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</table>
305.1 GENERAL POLICY & REGULATIONS

The information in this chapter explains how the provider payment amount is determined. It also explains how provider invoices are processed in PELICAN Child Care Works (CCW).

As set forth in § 3041.15 (b) (relating to payment of provider charges), “The Eligibility agency may not pay child care costs that exceed the maximum child care allowance less the family co-payment for the type of care the child receives from the provider.”

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See Manual Section “305.14.3.1 – Questions – 305.1 – General Policy & Regulation”

305.2 DEFINITIONS AND ACRONYMS

See manual section “101 – Definitions and Acronyms” for a complete, alphabetical listing of definitions and an alphabetical table of acronyms.

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305.3 GOALS & OBJECTIVES


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305.4 PAYMENT RATES

The Payment Rate is the amount paid for care. There are several payment rates as described below:

305.4.1 Standard Payment Rate

The Standard Payment Rate is the amount paid for care. It is either the Maximum Child Care Allowance (MCCA) or the provider's private pay rate, whichever is less.

The MCCA is the maximum rate a CCIS will pay a provider for subsidized child care. These rates are established by DPW, based on county, care level, provider type and unit of care (full-time or part-time).

The provider is required to report their weekly full-time and part-time published rate and average weekly full-time and part-time private payment rate where applicable as defined in the Provider Agreement. The weekly average rates are converted (full-time and part-time) to a daily rate by dividing by five. This determines the Converted Payment Rate (CPR).
EXAMPLE: The child needs care from 7:00 AM until 5:00 PM, Monday through Friday. A standard, daily full-time rate is calculated as follows:

<table>
<thead>
<tr>
<th>Published or Average Weekly Rate</th>
<th>$100.00</th>
</tr>
</thead>
<tbody>
<tr>
<td>/ 5 days per week</td>
<td>/ 5</td>
</tr>
<tr>
<td>Converted Payment Rate (CPR)</td>
<td>$20.00</td>
</tr>
</tbody>
</table>

Care Level is the age group, to which the child is assigned, based on the child’s birth date, developmental age or date entering kindergarten.

Valid care levels include:
- Infant – 0-12 months
- Young toddler – 13-24 months
- Older toddler – 25 to 36 months
- Preschool – 37 months to date child enters Kindergarten
- School age – Kindergarten to 13 years old

The Full-Time rate is the rate the provider would charge parents for five or more hours of child care daily.

The Part-Time rate is the rate the provider would charge parents for up to four hours and 59 minutes (not five hours) of child care daily.

The standard payment rate will be either the provider's private rate or the MCCA – whichever is less.

EXAMPLE: The child needs care from 7:00 AM until 5:00 PM, Monday through Friday for a Young Toddler. To determine the standard, daily full-time rate compare the following:

- Provider’s Private Rate = $25.00/day
- MCCA = $20.00/day

In this example, the Standard Payment Rate is the MCCA, as it is less than the private pay rate.

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See Manual Section “305.14.3.2 – Questions - 305.4.1 – Standard Payment Rate”

305.4.2 Blended Rates

A blended rate combines full- and part-time rates for the school year. It is intended to cover full day service during school closings and holidays for school age children.

The blended rate is paid for school age children, children attending Head Start or pre-kindergarten as long as the program follows the school year schedule.
Providers decide if they wish to accept the blended rate or a straight part-time rate. Providers cannot ask for a full-time rate for any full-time day during the school year if they do not accept the blended rate. Providers indicate if they accept the blended rate when they complete and return the Appendix C-1 of the Provider Agreement to the CCIS.

The blended school year rate is calculated by adding together 25 days at the provider’s full-time standard rate and 180 days at the provider’s part-time standard rate, divided by 205 days (the total number of days in a school year).

**EXAMPLE:**

**STEP 1**

Full-time CPR or MCCA (whichever is less) $20.00  
X 25 full-time days x 25  
$500.00

**STEP 2**

Part-time CPR or MCCA (whichever is less) $15.00  
X 180 part-time days x 180  
$2,700.00

**STEP 3**

$ 500.00 (step 1 total)  
+ 2,700.00 (step 2 total)  
$ 3,200.00

**STEP 4**

$\frac{15.61 \text{ BLENDED SCHOOL YEAR RATE}}{205} \frac{\$3,200.00}{3,200.00}$

**305.4.3 Keystone STARS Add-on Rates**

Keystone STARS add-on rates are an additional daily amount determined by OCDEL based on the STAR level achieved and whether the child care is part-time or full-time. This reward program recognizes providers who are Keystone STARS certified and promote continuous quality improvements in early learning and school age environments.
<table>
<thead>
<tr>
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<th>FULL-TIME</th>
<th>PART-TIME</th>
</tr>
</thead>
<tbody>
<tr>
<td>No STARS</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>STAR 1</td>
<td>$0.35</td>
<td>$0.15</td>
</tr>
<tr>
<td>STAR 2</td>
<td>$0.95</td>
<td>$0.45</td>
</tr>
<tr>
<td>STAR 3</td>
<td>$2.80</td>
<td>$1.05</td>
</tr>
<tr>
<td>STAR 4</td>
<td>$5.00</td>
<td>$1.35</td>
</tr>
</tbody>
</table>

Keystone STARS Add-On Rates effective January 1, 2013

**EXAMPLE:** The child is enrolled full-time with a STAR 3 provider.

- Standard payment rate: $20.00
- + STAR 3 FT add-on rate: + $2.80
- Daily payment rate: $22.80

**EXAMPLE:** The school age child is enrolled part-time with a STAR 4 provider.

- Blended rate: $15.61
- + STARS 4 PT add-on rate: + $1.35
- STAR 4 blended rate: $16.96

The STARS add-on amounts indicated above include all regulated provider types and all care levels. The additional daily amount may in some circumstances, increase provider rates to an amount that exceeds the MCCA.

OCDEL determines and pays Keystone STARS add-on rates, based on availability of funding. These add-on rates are subject to change by OCDEL.

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**See Manual Section “305.14.3.4 – Questions – 305.4.3 – Keystone STARS Add-on Rates”**

### 305.5 PROCESSING PROVIDER INVOICES

The first step in processing provider payments is to generate attendance invoices. Attendance invoices are generated monthly in PELICAN CCW. On-line invoices are available at the beginnings of each month for review by providers who are signed up to receive invoices through the Internet. For more information on how providers register for on-line invoicing refer to Provider Self Service (PSS) On-line Attendance Tracking – Provider.

Paper attendance invoices are generated around the 24th of each month automatically in PELICAN CCW. The CCIS prints the attendance invoices and mails them to each provider. The provider notes any absences or changes on the invoice and returns it to the CCIS by the 5th day of the following month.

