



**Re: Starting Oct. 1, 2019, Direct Service Workers timesheets will have to be completed electronically**

Dear Participant:

There is a new federal rule that requires UnitedHealthcare to use a timekeeping system to record the start and stop time your direct service worker, home health aide or nurse provide your home health and personal care services. This is called Electronic Visit Verification or EVV. Starting October 1, 2019, your Direct Service Worker's timesheet will need to be completed electronically.

**What This Means for You**

There will be no change in your services, your Direct Service Worker's pay, or the payroll schedule. You will still need to approve their time.

**Next Steps**

Consumer Direct will notify your Direct Service Worker. Consumer Direct will train them on how to use the App.

**Questions?**

If you have questions, you can call Consumer Direct at 888-444-8182. You can also call your UnitedHealthcare Care Manager at 800-791-9233.

Sincerely,

A handwritten signature in black ink, appearing to read "Lori Hairston".

Lori Hairston, RN, BSN, MS  
Associate Executive Director  
UnitedHealthcare Long Term Care Program

UnitedHealthcare Community Plan does not treat members differently because of sex, age, race, color, disability or national origin.

If you think you were treated unfairly because of your sex, age, race, color, disability or national origin, you can send a complaint to:

Civil Rights Coordinator  
UnitedHealthcare Civil Rights Grievance  
P.O. Box 30608  
Salt Lake City, UTAH 84130

[UHC Civil Rights@uhc.com](mailto:UHC_Civil_Rights@uhc.com)

You must send the complaint within 60 days of when you found out about it. A decision will be sent to you within 30 days. If you disagree with the decision, you have 15 days to ask us to look at it again.

If you need help with your complaint, please call Member Services at **1-888-716-8787, TTY 711**, Monday through Friday, 8:00 a.m. to 8:00 p.m.

You can also file a complaint with the U.S. Dept. of Health and Human Services.

**Online:** <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>

**Phone:** Toll-free **1-800-368-1019, 1-800-537-7697** (TDD)

**Mail:** U.S. Dept. of Health and Human Services  
200 Independence Avenue SW Room 509F,  
HHH Building Washington, D.C. 20201

If you need help with your complaint, please call the toll-free member phone number listed on your member ID card.

We provide free services to help you communicate with us.

Such as, letters in other languages or large print. Or, you can

ask for an interpreter. To ask for help, please call Member

Services at **1-888-716-8787, TTY 711**, Monday through Friday,

8:00 a.m. to 8:00 p.m.

ATTENTION: If you do not speak English, language assistance services, at no cost to you, are available. Call **1-888-716-8787, TTY 711.**

ATENCIÓN: Si no habla inglés, los servicios de asistencia de idiomas están disponibles sin costo para usted. Llame al **1-888-716-8787, TTY 711.**

ATANSYON: Si w pa pale Anglè, gen sèvis èd pou lang ki disponib san w pa peye anyen. Rele **1-888-716-8787, TTY 711.**

ВНИМАНИЕ: Если Вы не говорите по-русски, Вы можете воспользоваться бесплатной языковой помощью. Позвоните по телефону **1-888-716-8787, телетайп 711.**

ATENÇÃO: Se não fala inglês, estão disponíveis serviços de assistência linguística sem nenhum custo para si. Ligue para o **1-888-716-8787, TTY 711.**

注意：如果您不會說英文，您可獲得免費語言協助服務。請致電 **1-888-716-8787**，聽障專線 (TTY) **711**。