Ohio Elderly Services Program-Paper Timesheet Instructions

These instructions detail how a manual paper timesheet should be completed for the Ohio Council on Aging, Elderly Services Program. If a timesheet is submitted incomplete or contains issues, it will be rejected and must be resubmitted before processing.

Submitting timesheets online through the **Palco Connect Portal** is the most effective way to log your time. When a timesheet is submitted, validations occur within seconds, and you receive immediate confirmation of timesheet receipt and notification of errors preventing submission. To register, visit the Connect Registration page at: https://connect.palcofirst.com/#/registration/data_verification or speak with a Palco customer service representative if you have questions.

Paper Timesheets

Timesheets are completed with Time In/Time Out. Before being paid, validations are done on each timesheet to ensure enough funds remain in the Budget to cover the expenses. All timesheets are recorded in 15-minute increments, and services should begin and end at 00, 15, 30, and 45 minutes after the hour. Rounding to the nearest 15 minutes is allowed by the Department of Labor. You can round down employee time from 1-7 minutes, but you must round up employee time from 8-14 minutes and count it as a quarter hour of work.

Use this checklist to ensure the timesheet is not rejected and worker payment is not delayed
- ☐ Use one timesheet per Participant.
- ☐ Use one timesheet per Aide/Worker
- ☐ Complete **Section A** of the Timesheet:

Ohio Elderly Services Program Timesheet

Make plenty of copies of this timesheet. This is the only timesheet that will be accepted. If you make a mistake, mark a single line through the mistake, initial beside it and make the correction nearby. On days that the worker does not work, you may leave it blank.

Participant Name: *Jane Doe*   Participant Palco ID: *123456*

Worker Name: *Johnathan Doe*   Worker Palco ID: *654321*   Month/Year: *July* / *2022*

- ☐ **Line 1 – Participant Name:** This is the name of the Participant receiving services. Please print the participant's name clearly on the line.
- ☐ **Line 2 – Participant Identification Number:** 6-digit Palco ID. The ID can be found on Palco's Welcome Email or by calling Palco Customer Support.
- ☐ **Line 3 – Worker Name:** This is the name of the aide/worker who is providing services to the participant. Please print the worker's name clearly on the line.
- ☐ **Line 4 – Worker Identification Number:** 6-digit Palco ID. The ID can be found on Palco's Welcome Email or by calling Palco Customer Support.
- ☐ **Line 5 – Month/Year:**
  - ▪ **Month:** Please write the month the services were provided.
  - ▪ **Year:** Please write the year the services were provided.

Month/Year: _*July*_ / *2022*

☐ Complete **Section B** of the Timesheet:

☐ **Date Column:** Please write the date of the day when the services were provided. Valid date: 1 or 1st; 5 or 5th; 10 or 10th etc.

Day of Month	Service Code	Time In			Time Out		
		H H	Min- Round to the nearest 15 min	AM/PM	H H	Min- Round to the nearest 15 min	AM/PM
2	CDC Blended T2041	1 0	● 00 ○ 15 ○ 30 ○ 45	● AM ○ PM	1 1	○ 00 ○ 15 ● 30 ○ 45	● AM ○ PM
3	CDC Blended T2041	0 8	○ 00 ○ 15 ● 30 ○ 45	● AM ○ PM	0 5	○ 00 ○ 15 ● 30 ○ 45	○ AM ● PM
7	CDC Blended T2041	0 8	● 00 ○ 15 ○ 30 ○ 45	● AM ○ PM	1 2	● 00 ○ 15 ○ 30 ○ 45	○ AM ● PM
14	CDC Blended T2041	0 8	○ 00 ○ 15 ○ 30 ● 45	● AM ○ PM	0 9	● 00 ○ 15 ○ 30 ○ 45	● AM ○ PM
	CDC Blended T2041	☐ ☐	○ 00 ○ 15 ○ 30 ○ 45	○ AM ○ PM	☐ ☐	○ 00 ○ 15 ○ 30 ○ 45	○ AM ○ PM
	CDC Blended T2041	☐ ☐	○ 00 ○ 15 ○ 30 ○ 45	○ AM ○ PM	☐ ☐	○ 00 ○ 15 ○ 30 ○ 45	○ AM ○ PM
	CDC Blended T2041	☐ ☐	○ 00 ○ 15 ○ 30 ○ 45	○ AM ○ PM	☐ ☐	○ 00 ○ 15 ○ 30 ○ 45	○ AM ○ PM
	CDC Blended T2041	☐ ☐	○ 00 ○ 15 ○ 30 ○ 45	○ AM ○ PM	☐ ☐	○ 00 ○ 15 ○ 30 ○ 45	○ AM ○ PM

