

*Figure 1:* CDCN Portal home page with Sign In and Register Buttons

The Consumer Direct Care Network Portal, or CDCN Portal is a secure website (<u>https://DirectMyCare.com</u>). It provides online payroll and authorization tools to people who receive services through a CDCN company.

Online time entry and approval through the CDCN Portal is a fast way to submit time. It is also less prone to errors. Approved time is sent straight away to the CDCN payroll system. Online time sheets show the status of all time and payroll entries.

#### About terms used in this Guide:

Medicaid participants who receive Consumer Direct payroll services are called a "**Participant**" in the CDCN Portal. They may also be called an "Employer."

A worker who is hired to care for a participant is called a **Direct Service Worker** (DSW). They may be called a "Caregiver" in the CDCN Portal.

#### Table of Contents, next page



### **Table of Contents**

#### https://DirectMyCare.com/

#### How to Enter and Approve Time

A step by step guide for all parts of entering, submitting, and approving time. From DSW to participant or employer of record.

About Time Entry & Approval	Page 3
DSW Time Entry	Page 4
Participant Time Approval	Page 10
How to Reject Time	Page 15

#### **More About Shifts**

Learn more about shift statuses and how to delete a DSW's shift(s) when necessary.

About Shift Statuses	Page	16
How to Resubmit a Shift	Page	17
Deleting DSW Shifts	Page	19

#### **Resources:**

#### **Reports, Documents, Paystubs, and Authorizations**

Resources for participants, employers of record, and DSWs. These are great for reviewing documents and how services have been used.

Accessing Resources	Page 20
Participant Reports and Documents	Page 21
DSW PayStubs and Documents	Page 24
How to Reset Your Password	Page 25
Frequently Asked Questions	Page 27

### **About Time Entry & Approval**

This guide is about entering, adjusting, and approving time. Before time can be entered, changed, or approved, both DSWs and participants must register with the Portal. If you have not yet registered, and need instructions, please visit your local Consumer Direct website or contact Consumer Direct.

**CONSUMER DIRECT** 

**RE NETWORK** 

DSWs log their time with CellTrak or IVR (Interactive Voice Response, an option that works with landline phones). There are two times when they will use the Portal:

1) When they need to adjust a CellTrak Visit (see the CellTrak guide).

2) They were unable to use CellTrak or IVR during their shift and need to enter an exception.

To enter an exception, the DSW (caregiver) will log onto the CDCN Portal and enter the shift worked. Time entry for each shift will include the participant's name, the service provided, and beginning and ending shift times. In some situations, tasks performed and other service information must also be logged.

The DSW (caregiver) submits their exception shift(s) or adjusted shift for their employer's approval.

The Participant/employer logs in to the CDCN Portal to review and approve the DSW's time when:

- They haven't approved the shift in CellTrak.
- They want to approve IVR shifts using the Portal
- The DSW enters an exception or makes an adjustment.

Time may be approved at any point after the DSWs submission, however time entered must be approved by timelines listed on the pay calendar for DSWs to be paid without delay.

Once the time has been approved by the participant/employer (or a designated representative), entries can be processed and paid by Consumer Direct.

#### Time Legend

As you work through this guide and learn about time entry, the legend below will help identify time entry statuses. See page 16 to learn more about statuses.



#### Figure 7.4: Portal Symbol Legend



https://DirectMyCare.com/

### CARE NETWORK



### **DSW Time Entry Steps**

#### https://DirectMyCare.com/

1	Go to the CDCN Portal home page		Sign in			
1	( <u>https://DirectMyCare.com</u> ). Then click th	le	johnsmith@mailinator.com			
	Please remember, you must register and be		••••••			
	completely verified in our system to enter time	Э.	□ Keep me signed in			
2	Enter the email address and password vou created at registration to enter the		Sign in			
	site. Then click sign in again	(	Figure 7.5: Sign In fields			
	<ul> <li>(Figure 7.5).</li> <li>Outstanding time and entries (entered but not yet submitted)</li> </ul>					
Ŋ	My Dashboard.	• A list of p	participants the DSW works for			
J	After you log in, you will see a "dashboard."	Announce	ements			

The dashboard has a lot of information, as listed in the box to the right.

#### My Dashboard:

	CARE NETWORK		l	Jeff DemoCaregiver Sign out Españo Caregiver - VA	ot ^
				Home FAQ Contact	
	My Dashboard			O Time Linuy Paysiub Report	IIme Entry
	My Outstanding Time Entries 🛛 💿	Rejected 0 Not submitted		My Participants	& PayStubs
	Participant Service Date	Time Spent Status No data available	Source	Jeff DemoClient Mc ID: 2020336	(see page
	1				23)
				Announcements	
Outstandir	ng				Participants
Time Entri	es			No data available	
	Finung Q. Mu Doobhoon	Copyright © 2016 Consumer D	irect. All rights reserved.		Announcements

•

Buttons to access:

time entry

FAQs

pay stubs



#### https://DirectMyCare.com/

4 Click on From the

#### Click on the 'Time Entry" Button.

From the top right part of the screen, click on the Time Entry button. This goes to the time entry screen, below (*Figure 8.7*).



