2024 EVV and Timesheet Training

How to Fill out Timesheets and Log Home Visits Using EVV(Electronic Visit Verification)

Joyce's Caring Touch

"To Us it's Personal"

Order of Training

- Watch the Full Presentation Video

- All questions will be answered at the end of the presentation

  - Feel free to put questions and comments in the Chat

- This Training presentation will be emailed and linked on the JCT website

  (www.jcthomecare.com)

Agenda

This presentation will include:

- EVV Essentials and what's considered a verified visit,
- Instructions on how to fill out, submit, and where to get timesheets,
- The fields needed on the timesheet for it to be complete.

Please be sure to remember that ALL caregivers of ALL state agencies were mandated to use EVV and timesheets on May 1st 2023. please visit the DHS site for more info (https://www.dhs.wisconsin.gov/evv/index.htm).

We now must use **both** methods to receive funding and payment.

For more information and assistance,

- Visit our website at www.jcthomecare.com
- Email us at contactjct@jcthomecare.com or adminhr@jcthomecare.com
- Or call us at 414-841-5853
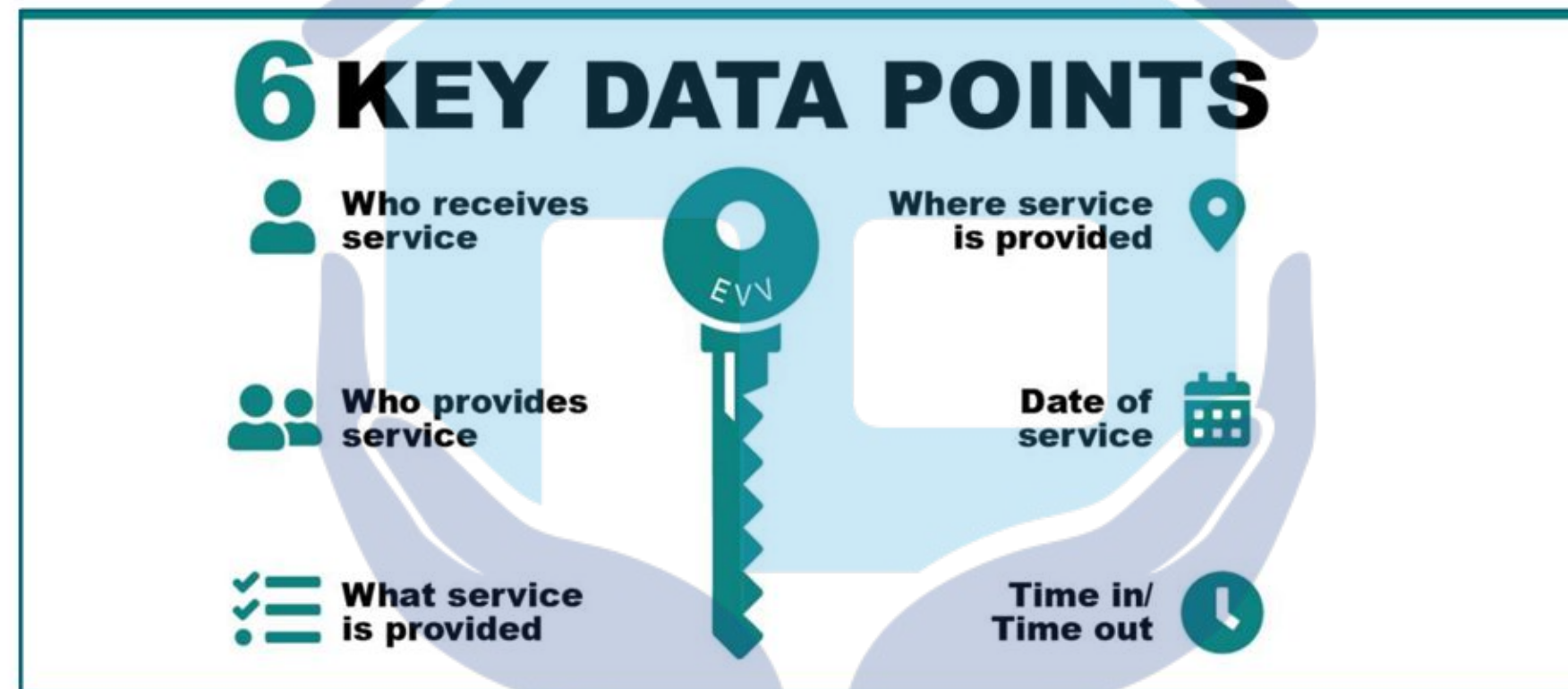
YESSS! We feel your pain….

Our agency's leniency has caused an overflow of work in making EVV Adjustments and corrections. We need to stay in compliance to avoid financial consequences and licensee issues.

SO… Let's jump right in!

Wisconsin Department of Health Services, EVV Essentials

Federally Required EVV Data

6 KEY DATA POINTS

- Who receives service
- Who provides service
- What service is provided
- Where service is provided
- Date of service
- Time in/Time out

Please note: EVV Location is only captured at the **Start** and **End** of a visit. Nothing is collected during the visit.

Sandata Has Updated Their App

1. You can search in Google Play (for Android users) or the App Store (for iPhone users) for "Sandata Mobile Connect."

2. You'll be asked to reset your password. This new password will be used for any provider agency you work for that uses Sandata.

This new feature will be helpful for those of you working for more than one provider.

Summary of SMC Changes

New features now in the SMC app:
- Autofill provider information
- One password for all provider accounts
- Easier password reset
- More obvious offline mode
- Home/community selection
- Switch services option
- Additional service codes
- Seven days of past visits
- Directions/call client option

Sandata
Mobile Connect

Password Reset/Temporary Passwords Last for 24 Hours

You will receive a welcome email from Sandata with your username (which is your email address) and temporary password to sign in.

If you have not received your welcome email from Sandata, check your email's spam filter. You can also search "Sandata" in your email's search bar to find the word.

If you have not received this initial email, let the agency's administrator know!

SMC Notice

- Sandata will email the employee a temporary password and the Company ID.
- The same email address can be used for multiple agencies.

Hi _____
Your username to login to Sandata Mobile Connect is _____ and your temporary password for Company ID 2-60110 is:
6yv57U!2

Please remember to take your Company ID, Username and Temporary Password with you for your next client visit. Your temporary password will expire on 4/15/2019. If your temporary password expires or if you experience any issues with logging into Sandata Mobile Connect, please contact your EVV Administrator or your EVV program's Customer Support.

EVV Customer Care

Make note of your emails and passwords for each part of the system

- If you work for more than one agency, you can use the same email address and password for each provider.

Employee Support

Wisconsin EVV Customer Care
- Phone: 833-931-2035
- Email: vdxc.contactevv@wisconsin.gov
- Monday–Friday: 7 a.m.–6 p.m. Central time

EVV Training Resources

www.dhs.wisconsin.gov/evv/training-workers.htm

EVV Worker ID Card

Wisconsin Electronic Visit Verification
WORKER VISIT CARD
Wisconsin EVV Customer Care

📞 833-931-2035   ✉ vdxc.contactevv@wisconsin.gov   🕐 Monday - Friday 7am-6pm

Agency's Sandata toll-free numbers:	
Agency/Company ID:	2-
Worker Santrax ID:	
Sandata Mobile Connect Username:	
Client Identifier:	
Service Code(s):	

Is recording tasks within EVV required?___Yes __No

Service Code	SMC Service Code	TVV Service Code #
	Personal and Supportive Care Services	
T1019	Personal Care Svc/15 min	10
S5125	Supportive Home Care/15 min	15
S5126	Supportive Home Care/Day	20
T1020	Personal Care/Day	25
Combo	Combo-PCS & SHC	30
99509	PCS Nurse Supervisory Visit/Visit	55
	Home Health Care Therapy Services	
92507	Speech Therapy Individual/Visit	35
97139	Unspecified Therapeutic Procedure-OT/Visit	40
97799	Unspecified Rehab Svc-PT/Visit	45
	Home Health Care Nursing Services	
99504	Mechanical Vent Care/Hour	50
S9123	Private Duty Nursing RN/Hour	65
S9124	Private Duty Nursing LPN/Hour	70
99600	Unspecified Home Visit-RN or LPN/Visit	60
T1001	Nursing Assessment or Eval/Visit	75
T1021	Home Health Aide or CAN/Visit	80
T1502	Med Admin-Oral, IM, Subq/Visit	85