**Note:** It is important that all CCIS agencies are consistent and direct providers to enter the actual days the child attends when filling out the attendance invoice. For example, if the child is scheduled to attend on Monday, Wednesday and Friday but the child attends Monday, Tuesday, Wednesday, the provider must
complete the attendance invoice accurately. This includes marking Tuesday as attended and Friday as an absent day.

The CCIS uses the Invoice Search page each month to locate the paper invoices to process. The CCIS enters the Service Period and select “Need Invoice – Paper” to find the invoices that need processed for the month. The next section explains in more detail.

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See Manual Section “305.14.3.5 – Questions – 305.5 – Processing Provider Invoices”

305.6 PROVIDER INVOICE STATUSES

In PELICAN CCW, the provider invoice moves through various phases. Each phase results in a change in status.

- New Invoice Not Printed: Indicates the invoice has been created in PELICAN CCW as part of the advance payment to a CCIS, but the invoice has not yet been released for batch printing.

- Need Invoice: Indicates that the attendance invoice was sent to the provider but the provider has not yet returned it.

- Have Invoice: Indicates the provider returned the attendance invoice to the CCIS and the received date has been entered into PELICAN CCW.

- Calculated: Indicates the attendance invoice was processed and the provider invoice is awaiting authorization.

- Authorized: Indicates the provider invoice has been authorized for payment.

- Payment Requested: Indicates the Payment Summary has been created and is ready to be printed.

- Paid: Indicates the provider invoice was paid. (A date or check number is entered into PELICAN CCW. This is not a required process for CCISs.)

- Paid - Pending Adjustment: Indicates the provider invoice was paid but a
change has been made that requires an adjustment to the paid amount. This adjustment can be an under or over payment. (See Manual Section 305.5.11-Adjustments)

- Deleted Invoice: The invoice has no dollars associated with it and has been deleted.

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See Manual Section “305.14.3.6 – Questions - 305.6 –Provider Invoice Statuses”

305.7 **RECORDING INVOICE RECEIVED DATES**

The CCIS worker uses the Invoice Detail page to enter the date the invoice was received from the provider. The receive date must be entered before you can process an attendance invoice in PELICAN CCW.

Once the date is entered, the worker can click Save or click Save - Go to Attendance to move to the Invoice Attendance Detail page which will show you the children enrolled in PELICAN CCW for the service period and the total number of days served.

**Note:** If the worker enters a date in error (Invoice in “Have Invoice” status), they can remove the date entered and click “Save.” The invoice will go back into “Need Invoice” status.

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305.8 **PROCESSING ATTENDANCE ON PAPER INVOICES**

The CCIS will only pay for a maximum of 25 absences in a State fiscal year. Eligibility will continue, but the p/c is responsible to pay the provider the daily rate for each absence beginning with the 26th absence. The absence count resets at the beginning of each State fiscal year.

Absences are captured per child for the fiscal year and stored based on the child’s individual number.
The Invoice Attendance Detail page will help the CCIS track absences for the year. It is read only when invoice is in “New Invoice Not Printed” or “Need Invoice” statuses. The “Current” and “Paid” Absences columns are editable when the invoice is in “Have Invoice” or greater status. The absences become read only again when books close at the end of the fiscal year.

The CCIS will continue to record end of month absences in the “Current Absences” column and data will move to “Prior Absences” on the next invoice.

The CCIS will record any absences from the invoice in the “Paid Absences” column. Paid absences can go up to the number of units of care in the month to a maximum of 25 days in a fiscal year.

The entries in the “Current Absences” and “Paid Absences” fields do not change when the schedule is adjusted. Total attended days is no longer an editable field.

**Total Attended Days = Units of Care – Paid Absences**

The “FY Cap Absences” column displays cumulative paid absences for the year. This column updates when the worker clicks “Save” or “Save Go to Calculate” on the Invoice Attendance Detail page.

**Note:** The following do not count as absences per policy:
- Suspended Days
- Zeroed Out Days
- Non Scheduled Days
- Closures (Paid or Nonpaid)

The CCIS will suspend a child’s enrollment PRIOR TO DAY 6 if the following conditions are met:
- The circumstances must meet one of the conditions set forth in § 3041.21(a) (1) – (8) (relating to subsidy suspension).
  - May be planned or unplanned (i.e., emergency).
  - The p/c submits verification, in advance (except for emergencies), that the child will be unable to attend child care for more than 5 consecutive days due to one of the reasons listed in subsidy suspension.
The CCIS will **NOT** suspend a child’s enrollment or zero-out enrollment days related to family vacations or any other reason not set forth in § 3041.21(a)(1) – (8).

There is no concept of excused versus non-excused absences when processing provider payments. Examples of different situations and how to handle them are below for a child who is scheduled to attend Monday through Friday for full time care:

1. Non Reported Absences  
   a. Discover 10 consecutive absences on the provider invoice but neither p/c nor provider reported.  
      Action – Mark the child with five absences on the Invoice Attendance Detail page, suspend child’s enrollment starting with day six and send Notice of Adverse Action.

2. Reported Illness  
   a. Child is sick for four days and p/c states they have a chronic condition and they submit a doctor’s excuse.  
      Action – Mark the child with four days of absence on the Invoice Attendance Detail page.  
   b. Child is sick for eight days and p/c states they have chronic condition and they submit a doctor’s excuse within five days of the absence.  
      Action – Suspend the child on day one since this is a reason set forth in § 3041.21(a) (1) – (8) and the consecutive absences are greater than five days.  
   c. Child is sick for eight days at the beginning of the month and p/c contacts the CCIS on the 28th day of the month and states the child has a chronic condition and they submit a doctor’s excuse.  
      Action – Mark the child absent for five days and then suspend the child on day six since the p/c failed to report within five days of the 1st day of absence.

3. Vacation  
   a. P/c calls and states that the child will be on a two week vacation with the p/c (custodial). (This would be the same if the p/c says the child will be on vacation with a grandparent.) –  
      Action - Mark the child with five absences on the Invoice Attendance Detail page and suspend the child on day six.  
      Send Notice of Adverse Action.  
   b. P/C calls and self declares that the child will be visiting the noncustodial parent for two weeks.  
      Action – Suspend the child on day one.

4. Child Hospitalization  
   a. P/c calls and self declares that the child has been in the hospital for six days and remains hospitalized.  
      Action – Suspend the enrollment on day one of the hospitalization because the p/c reported the hospitalization while the child is still in the hospital.  
   b. Discover eight consecutive absences on the provider invoice.  
      CCIS then finds out the child was hospitalized during that period.  
      Action – Because the absences were not reported timely, mark the child with five absences on the Invoice Attendance Detail page and zero out three days on the child’s schedule.
Note: The difference between when to suspend and zero out the schedule is based on when the CCIS discovers the reason for the absence. For example:

- Suspend when timely notification is received.
- Zero out the schedule when more than five absences are discovered on the provider invoice and the child has already returned to service. For example days six through nine may be zeroed out when the child returns on day ten. If the child has already returned, zero out the days.