Figure 8.5. Time Entry Button



#### Time Entry Screen:

Figure 8.7 Time Entry Screen



#### https://DirectMyCare.com/

5 Ch The see

h

#### Choose week(s) of service.

Choose which week(s) you wish to enter time for. The back or forward arrows change the week(s) you see (*Figure 9*).

- **Select the participant you will enter time for from the drop down list** (Figure 10).
  - Click in the cell for the day of the work week you want to enter time for (*Figure 11*).



Figure 9. Select week(s) of service

	-
Cassie Smith	~
Please Select Cassie Smith	
	Cassie Smith Please Select Cassie Smith

Figure 10. Select Participant

)—											
	Participant	Service Code	Thurs 12/6	Fri 12/7	Sat 12/8	Sun 12′a					
	Test Participant_UAT	S5135		🖺 4	🖺 0.5	15					
			0	4	0.5	0					
		Additional Actions:	~	~	~	~					
			🛕 Action Required < Action Completed								

*Figure 11.* Select date of service

Steps continue on next page.

#### **MOLINA** HEALTHCARE

https://DirectMyCare.com/

### 8

#### **Enter shift details** (*Figure 12*).

Fill in the details for the shift worked in the pane on the right hand side of screen that appears after you click a cell representing a date in the calendar. The pane will pre-populate with the service code and date of service. These values can be changed here, if need be.

Click the up or down arrows to adjust your time in and time out. You can also type in your time.

Note the Source field below the Time In and Time Out fields. This field shows where DSW time came from. This means you can see your CellTrak and IVR shifts in the Portal.

### Click the Save or Submit button to complete the time entry.

Select "Save" to save your time entry. You will need to submit it to your participant/employer at a later time. Select "Submit" to send your time worked to your participant/employer for approval.

### 1(

### Repeat the Time Entry steps again for each shift you worked.

The shift entry box stays open. You may click "+ Add Shift" to enter a new shift for the same participant. You may also repeat the steps above.





#### Figure 12.5. Add Another Shift



Additional Actions (not required in FL, Figure 13). This is not used in Florida. You do not need to do anything here.

#### How to Submit Shifts

After the shift(s) have been entered you will want to submit your time to be approved by the participant/employer. You may choose to select and submit one shift (*Figure 14*), more than one shift (*Figure 15*) or all shifts for the work-week(s) (*Figure 16*).

### 12

#### To submit one shift:

Click in the cell you want to submit. Make sure the "Additional Actions" have been done. Then click the "Submit Entries" button.

/	Sun 4/17	Mon 4/18	Tue
	🖺 1	🖺 1	E
	🖪 1		
	2	1	
s:	~	A	

*Figure 13.* Additional action required to submit a shift. Not used in Florida.



## CARE NETWORK



### DSW Time Entry Steps, cont.

https://DirectMyCare.com/

#### 12

#### To Submit More Than One Shift:

If you want to submit more than one shift, pick each shift or click on a row to submit the entire row (*Figure 15*, the entire row highlights yellow). Make sure all Additional Actions are done and click the "Submit Entries" button. Note: You will be asked to fill in additional actions if you click submit and these have not been done.

#### **Reminder:**

Always check your time for accuracy before submitting.

		Participant								Wed 12/12	
E	/	Test Participant_UAT	S5135		🖺 4	🖺 0.5					4.50
		Test Participant_UAT	S5135		🖺 4						4.00
				0	8	0.5	0	0	0	0	8.50
			Additional Actions:	~	×	×	~	~	×	<b>~</b>	
				Action Require	ad 🖌 Action	Completed					
				Action Require	ed 🖌 Actior	n Completed					
										Del	ete Submit E
										_	

*Figure 15.* Submit a row of shifts

14

#### To Submit a Whole Week:

You may also select the whole week. To do so, click the box in the top left hand corner of the grid next to the word "Participant." Make sure all Additional Actions are filled in. Then click the "Submit Entries" button.

To Submit all time for two weeks, check mark the participant box for both weeks.



#### https://DirectMyCare.com/

15

### Attest that your entry is true and accurate.

When you click the "Submit" button you will see an Attestation (*Figure 17*). Click "OK" to agree that your shifts are true and complete. The shifts you submitted now have a purple "Submitted" symbol next to them. This means your participant/employer can now approve them.



Figure 17. Attestation statement

### **Participant Time Approval**

#### Click on the "Sign In" button on the CDCN Portal home page.

When your DSW has finished one or more shifts click the green "Sign in" button. Checking time is also good to do at the end of the work week. Please remember, you must register and be completely verified in our system to review and approve time entries.

Enter the email address and password you created at registration to enter the site. Then click sign in again.

(*Figure 17.1*).





**NEE NETWORK** 

CONSUMER DIRECT

### CARE NETWORK



### **Participant Time Approval**

#### https://DirectMyCare.com/

### 3

#### My Dashboard.

Once logged in, you will see a "dashboard" (*Figure 18*).

The dashboard contains a lot of information.