P-02844A (10/2023)

www.dhs.wisconsin.gov/library/p-02844.htm

The worker ID card will be provided if you have not received one. It will help with remembering:
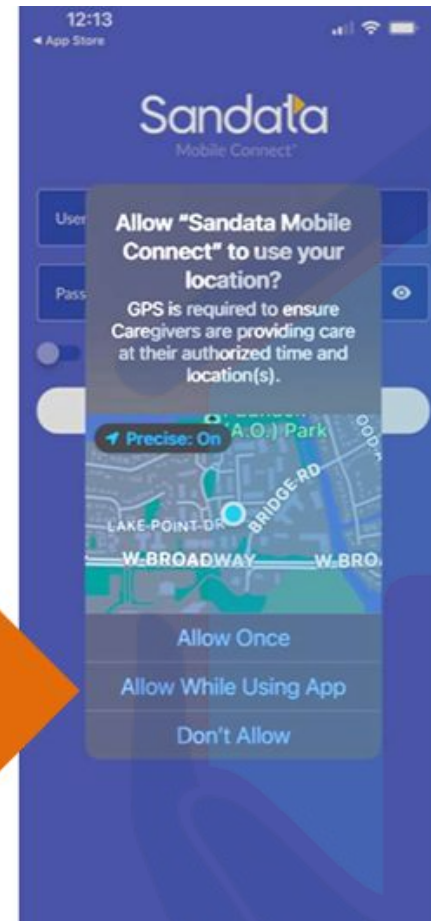
• The agency's ID

• The client ID

• and the service codes (T1019 Personal Care Svc/15min and S5125 Supportive Care/15min)

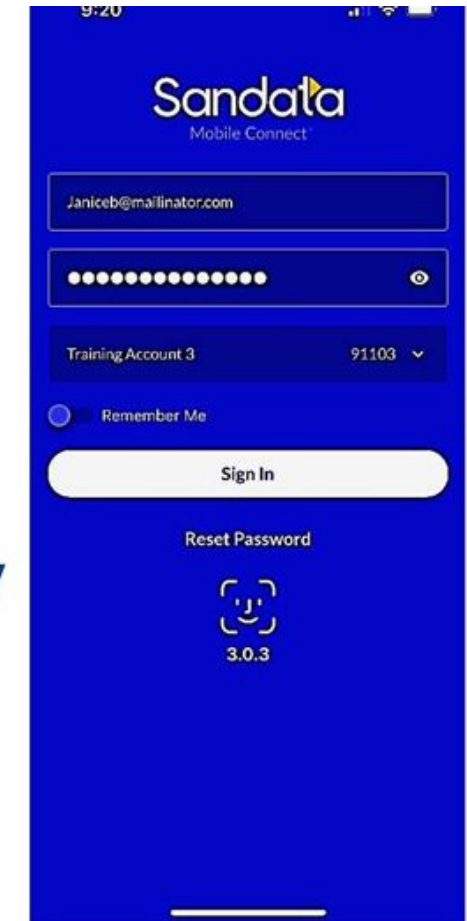# Allow Sandata Mobile Connect to use your location

SMC App

- EVV identifies the location at the start and end of the visit. It does not track location before, after, or during the visit.
- Select "Allow While Using App."

SMC App

- Username: Enter the full email address.
- Password: Enter the temporary password from Sandata.
- Company ID: Select your Company ID from the drop-down menu.

Company ID Joyce's Caring Touch Home Health 92219

The first time you log in to the app, be sure to have Wi-Fi. This will save your settings. The app can be used without Wi-Fi after this first set-up use.

Select **Remember Me** option to automatically enter your username in the future. (RECOMMENDED)

You'll still need to enter your password for security. You'll also have the option to add face ID, just below the "sign in" button. (RECOMMENDED)