Paid Absences are stored in history on the Case Summary Detail page once the fiscal worker clicks "Save" or "Save - Go To Calculate" on the Invoice Attendance Detail page.

As set forth in the regulations, absences for the FS/SNAP funding program will not be included in FY Cap Absences. If any day of the enrollment is funded through FS/SNAP, absences for the month will not count towards the CAP Absences.

The “Enrlmt Info” column displays:

**VWS** - Varied Work Schedule indicator is displayed for averaged or "Wal-Mart Schedules." This is to assist the worker when reviewing attendance invoice & recording absences accurately.

Note: For Variable Work Schedules, the CCIS will only record an absence in PELICAN CCW when the child attends fewer days than scheduled per month. The CCIS must pay based on the enrollment. For varying schedules the CCIS should consider the number of units of care per month rather than per week. The CCIS needs to count the number of attended days scheduled for the month to determine if the child had any absences. For example, if the Invoice Attendance Detail page displays that the child should be there 19 full-time units of care and the child only attended 17 days for the month, the CCIS would record 2 absences for the child. If the CCIS sees a pattern that the child is regularly attending more or less often than scheduled, the Eligibility Specialist should contact the p/c to determine if a schedule change is warranted.

2 Enrlmts – is displayed if a child has more than one enrollment regardless of whether the enrollment is in the same case or different cases.

An alert generates to the Eligibility Specialist when child reaches 20 paid absences. If child has dual enrollments only one absence counts/day per policy. The system will count every absence so the CCIS must decide whether to reconcile dual enrollments each month or when alert generated.

The hyperlink on FY Cap Absences allows absences to be removed from the FY Cap Absences.
This field is only editable by Help Desk or staff with the Payment Authorization Roles.

The main reason to adjust CAP Absences is when a child is enrolled at multiple providers and more than one absence is recorded in PELICAN CCW for a day.

The fiscal worker can adjust one of the invoices so the child is not charged with two absences during a given day.

If a user makes a mistake when editing the FY Cap Absence field, it can be corrected. For example, change ‘2’ to ‘1’ and click save. The FY Cap Absences will be updated accordingly.

**Note:** If a child is absent on the 1st day of scheduled care, payment begins the first day the child attends. Zero out the day(s) on the schedule since this is not considered an absence. The p/c should pay the co-payment for the week. **DO NOT record this as an absence on the Invoice.**

When a child listed on the Invoice Attendance Detail page reaches the 26th absence in a fiscal year, the child’s row will highlight and an error message displays when “Save - Go To Calculate” is selected.

The worker **must** click “Save,” then click the Individual Number hyperlink to go to the schedule to mark an absence as unpaid or adjust the "Paid Absences" to proceed.

**Note:** When the worker returns to the Invoice Attendance Detail page after adjusting the schedule, the worker must click “Refresh.”
Any unpaid absences will reduce Units of Care and Total Attended Days.

Unpaid days entered on the schedule will adjust the Paid Absences column. Unpaid absences are only marked when a scheduled day is not being paid due to the child reaching 25 days of absence. **DO NOT USE UNPAID ABSENCES TO ZERO OUT THE SCHEDULE FOR ANY OTHER PURPOSES.**

To record an unpaid absence:
- Select the checkbox next to the child’s enrollment on the *Case Enrollment Summary* page.
- Click “Schedule.”
- Click “Edit” for the week that needs to display an unpaid absence.
- Select the checkbox for any unpaid absence.
- Click “Save.”

*Note:* Non-standard schedule changes must be done as a separate transaction.

The unpaid absence will display on the Enrollment Schedule.

*Note:* If the absence is recorded on a day that only has a Standard Schedule, the schedule will show as non-standard because the absence changes the schedule type.

All paid and unpaid absences are recorded real-time on all pages in PELICAN CCW.

The standard schedule accessed from the *Enrollment Detail* page is where the worker can indicate if the p/c has a varying work schedule. Review **Manual 408 – Enrollments & Co-payments** for more information.
The Case Summary page now includes a link to the total number of paid absences for a child. To access this information, click the History Icon on the end of a Case Members row to view his/her paid absences.

Note: If a CCIS user discovers an MCI mismatch for a child, add absences for the year on the invoices that are generated for the correct MCI number. Enter an invoice comment indicating that number of absences added is due to the incorrect MCI number.

The Individual Absences Detail page displays the number of paid absences for each service period within the fiscal year for the selected child.

"Invoice ID", "Provider ID", "Office" and "County" fields are included to assist with researching any absences that might need to be adjusted in the case of a dual enrollment.

The worker must click “Refresh Absences” to ensure the number is accurate as of the latest invoicing.

Note: If a provider having seven or more enrollments submits three invoices with the No Change box checked for all children within the fiscal year, the CCIS shall send a Provider No Change letter to the provider asking for verification of attendance.

The letter informs the provider that he/she is required to verify attendance for the remainder of the fiscal year on a daily attendance log. The CCIS should also send the Daily Attendance Log form to the provider with the letter.
If a provider does not submit a daily attendance log with each invoice for the balance of the fiscal year, the CCIS will consider the invoice incomplete and will return the invoice to the provider. Payment will be held until the provider submits the invoice with the required attendance log.

If a provider does not submit the required documentation, the CCIS agency should contact their Subsidy Coordinator to discuss termination of the agreement.

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See Manual Section “305.14.3.7 – Questions – 305.8 – Processing Attendance on Paper Invoices”

305.9 PROCESSING ON-LINE INVOICES

305.9.1 Performing a Search & Accessing Attendance Detail

To locate online invoices, do the following:

- Click on the “Online Invoices Submitted” link on the left side of the Home page.
- Select one of the following options:
  - To change search options, enter search criteria and select sort options, then click Search.
  - To view invoice details, click a Provider Location link to go to the Invoice Detail page for the selected Provider Location.

Notes:
- Online invoices can only be individually processed; therefore, the Select drop-down box cannot be used for online invoices. However, once an online invoice has been calculated it will be the same as a paper invoice and can therefore be authorized in a group.
- Invoices in “Have Invoice – Online” status are displayed by default.

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See Manual Section “305.14.3.8 – Questions – 305.9.1 – Performing a Search & Accessing Attendance Detail”

305.9.2 Processing Provider Added Children

When an online invoice includes provider added children, follow the steps below to associate the child’s attendance information with an enrollment, or to reject the addition.

1. Navigate to the Invoice Detail page for the appropriate invoice.
2. Click “Go To Attendance.”
3. Click "View Online Attendance Invoice."