#### **Dashboards Include:**

- DSW time ready for your approval
- A list of DSWs that work for you
- Announcements
- Access to FAQ's

CARE NETWORK						Jeff DemoClient Participant - VA Home Ø Non Availabili	Sign out Español FAQ Contact U ty O Time Entry	s	Non-Av & Time	vailability Entry
My Outstanding Time E	ntries 💿 Not	approved		V	iew Authorization	My Contacts				
Caregiver Service	Date	Time Spent	Status	Source		Name & Id C	ontact Nu			
Jeff DemoCaregiver S5135	2019-05-31	01:00	Submitted	WEBTS	Detail	Jeff DemoEOR Employer of Record	More			
						Jeff DemoCaregiver	More	-	My Co	ntacts
			$\mathbf{i}$			< Announceme	<b>&gt;</b>			
		Conver	oht © 2016 Consumer Dir	et al robe resourt		No da	ta available	Ĵ,	Annou	incements
		0000								
<i>Figure 18.</i> My Das	shboard				Tim	e Entries	Not Yet	Approved		

#### Click on the "Time Entry" button.

From the top right part of the screen click on the "Time/Mileage Entry" button. This goes to the time entry approval screen. (see next page)



4



### Participant Time Approval, cont.

https://DirectMyCare.com/

#### **Time Entry Screen:**

(Steps for Approving Time on next page)





### Participant Time Approval, cont.

5 Chose w for. If yo

h

#### Chose which caregiver (DSW) to approve time

**for.** If you have more than one DSW, select which you want to approve time for. Use the drop down box as shown in Figure 19 to pick a DSW. (See also Figure 20)

#### Approving DSW Work Time.

You can choose to approve one shift at a time, a row at a time or a whole week(s) at a time.

#### To approve one shift:

Click in a cell where time has been submitted. When you click in a cell the cell turns color and you will see a pane on the right hand side of the screen.

Review all details in the pane. If it is correct click "Approve" (Figure 20).

Time Entry Caregiver Test CareGiver	5 CARE	r direct Network	
Caregiver Test CareGiver	Time E	ntry	
	Caregiver	Test CareGiv	er 💌

*Figure 19.* Select Caregiver (DSW)



Time Entry									Legend	Jeff DemoC	aregiver
Caregiver Jeff DemoCaregiver	ek 2 Weeks		O Non	Availability	<b>′</b>	• •	т	hu May 30	- Wed Jun 12	Service Code	
										S5135	
	V	/eek 1 (Ma	ay 30 - J	lun 05)						Date	
Caregiver	Service Code	Thurs 5/30	Fri 5/3	31	1 Sun 6/	2 Mon 6/3	3 Tue (	5/4 Wed 6/	/5 Total Hrs.	05/31/2019	
Jeff DemoCaregiver	S5135	1 🛩	1 4						2.00	Time In	Time Out
		1.00	1.00	0.00	0.00	0.00	0.0	0.00	2.00	12:00 AM	01:00 AM
	V	Veek 2 (Ju	in 06 - J	un 12)						Source	
Caregiver	Service Code	Thurs 6/6	Fri 6/7	Sat 6/8	Sun 6/9	Mon 6/10	Tue 6/1	1 Wed 6/1	12 Total Hrs.	WEBTS	
		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	Caregiver's Comm	ents
	Service Code	т	hurs	Fri Sa	at Sun	Mon	Tue	Wed	Total Hrs.		
	S5135	i 1	.00 1	1.00 0.0	00.00	0.00	0.00	0.00	2.00		
	Total	1	.00 1	1.00 0.0	00.00	0.00	0.00	0.00	2.00		Cancel Reject App
								Review Add	litional Details		4
	1.0										

**Approve Button** 

### CARE NETWORK



### Participant Time Approval, cont.

https://DirectMyCare.com/

#### To Approve One Row:

If you want to approve one row of time, click in the box next to the DSW's name in the row (*Figure 21*). The whole row will change color. Then click on the "Approve" button to finish the process.

#### **Reminder:**

Always check each time entry for correctness before approving.

								Home 300s	FAQ Contact Us
me Entry									Legend
Test CareGiver	O Non Availability							🔹 🕨 🋗 Thu	Dec 06 - Wed Dec 12
Caregiver	Service Code	Thurs 12/6	Fri 12/7	Sat 12/8	Sun 12/9	Mon 12/10	Tue 12/11	Wed 12/12	Total Hrs.
Test CareGiver	S5135		<b>1</b> 4						4.00
Test CareGiver	S5135		<b>±</b> 4						4.00
		0	8	0	0	0	0	0	8.00
							l	Review Additional Details	Reject Approve

#### Approve Whole Week(s):

You can also choose to approve a whole week(s). To do this, click the checkbox in the top left hand corner of the grid next to the word "Caregiver" (the DSW). Then click Approve (*Figure 21.5*).

To approve all entries for two weeks, checkmark the DSW box for both weeks.