Touch/Face/Fingerprint Options

Your can find these options by logging in. Use the ☰ menu icon in the upper left corner of your device and Go to the settings.
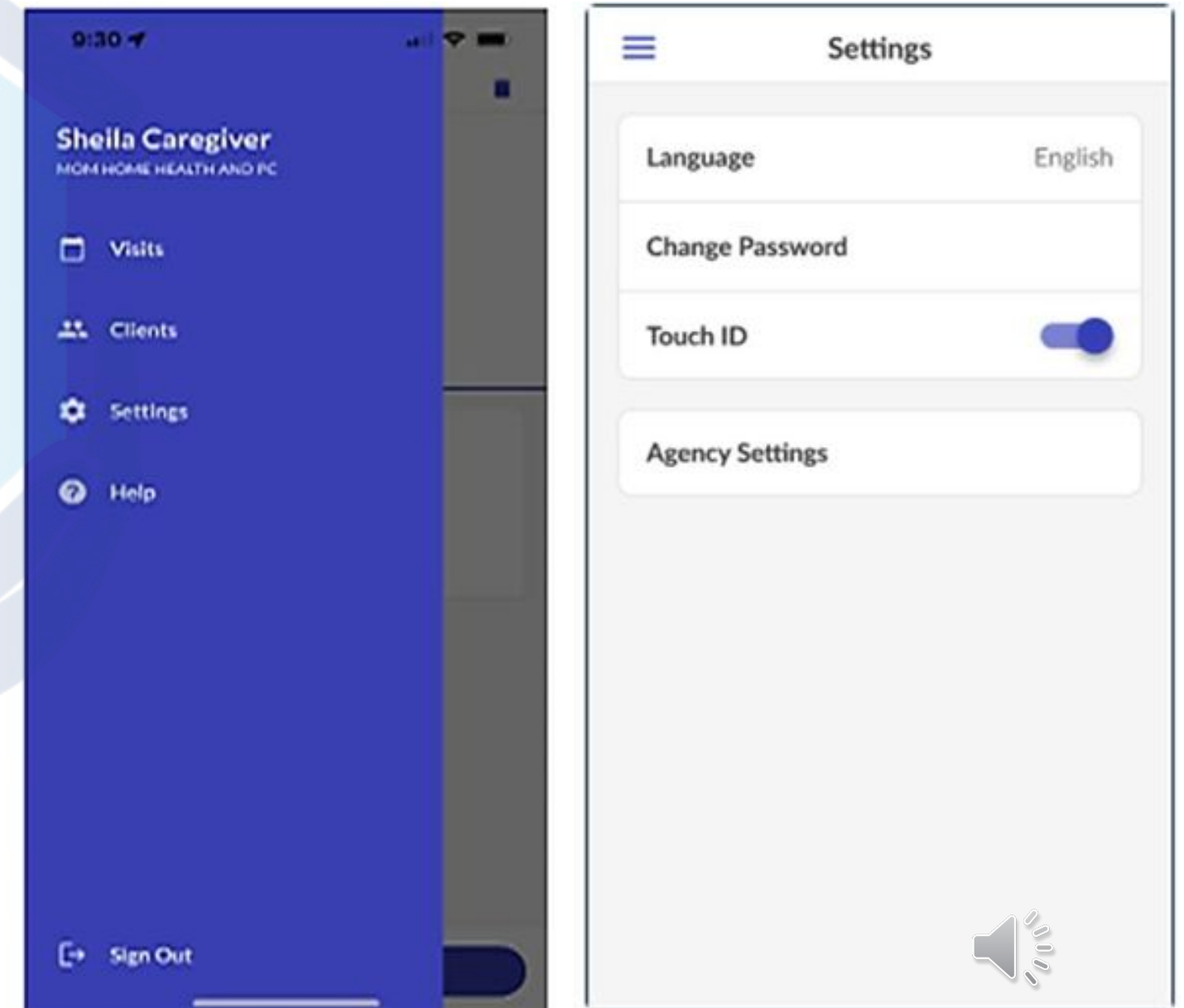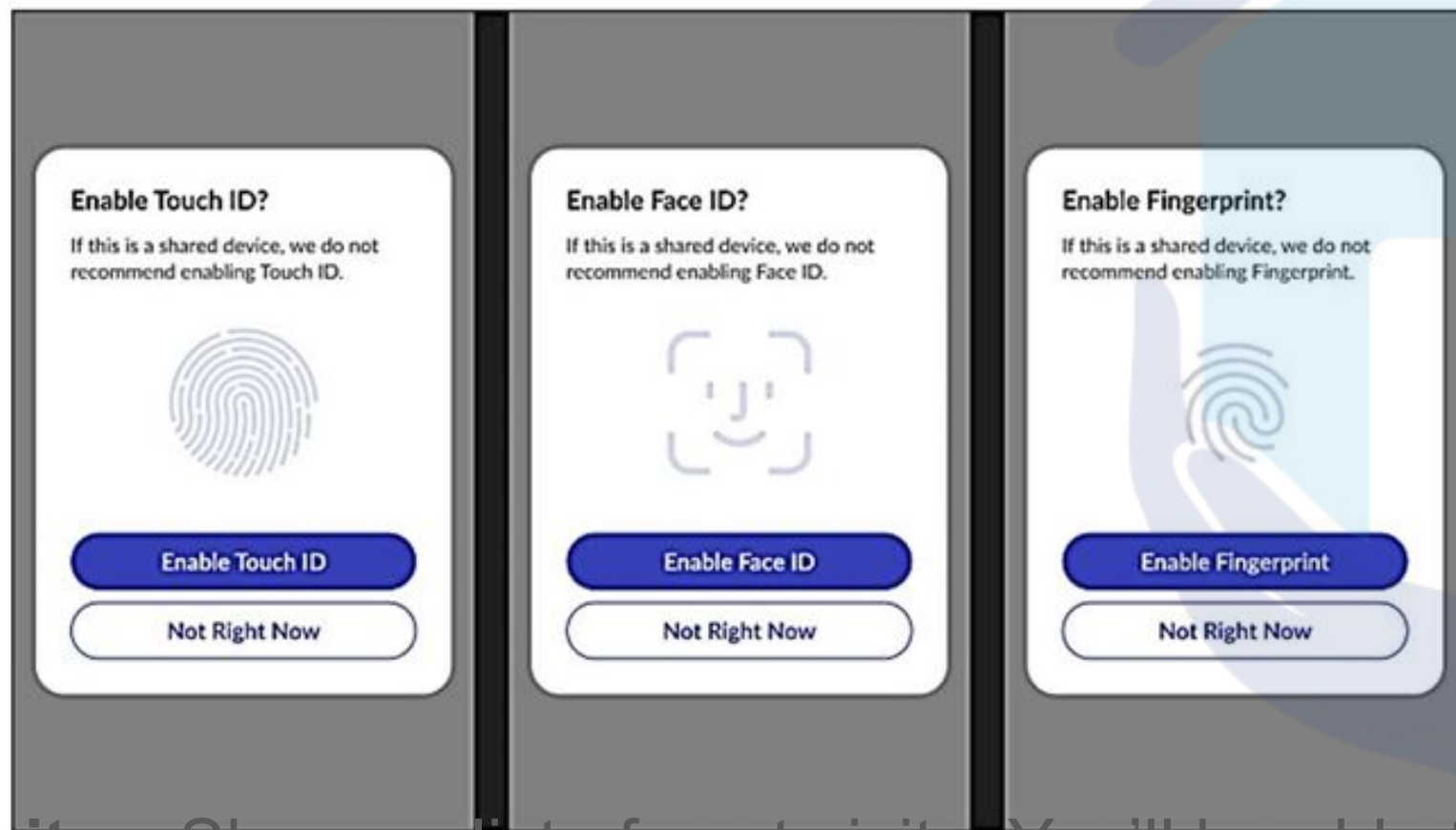
Visits—Shows a list of past visits. You'll be able to see all visits from the last seven days. Until then, it will show the last five days.
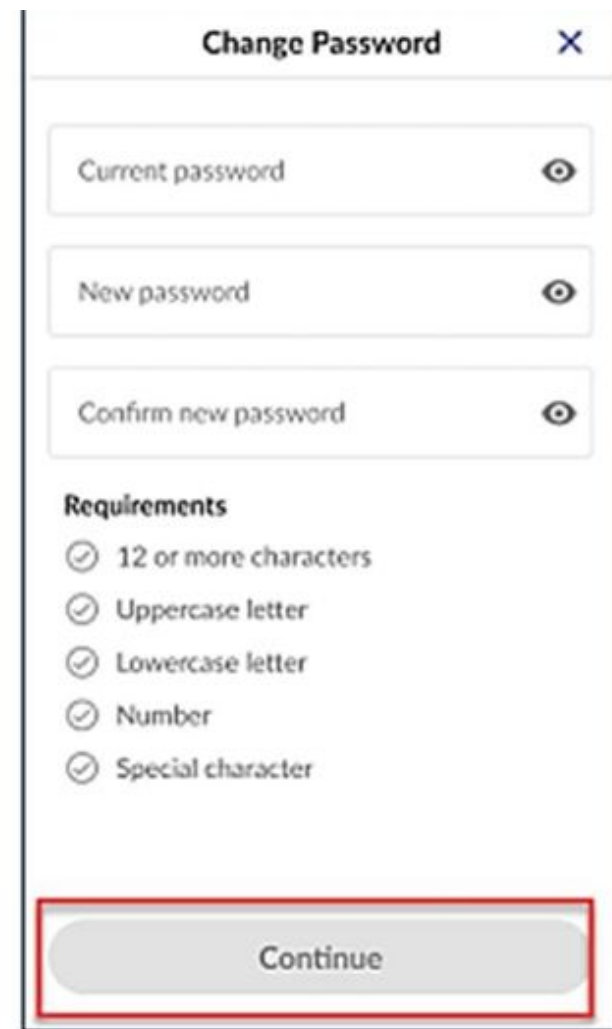
Clients—Opens up an option to search for a client to start a visit.

SMC Password

Employees have 5 attempts to enter the correct password before the **Information** *pop-up* appears. Passwords expire every 60 days.

Employees can reset their own password from either:

- The Settings menu
- The Login screen
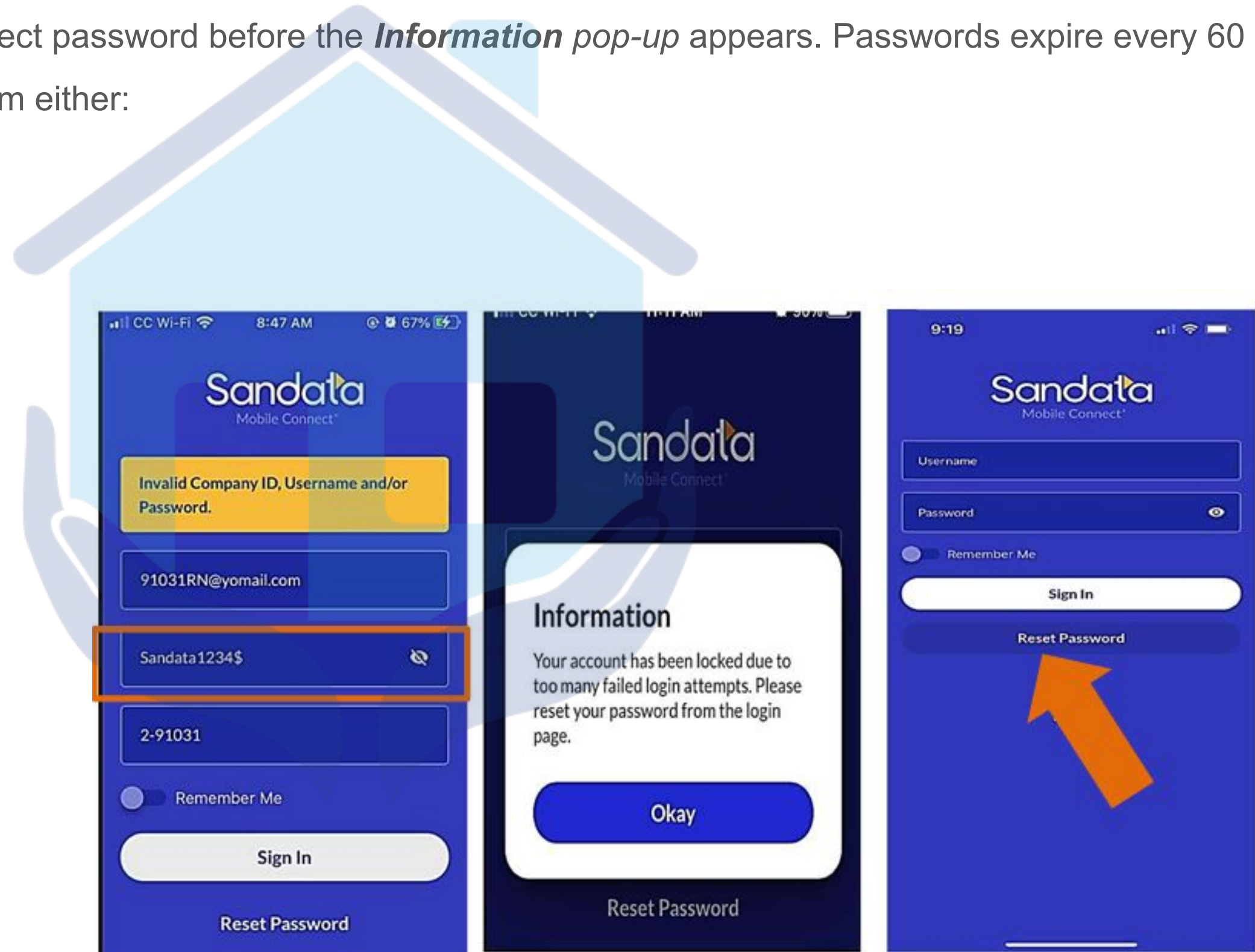
Device Settings

For best app performance, make sure you turn on automatic updates.