4. Scroll down to the Provider Added Children section of the invoice.

**Notes:**

- Click the "I" icon to see child information, such as date of birth.
- To print the provider added children, click "Print Provider Added Children" and follow normal print procedures.
- To print the invoice, click "Print Invoice" and follow normal print procedures.

5. If you determine that the provider added child legitimately belongs on the invoice, you must now associate the proper enrollment in PELICAN CCW. If the child is not already enrolled, use the Main Navigation bar to access the child’s individual case to update the enrollment accordingly. If the child does not belong on the invoice, skip to the second bullet of step 11.

**Note:** All provider added children must be associated to an enrollment or in a “Rejected” status in order to calculate the invoice.

6. Navigate to the Home page and click the Online Invoices Submitted link on the left side of the page.

7. Select the "Provider Location" link associated with the invoice.

8. Click “Go To Attendance.”

9. Click "View Online Attendance Invoice."

10. Click "Refresh" if the enrollment was updated; otherwise, continue with step 11.

11. The child is now listed in the “Select Enrollment” drop-down box and can be associated with the enrollment.

12. Select one of the following options:

   - Select the child’s name from the “Select Enrollment” drop-down box to associate the child with the attendance.
   - Select "Reject" from the “Select Enrollment” drop-down box if the child was not associated to the enrollment and should not be added to the invoice.

13. Click “Save.”

**Notes:**
Click the View Client History icon "i" to view client history, such as the child’s date of birth and enrollment date (as shown on the previous page). Click the X in the upper right of the box to close the client history.

Click “CCIS Invoice Comments” to add a comment regarding this invoice, if desired. Select the checkbox, and then click “New.” Type a Subject and Comment Text, then click “Save.”

305.9.3 View Provider Added Children History

1. Navigate to the Invoice Detail page for the appropriate invoice.
2. Click “Go To Attendance.”
3. Click “View Online Attendance Invoice.”
4. Click the View Client History icon "i" associated with the added child’s history to view. The history is displayed at the bottom of the pop-up window. It includes the history of all enrollment selections for that child for the specific invoice.
5. Click the Close button (X) to close the pop-up window.

305.9.4 Update Online Attendance Invoices

Updating the Invoice Attendance Detail page will work the same for the online attendance process as the paper process for provider attendance invoicing except for a few differences.

NOTE: For paper and online provider invoices that have a large number of enrollments, it is advised for the worker to periodically click “Save” while processing the absences so that PELICAN CCW correctly populates each individual’s absences.

One difference is that “Current Absences” and “Paid Absences” will automatically populate from the “Online Provider Invoice.” The CCIS will need to validate absences, update accordingly and “Save” the page.

If discrepancies exist between the current PELICAN CCW enrollment schedule and the information the provider submitted, the discrepancies must be investigated.
Schedule changes require verification, but the invoice can still be saved and calculated.

The following discrepancies must be resolved in order to calculate the invoice. In these circumstances, investigate and resolve the reason.

- Change in closure
- Child terminated
- 5 day absence
- Late start date

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See Manual Section “305.14.3.9 – Questions – 305.9.4– Update Online Attendance Invoices”

### 305.9.5 Overriding Attendance or Paid Closures

If legitimate discrepancies exist between the current PELICAN CCW enrollment schedule and the information the provider entered, with the exception of schedule changes, they must be overridden in order to calculate the invoice. The only roles that may override attendance or paid closures on an invoice are Supervisor or Director roles. A CCIS worker with one of these roles may perform an override as follows:

1. Navigate to the Invoice Attendance Detail page associated with the invoice.
2. Click “Override.”
3. Select Yes from the Invalid Entry drop-down box to reject the change, then type a reason in the associated Reason field.

   **Note:** If a change in closure exists, enter the reason for override in the Invalid Entry Reason field.

4. Click “Save & Close” to save the information and close the pop-up window.
5. Click “Refresh” to clear the highlighted items.
6. Click “Save - Go To Calculation” to save the data and calculate the invoice normally.

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### 305.10 VIEWING INVOICE CALCULATION AND PAYMENT DETAIL

The Invoice Calculation Detail page is used to view details for child care calculations made at a per-child level. This page is the same for paper and online invoices. It lists units of care, cost per unit, co-payment and any child care deductions for each enrollment.
If you need information about the child’s calculations, click the "i" icon in the first column to open an Invoice Calculation Detail page for the child.

To move to a child’s enrollment information click the hyperlink in the Individual Number column. That will open a new session (window) of PELICAN CCW where updates to schedules or co-payments can take place.

Once an invoice is processed and a payment is issued, you are able to view information for the payment. The Invoice Calculation Detail page also indicates Keystone STARS Quality Add-on Rates for those provider types designated by Policy.

The abbreviation "KS" and the STAR level number is appended to the unit of care to reflect the add-on rate level. For example, "FTKS2" indicates a full time unit of care paid at the Keystone STARS level 2 rate. The "Amount" column reflects the total rate with the additional rate increase.

Invoices with a Calculated or Authorized status display the Payee Type. The Payee Type indicates where the payment is directed for that specific enrollment. To view more detailed information about the Payee Type, click the Provider Payment Line Item (Provider) or the Case Payment Line Item (Client) hyperlink to move to the Invoice Line Item Detail page.
The Invoice Line Item Detail page is used to view detailed payee and provider information. The page also includes the line item total, invoice ID, service period, invoice status and invoice status date.

From this page, use the Select drop-down box or Previous button to move to other pages in the provider invoice section of PELICAN CCW.

The Payment Search page is used to identify payments that match the criteria you enter. You use this page if you do not know the Payment ID.

You are able to sort your results by Payment ID or Payment Status.

Once you have initiated your search by clicking Search, the results are returned at the top of the page.

Click a hyperlink in the Payment ID column to produce the Payment Detail page needed for viewing the payment information. The Payment Detail page is used to view details for an invoice with a status of Payment Requested or Paid.
The blue table at the top of the page includes the payment ID (the ID automatically generated by PELICAN CCW), payment status (either Paid or Payment Requested), status date (date on which the status was changed), amount, reporting period (the service period in which the status changed to Payment Requested) and payment method.

The Payee Information section displays the payee name and address. Any alternate payees are also listed in this section.

The Payment Line Items section provides links to invoices included in the payment. Clicking a hyperlink in the Invoice ID column opens the Invoice Detail page for the payment line item listed.

The Client/Case Search page is used to find total payment amounts that are specific to a client or case. The payment amounts returned from the search will reflect invoices that are in "Payment Requested" or "Paid Invoice" status and any associated authorized adjustment amounts. CCIS offices can only access the invoices belonging to its office.