✓	Caregiver				Sat 12/8					Total Hrs.
-	Test CareGiver	S5135		<b>1</b> 4						4.00
~	Test CareGiver	S5135		<b>1</b> 4						4.00
			0	8	0	0	0	0	0	8.00
									Review Additional Details	Reject Approve

0



### Participant Time Approval, cont.

#### https://DirectMyCare.com/

9

#### Attest that your entry is true and correct.

Once you click the "Approve" button you will see an Attestation (Figure 17, page 10). Click "OK" to agree that the shifts approved are true and correct. All shifts you approved will now have a blue "Approved" check mark next to them. (Figure 23). Note: Learn more about statuses on page 16.



Figure 23. Approved shifts

### How to Reject a Shift

The difference between approving a shift and rejecting one is clicking the "Reject" button instead of the "Approve" button. You must also provide an explanation when rejecting a shift.

- 1
- **Choose the shift(s)** that you want to reject. You choose them the same wa

choose them the same way you would select them to be approved (pages 10-12).

Make sure only shifts that you want to reject are chosen.



Figure 24. Rejecting a single shift

(Figure 24).

#### Click the "Reject" button.

### **About Shift Statuses**

#### https://DirectMyCare.com/

A shift in the Portal has a status at all times. There are nine statuses. The status *Ready to be paid* means that time has passed all steps and has been cleared by Consumer Direct.

#### Saved 🖺

The DSW has entered the shift on the Portal but has not yet submitted it to the participant for approval.

#### Submitted 🔔

The DSW has submitted a shift to be approved by the participant.

#### Rejected 🗙

The participant rejected the shift. This sends it back to the DSW. They may change it and resubmit or delete it.

#### Deleted 💼

The DSW deleted the shift. A DSW can only delete a shift that has not been approved by the participant.

#### Approved 🗸

The participant has reviewed a shift submitted by the DSW and approved it for pay. Approved time can only be changed by Consumer Direct.

**Note:** Time approved by the participant still needs to be cleared by Consumer Direct.

#### In Progress »

Consumer Direct has received time approved by the participant and is preparing it for pay.

#### Ready to be paid 🔳

Time received by Consumer Direct is ready to be paid according to the payday schedule.

#### Paid \$

CDCN has issued a paycheck for time worked on the shift.

#### Denied 😑

The shift will not be paid by Consumer Direct. The denial reason is sent as a message (look in the top right area of the Portal).

### How to Resubmit a Shift

#### https://DirectMyCare.com/

When a shift is denied or rejected, DSWs have two choices. They can delete the shift or they can change it and resubmit it. This page covers resubmitting a shift. Deleting a shift is on page 19.

CONSUMER DIRECT

Rejected and Denied shifts show up on the dashboard when you sign in to the CDCN Portal. You can see them in the "My Outstanding Time Entries" area (Figure 8, page 4). You will also see that you have a new message in your Portal Inbox (Figure 40). The message in your inbox has the reason it was rejected or denied. Steps for deleting a shift are on page 19.

- 1 Click the Portal Inbox icon. It is in the top right part of the screen. It looks like a piece of mail.
  - 2 You will see a message with the subject that your time was rejected or denied. Click this to read it.

Your participant/employer may tell you how the shift needs to be changed.

After reading the message and the reason, click "Home" to return to the dashboard. The home button is also in the top right part of the screen.



#### Figure 39. Portal Inbox new message icon





#### Figure 41. Message detail



### CARE NETWORK



### How to Resubmit a Shift, cont

https://DirectMyCare.com/

From "My Outstanding Time Entries" click the "Detail" link for the rejected time (Figure 43). This opens the time so you can change it.

My Dashb	board					
My Outstanding Time Entries		1 Rejected	4			
Participant	Service	Date	Time Spent	Status	Source	
Jeff DemoClient	S5135	2019-05-31	01:00	Rejected	WEBTS	Detail
Jeff DemoClient	S5135	2019-06-01	03:00	Saved	WEBTS	Detail

Figure 43. My Outstanding Time with rejected entry.

5

4

Fix the time entry and then click "Submit" (Figure 44).



Figure 44. Submit a corrected shift

### How to Delete a Shift

#### https://DirectMyCare.com/

DSWs can only delete a shift which has not yet been approved by the participant. Approved shifts can not be deleted in the Portal. If there is a problem with approved time, contact Consumer Direct right away.

# The DSW has saved the shift. It has not yet been submitted.

The DSW can delete it. Follow the instructions, below.

#### The shift is submitted and the participant has not yet approved it.

The participant/employer must reject the time so the DSW can delete it. If you are the DSW, ask your participant/employer to reject the time. Steps to reject a shift are on page 15.

## The participant has rejected the shift.

The DSW can delete it.

#### DSW Time Deletion

Consumer direct



Select the shift by clicking on it.

DSW Signs In to the Portal and

finds the shift to delete.





Figure 25. Deleting a single shift

### CARE NETWOR



### **Accessing Resources**

#### https://DirectMyCare.com/

DSWs, participants, and employers of record can learn more about their services using the Portal. There are three ways.

#### Portal Inbox (A): 🖂

Participants and DSWs may get messages in the Portal Inbox. DSWs learn more about rejected and denied shifts here.