Location Services on for clocking in and clocking out is **required**.

If your Location Services is turned off, the app won't advance beyond the login screen.

(Sandata updates the app frequently)
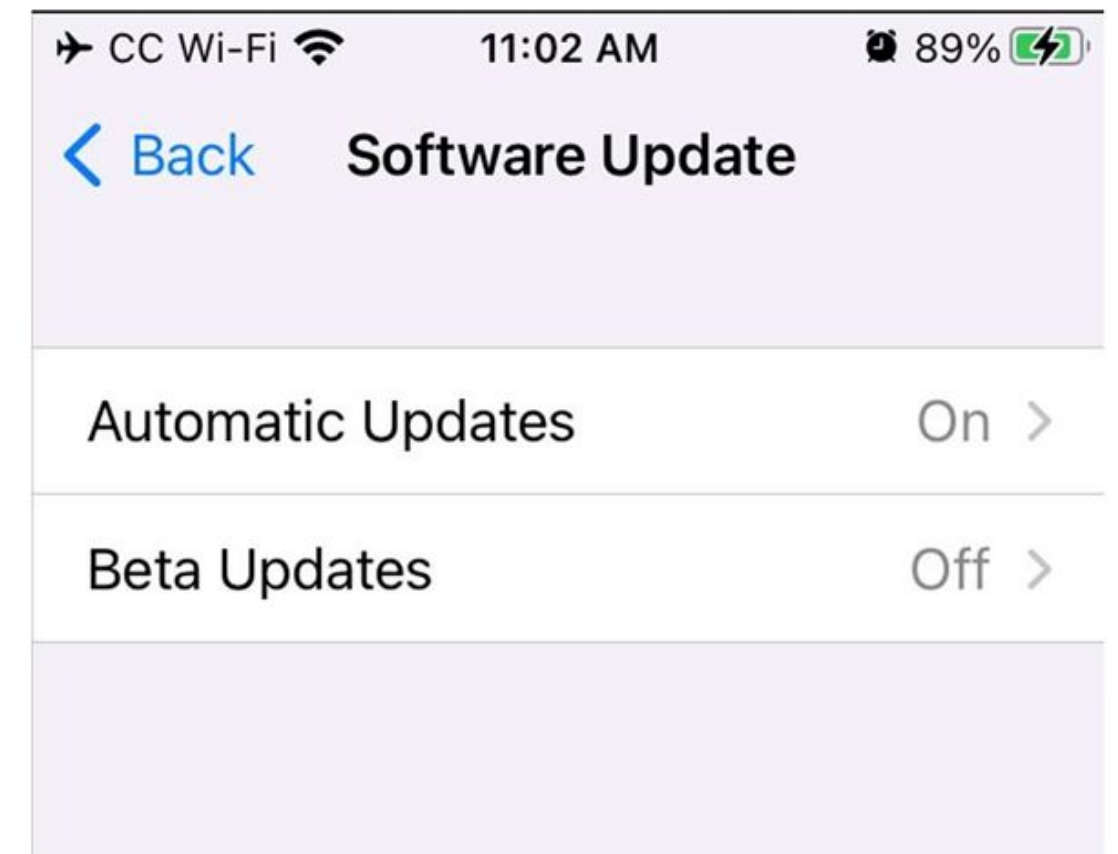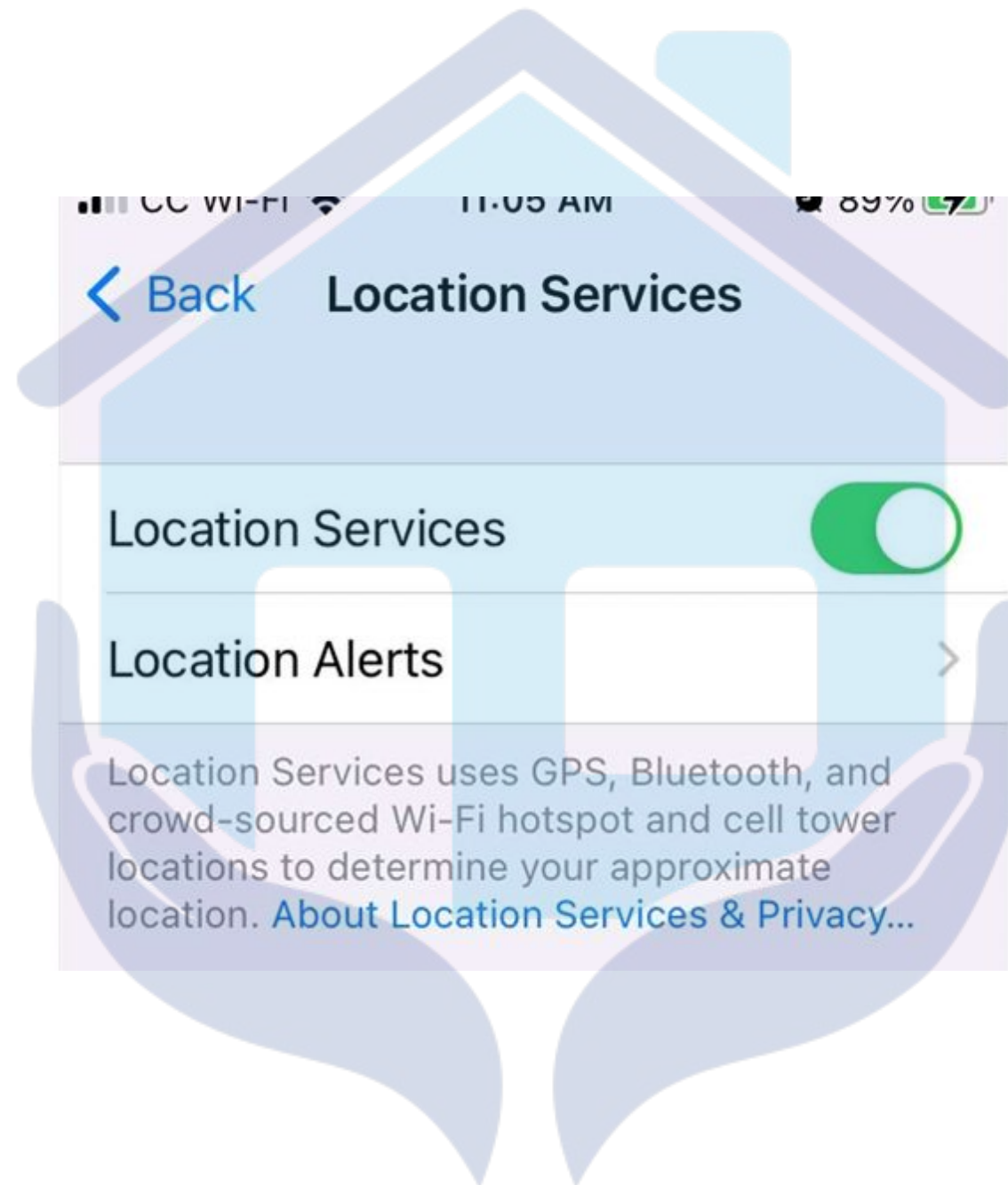
Starting a Visit

Once logged in, search for a client by entering in their Client ID (six digits) or Medicaid ID number. Confirm the Client, tap Start Visit. Select the service being provided, **Personal Care Svc/15min** or **Supportive Home Care/15min**. Tap Start Visit. (If a client cannot be found, an unknown visit can be started.)

Choose Home or Community.

Tap Continue.

Tap Yes.

