West Virginia Personal Options Program



Paper timesheets are only allowed for live-in caregivers who are exempt from EVV. To avoid your timesheet being rejected, please make sure you are exempt from EVV and that everything is filled out before submitting.

1. Participant Name			2.Partio	2.Participant Identification Number					SERVICES		
3. Caregive	4. Care	4. Caregiver Identification Number ADW Waiver • Personal Attendant Services I/DD Waiver • Person-Centered Support (PCS)									
5. Month/Y	Eor ins	• Respite									
Month:	Year:		For Instructions on completing the TBI Waiver timesheet, visit www.palcofirst.com Personal Attendant Services								
6. Services	Provided										
Date Service Type T			Time In H H					Time Out Min - Round to H H the nearest 15 min			
				O 00 O 30	O 15 O 45	O AM O PM		000	O 15 O 45	O AM O PM	
				O 00 O 30	O 15 O 45	O AM O PM		000	O 15 O 45	O AM O PM	
				O 00 O 30	O 15 O 45	O AM O PM		000	O 15 O 45	O AM O PM	
				O 00 O 30	O 15 O 45	O AM O PM		000	O 15 O 45	O AM O PM	
				O 00 O 30	O 15 O 45	O AM O PM		000	O 15 O 45	O AM O PM	
				O 00 O 30	O 15 O 45	O AM O PM		000	O 15 O 45	O AM O PM	
				O 00 O 30	O 15 O 45	O AM O PM		000	O 15 O 45	O AM O PM	
				O 00 O 30	O 15 O 45	O AM O PM		000	O 15 O 45	O AM O PM	
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				O 00 O 30	O 15 O 45	O AM O PM		000	O 15 O 45	O AM O PM	
7. Checklist											
				esheet submitted after hours worked Dloyer & caregiver both signed				Used blue or black ink Did NOT use white-out			
									1		
8. Caregiver Signature 8a. E			. Date	6D. I	8b. Employer Signature				8c. Date		
Your signature confirms the information provided above is complete and accurate.											

Your signature confirms the information provided above is complete and accurate.

Timesheets are due to Palco by 12:00 pm Eastern Time on the first day after the end of the pay period.

Fax: 1-877-859-8757 Email: timesheets@palcofirst.com Mail: P.O. Box 13260, Maumelle, AR 72113