

## 2415 Annapolis LN N Suite 130 Plymouth, MN 55441 Phone 612-701-6094

Fax Number: 763-205-6574

**PCA Time and Activity Documentation** 

PCA Agency Name:			Phone Number:						
Peaceful Care LLC			612-701-6094						
Dates/Location	of Recipient Stay	in PCA Care:							
In the date of BOA	Danida Nama			T					
Individual PCA Provider Name:				Recipient/Client	Name:				
Dates of Service (in consecutive order)	MM/DD/YY	MM/DD/YY	MM/DD/YY	MM/DD/YY	MM/DD/YY	MM/DD/YY	MM/DD/YY		
Activities									
Dressing									
Grooming									
Bathing									
Eating									
Transfers									
Mobility									
Positioning									
Toileting									
Health Related									
Behavior									
IADL's									
Visit One									
Ratio Staff to Recipient	1:1	1:1	1:1	1:1	1:1	1:1	1:1		
Shared Services location	N/A	N/A	N/A	N/A	N/A	N/A	N/A		
Time In (Circle AM/PM)	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM		
Time Out (Circle AM/PM)	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM		



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## **Visit Two**

Ratio Staff to Recipient	1:1	1:1	1:1	1:1	1:1	1:1	1:1
Shared Services location	N/A						
Time In	AM						
(Circle AM/PM)	PM						
Time Out	AM						
(Circle AM/PM)	PM						

Total Minutes Per Day	Minutes						

Total Minutes	Total 1:1
This Time Sheet	Minutes

## **Acknowledgment and Required Signatures**

After the PCA has documented his/her time and activity, the recipient must draw a line though 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.

Recipient Name (First, MI, Last)	MA Member # or Date of Birth	Recipient Signature	Date
PCA Name (First, MI, Last)	PCA/UMPI Number	PCA Signature	Date

Review PCA Provider Time and Activity Documentation for additional policy information about timesheet requirements.

ALL SIGNATURES, PCA UMPI NUMBERS, AND MINUTES ARE REQUIRED FOR TIMESHEET/S TO BE ACCEPTED AND PAID!