Please note, if you are choosing Community

frequently for **Homecare** services, the client's

units-hours are subject to be decreased by their

insurance company.
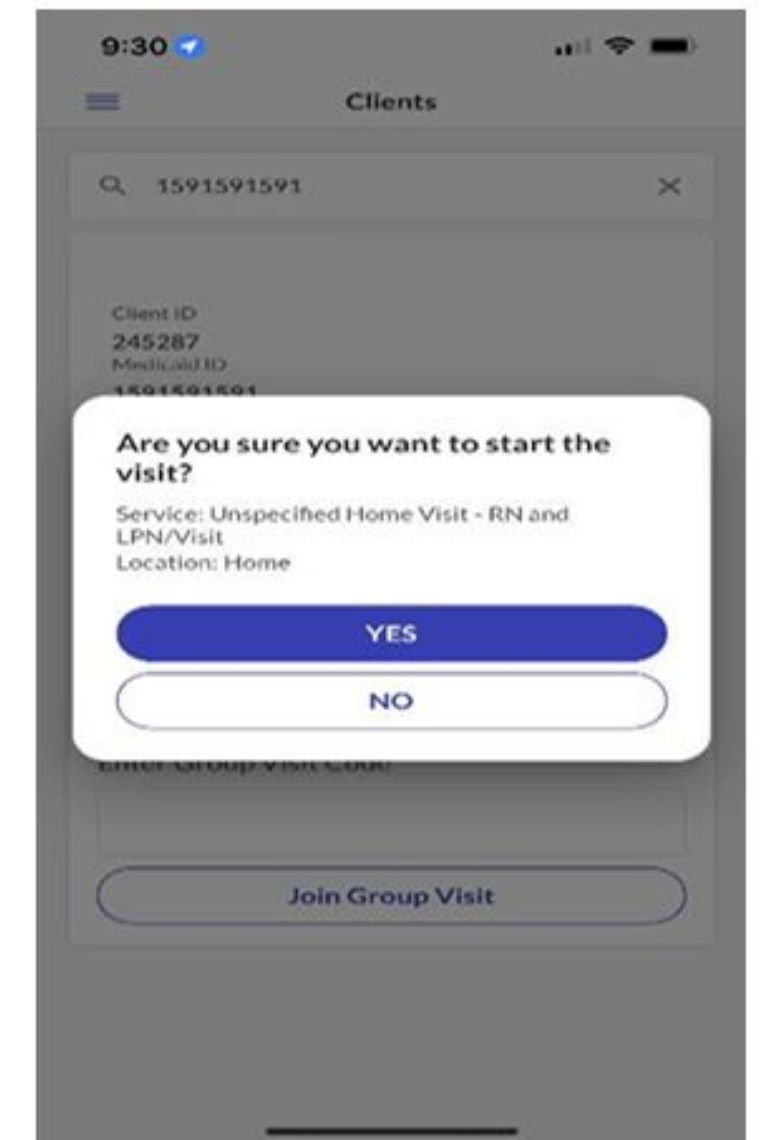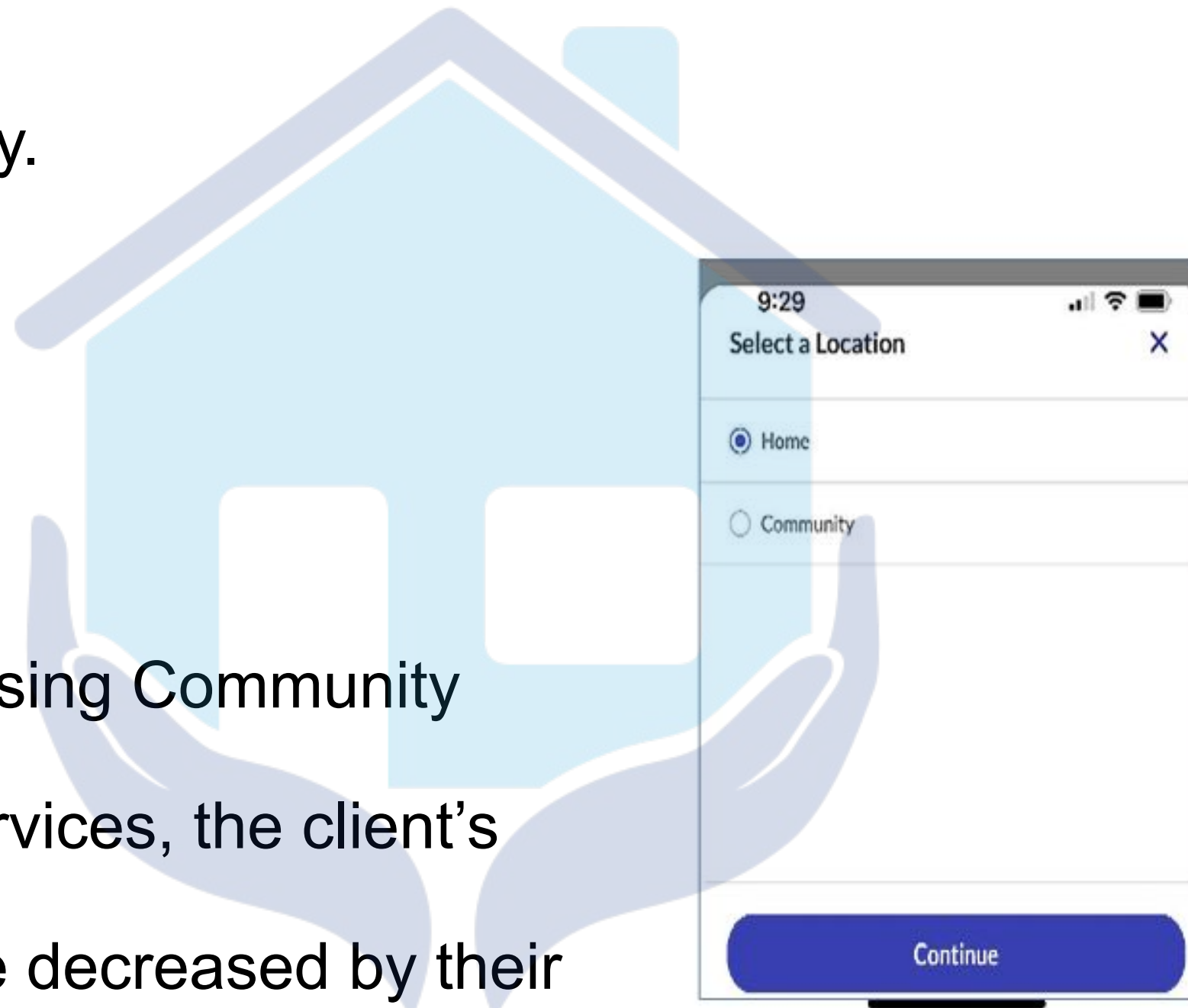
Tasks and Notes Option

Selecting Tasks are Required!

When ending a visit:

- Select the Tasks tab.
- Tap Add Tasks.
- Select tasks performed from the list.
- Tap Done.
- Confirm each task by tapping its circle.
- Select Notes tab if needed.
- Add notes.
- Tap Complete Visit.
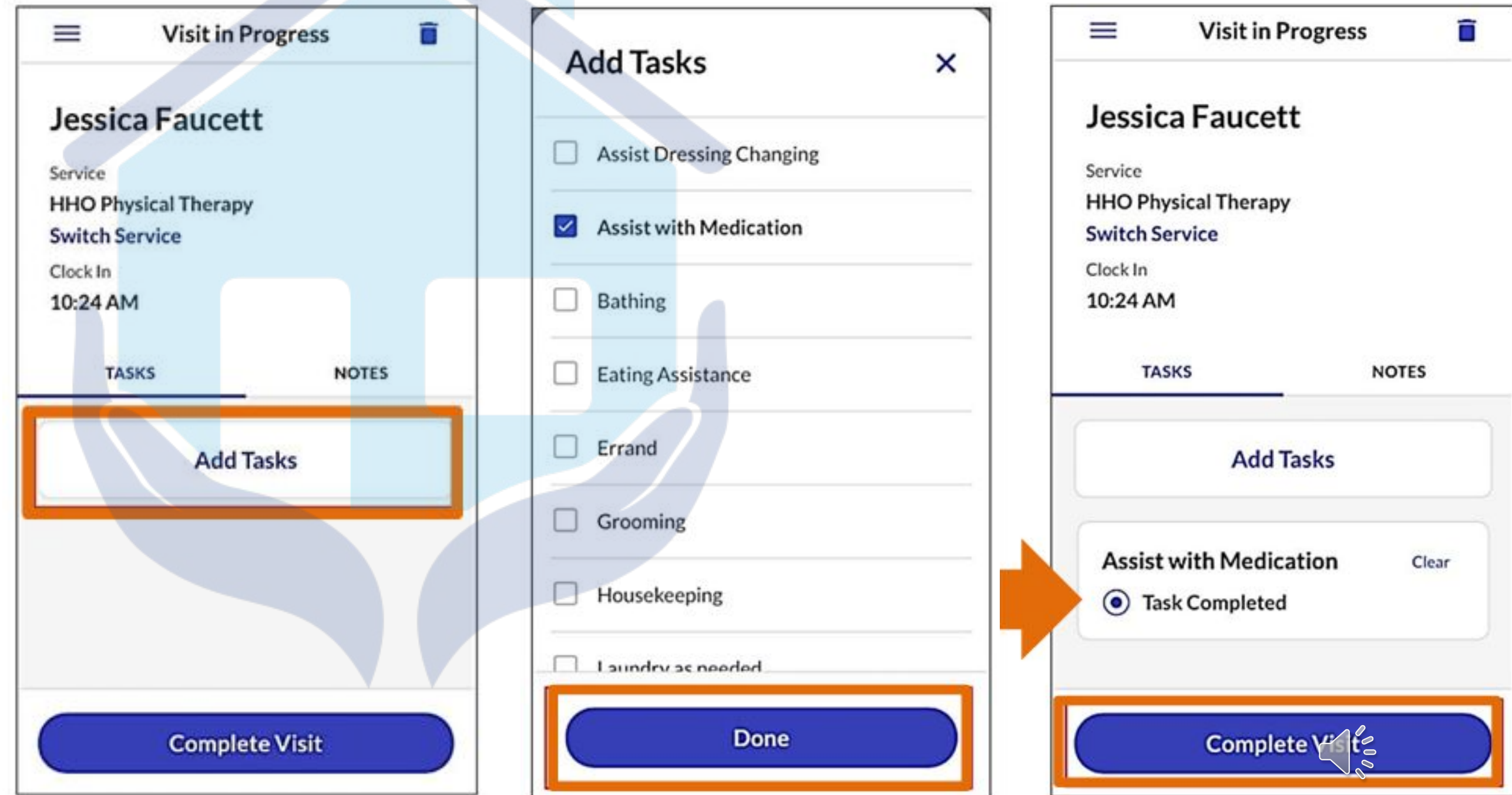
Client Verification Option

After the employee has entered the check out information:

- Tap **Continue**.
- Pass the device to the client.
- Choose language.
- Tap **Continue**.

The client will select the language, confirm service times, and sign with finger. The client or worker will tap continue.

Client Verification Option

- Tap **Done**.
- Pass the phone back to the employee.

IMPORTANT: visits in EVV must match visits on timesheets

✓

Thank You

Your visit is complete. Please hand the device back to your caregiver.

Done
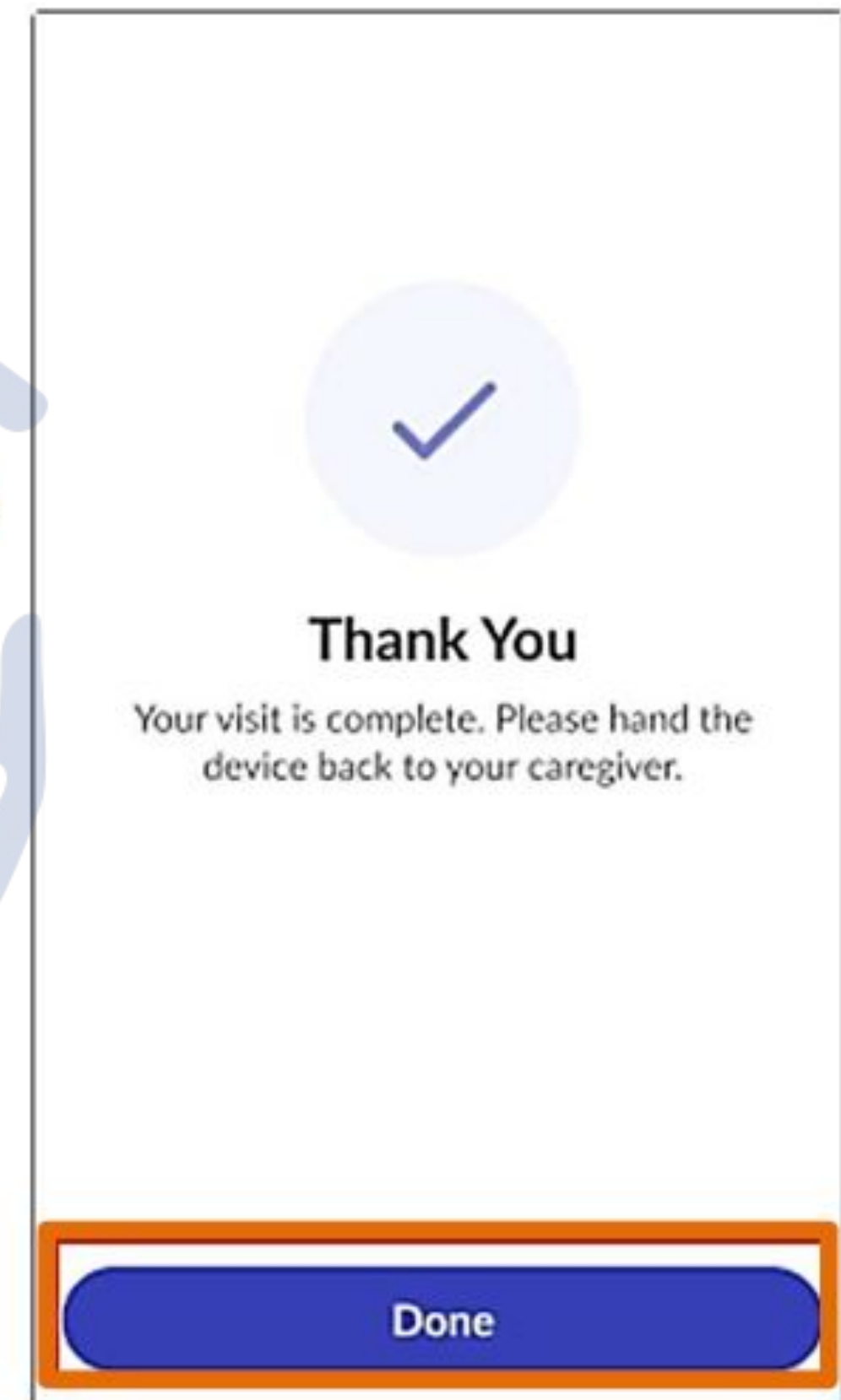
EVV has been required in all US States since May 1, 2023.

- EVV is now heavily audited by **DHS** and **DQA**(Division of Quality Assurance) for **Program Integrity Performance** and to ensure all Medicaid funds are being paid for verified care visits only.

- Clients and workers who submit falsified timesheets, will have consequences and will have to pay back funds, and be cut from all Medicaid programs.

- Agencies could lose their license, also be required to pay back Medicaid funds, and be cut from any Medicaid Programs.

(Please take a look at some of the other states such including California who are also required to use EVV.)

What is EVV (Electronic Visit Verification) and Why Do I ... ✅

Jan 4, 2023 — New Regulations Require EVV. Many states have already begun requiring electronic visit verification for registered agencies, but the EVV ...
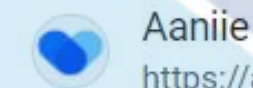
Aaniie
https://aaniie.com › solutions › electronic-visit-verificati... ⋮

Electronic Visit Verification (EVV) – Aaniie eVerified ❓

Aaniie eVerified EVV is designed and built to be a fully compliant EVV solution. Intuitive and easy to use, Aaniie EVV is used across the US by caregivers ...

TripLog
https://triplogmileage.com › healthcare › evv-complian... ⋮

EVV Compliance Requirements by State (2024 Update) ✅

With the 21st Century Cures Act, the US federal government requires all states to implement EVV. Here are 2024's updated guidelines.

California Department of Social Services (.gov)
https://www.cdss.ca.gov › ... › IHSS › EVVhelp ⋮

Electronic Visit Verification (EVV) Help - IHSS ✅

EVV is a federal law that requires electronic record of certain information about the IHSS and/or WPCS services performed.

DREDF
https://dredf.org › 2021/08 › EVV-Report-210722 [PDF] ⋮

Impact of Electronic Visit Verification (EVV) on Personal ... ✅

Timesheets… When, Why, and Who?