Performing a Case/Client search requires selecting a date range from the “Funding Fiscal Year” drop-down box and entering at least one of the following three parameters: Co/Record Number, Client ID or Provider ID. After entering or selecting any additional parameters, click Search to initiate the search.
The Client/Case Search results display a total payment amount for each individual along with the total of all payment amounts included in the search results.

Clicking a hyperlink in the “Co/Record” column opens a new session (window) of PELICAN CCW and enables you to review the client’s case information.

Clicking the hyperlink in the “Client ID” column also opens a new session of PELICAN CCW and allows you to verify the client’s enrollment information.

Click the hyperlink in the “Total” column to open the Client Payment Search Detail page and view detailed payment information for a specific child. Clicking the hyperlink in “Total” column of the Client Payment Search Results brings you to the Client Payment Search Details page. This page displays a list of the payment amounts by provider invoice and service period. To view provider invoice and payment information, click the appropriate hyperlink in the “Invoice ID” column. The Invoice Detail page for the selected invoice then displays in a new session of PELICAN CCW.

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305.11 Adjustments

Adjustments are caused by retroactive enrollment changes, retroactive provider changes, child support deduction changes or return payments from a provider which is made on an invoice that has already been paid.

If enrollment or provider information is changed for invoices that have already been paid, PELICAN CCW will change the status of the invoices to Paid Pending Adjustment either immediately or during night batch process. Changes that impact only one enrollment cause an adjustment to the invoice status immediately. Changes that potentially impact multiple enrollments trigger the adjustment during the nightly batch process. Night batches are processes that run in the late evening when system usage is at its lowest.

Real Time Changes that Affect One Enrollment:
- Schedule Change
- Provider Change
- Effective Date Change
- New Enrollment
- Termination

Night Batch Changes that May Affect More than One Enrollment:
- Rates
- MCCA
- Paid Closures
- Date of Birth
- Developmental Age
- Provider Type

Pending Adjustments
The Pending Adjustment Summary page is used to view details of any pending adjustment, including the adjustment amount, payee ID and the type of adjustment (underpayment or overpayment). To access the page, enter an invoice number in the "Process Adjustment" field on the Payment Home page.

Adjustments are grouped by adjustment type at a payee level for each invoice. The adjustment types are: Enrollment Adjustment, Return Payment Adjustment and Child Support Deduction Adjustment. For example, if multiple adjustments occur on the same invoice that impact enrollments, such as the provider’s rate is changed retroactively or schedule changes for multiple children occur, the CCIS only needs to process a single adjustment. As changes continue to happen to enrollments or provider information, the changes will be included in the pending adjustment until you process it. If however, an adjustment of another type occurs, that would create a separate adjustment for the CCIS to process.

See Manual Section “305.14.3.10 – Questions – 305.10 – Viewing Invoice Calculation and Payment Detail”
You can view details of the adjustment by clicking a hyperlink in the “Payee Type” column. Clicking “History” will take you to the Invoice Adjustment page where you can view the details of adjustments which have already been processed on this invoice.

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See Manual Section “305.14.3.11 – Questions – 305.11 – Adjustments”

305.11.1 Processing a Positive Adjustment

The "Underpayment" view of the Invoice Adjustment Pending page is used to view information about an adjustment including other outstanding under- and overpayments for the payee.

The Adjustment Reason is a free text field which prints on the Payment Summary. Identify the cause of the adjustment by comparing before and after adjustment details; then list the reason in the Adjustment Reason text field (e.g. Retroactive co-payment change for Shawn). This field will pre-populate for Child Support and Return Payment Adjustments.

The Invoice Calculation - Before Adjustment section shows the details of the invoice prior to the adjustment. The Invoice Calculation - After Adjustment section shows the details of the invoice after the adjustment.
To process the adjustment, select the appropriate option from the adjustment settlement method drop-down box at the bottom of the page and click Perform Action.

**Notes:**
- After the adjustment, the night batch process changes the status of the invoice from Paid - Pending Adjustment to Payment Requested. The next day, you must print the Provider Payment Summary and issue a new check. With that in mind, the CCIS may want to process adjustments around the time payments are processed to avoid generating correspondence a considerable length of time before checks are mailed.

- To update or view the child’s enrollment, click the Individual Number hyperlink for the child. That will open a new session of PELICAN CCW where you can view or modify the child’s schedule, status or co-payment.

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### 305.11.2 Processing a Negative Adjustment

For a negative adjustment, the *Invoice Adjustment Pending* page allows you to select the adjustment settlement method and Future Payment Recoupment Percentage. The *Future Payment Recoup % Up to* indicates the percentage of the amount that will be recouped from each subsequent check. The *Invoice Calculation -Before Adjustment* shows the details of the invoice at a child level prior to the adjustment.

The Adjustment Reason is a free text field which will print on the Recoupment Letter. The staff person should identify the cause of the adjustment by comparing before and after adjustment details; then list the reason in the Adjustment Reason text field.

The *Invoice Calculation - After Adjustment* shows the details of the invoice at a child level after the adjustment. In this case, you can enter “Decrease in days for Maria” as the reason in the Adjustment Reason text field. Then, process the adjustment by selecting the adjustment method and clicking Perform Action.
**Note:** When a recoupment against a provider is required, the CCIS Director or Fiscal Manager must submit a Recoupment Letter to the provider. The letter should list the amount, the recoupment percentage and the reason for the recoupment. A copy of the letter must be stored in the provider’s file. CCIS Directors must decide if a recoupment percentage must be used or if the entire recoupment must be taken from the provider at the next payment cycle. Recoupment percentage refers to the amount of each subsequent payment which will be recouped from the provider.

**Note:** The adjustment options for a Negative Adjustment (Overpayments) are:

- **Recoup from Future Payments** - During night batches, PELICAN CCW creates a Recoupment Letter that a staff person will mail to the provider.
- **Record Overpayment** - CCISs should **NOT** use this option unless they know they will be unable to recoup the dollars; it is primarily CAO functionality.
- **Satisfy Positive Adjustment and Authorize Recoup of Extra** - This option can be used if a positive adjustment exists and you want the positive adjustment to be used to satisfy the negative adjustment and recoup any outstanding balance. To identify if there are any outstanding underpayments, use the Other Outstanding Underpayments for Payee field.
- **Satisfy Positive Adjustment and Record** - CCISs should **NOT** generally use this option; it is primarily CAO functionality. To identify if there are any recorded under payments, use the Other Outstanding Underpayments for the Payee field.

**NOTE:** If a provider has both positive and negative adjustments on different invoices and multiple months, the worker should process the negative adjustments first using the method: recoup from future payments. When they process the positive adjustments, select the method: satisfy negative and authorize payment of extra.

