

School Readiness and Local Funding Provider Reimbursement Guide

This tip sheet is intended to assist providers with knowing important information that will allow them to be reimbursed in a timely and efficient manner and to help them make every effort to maximize their site's monthly School Readiness reimbursements. These are the rules, requirements, and processes that our Coalition's Reimbursement Department follows to help ensure the accurate and efficient processing of the monthly provider reimbursements within the functionality of the Division of Early Learning (DEL) Provider Portal. Please know that this is not all the information providers need to know to be fully knowledgeable and meet all requirements for all programs and all departments within the Coalition. A link to the most current DEL Provider Portal User Guide is on the dashboard of the DEL Provider Portal. There are also additional resources such as this tip sheet for providers available on our website at www.elcpinellas.org. Please be sure to read this tip sheet in its entirety or refer to it when a question arises regarding School Readiness reimbursement as most of the information a provider needs can be found in this tip sheet.

NOTE: The browser requirements for the DEL Provider Portal are that the provider uses either Chrome or Microsoft Edge as their system's browser.

1. Sign in Sign Out Sheets (SISOs) - All SISO Sheets must meet Rule 6M Requirements

PROVIDER NAME: ABC & 123 Preschool	
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PARENT/GUARDIAN SIGN-IN/OUT SHEETS

FULL SIGNATURES REQUIRED

CHILD'S NAME: John Brown

MONTH/YEAR September 2023

DATE	DAY	TIME IN AM SIGN IN		TIME OUT PM	SIGN OUT	NOTES
09/01/2023	Fri	Actual Time	Full Signature Required	Actual Time	Full Signature Required	
09/02/2023	Sat		Saturday			
09/03/2023 Sun Su			Sunday			
09/04/2023	Mon		Labor Day Holiday			
09/05/2023	Tues Actual Full Signature Require		Full Signature Required	Actual Time	Full Signature Required	

a. Providers are required to submit sign in sign out sheets for the ELC children at the same time that they submit their electronic attendance each month. Sign in sign out sheets must be received by the due date stated in the Provider Portal attendance screen. If not, the attendance will <u>not</u> be processed, and reimbursement will not be made on the 20th of the month. The deadline must be met to ensure that the Reimbursement Team can meet the DEL's billing deadline so all providers who complied with



- the submission deadline for the electronic attendance and sign in sign out sheets are reimbursed on time per the contractual deadline of the 20th of the month.
- b. Sign in sign out sheets should be uploaded to the Monthly Sign in out Sheet folder of the provider's document library in the DEL Provider Portal. Please use the child's full name that is on the attendance screen on the child's individual sign in sign out sheet. Please do not use the child's nickname. We only recognize the child by the first and last name used at the time of enrollment to the provider's site. The ELC Pinellas requirement is that providers alphabetize their site's sign in sign out sheets by the child's last name before uploading. Also that when uploading, the file name is in this format: the month then the year of the sign in sign out sheets then the child's last name and then the first name or initial. Sample if individual sign in sign out sheets are uploaded by child: September 2023 Smith, Alex; if sign in sign out sheets are batched then please add set numbers at the end of the file name or what last name alpha letters are included in the set. Sample if sets of the sign in sign out sheets are uploaded: September 2023 A – D or September 2023.1. September 2023.2. etc. Please do not add other random words to the filename. The goal is to get all the files for a particular month listed together. This will help the Reimbursement Specialists be more efficient when comparing this information with the submitted attendance for validating, internal monitoring, and processing accurate reimbursements. Failure to name the sign in sign out sheets in a manner that is organized and easily identifiable may lead to a delay in the provider's attendance being processed in a timely manner especially if the Reimbursement Specialist cannot locate the month's sign in sign out sheet files easily or quickly.
- c. The provider's site name must be on every sign in sign out sheet, preferably at the top, and the sign in sign out sheet should include the month and the year that the sign in sign out sheet is for. The days of the month must match the right date, for example, Thursday, September 14, 2023. Please account for every day of the month. Please write the word holiday for any day that is a reimbursable holiday per your site's certified Exhibit 6. Please write the word closed or N/A on days that your site does not provide care for a child and it is a non-reimbursable closure day, or a Saturday or Sunday and care is not offered on the weekend. This will keep the clients from signing in or out on the wrong day. There must be a sign in and sign out time with the a.m. and p.m. designation for every child for every day that the child is present along with the client's or authorized person's signature. The time in and time out for drop off and pick up should be the actual time on a clock, digital is best, and not a rounded up or down time. The time in and time out should not be the same for every day. Inaccuracies related to the sign in sign out sheet could lead to non-compliance and a deduction in the provider's reimbursement for any information that is not comprehensible. Please use the appropriate type of sign in sign out sheet for children who attend before and after school care. There are samples on our website at www.elcpinellas.org.
- d. It is best practice to mark the day with the word "ABSENT" when a child is absent to prevent the client from signing in and out on the blank absence line later when the child returns to care.
- e. For paper sign in sign out sheets, there must be a place for the provider to sign and date their signature at the bottom of the sign out sheet for each child. This signature is the provider's attestation that the information on the sign in sign out sheet is true and accurate. There should never be a discrepancy between the sign in sign out sheet and the submitted attendance. There are samples of the proper sign in sign out sheet forms available on the website at www.elcpinellas.org.
- f. Per 6M rules, only one sign in sign out sheet, per month, per child is allowed.