When Does the Timesheets Need to be Used and Take Effect? **Start Now!**

After September 8th, Workers will not be paid without verified EVV Visits AND a signed timesheet. (Submitted the Monday before Payroll. (Please refer to the 2024 Upcoming Pay Period Schedule or the Gusto Payroll site.)

Wisconsin Department of Health Services(**DHS**)requires ALL State agencies to use timesheets and EVV showing:
-The In/Out time
-The Service Type (Personal Care or Supportive Care)
-The GPS Location in the vicinity of Client's residence

Why are Workers required to use Timesheets AND EVV?

OIG(**Office of the Inspector General**) wants to ensure more accurate time reporting and to improve **Payment Integrity**(The goal of program is to help safeguard **DHS**-administered public assistance programs).

Please be Aware: <u>ALL</u> caregivers at **<u>ALL</u>** provider agencies are now required to use EVV and timesheets to receive payment for providing care services.

Timesheets… When, Why, and Who?

Who Has to fill out Timesheets?

Live-In Workers and NON-Live-In Workers must fill out timesheets

for payment.

If you are a Live-In Worker and are still using EVV, please

submit the required documentation in **Column A(Chose One)**

or Column B(Chose 2) to be exempt from using the EVV app

to clock in and clock out.

Please note, live-in workers must submit live-in

documentation every year to be exempt.

Payment Integrity Review (PIR) Program

A. The PIR program starts on April 1, 2023.

Q. **What is the program's goal?**
A. The goal of this innovative program is to help safeguard DHS-administered public assistance programs, like Wisconsin Medicaid and BadgerCare Plus, from unnecessary expenditures, service overutilization, and other compliance issues.

Q. **What is the program's purpose?**
A. The PIR program allows the OIG to proactively review select, provider-submitted claims prior to payment to ensure that federal and state requirements are met. Through PIR, the OIG will offer enhanced, compliance-based technical assistance to meet the specific needs of providers, as well as increase monitoring of high-risk benefit and services areas.

Q. **What is Pre-Payment Review?**
A. When the OIG has reasonable suspicion a provider is violating program rules, claims may be selected for Pre-Payment Review in accordance with Wis. Admin. Code § DHS 106.11.

Once a Client has been selected for **PIR**, the provider agency claims will be denied, and funds will be on hold until OIG (**Office of the Inspector General)** gets all required documentation to support client's claims.

Please visit the link for more info on Payment Integrity (https://www.dhs.wisconsin.gov/publications/p03409b.pdf)

SAMPLE TIMESHEET

DAILY IN AND OUT TIMESHEET Pay Period: 09/08/2024 - 09/21/2024 EVV Adjustment ✗

Select Servcive Type for IN and Out Time (PC for Personal Care and SHC for Supportive Home Care)

Check Service Type (PC or SHC)	SUN	MON	TUES	WED	THUR	FRI	SAT
DATE: (example 1/1/24)	09/08/2024	09/09/2024	09/10/2024	09/11/2024	09/12/2024	09/13/2024	09/14/2024
1 Time IN: PC ✗ SHC__	10AM :15	10AM :00	10AM :59	10AM :00	12PM :30		9AM :00
Time OUT:	1PM :00	12PM :00	1PM :30	12PM :45	2PM :30		10AM :15
2 Time IN: PC __ SHC ✗	1PM :30		1PM :30		3PM :15	11AM :00	
Time OUT:	3PM :00		3PM :00		5PM :00	3PM :00	
3 Time IN: PC ✗ SHC__		12PM :15				3PM :15	
Time OUT:		1PM :30				4PM :30	
Total Hours Worked (calculate total hrs)	PC 2.75 SHC 2.50	PC 3.25 SHC 1.5	PC 2.5 SHC 1.5	PC 2.75 SHC	PC 2 SHC 1.75	PC 1.25 SHC 4	PC 1.25 SHC
Bathing (complete/partial)	✗	✗			✗		
Assist with Dressing: ☐ Upper ✗ Lower	✗	✗			✗		✗
Grooming(shampoo/brush) Nail Hygiene / Oral/ Shave/Deodorant	✗		✗		✗		
Skin Care & Foot Care / Lotion	✗		✗				✗
Toileting /Bowel / Incontinent Care	✗	✗	✗	✗	✗		✗
✗ Assist w/Transfers Position ☐ Ambulation/Assist	✗	✗	✗	✗	✗		✗
DME: ☐Cane ☐Walker ✗W/C ☐Crutches ☐Hoyer ☐Slide board ☐Sit to stand ☐Pivot ☐Other	✗	✗	✗	✗	✗		✗
Range of Motion	✗		✗	✗	✗		✗
✗ Meal Prep/Set-up ☐Assist with Feeding	✗	✗	✗	✗	✗		✗
Grocery Shopping	✗						
Light Cleaning Duties							
☐Record Input/output ☐Glucose monitoring							
Medication Reminder	✗	✗	✗	✗	✗		✗
Other/Pets/Comments:	Forgot to log into EVV on Monday and enter task in EVV						

I hereby certify that the hours below were worked by the Agency's employee and represent true and accurate time for services.

I Understand this timesheet is REQUIRED for PAYMENT!

Worker Signature _____   John Smith   Date 09/16/2024
                                    Print Name

Client Signature _____   Brian Johnson   Date 09/16/2024
                                    Print Name

RN Supervisor Signature _____   Emily Sue   Date 09/16/2024
                                           Print Name

Submit time sheets: Fax 414-921-5589 - Mail 2266 N Prospect Ave STE 210, Milw, WI 53202 - Email contactjct@jcthomecare.com Please Call 414-841-5853 with questions on how to complete this form. Payday Due Date: Tue 6PM. Submit time sheets by MONDAY!

For each timesheet, enter or select options:*(Fillable timesheet will have drop down boxes)*

a. The Pay period entered

b. The Dates worked entered

c. The service start and end times are entered(AM or PM is selected)

d. The Hours Worked are calculated for that day and service

e. The tasks performed are selected for each day worked

f. The Worker, Client, and

Main Sections (Fields must be completed)

- Pay Period Start and end Dates

- Dates of service and In and Out Time
  - Service Type checked, PC or SHC

- Tasks Performed
  - (Which should match Plan of Care)

- The Client, Worker, and RN Signature

Submit timesheets on Monday before Payroll.

(Refer to 2024 Upcoming Pay Period Schedule.)

EVV GPS Exception Form

IMPORTANT: This form must be attached to all timesheets where the GPS location not showing in the vicinity of the client's residence.

NOTE: Agencies and DHS can see if you are at home! GPS shows the exact location you are clocking in and clocking out at.

EVV GPS Exception Form

EVV adjustments require written documentation and signature from Worker(PCW/SHC) and Client.
Please fill out and return by:
- Email: contactjct@jcthomecare.com
- Fax: 414-921-5589
- Mail or Dropbox: 2266 N Prospect Ave STE 210, Milwaukee , WI 53202

Worker: _____

Client: _____   Client EVV ID: _____

NOTE: Service Type: PC (Personal Care Svc/15min)
SHC (Supportive Home Care Svc/15min)

	DATE	TIME IN	TIME OUT	SVC TYPE PC or SHC	Reason (Explanation of why visit start/end was not in vicinity of Client's Home)
EX.	1/1/24	8:30 AM	11:00 AM	X	Forgot to clock out at 11 AM, and clocked out at home.
	08/18/24	1:30pm	4 pm	X	forgot to clock in and or out, or out w/client
	8/19/24	1:30pm	4pm	X	
	8/20/24	1:30pm	4pm	X	↓
	8/21/24	1:30pm	4 pm	X	forgot to clock in or out, or out w/client
	8/22/24	1:30pm	4pm	X	↓
	8/23/24	1:30pm	4pm	X	↓
	8/24/24	1:30pm	4 pm	X	Same explanation for all

I hereby certify that the hours and exceptions were worked by the Agency's employee and represent true and accurate services.

Worker Signature _____   Date: 8/24/24

Client's Signature: _____   Date: 8/24/24

GPS Location

Worker **NOT** at the client's residence when clocking in – **Will Need to fill out GPS Exception Form with Timesheet for Payment.** (*The administrator will email you a form*)

Client **IS** at the client's residence when clocking in –No GPS Exception Form needed.