#### View Authorization (B): View Authorization

Participants and employers of record can see a "big picture" of their authorizations from the View Authorization link. A sample authorization is at the bottom of this page.

#### From Your Profile (C)

Jeff DemoClient Participant - VA

DSWs can view documents from their profile. Participants and employers of record are able to see documents too. They can also see Detail and Summary Reports. These reports show service trends and list each service provided.



Figure 33. Links on my dashboard to reports, messages, and documents

~	ACN2019071AUT000085	006866	6866 2020336 Livin		01/01/1989	VADMASNORTH 05/01/2019		12/31/2019	Active
Servic	e Code	Start Date		End Date		Authorization no.		Status	
S5135	5	05/01/2019		12/31/2019				Active	0

Figure 34. Sample Authorization

### **Participant Reports**

Sian out

FAQ

Español

Contact Us

View Documents

Participants can view their documents and two types of reports. To find these, click your name in the top right part of the Portal (as seen in Figure 26).

#### Summary Report:

A summary of services with total hours worked by DSWs (as known by Consumer Direct). This report shows more about your authorizations, such as:

- their date ranges
- how your funds/units have been used so far
- how many funds/units are left.

See Page 22 to learn more.

#### **Detail Report:**

Figure 35. Report and Document Links

 $\square$ 

Jeff DemoClient

Participant - VA

Lists each service worked for the participant by date and length of service. This is a good report for seeing how services are being used on a daily or weekly basis. Example on Page 23

#### View Documents:

A list of all documents Consumer Direct has on file for the participant/employer of record. You may find in this list:

- agreement(s) with Consumer Direct
- employer related documents
- and authorizations.

You can save these to your computer. See example below, Figure 36.

Document Name	Document Description	Modified Date	
CRIMINAL HISTORY RECORD NAME SEARCH REQUEST 1	4332899: CRIMINAL HISTORY RECORD NAME SEARCH REQUEST 1	2019-04-12	View
ATTENDANT DATA FORM 1	4328876: ATTENDANT DATA FORM 1	2019-04-03	View
W-4 1	4328880: W-4 1	2019-04-03	Vew
FORM VA-4 1	4328881: FORM VA-4 1	2019-04-03	View
PAY SELECTION FORM 1	4328883: PAY SELECTION FORM 1	2019-04-03	View
OIG CHECK 1	4328888: OIG CHECK 1	2019-04-03	View
CRIMINAL HISTORY RECORD NAME SEARCH REQUEST 1	4328889: CRIMINAL HISTORY RECORD NAME SEARCH REQUEST 1	2019-04-03	View
ATTENDANT ENDOLI MENT PHEORI IST 4	4320000 ATTENDAM ENDOLLMENT CHECKLIST 4	2640.04.03	View

*Figure 36.* Sample Documents

page	21	of 32	
page.		0.02	





CONSUMER DIRECT Spending : 2/12/2019

### **Summary Report**

A participant's Summary Report shows:

- each service in an authorization
- total services used so far
- remaining funds/units within each service.

Values are provided in as percentages.

in units/funds as	swell		au	thorization							
	, won								Dollar amounts in the Proces	oing column include estimated employer costs. To . Beaus research usur Roomon Coordinates for Ba	to colculate remaining availa Lether assistance
	Participan 201XXXX Phone	t Number	Progr	am Coordinato nal CM	r <u>Curren</u> <u>Ra</u> 0.1	<u>t Suta</u> Ite 1%					
	(434) 555-	4057						Patient Pay S	ub Report		
	VA DEPT OF FEA	MEDICAL	ASSIS	SER - VA DEF	PT OF MEDI	CAL ASSIST S	ERV -	%Elaps	ed %	Remaining	-
	S	tart	End	%Time El	apsed <u>% Au</u>	th Used <u>%</u>	Difference		61.	.8/	
	Auth 9 Period	/5/2018	9/3/202	0 :	38.13%	56.25%	18.12%	0 20	40 60	80 10	0
Services	Servio	e .	Туре	Authorized Amount	Used YTD	In Process	Remaining				
Services are	S5126 Attendant 9/5/2018-9/4/2019		Hours	2,080	920	40	1,120			53.85	
listed one by	S5150 Respite 9/5/2018-6/30/2019	,	Hours	480	480					0.0	00
one.	Totals		Hours	2,560	1,400	40	1,120			43.75	
								1			

How much of the authorization time

span has passed as a percentage.

50% means half way through the

% Time Elapsed

#### **Authorized Amount/Used YTD** The total funds/units in the authorization and

the amount used during the Auth Period.

In Process
Funds that will
soon be paid.

Graph

A quick way to view the authorization at a glance.



### **Detail Report**

The Detail Report lists each service worked for a participant in the past 30 days. Portal users who want to track all work over time may download it monthly.

#### **Payroll and Admin Fields**

CDCN processing fees.

