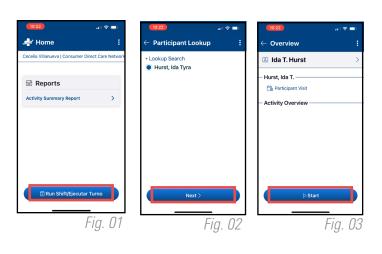


Non Live-In Attendants must use the CellTrak app or IVR (automated phone systm) to enter in shifts worked. Live-in Attendants may use the DirectMyCare Web Portal.

CellTrak is an app you can use on your mobile device to show when you start and stop working. The app is designed to follow Electronic Visit Verification (EVV) rules. Here are the steps to follow:

1. Start Your Shift

- A. Open the **CellTrak app** on your mobile device and type your password to log in.
- **B.** Tap **Run Shift** to start your shift. (Fig. 01)
- **C.** If needed, choose the **Participant** and tap **Next**. (Fig. 02)
- **D.** Tap **Start**. (Fig. 03)



2. End Your Shift

It is best to be with the Employer of Record (EOR)/Designated Rep. when you finish your shift. They need to approve your shift. If you cannot be with them, they need to sign into the DirectMyCare web portal and approve your shift.

- **A.** Open the **CellTrak app** and enter your password to log in.
- **B.** Tap **End Shift** when you finish your shift. (Fig. 04)
- C. If the shift requires any changes, select yes and specify the information required. If no changes are needed, select **no**. (Fig. 05)
- **D.** To sign, choose **yes**, then tap the signature box. (Fig. 05) Turn the device sideways to sign with your finger. Tap **Done** when finished.
 - If unable to sign, choose no and enter a reason why a signature was not captured. Shift will need to be submitted in the DirectMvCare web portal. See instructions on next page.
- **E.** Once signed, type your name.

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DO NOT tap **Finish** without obtaining the EOR/Designated Rep's signature.

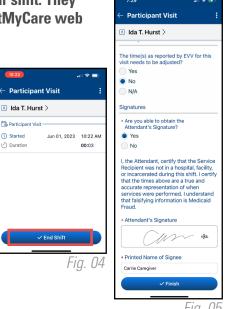


Fig.

continued on next page

Co Participant

(1) Started

3. EOR Shift Approval

- **A.** Hand the device to the EOR/Designated Rep. for their signature.
- **B.** To sign, Tap the the signature box. Turn the device sideways to sign with your finger. Tap **Done** when finished. (Fig. 06)
 - If unable to sign, enter a reason why a signature was not captured. Shift will need to be approved by EOR in the DirectMyCare web portal.
- C. Choose the EOR/Designated Rep. from the dropdown menu and type their name. (Fig. 07)
- **D.** Tap **Finish** to end your shift. (Fig. 08)

NOTE: Any shift changes **must** be approved by the EOR/Designated Rep. in the DirectMyCare web portal.

4. Submitting Your Shift in the Web Portal (optional)

If your shift needs to be corrected, or if it is missing signatures, you can use the DirectMyCare web portal to make changes and/or submit your shift. **REMEMBER:** Any shift changes must be approved by EOR/Designated Rep.

- A. Log into the DirectMyCare Web Portal from link on the CDVA website or go to DirectMyCare.com
- **B.** From the My Dashboard screen, locate **My Outstanding Time Entries.** (Fig. 09)
- C. Select the shift you need to submit/change by using the Details link. (Fig. 09)

		Pay Stub Service Detail O Time Entry Pay Stub/W-2						
My Dashboard To access your current W-2, please click here.								
My Outstanding Time Entries			0 Rejected 1 Not submitted					
Participant	Service	Date	Time In 🕇	Time Out	Time Spent	Status	Source	
And the second sec	Attendant (S5126)	2023-07-19	5:30 PM	11:00 PM	05:30	Saved	WEBTS	Detail

Erase

Fig. 06

Fig. 09

- **D.** Change any of the shift details in the black side panel. (Fig. 10)
- E. Press Submit to send your shift to CDVA for payment. (Fig. 10)

NOTE: Any shift changes **must** be approved by the EOR/ Designated Rep. in the DirectMyCare web portal.

		Legend						
Thu Jul 13 - Wed Jul 19 Available Sick Time			Service Code Attendant (S5126)					
			Date 07/19/2023					
7/18	Wed 7/19	Total Hrs.						
(PAID)	5.5 (PAID	29.50	Time In Time Out					
	5.5 🖺		05 : 30 PM 11 : 00 PM					
		24.00	Time In (Actual) Time Out (Actual)					
		0.00						
50	11.00	59.00	Source					
			WEBTS					
			Cancel Save Submit					

Fig. 10

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7:31	.il ବ 👀
\leftarrow Participant Vi	sit 🚦
🗷 Ida T. Hurst >	
I certify that the Serv not in a hospital, facil during this shift. I cer above are a true and representation of wh performed. I understa information is Medica • Employer of Record Rep. Signature	ity, or incarcerated tify that the times accurate en services were and that falsifying aid Fraud.
Signed By)
Employer of Record	~]
* Printed Name of Sig	inee
Sara Client	
√ Fir	iish
	Fig. 07