AHCCCS ELECTRONIC VISIT VERIFICATION (EVV) PAPER TIMESHEET

It is permissible for provider agencies to utilize their own paper timesheet as long as the minimum data elements are captured.

Week Ending: _____

Provider Agency Name: _____ AHCCCS Provider ID: _____

Employee Information: _____ _____ *Direct Care Worker (DCW) ID: _____
Last Name *First Name*

Member Information: _____ _____ Member AHCCCS ID: _____
Last Name *First Name*

DAY	SERVICE *FILL OUT LINES BY SERVICE PROVIDED*	DATE	TIME IN	**INDEPENDENT VERIFICATION	TIME OUT	**INDEPENDENT VERIFICATION	***TASK(S) COMPLETED	***TASK(S) COMPLETED	***TASK(S) COMPLETED
SUNDAY									
MONDAY									
TUESDAY									
WEDNESDAY									

Effective Date: 01/01/21, 08/06/26
Approval Date: 11/19/20, 07/17/26

DAY	SERVICE *FILL OUT LINES BY SERVICE PROVIDED*	DATE	TIME IN	**INDEPENDENT VERIFICATION	TIME OUT	**INDEPENDENT VERIFICATION	***TASK(S) COMPLETED	***TASK(S) COMPLETED	TASK(S) COMPLETED***
THURSDAY									
FRIDAY									
SATURDAY									

*Any agency ID specific to the worker.

**The actual date, start and end time of the service provision must be independently verified through the EVV system, for example, a code that represents a time and date stamp.

***Refer to Appendix A below for task list.

*MEMBER/HEALTH CARE DECISION MAKER (HCDM), OR DESIGNEE SIGNATURE**** *SIGNER PRINTED NAME (IF NOT MEMBER)*

*EMPLOYEE SIGNATURE**** *MANAGER SIGNATURE*

****By signing this timesheet, I attest that the information contained within is correct and true.

APPENDIX A

TASK DESCRIPTION (**)	EVV TASK ID	ALTERNATIVE EVV TASK ID
Shopping	0110	
Meal/Snack Preparation and Clean Up	0120	
Errand	0130	
Medical Appointment	0140	
Self-Administration of Medication	0150	
Bathing	0160	
Eating	0170	
Assisting with Mail	0180	
Dressing and Grooming	0190	
Housekeeping - Bedroom	0200	
Housekeeping - Bathroom	0210	
Housekeeping - Kitchen	0220	
Housekeeping – Common Living Areas	0230	
Laundry	0240	
General Supervision	0250	
Turning, Positioning or Transferring	0260	

TASK DESCRIPTION (**)	EVV TASK ID	ALTERNATIVE EVV TASK ID
Toileting	0270	
Cognitive/Academic	0280	
Communication	0290	
Continence Support and Hygiene (bowel, bladder, catheter)	0300	
Emergency and Safety Skills	0310	
Health/Medical	0320	
Independent Living Skills	0330	
Leisure Time Recreation Skills	0340	
Medication Administration	0350	
Mobility	0360	
Personal Health Care	0370	
Range of motion/exercise	0380	
Sensorimotor	0390	
Socialization	0400	
Vital Signs	0410	