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**See Manual Section “305.14.3.12 – Questions – 305.11.2 – Processing a Negative Adjustment”**

### 305.11.3 Processing a Return Payment

If the provider sends in a check for an overpayment, access the Payment Returned page. You may access the Payment Returned page by entering a Payment ID next to Process Return Payment on the Payment Home page or by selecting ”Return Payment Processing” from the Select drop-down box and clicking ”Go” on the Payment Detail page.
The **Payment Returned** page facilitates processing of all adjustments for provider payments during the reporting period, including the adjustments associated with the enrollments requiring repayment.

The page indicates total balances for both pending and approved adjustments. Use the balance hyperlinks to access the pages where you process the adjustment or modify an existing adjustment.

Clicking the Pending Adjustment(s) Balance hyperlink moves you to either a summary page displaying multiple pending adjustments or a detail page having a single pending adjustment for this payment. Once any pending adjustments are processed using the **Payment Returned** page, PELICAN CCW displays the approved adjustment balance within the hyperlink of the same name and in the Outstanding Overpayments for Payee field.

**Note:** If a pending adjustment was approved in error, click the Approved Adjustment(s) Balance hyperlink. Then, click Cancel Adjustment Payment Authorization to move the adjustment back to pending status.

If an overpayment existed for the payee because of an unsatisfied recoupment from the current or a previous service period, its remaining amount appears in the Outstanding Overpayments for Payee field.

The Pending Adjustment(s) hyperlink only displays pending adjustments associated with the invoice displayed. It does NOT show Year-To-Date pending adjustments for the payee.

The adjustments accessed through the Approved Adjustments Balance hyperlink are those against which the return payment is to be balanced.

Prior to processing a return payment, you may modify the adjustment on the **Payment Returned** page. After the adjustment is processed, updates to this page will cause an additional pending adjustment.

To update or view the child’s enrollment, click the Individual Number hyperlink for the child. That will open a new session of PELICAN CCW where you can view or modify the child’s schedule, status or co-payment.
To process the return payment, you must select a return payment reason (Care Not Provided, Incorrect Amount, Incorrect Payee or Undeliverable) and enter the date when the check was received in your office in the Return Date field. You should also enter a Return Payment Adjustment Reason (up to 200 characters maximum). You then enter the amount of the returned payment next to the child for whom it is being returned. To view the Invoice Detail, click the invoice number hyperlink.

If, and only if, the outstanding balance is less than the return amount, PELICAN CCW provides a warning and prompts you to check the Force Re-Issue of Payment checkbox. Click Authorize Return a second time to have PELICAN CCW create a second payment for the difference.

Once authorized the Payment Returned page refreshes to show the Approved Adjustment(s) Balance reduced to zero and the outstanding overpayments reduced.

The forced payment created using the Force Re-Issue of Payment function does not carry over the enrollment information used in calculations for the adjustment. It is only meant to enable PELICAN CCW to account for the balance difference.

You have the option to Un-Authorize or Re-Authorize the return, in case of changes, before the night batch runs.

If the return payment is authorized but the night batch has not run and a change is made to any enrollments for that invoice, PELICAN CCW automatically cancels authorization of the return payment. A fiscal alert generates immediately indicating an adjustment was made.

PELICAN CCW automatically applies the "Satisfy negative adjustments and authorize payment of extra" settlement method for returns.
Select "Ineligible Provider" reason code in the Return Payment Reason drop-down box to process a return payment when an Office of Inspector General (OIG) Investigation shows that a provider is ineligible.

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See Manual Section “305.14.3.13 – Questions – 305.11.3 – Processing a Return Payment”

### 30511.4 Invoice Adjustment

You can access the Invoice Adjustment page by clicking History on the Pending Adjustment Summary page. This page shows all the adjustments that have been processed for this provider and invoice. The date the adjustment was processed is listed as well as the amount, balance, settlement method, type of adjustment and its status.

To view the details of the adjustment, click the Date hyperlink.

You can access the Invoice Adjustment Details page by clicking the Date hyperlink on the Invoice Adjustment page or clicking the Date hyperlink on the Invoice Detail page. This page shows the details of a processed adjustment.
You can cancel the adjustment after the adjustment is processed and prior to the night batches running. To cancel the adjustment, click Cancel Adjustment Payment Authorization.

For processed negative adjustments, once night batch processes run, a duplicate Recoupment Letter can be generated from this page by clicking Generate Recoupment Letter at the bottom of the page. If a provider has a negative adjustment due to an overpayment and no longer has enrollments from which to recoup the overpayment, an Outstanding Balance Letter is generated by clicking the Outstanding Balance Letter button.

After the adjustment has been processed through night batches, it is still possible to modify the Adjustment Settlement Method if the adjustment is not yet satisfied.

The status of an adjustment will be Approved until it is processed through night batches. If it is a positive adjustment, and you processed it as opposed to recorded it, night batches will change the status to Satisfied. Recoupments are listed as Open until they are completely recouped and then the status changes to Satisfied.

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See Manual Section “305.14.3.14 – Questions – 305.11.4 – Invoice Adjustment”

305.12 DELETING INVOICES

The Provider Agreement informs all providers that the CCIS will not make payment on any invoice received more than 60 calendar days following the last day of the calendar month that child care is provided. It also states that invoices for the months of May and June must be received by July 31. For example, an invoice for the September service period is sent by October 1 and must be received by December 1 for the provider to be paid.

The provider agreement does not specify how to handle provider invoices that are created as the result of retroactive enrollments. Policy for retroactive enrollment invoices is that the provider, in order to receive payment, has 60 days from the date the CCIS sent the attendance invoice – as long as the CCIS
has greater than 60 days until the PELICAN CCW books closing date for the fiscal year. Otherwise, the amount of time will be less than 60 days – depending on when the books close for the fiscal year.

On a monthly basis, CCISs should run the RE704 Pending Invoice Extract report to determine invoices that must be deleted. Enrollments on invoices with a positive balance that are not going to be paid, cause the anticipated cost of care to be artificially elevated and tie up funds unnecessarily.

To delete an invoice, the CCIS must first end or suspend all enrollments. When the invoice total equals zero, the invoice can be deleted using the Delete Invoice functionality in PELICAN CCW.

Negative provider invoices will not artificially increase encumbrances. However, the co-payment amount needs to be deducted from the provider's payment for the week in which care was given. For example, a January invoice was not returned for an enrollment that originally began 1/30/12, as a result, the schedule for the enrollment was “zeroed” out for the month of January. The result is a negative invoice equal to the co-payment for the week of 1/30/12.

CCISs should process negative invoices that resulted from zeroing out a schedule when the provider never returned the invoice. Negative balances occur because the co-payment week crosses over into the next invoicing period. This type of invoice should be authorized. It will be recouped with the next positive payment. The negative invoices should not just ‘sit’ in the system. They should be authorized, as there is a co-payment for that week, which should be recouped.