	Employee	Service Code	Service Date	Pay Period	Pay Date	Pay Units	Pay Rate	Pay Total	Payroll Costs	ADMN Fee	Total Spent	Estimate
Service Details The who, what, — when, and how much of each service worked.	_ewis, Larry	S5150	5/16/2019	5/9/2019- 5/22/2019	5/31/2019	6	\$9.22	\$55.32	\$0.00	\$0.00	\$61.02	Yes
	_ewis, Larry	S5150	5/17/2019	5/9/2019- 5/22/2019	5/31/2019	7.5	\$9.22	\$69.15	\$0.00	\$0.00	\$76.28	Yes
	.ewis, Larry	S5150	5/18/2019	5/9/2019- 5/22/2019	5/31/2019	9.5	\$9.22	\$87.59	\$0.00	\$0.00	\$96.62	Yes
						23		\$212.06	\$0.00	\$0.00	\$233.91	
						23		\$212.06	\$0.00	\$0.00	\$233.91	

**Totals** The sum of each pay and cost field.



### **DSW Documents**

#### https://DirectMyCare.com/

DSWs can find Paystubs and view their documents in the Portal. These include CPR certification, background check results, W-4, etc. Files and paystubs can be saved to your computer.

#### To View Documents:

First click on your name in the top right area of the Portal, as shown in Figure 33. Then click View Documents. You will see a list of documents Consumer Direct has on file for you. This looks like the participant/employer of record documents. See Figure 36 on page 21 for an example.





#### PayStubs:

The Paystubs button is next to the Time Entry button on "My Dashboard," as seen in Figure 8 on Page 4.

Click the paystubs button to see a list of your paystubs. These are PDF files, which means you can save them for your records. When a paystub report starts with a "D" it mean the DSW was paid by Direct Deposit. When it starts with a "0" the DSW was paid by mail.

Employee ID	Employee Name	Pay Type	SSN				
123456789	Lewis, Larry	DirectDeposit	***_**- 1234				
Check Nbr	Check Date	Chk Amt	Doc Type	Clear Amt	Pay Period	Per Beg	Per End
0001020304	8/19/2016	\$1,143.22	ск	\$1,143.22	17	7/24/2016	8/6/2016
Earn-Ded Descr		Current Earn- Ded	YTD Earn-Ded	** Does Not C Net pay	Contribut to		
REGULAR		\$1,573.60	\$26,825.40				
FED INC TAX		\$209.00	\$3,547.00				
FICAMED/EMPLOYE		\$22.82	\$389.00				
FICA/EMPLOYEE		\$97.56	\$1,663.19				
IDAHO INC TAX		\$101.00	\$1,702.00				
NET PAY		\$1,143.22	\$19,524,21				

Figure 38. Sample Paystub Report

### How to Reset Your Password

#### https://DirectMyCare.com/

If you forget your password or want to change it you can do so from the CDCN Portal Sign In screen. There are two steps. The first step is account verification. This makes sure you are doing this and not someone else. The second step is to make your new password.

Consumer direct

Go to the CDCN Portal Home page. Then click the "Can't access your account?" link. It's under the Can't access your accour "Sign In" button (Figure 25). Figure 25. Sign in area You will see a new screen. First enter your email User ID testuser@DI Email area address in the top field (Figure 26). Then enter the ۳, letters from the image below it into the next field. 0 These letters may be hard to read. Click the 'reset' Image letters button 🝠 for a new set of letters. Or click the audio button 🐗 to hear them on your device. Next When both fields have been filled, click "Next." Figure 26. Beginning account verification Click the blue 'Email' Button on the next screen. This CONSUMER DIRECT sends a verification code in an email to you Get back into your account (Figure 27). verification step 1 > choose a new password Check your email inbox for the verification code. Email my alternate emai 4 The email will have an image like the one shown in Email Button Figure 28. You will need this code for step five (next page). Figure 27. Requesting a verification code



Verify your email address

Thanks for verifying your cdcn\_account@mailinator.com account!



### **Resetting A Password, cont.**

#### https://DirectMyCare.com/

Enter the 6 number code from the This resets your password. You will get a verification email into the password confirmation message, as show in step 8 change form (Figure 29). Then click "Next." (*Figure 31*). You'll also get an email letting you know Enter your new password twice to make that your password has changed (*Figure* sure it is the same as what you want it to 32). be. Passwords must have letters, numbers and symbols. Click the "Click Here" link to go back to Then click "Finish." the portal. Then sign in with your new password! 5 CONSUMER DIRECT CONSUMER DIRECT Get back into your account Get back into your account 🔇 Your password has been reset verification step 1 > choose a new password To sign in with your new password, click here hoose the contact method we should use for verification Figure 31. Password reset confirmation Email my alternate email 058144 Code here Try again Contact your administrator Password reset notification Figure 29. Enter the verification code The password on your account has recently been reset. If you performed this password reset,



Figure 30. Choose a new password



User ID: cdcn\_account@mailinator.com

Figure 32. Password reset email

new password!

B2C CDMS AAD

Sincerely

If you are not sure you or your administrator performed this password reset, then you should contact your administrator immediately.

Remember: Make sure you update all of your devices (phones, tablets, and PCs) with your

CONSUMER DIRECT



#### Where can I find instructions?

This guide contains step by steps to use the Portal. A table of contents is on page 2.

