



Accra Care, Inc. a 245D Provider
 1011 1st Street S #315, Hopkins MN 55343
 Phone: 952-935-3515 Fax: 952-935-7112
 Email: mytime@accracare.org

Complete only if consumer was hospitalized:

Admit	Date	Time	Date	Time
	5/18/2018	4pm	5/21/2018	10AM

No hours can be claimed if Consumer is in the hospital, nursing home, incarcerated or out of home placement

Consumer: James Test DOB: 1/1/1991 MHCP#: 1234567 Pay Period End Date: 5/26/2018
 (Please Print) 012345

WEEK ONE

Wk One	Mo/Day/Yr	Time In/Out AM or PM	Time In/Out AM or PM	Adult Companion Or Personal Support	Respite	** Homemaker	Night Supervision
Sun	5/13/2018	3:30PM	5:45PM	2.25			
Mon	5/14/2018						
Tue	5/15/2018	4PM-11PM	11PM-11:59PM	7	1		
Wed	5/16/2018	12AM	8:30AM		8.5		
Thur	5/17/2018	2PM	4PM			2	
Fri	5/18/2018	Hospital					
Sat	5/19/2018	Hospital					
Maximum Hours per week 40 hours for all consumers combined				Total	9.25	9.5	2
				Adult Companion Or Personal Support	Respite	Homemaker	Night Supervision

WEEK TWO

Wk Two	Mo/Day/Yr	Time In/Out AM or PM	Time In/Out AM or PM	Adult Companion Or Personal Support	Respite	** Homemaker	Night Supervision
Sun	5/20/2018	Hospital					
Mon	5/21/2018	3PM	9PM	6			
Tue	5/22/2018	10AM	3:45PM	5.75			
Wed	5/23/2018	2PM	4PM			2	
Thur	5/24/2018	4PM-9:30PM	9:30PM-11:59PM	5.5	2.5		
Fri	5/25/2018	12AM-8AM	8AM-10AM	2	8		
Sat	5/26/2018						
Maximum Hours per week 40 hours for all consumers combined				Total	19.25	10.5	2
				Adult Companion Or Personal Support	Respite	Homemaker	Night Supervision

*Please make sure your hours are in the column that corresponds to the services you are providing to the consumer.

**Basic Homemaker is not a 245D Service. For duties, see the CSSP Addendum.

**By signing this timesheet I am verifying the above recorded hours are true and accurate. It is a Federal Crime to provide false information for Medical Assistance payment

John Employee 5/26/2018 John Employee 100000 James Test 5/26/2018
 Employee Signature Date Employee Name (Printed) EmpID (on Pay Stub) Consumer or Responsible Party Signature Date

Employee Phone # (218)555-1234

Consumer or Responsible Party Phone # (320)555-1234

*** Timesheets are due in the office by noon Tuesday following the end of the pay period.