

INSTRUCTIONS FOR MFP WAIVER SERVICES ACTIVITY TIMESHEET—A SEPARATE TIMESHEET MUST BE COMPLETED BY EACH DCW

Important Reminders for Waiver Participants and Direct Care Workers (DCW)

- 1.) MassHealth prohibits payment for Direct Care Worker (DCW) Activity-time during the time a Waiver Participant is in an inpatient facility or nursing home or is enrolled in Adult Foster Care or Group Adult Foster Care. Activity time performed by a DCW while the waiver participant is in an inpatient facility or nursing home or enrolled in Adult Foster Care or Group Adult Foster Care is considered fraud and will be referred to the Bureau of Special Investigations.
- 2.) MassHealth prohibits payment for DCW activity time performed by a DCW whose name appears on the Office of Inspector General (OIG) List of Excluded Individuals and Entities (LEIE).
- 3.) Waiver participants must schedule their DCWs to work in 15-minute increments for each day. Waiver Activity-time will be rounded to the next 15-minute increment for manual forms and to the nearest 15-minute increment by the EVV system.
- 4.) MassHealth does not reimburse any Waiver Activity-time by a DCW that exceeds the waiver participant's weekly-authorized amount of time for each self-directed services.
- 5.) MassHealth requires Waiver Participants to inform their DCWs of the option to have DCW payments direct deposited into the DCW's bank or debit card account.
- 6.) Waiver Participants are responsible for ensuring the accuracy and validity of all DCW Activity-time listed on Waiver Activity Forms, prior to submission for payment, and that submission of false or incorrect Activity-time may jeopardize Waiver Participants' ability to continue receiving Self-Directed Waiver services.
- 7.) If MassHealth identifies false or incorrect Activity-time, it reserves the right to deny or recoup payment in addition to taking other appropriate steps to address the erroneous submission of Activity-time.

Completing and Submitting MFP Waiver Services Activity Timesheet

- 1.) Please mail, fax or deliver this signed timesheet by 12:00PM on the Monday after the biweekly cycle ends to ensure timely payment. Incomplete or illegible timesheets, or timesheets not signed by both Waiver Participant/surrogate and the DCW will be returned. Please do not send the same timesheet twice. Be sure to keep a copy of the timesheet for the Waiver Participant's records.
- 2.) Record the payroll dates. The payroll runs for 2 weeks. Each week starts on Sunday and ends on Saturday. Please check the payroll calendar for your schedule.
- 3.) Record the Waiver Participant and DCW information. On the top left side of the form, write the Waiver Participant's name and 4-digit employer number. On the top right side, write the DCW's name and last 4-digits of their Social Security Number. For updating Waiver Participant or DCW worker contact information, please check the box(es) located below the Waiver Participant and DCW name and attach a completed Change Form.
- 4.) Recording the Self-Directed Waiver services Activity-time. Please schedule DCWs to work in 15-minute increments, time for each day on the waiver services activity form must be recorded in 15-minute increments or we will need to round up to the next 15-minute increment. Please complete the timesheet indicating the time and service worked each day, making sure to put the in and out times and service code.
 - There are 3 lines of boxes per day to record the hours and minutes and Self-Directed Waiver services the DCW performed, with circles to record AM or PM. The first column is where the Self-Directed Waiver service code should be recorded, the next column is where time the DCW started "Time In" should be recorded in hours and minutes with the AM or PM circle completely filled in. The third column is where the time the DCW left "Time Out" should be recorded in hours and minutes and the AM or PM circle filled in completely. The final column should have the total time for that shift recorded in hours and minutes. E.g., 8:00AM to 10:15AM equals a total time of 2:15.
 - If the DCW came back and worked more hours under the same Self-Directed Waiver service code or performed tasks under a different Self-Directed Waiver service code, that information will need to be recorded in the other two rows for that day.

- If your DCW worked more than three shifts under one Self-Directed Waiver service code or performed tasks under more than three Self-Directed Waiver service codes on one day, a separate timesheet is necessary (Remember to fill out all the required information again).

5.) **Marking Instructions:** For optimum accuracy, please:

- Write in BLACK PEN ONLY
- Write numbers as large and legible as possible without touching the sides of boxes
- Mark circles by filling them in like this: ● (Do not check ✓, circle or ✕ them)
- When recording hours and minutes in the Total column, be sure to use hours plus minutes in 15 minute increments. E.g., 1:00PM to 2:30PM is 1:30, (not 1 1/2 or 1.5)
- If you have any questions, please call Stavros FI or your skills trainer for clarification before submitting the timesheet.