Filling Out Timesheet

SAMPLE TIMESHEET

DAILY IN AND OUT TIMESHEET   **Pay Period:** 09/08/2024 - 09/21/2024   **EVV Adjustment** X

Select Servcive Type for IN and Out Time (PC for Personal Care and SHC for Supportive Home Care)

Check Service Type (PC or SHC)	SUN	MON	TUES	WED	THUR	FRI	SAT
DATE: (example 1/1/24)	09/08/2024	09/09/2024	09/10/2024	09/11/2024	09/12/2024	09/13/2024	09/14/2024

1. **Enter the Pay Period Start and End date.** *(Refer to pay period schedule for pay period dates)*

   a.   Enter the Week number. *(Optional, Wk 1 or Wk 2)*

2. Put the date of each visit date under each day of the week. *(Example: 1/1/24, 1/2/24, 1/3/24 etc. (The first and last date of the week is required)*

3. Mark the service type **(PC or SHC)**

   a.   Check **PC** for Personal Care or **SHC** for Supportive Care. *(There are multiple lines if you provide both services)*

   NOTE: The Start and End Times, Service Type, and Tasks should match up with visits in EVV

Filling Out Timesheet (Cont.)

4. Put the start time in the hours and minutes format (10:00AM, 1:45PM), rounding to the nearest 15 minutes.

TIP: 7 minutes under round up, 7 minutes over round down. Example: Starting or ending at 10:37AM would be 10:30AM. Starting or ending at 10:23AM would be 10:30AM.

SAMPLE TIMESHEET

DAILY IN AND OUT TIMESHEET   **Pay Period:** 09/08/2024 - 09/21/2024   **EVV Adjustment** X

Select Servcive Type for IN and Out Time (PC for Personal Care and SHC for Supportive Home Care)

Check Service Type (PC or SHC)		SUN	MON	TUES	WED	THUR	FRI	SAT
DATE: (example 1/1/24)		09/08/2024	09/09/2024	09/10/2024	09/11/2024	09/12/2024	09/13/2024	09/14/2024
1	Time IN: PC × SHC__	10AM :15	10AM :00	10AM :59	10AM :00	12PM :30		9AM :00
	Time OUT:	1PM :00	12PM :00	1PM :30	12PM :45	2PM :30		10AM :15
2	Time IN: PC__ SHC_ ×	1PM :30		1PM :30		3PM :15	11AM :00	
	Time OUT:	3PM :00		3PM :00		5PM :00	3PM :00	
3	Time IN: PC × SHC__		12PM :15				3PM :15	
	Time OUT:		1PM :30				4PM :30	

NOTE: There are #3 rows for a lunch break and additional breaks.

Repeat this step for each day and all breaks.

5. Calculate your total hours worked for PC and SHC for each day and enter by its Service type.

Select Servcive Type for IN and Out Time (PC for Personal Care and SHC for Supportive Home Care)

Check Service Type (PC or SHC)		SUN	MON	TUES	WED	THUR	FRI	SAT
DATE: (example 1/1/24)		09/08/2024	09/09/2024	09/10/2024	09/11/2024	09/12/2024	09/13/2024	09/14/2024
1 Time IN: PC ×_ SHC__		10AM :15	10AM :00	10AM :59	10AM :00	12PM :30		9AM :00
Time OUT:		1PM :00	12PM :00	1PM :30	12PM :45	2PM :30		10AM :15
2 Time IN: PC __ SHC _×		1PM :30		1PM :30		3PM :15	11AM :00	
Time OUT:		3PM :00		3PM :00		5PM :00	3PM :00	
3 Time IN: PC × SHC__			12PM :15				3PM :15	
Time OUT:			1PM :30				4PM :30	
Total Hours Worked (calculate total hrs)		PC2.75 SHC2.50	PC3.25 SHC1.5	PC2.5 SHC1.5	PC2.75 SHC	PC2 SHC1.75	PC1.25 SHC4	PC1.25 SHC
Bathing (complete/partial)		✗	✗			✗		

This is for your reference only. JCT will calculate payment based on daily in and out times listed by the start and end times.

TIP: 15 minutes = .25 hrs (1 unit) Round to the nearest 15 minutes
- 15 minutes = .25 Hours (1 unit)
- 30 minutes = .50 hours (2 units)
- 45 minutes = .75 hours (3 units)
- 60 min = 1 hour (4 units)

Example: 1:04 PM to 3:30 PM = 2.5 hours and 10:30 AM to 2:43 PM = 4.25 hours

Entering Your Task

6. Choose the tasks performed at each visit by using the Check boxes next to each task. (These same tasks should also be selected in the EVV app.)

Check ALL boxes that apply to the Tasks you are performing. Here is a list of tasks:

a.   Shower-Bathing

b.   Skin Care

b. Dressing

c. Grooming

d. Toileting

e. Transferring and Mobility

f. Positioning

g. Range of Motion

h. DME

i. Essential Grocery Shopping/Errands

k. Housekeeping-Light Cleaning

l. Laundry

m. Medication Reminder

n. Meal Prep/ Assist with Feeding

o. Prosthetics-Splints-Teds

p. Comment Section-

(Report any hospitalization and incidents.)

Entering Your Tasks (cont.)

NOTE: The main fields must be filled in completely for each day. Please try not to use arrows or ditto marks to represent repeated services or task.

In this example, each task and time is selected for each day, except Friday.

Time OUT:			1PM :30				4PM :30	
Total Hours Worked (calculate total hrs)	PC 2.75 SHC 2.50	PC 3.25 SHC 1.5	PC 2.5 SHC 1.5	PC 2.75 SHC	PC 2 SHC 1.75	PC 1.25 SHC 4	PC 1.25 SHC	
Bathing (complete/partial)	X	X			X			
Assist with Dressing: ☐ Upper ☒ Lower	X	X			X		X	
Grooming(shampoo/brush) Nail Hygiene / Oral/ Shave/Deodorant	X		X		X			
Skin Care & Foot Care / Lotion	X		X				X	
Toileting /Bowel / Incontinent Care	X	X	X	X	X		X	
☒Assist w/Transfers Position ☐Ambulation/Assist	X	X	X	X	X		X	
DME: ☐Cane ☐Walker ☒W/C ☐Crutches ☐Hoyer☐Slide board ☐Sit to stand ☐Pivot ☐Other	X	X	X	X	X		X	
Range of Motion	X	X	X	X	X		X	
☒Meal Prep/Set-up ☐Assist with Feeding	X	X	X	X	X		X	
Grocery Shopping	X							
Light Cleaning Duties								
☐Record Input/output ☐Glucose monitoring								
Medication Reminder	X	X	X	X	X		X	
Other/Pets/Comments:	Forgot to log into EVV on Monday and enter task in EVV							

I hereby certify that the hours below were worked by the Agency's employee and represent true and accurate time for services.

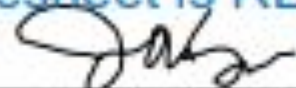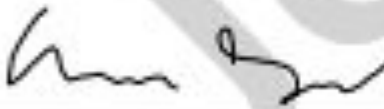*I Understand this timesheet is REQUIRED for PAYMENT!*

Sign And Date Timesheet for RN Review

7. The Worker and Client will Sign, Print, and Date the Timesheet. The timesheet should be submitted to JCT for RN Supervisor Signature.

The RN Supervisor will review your Timesheet , EVV visits, and will Sign, Print, and Date for processing your paycheck.

Repeat this process for each Client

Submitting Your Timesheets

Choose the option that is more convenient for you!

Please Submit timesheets on **Mondays before Payroll** to:

- Email or Text: contactjct@jcthomecare.com

- Fax: 414-921-5589

- Mail or Dropbox: 2266 N Prospect Ave STE 210,

  Milwaukee, WI 53202

NOTE: *Refer to the 2024 Payroll Schedule for timesheet*

submission Due Dates and Pay Dates.

Where To Get Timesheets

Please visit our website at: **https://jcthomecare.com/downloadable-forms** or the CAREGIVER

Tab **https://jcthomecare.com/caregiver-forms** for additional instructions, Timesheets, and

forms.

Important Information

Here's some important information to know so your timesheets are processed without delay in payment or denial. The Agency will Process Payment AFTER Timesheet (and any attachments) are received.

- Each time sheet should be between one client and worker.

- Each Timesheet is for One week.(You will submit 2 timesheets per pay period)

  - If you work for multiple clients in that pay period, you'll submit one timesheets for each client, so if you're working for 2 clients, you'll submit 2 timesheets, if you're working for 5 clients, you'll submit 5 different timesheets.

- Enter the dates of service with the correct pay period and dates.

NOTE: 2024 Pay Schedule can be found on the Gusto website or on the back of the timesheet.
- Please keep dates in order and only submit one time sheet per client

We value your Time!- JCT

Questions, Comments, and Suggestions?

- We will start with the questions in the chat.
- Please Unmute yourself to speak.