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See Manual Section "305.14.3.15 – Questions – 305.12 –Deleting Invoices"
305.13 UPDATED INFORMATION & ADDITIONAL RESOURCES

This section contains a listing of updated information distributed following issuance of this manual section via Announcements, Updates and Communiqués, as well as additional resources available to the CCIS.

305.13.1 Announcements

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### PROVIDER PAYMENTS

#### 305.13.2 Updates

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### PROVIDER PAYMENTS

#### 305.13.3  Communiqués

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305.13.4 Additional Resources

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305.14 TRAINING GUIDE

This section contains information pertinent to training the Provider Payment Section. The following subsections contain the goals and objectives of the manual section, as well as helpful question and answer checkpoints.

305.14.1 Goals

The information in this section contains the goals with regard to Provider Payments. The following are the goals of this manual section:

1. To understand the various payment rates.
2. To be able to process provider invoices; both paper and on-line.

305.14.2 Objectives

The information in this section contains the objectives with regard to Provider Payments. The following are the objectives of this manual section:

1. To be able to determine the correct standard payment rate.
2. To understand the MCCA for the county/counties served by your CCIS.
3. To understand and be able to determine the level of care.
4. To understand what constitutes full-time care and part-time care.
5. To be able to calculate the Keystone STARS add-on rate.
6. To be able to calculate the blended rate.
7. To understand the various provider invoice statuses.
8. To be able to record the date invoices are received.
9. To be able to process attendance on paper invoices.
10. To be able to search for and access attendance detail.
11. To process children added by the provider and view their history.
12. To be able to update online attendance invoices.
13. To be able to view the invoice calculation and payment detail.

14. To understand various adjustments to the provider invoice.

15. To be able to delete invoices.

Return to Manual Section “305.1 - General Policy & Regulation”

Return to Manual Section “305.4 – Payment Rates”

Return to Manual Section “305.5 – Processing Provider Invoices”

Return to Manual Section “305.6 – Provider Invoice Statuses”

Return to Manual Section “305.7 – Recording Invoice Received Dates”

Return to Manual Section “305.8 – Processing Attendance on Paper Invoices”

Return to Manual Section “305.9 – Processing On-Line Invoices”

Return to Manual Section “305.10 – Viewing Invoice Calculation and Payment Detail”

Return to Manual Section “305.11 – Adjustments”

Return to Manual Section “305.12 – Deleting Invoices”

305.14.3 Section Checkpoint Questions

The Policy and Operations Divisions of the Bureau of Subsidized Child Care Services developed the following questions as a checkpoint to ensure comprehension of the information presented within this manual section. Upon review of the information within this section, CCIS staff should be able to answer all of the questions listed below.

305.14.3.1 Questions – 305.1 – General Policy & Regulation

1. TRUE or FALSE. The eligibility agency may not pay for child care costs that exceed the maximum child care allowance less the family co-payment for the type of care the child receives from the provider.

2. TRUE or FALSE. If a parent or caretaker selects a provider whose published rate exceeds the
Department’s payment rate, the provider may not charge the parent or caretaker the difference between these two amounts.

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Return to Manual Section “305.1 – General Policy & Regulation”

See Answers

305.14.3.2 Questions – 305.4.1 – Standard Payment Rate

3. The Maximum Child Care Allowance is established by DPW and based on which of the following?
   a. County
   b. Care level
   c. Provider type
   d. Unit of care
   e. All of the above
   f. None of the above

4. Care level is the age group to which the child is assigned and is based on which of the following?
   a. child’s birth date
   b. developmental age
   c. date entering kindergarten
   d. All of the above
   e. None of the above

5. TRUE or FALSE. If a child is in care for 4 hours and 59 minutes, the CCIS will pay the part-time rate.
See Answers

305.14.3.3 Questions – 305.4.2 – Blended Rates

6. Which of the following is not a type of care eligible to receive the blended rate?
   a. Head Start
   b. Pre-kindergarten
   c. Keystone STARS
   d. School-age
   e. None of the above

Return to Table of Contents
Return to Manual Section “305.4.2 – Blended Rates”
See Answers

305.14.3.4 Questions – 305.4.3 – Keystone STARS Add-On Rates

7. TRUE or FALSE. All Keystone STARS providers, regardless of STAR level are eligible for the Keystone STARS add-on rate.

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Return to Manual Section “305.4.3 – Keystone STARS Add-on Rate”
See Answers

305.14.3.5 Questions - 305.5 – Processing Provider Invoices

8. TRUE or FALSE. Attendance invoices are generated weekly in PELICAN CCW.

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Return to Manual Section "305.5 – Processing Provider Invoices"
See Answers

305.14.3.6 Questions - 305.6 – Provider Invoice_statuses

9. Which provider invoice status indicates the attendance invoice was processed
and the provider invoice is awaiting authorization?

a. Need Invoice.
b. Have Invoice.
c. Calculated.
d. Authorized.
e. Paid.

10. TRUE or FALSE. An invoice in deleted status has no dollars associated with it and has been deleted.

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Return to Manual Section "305.6 - Provider Invoice Statuses"

See Answers

305.14.3.7 Questions - 305.8 - Processing Attendance on Paper Invoices

11. TRUE or FALSE. The CCIS will only pay for a maximum of 25 absences in a State fiscal year.

12. The following do count as absences per policy except:

a. Suspended Days.
b. Zeroed Out Days.
c. Non-scheduled days.
d. Vacation Days.
e. Closures (Paid or Nonpaid).

13. TRUE or FALSE. As set forth in the regulations, absences for the FS/SNAP funding program will be included in FY Cap Absences.

14. True or FALSE. Unpaid absences are only used when a scheduled day is not being paid due to the child reaching 25 days of absence.

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Return to Manual Section “305.8 - Processing Attendance on Paper Invoices”
See Answers

305.14.3.8 Questions - 305.9.1 – Performing a Search & Accessing Attendance Detail

15. TRUE or FALSE. Online invoices can only be individually processed; therefore, the Select drop-down box cannot be used for online invoices.

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Return to Manual Section “305.9.1 – Performing a Search & Accessing Attendance Detail”

See Answers

305.14.3.9 Questions - 305.9.4 – Update Online Attendance Invoices

16. Which of the following discrepancies must be resolved in order to calculate the invoice?

   a. Change in closure.
   b. Child terminated.
   c. 5-day absence.
   d. Late start date.
   e. All of the above.
   f. None of the above.