### What devices/browsers does the Portal Support?

Internet Explorer is the best choice. Firefox is an OK choice, too.

Smart phones and tablets can be used. Slow data speeds may make portal hard to use. WiFi connections seems to work best.

#### REGISTRATION

#### Who needs to register?

Everyone! All paid DSWs, Participants and Designated Representatives (DR). Please note that Participants must register even if they have an Designated Representative.

#### How do I register?

A step by step guide for new Portal users can be found at: https://consumerdirectfl.com/ forms/

More questions about registration are answered in the registration instructions.

#### DSW FAQ

#### Why haven't I been paid?

First check that your time has been submitted. It may also be that the participant you work for has not yet approved your time. There may be other reasons. You may contact us to help.

#### Where can I print a pay stub?

See page 24. When you view or save the PayStub PDF you can then print it.

#### Where can I get a copy of my W-2?

Consumer Direct mails W-2s to all DSWs each new tax year. This means is important to keep your mailing address up-to-date. You may also receive a copy of your W-2 by contacting Consumer Direct.

### I want to work as a DSW but don't have a participant. Should I register?

You do not need to. The Portal is only useful when you have a participant/employer.

### Can I get a printed copy of new employee paperwork through the Portal?

You can find employment paperwork at https:// consumerdirectfl.com/forms/

More FAQs, next page



https://DirectMyCare.com/



#### Frequently Asked Questions, cont.

### How do I enter a full day or a shift that spans several calendar days?

A Portal "day" begins at 12:00 am and ends at 11:59 p.m. If your shift starts on one day and ends on the next, enter your time as two different shifts. For example, Tuesday from 8:00 p.m. until 11:59 p.m. and Wednesday from 12:00 a.m. until 4:00 a.m.

#### How do I enter a split shift?

Each split is a new shift in the Portal. Enter each on its own. You can use the "+Add" button on the time entry screen to enter new shifts.

### The time I submitted was wrong and my employer approved it. What do I do?

Please call or email Consumer Direct as soon as possible. We will try to fix your time before you get paid. If the wrong time has been paid, we will need to adjust future pay.

### I've submitted time and my participant isn't seeing it for approval.

First check your dashboard to see if the time has been submitted. This will be in the "status column." Next check to see if the shift has additional actions. You may need to mark these as done before you can submit the time.

#### https://DirectMyCare.com/

### I'm a DSW and the time I submitted is wrong. What can I do?

Contact your participant/employer and ask them to reject the time. When that is done you can fix it and resubmit or delete it. If the time has already been approved and submitted, contact Consumer Direct for help.

See pages 15 and 17-19 for steps.

#### PARTICIPANT/DESIGNATED REPRESENTATIVE FAQ

#### How do I delete Approved Time?

Approved time can not be deleted in the Portal. Contact Consumer Direct to stop the time from being paid.

Email: infoCDFL@consumerdirectcare.com Phone: 888-444-8182

#### Where can I find my reports?

See page 21 to learn more about reports.

### I am a designated representative. How do I act on behalf of my participant?

You can register as a designated representative on the Portal. Your participant also needs to be registered. When you have both registered and sent in any required forms, Consumer Direct admin staff can link your accounts. This may take a few days to complete.



Please note: If you have a disability and need more help, we can help you. If you need someone that speaks your language, we can also help. You may call our Member Services Department at 1-866-472-4585 for more help from 8:00 a.m to 7:00 p.m.. If you are blind or have trouble hearing or communicating, please call 711 for TTY/TTD services. We can help you get the information you need in large print, audio (sound), and braille. We provide you with these services for free.

Tenga en cuenta lo siguiente: Si tiene una discapacidad y necesita más ayuda, podemos ayudarlo. Si necesita una persona que hable su idioma, también podemos ayudarlo. Puede llamar a nuestro Departamento de Servicios para Miembros al 1-866-472-4585 para recibir más ayuda, de 8:00 a. m. a 7:00 p. m. Si es ciego o tiene problemas de audición o para comunicarse, llame al 711 para servicios de TTY/TTD. Podemos ayudarlo a obtener la información que necesita en letra grande, audio (sonido) y braille. Le brindamos estos servicios en forma gratuita.

Veuillez noter: Si vous avez un handicap et vous avez besoin plus d'aide, nous pouvons vous aider. Si vous avez besoin de quelqu'un qui parle votre langue, nous pouvons vous aider aussi. Vous pouvez appeler le Service aux Membres au 1-866-472-4585 entre 8:00 a.m. et 7:00 p.m pour obtenir plus d'assistance. Si vous êtes aveugle ou si vous avez des problèmes auditifs, veuillez appeler 711 pour les services TTY/ATS. Nous pouvons vous aider à trouver l'information dont vous avez besoin en gros caractères, audio (son), et braille. Nous vous fournissons ces services gratuits.