☐ **Time In Column:**
– **Hour ⊞ ⊞:** Enter the time (Hours) your shift started in HH format (HOUR)
– **Min – Round to the nearest 15 min:** Fill in the circle indicating the minutes.
(Correct Method: "●"; Incorrect Method: "⊙","①","②","③","④","⊗","⊖","✓")

Time is currently entered in 15-minute increments at HH:00, HH:15, HH:30, and HH:45. Round down to the nearest quarter hour if an Worker/Aide is within the first 7 minutes of the interval and Round up if to the nearest quarter hour if an Worker/Aide is within the last 7 minutes of the interval.
For example, if a Worker/Aide clocks in at 8:08, their time could be rounded to 8:15. If a Worker/Aide clocks in at 8:07, their time should be marked as 8:00.

– **AM/PM:** Fill in the circle indicating if the Worker/Aide worked in the AM or PM

☐ **Time Out Column:** Enter the time (Hours) your shift ended in HH format (HOUR).
– **Hour ⊞ ⊞:** Enter the time (Hours) your shift started in HH format (HOUR)
– **Min – Round to the nearest 15 min:** Fill in the circle indicating the minutes.
(Correct Method: "●"; Incorrect Method: "⊙","①","②","③","④","⊗","⊖","✓")

Time is currently entered in 15-minute increments at HH:00, HH:15, HH:30, and HH:45. Round down to the nearest quarter hour if a Worker/Aide is within the first 7 minutes of the interval and Round up if to the nearest quarter hour if an Worker/Aide is within the last 7 minutes of the interval.
For example, if a Worker/Aide clocks out at 10:08, their time could be rounded to 10:15. If a Worker/Aide clocks out at 10:07, their time should be marked as 10:00.

– **AM/PM:** Fill in the circle indicating if the Worker/Aide worked in the AM or PM.

☐ Complete **Section C** of the Timesheet:

> Your signature confirms that these hours were actually worked. Submitting a timesheet for hours not actually worked, is considered fraud. Please note, your signature date must be _on or after_ the last date worked.
>
> *Jane Doe*   07/15/2022   *Johnathan Doe* 07/15/2022
> **Employer Signature**   **Date**   **Worker Signature**   **Date**

- **Line 6.a. – Employer of Record (EOR) Signature:** Signature of the Employer of Record who reviewed and approved the timesheet.
- **Line 6.b. – Date:** This should be the date that the Employer reviewed and signed the timesheet. This date cannot be prior to the last day of services provided.
- **Line 7.a. – Worker/Aide Signature:** Signature of the Worker/Aide who provided the services.
- **Line 6.b. – Date:** This should be the date that the Worker/Aide reviewed and signed the timesheet. This date cannot be prior to the last day of services provided by the Worker/Aide.

☐ **Review timesheet completely:** all fields are completed and legible, time is entered accurately for each shift. An optional checklist is provided as a resource.

☐ Send timesheet to Palco **by 12:00 PM Central Time on the due date** (See [Ohio Payment Schedule](#) for the exact date).
- Scan and email a PDF to timesheets@palcofirst.com
- Fax to 1.877.859.8757
- Mail to Palco, ATTN: Timesheets, P.O. Box 13260, Maumelle, AR 72113
(Allow five business days before inquiring about your mailed timesheet status.)

General Recommendations:
- ✓ Fill in the timesheet clearly. Your Employer and Palco will need to be able to read your timesheet to process your time, or your payment may be delayed.
- ✓ Fill in all the required fields. Your timesheet will not be processed and paid unless all the fields are completed properly.
- ✓ Use dark ink.
- ✓ Use separate timesheets for different Participants
- ✓ Do not submit multiple copies of the same timesheet.
- ✓ Do not email, mail, or fax the same timesheet.
- ✓ For overnight shifts you must complete one line for work you did before midnight and another line for work you did after midnight. For example, say you worked overnight Friday night from 9:00 PM to 6:00 AM. Enter the start time as 9:00 PM and enter the end time for that day as 12:00 AM. Enter the rest of your time on Saturday from 12:00 AM to 6:00 AM.

For questions, you can email us at customersupport@palcofirst.com or call us at **1-866-710-0456**. Our Customer Support team is ready to help and give you answers fast, Monday – Friday from 8:00am – 5:00pm EST. You can also visit our website: https://palcofirst.com/ohio/