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Return to Manual Section “305.9.4 – Update Online Attendance Invoices”

See Answers

305.14.3.10 Questions - 305.10 – Viewing Invoice Calculation and Payment Detail

17. TRUE or FALSE. The Invoice Calculation page is the same for paper and online invoices.

18. The page used to view details for child-care calculations made at a per-child level is:
   a. Invoice Line Item Detail Page.
   b. Invoice Calculation Detail Page.
c. Payment Detail Page.

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Return to Manual Section “305.10 – Update Online Attendance Invoices”

See Answers

305.14.3.11 Questions - 305.11 – Adjustments

19. Adjustments are caused by:
   a. Retroactive enrollment changes.
   b. Retroactive provider changes.
   c. Child support deduction changes
   d. Return payments from a provider which are made on an invoice that has already been paid.
   e. All of the above.
   f. None of the above.

20. TRUE or FALSE. A schedule change is a night batch change that may affect more than one enrollment.

21. TRUE or FALSE. After an adjustment has been processed through night batches, it is still possible to modify the Adjustment Settlement Method if the adjustment is not yet satisfied.

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Return to Manual Section “305.11 – Adjustments”

See Answers

305.14.3.12 Questions - 305.11.2 – Processing a Negative Adjustment

22. TRUE or FALSE. CCISs should not use the Record Overpayment option for overpayments unless they know they will be unable to recoup the dollars.

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Return to Manual Section “305.11.2 – Processing a Negative Adjustment”

See Answers
305.14.3.13 Questions - 305.11.3 – Processing a Return Payment

23. TRUE or FALSE. The Payment Returned page facilitates processing of all adjustments for provider payments during the reporting period, including the adjustments associated with the enrollment requiring repayment.

305.14.3.14 Questions - 305.11.4 – Invoice Adjustment

24. TRUE or FALSE. The Adjustment Settlement Method cannot be modified after the adjustment has been processed through night batches.

305.14.3.15 Questions - 305.12 – Deleting Invoices

25. The Provider Agreement states that the CCIS will not make payment on any invoice received more than 60 calendar days following the last day of the calendar month that child care is provided. Therefore, an invoice for the September service period must be received by:

   a. October 1
   b. November 1
   c. December 1
   d. January 1

26. True or False. To delete an invoice, the CCIS must first end or suspend all enrollments.
305.14.4  Section Checkpoint Answers

The Policy and Operations Divisions of the Bureau of Subsidized Child Care Services provided the answers to all of the questions asked in Manual Section “403.8.3 – Section Checkpoint Questions”.

305.14.4.1  Answers – 305.1 – General Policy & Regulation

1.  TRUE.

2.  FALSE. - If a parent of caretaker selects a provider whose published rate exceeds the Department's payment rate, the provider MAY charge the parent or caretaker the difference between these two amounts.

305.14.4.2  Answers – 305.4.1 – Standard Payment Rate

3.  e. – All of the above.

4.  d. – All of the above.

5.  TRUE.

305.14.4.3  Answers – 305.4.2 – Blended Rates

6.  c. – Keystone STARS.

See Answers
Review Questions Again

Return to Manual Section “305.4.2 – Blended Rates”

Return to Manual Section “305.4.3 – Keystone STARS Add-On Rates”

305.14.4.4 **Answers – 305.4.3 – Keystone STARS Add-On Rates**

7. TRUE. - Keystone STARS providers who have achieved **STAR 1 or above** are eligible for the Keystone STARS add-on rate.

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Review Questions Again

Return to Manual Section “305.4.3 Keystone STARS Add-On Rates”

Return to Manual Section “305.5 – Processing Provider Invoices”

305.14.4.5 **Answers – 305.5 – Processing Provider Invoices**

8. FALSE. - Attendance invoices are generated **monthly** in PELICAN CCW.

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Review Questions Again

Return to Manual Section “305.5 – Processing Provider Invoices”

Return to Manual Section “305.6 – Provider Invoice Statuses”

305.14.4.6 **Answers – 305.6 – Provider Invoice Statuses**

9. c. - Calculated.

10. TRUE.

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Review Questions Again

Return to Manual Section “305.6 – Provider Invoice Statuses”
305.14.4.7 Answers – 305.8 – Processing Attendance on Paper Invoices

11. TRUE.

12. d. – Vacation Days.

13. FALSE. – AS set forth in the regulations, absences for the FS/SNAP funding program will not be included in FY Cap Absences.

14. TRUE.

Return to Manual Section “305.8 – Processing Attendance on Paper Invoices”

Review Questions Again

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Return to Manual Section “305.9.1 – Performing a Search & Accessing Attendance Detail”

305.14.4.8 Answers – 305.9.1 – Performing a Search & Accessing Attendance Detail

15. TRUE.

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Review Questions Again

Return to Manual Section “305.9.1 – Performing a Search & Accessing Attendance Detail”

Return to Manual Section “305.9.4 – Update Online Attendance Invoices”

305.14.4.9 Answers – 305.9.4 – Update Online Attendance Invoices

16. e. – All of the above.

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Review Questions Again

Return to Manual Section “305.9.4 – Update Online Attendance Invoices”
PROVIDER PAYMENTS

305.14.4.10 Answers – 305.10 – Viewing Invoice Calculations and Payment Detail

17. TRUE.

18. b. – Invoice Calculation Detail Page.

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Review Questions Again

Return to Manual Section “305.10 – Viewing Invoice Calculations and Payment Detail”

Return to Manual Section “305.11 – Adjustments”

305.14.4.11 Answers – 305.11 – Adjustments

19. e. – All of the above.

20. FALSE. – A schedule change is a real time change that affects one enrollment.

21. TRUE.

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Review Questions Again

Return to Manual Section “305.11 – Adjustments”

Return to Manual Section “305.11.2 – Processing a Negative Adjustment”

305.14.4.12 Answers – 305.11.2 – Processing a Negative Adjustment

22. TRUE.

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Review Questions Again

Return to Manual Section “305.11.2 – Processing a Negative Adjustment”

Return to Manual Section “305.11.3 – Processing a Return Payment”

305.14.4.13 Answers – 305.11.3 – Processing a Return Payment
23. TRUE.

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Review Questions Again

Return to Manual Section “305.11.3 – Processing a Return Payment”

Return to Manual Section “305.11.4 – Invoice Adjustment”

305.14.4.14 **Answers – 305.11.4 – Invoice Adjustment**

24. FALSE. – After the adjustment has been processed through night batches, it is **still possible** to modify the Adjustment Settlement Method if the adjustment is **not yet satisfied**.

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Review Questions Again

Return to Manual Section “305.11.4 – Invoice Adjustment”

Return to Manual Section “305.12 – Deleting Invoices”

305.14.4.15 **Answers – 305.12 – Deleting Invoices**

25. c. – December 1.

26. TRUE.

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Review Questions Again

Return to Manual Section “305.12 – Deleting Invoices”