Nota: siamo in grado di offrire ulteriore assistenza agli associati con disabilità. Ove necessario, è possibile richiedere l'intervento di un addetto che parli la lingua dell'associato. Per ulteriori informazioni è possibile chiamare il nostro Dipartimento dei servizi per gli associati



(Member Services Department) al numero 1-866-472-4585 dalle ore 8:00 alle 19:00. Gli associati non vedenti, ipovedenti, non udenti o con difficoltà di comunicazione possono usufruire dei servizi TTY/TTD (trasmissione telefonica di testo/dispositivi di telecomunicazione per non udenti) resi disponibili tramite il numero 711. Siamo in grado di fornire le informazioni necessarie in formato di stampa a caratteri grandi, in formato audio (sonoro) e braille. Questi servizi sono fruibili gratuitamente.

Veuillez noter : si vous avez un handicap et besoin d'une aide supplémentaire, nous pouvons vous aider. Si vous avez besoin de quelqu'un qui parle votre langue, nous pouvons aussi vous aider. Vous pouvez appeler notre département de services aux membres au 1-866-472-4585 pour une aide supplémentaire de 8h00 à 19h00. Si vous êtes aveugle ou avez des troubles de l'audition ou de la communication, veuillez téléphoner au 711 pour les services de télécommunication à l'intention des malentendants. Nous pouvons vous aider à obtenir les informations dont vous avez besoin en grands caractères, sous forme audio (sonore) et en braille. Nous fournissons ces services gratuitement.

Обратите внимание: Мы помогаем лицам с ограниченными способностями или тем, кому требуется дополнительная помощь. Если вам требуется лицо, говорящее на вашем языке, мы также можем помочь. Для получения дополнительной информации вы можете связаться с отделом обслуживания участников программы по телефону 1-866-472-4585 с 08:00 до 19:00. Если у вас есть нарушения зрения, слуха или речи, позвоните по номеру 711 для связи по телетайпу/текстовому телефону. Мы можем предоставить вам необходимую информацию крупным шрифтом, в аудиоформате или шрифтом Брайля. Данные услуги предоставляются бесплатно.



Your Extended Family.

Molina Healthcare of Florida (Molina) complies with all Federal civil rights laws that relate to healthcare services. Molina offers healthcare services to all members without regard to race, color, national origin, age, disability, or sex. Molina does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex. This includes gender identity, pregnancy and sex stereotyping.

To help you talk with us, Molina provides services free of charge:

- Aids and services to people with disabilities
  - o Skilled sign language interpreters
  - o Written material in other formats (large print, audio, accessible electronic formats, Braille)
- Language services to people who speak another language or have limited English skills
  - o Skilled interpreters
  - o Written material translated in your language
  - o Material that is simply written in plain language

If you need these services, contact Molina Member Services at (866) 472-4585.

If you think that Molina failed to provide these services or treated you differently based on your race, color, national origin, age, disability, or sex, you can file a complaint. You can file a complaint in person, by mail, fax, or email. If you need help writing your complaint, we will help you. Call our Civil Rights Coordinator at (866) 606-3889, or TTY, 711. Mail your complaint to:

Civil Rights Coordinator 200 Oceangate Long Beach, CA 90802

You can also email your complaint to <u>civil.rights@molinahealthcare.com</u>. Or, fax your complaint to (877) 508-5738.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights. Complaint forms are available at http://www.hhs.gov/ocr/office/file/index.html. You can mail it to:

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

You can also send it to a website through the Office for Civil Rights Complaint Portal, available at <u>https://ocrportal.hhs.gov/ocr/portal/lobby.jsf</u>.

If you need help, call 1-800-368-1019; TTY 800-537-7697.



Your Extended Family.

English	ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call 1-866-472-4585 (TTY: 711).						
Spanish	ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-866-472-4585 (TTY: 711).						
French Creole (Haitian Creole)	ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele 1-866-472-4585 (TTY: 711).						
Vietnamese	CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-866-472-4585 (TTY: 711).						
Portuguese	ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para 1-866-472-4585 (TTY: 711).						
Chinese	注意:如果您使用繁體中文‧您可以免費獲得語言援助服務。請致電 1-866-472-4585(TTY:711)。						
French	ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-866-472-4585 (TTY : 711).						
Tagalog	PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-866-472-4585 (TTY: 711).						
Russian	ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-866-472-4585 (телетайп: 711).						
Arabic	مقرب لتصا . نجاملبا ك رفاونة ةيو غللا ةدعساملا تامدخ نفإ ،ةغللا ركذا شدحتة تنك اذا بتخطوحلم مبكلاو ملصا فتاه مقر( 1-866-472-4585: 711).						
Italian	ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 1-866-472-4585 (TTY: 711).						
German	ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-866-472-4585 (TTY: 711).						
Korean	주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-866-472-4585 (TTY: 711) 번으로 전화해 주십시오.						
Polish	UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 1-866-472-4585 (TTY: 711).						
Gujarati	�ચના: જો તમ �જરાતી બોલતા હો,તો િન:�લર્ક ભાષા સહાચ						
	સવાઓ તમારા માટ ઉપલબ <b>્ધ છ. ફોન કરો</b> 1-866-472-4585 (TTY: 711).						
Thai	เรฺียน: ถาคณพดภาษาไทยคณสามารถใชบรการชวยเหลอทางภาษาไดฟร โทร 1-866-472-4585 (TTY: 711).						