- a. It is best to upload the monthly sign in sign out sheets but if not, they can be faxed to 727-400-4472. This is the only fax number providers should use for sign in sign out sheet submissions. Regardless of whether the provider is uploading or faxing their sign in sign out sheets, they need to be in alphabetical order by child's last name. This will assist the Reimbursement Specialists to process attendance more efficiently and accurately as the attendance roster is in alphabetical order in the attendance screen of the Provider Portal. Providers are responsible for getting a confirmation page if they must fax their sign in sign out sheets to the Coalition. This is the only proof that providers will have that their site's sign in sign out sheets were received. Providers would need to show proof that the fax was received at the 727-400-4472 fax number if there were an issue with the timely processing of their site's attendance per the attendance submission and reimbursement processing deadlines. Please be sure that the confirmation page from your site's fax states result = ok. Providers who are outside of Pinellas County (Out of County Providers) but contract with Pinellas County <u>must fax</u> their <u>alphabetized</u> sign in sign out sheets, as their document library is not visible to Pinellas ELC. Providers who choose to drop off their siso sheets need to put them in alphabetical order as well and need to know that there is a possibility that they can get lost. Please remember that the Reimbursement Specialists do not notify providers if the siso sheets are not received by the Coalition.
- h. Providers can follow their site's attendance status in the attendance screen to see when their attendance is processed as the green SUB next to the children's names will switch APP status when the child's attendance has been processed. This usually occurs no later than the 13th of the month; however, the reimbursement finalization dates vary from month to month depending on what day of the week the payment period opens and if there are holidays or unusual circumstances that affect the reimbursement processing timeline.
- i. Currently, the file size limit for uploading documents is 2MB per upload. The preferred format for the file is pdf. The document library works best if the file extension is lower case. Pictures of sign in sign out sheets can be quite difficult to read and may not capture all the details needed to process attendance. If possible pdf is the format that uploads the best and is the easiest to read when attendance is being processed for your site.

2. Attendance

- a. Attendance must be submitted each month by the due date noted on the attendance screen. Attendance can be submitted as early as the last day of the month after attendance has been recorded for all the children for that day. There is no need to wait until the system's due date to submit attendance for the month. Submitting attendance sooner is better rather than later.
- b. Attendance submitted after the system due date will <u>not</u> be processed in the current month's payment period. This means that the provider will have to wait until the next processing period to receive their site's earned reimbursement dollars.
- c. Sign in sign out sheets are required for the attendance to be processed. Sign in sign out sheets should be submitted to the Coalition on the same day as the attendance to avoid any possible delay in the processing of your site's attendance.
- d. Please be sure to cancel/end/term enrollments for children who never attended or who are no longer attending by going through the <u>Enrollments Tab/Manage SR Enrollments/View-Edit Enrollments</u> process <u>BEFORE</u> submitting attendance electronically to the Coalition. Use the end enrollment button to terminate children who have attended your site for one day or more and use the



cancel button to remove enrollments for children who never attended for even one day. Providers should not wait until attendance is due to process a child's termination. This process is not done in the attendance screen. It is done through the Enrollment screen. Providers should enter enrollment terminations at the time they occur. There is no need to wait until it is time to submit the attendance. Please remember that the Reimbursement Specialists do not key enrollment terminations. The term must be keyed in a timely manner for the child to be removed from future months' attendance rosters. This will also avoid overpayments and the need for adjustments due to overpayments. **Terminations** cannot be keyed to a date in the prior month if that month's attendance has been submitted and or processed. In this case, the provider should use the 1st of the new month for the term date and the last day of the prior month as the child's last physical day of attendance. Example: Child's last day was September 29, 2023, but the September attendance was already submitted and/or processed; therefore, the soonest date that the provider can key a termination of enrollment is October 1, 2023, with the child's last day of care being September 30, 2023. This is the reason why terminations should be keyed as soon as the provider knows that the child is not returning to care as it simplifies the process. Please refer to the Provider Portal User Guide for more information on how to terminate/end/cancel enrollments for children. This is a provider's responsibility. If the provider is unable to terminate a child, they should contact Family Services at 727-400-4411.

e. The provider controls when the Hs appear are on the attendance. It is best to set the site's holidays up correctly during contract submission so that the site does not have to make changes throughout the contract year. Providers can choose all 12 of their site's reimbursable holidays at the time they submit their SR profile/contract. Providers should decide on their site's holidays at the beginning of the contract year. All closure dates including non-reimbursable closure days beyond the 12 reimbursable holidays should be recorded on the closure calendar screen. Providers who offer VPK should make sure that their site's closure dates also coincide with their VPK instructional calendar. Additional closure dates that are non-reimbursable will be marked with an asterisk on the site's attendance if the provider recorded these days ahead of time in the site's closure calendar when they finalized their SR contract. The provider should mark all unplanned closure days with an "N" on the electronic attendance as they are also non-reimbursable. Per ELC policy, changes cannot be made, after the fact, to the twelve (12) approved/certified reimbursable holidays that can be referred to in the provider's certified contract, Exhibit 6. The provider can only make changes to future reimbursable holidays. This is done by submitting the change through the closure calendar in the provider's profile. Any future holiday date changes require an amendment (20A) as this change affects Exhibit 6 and amends the provider's latest Exhibit 6. Holidays should not be changed on short notice, as clients need to be notified of any holiday changes in advance so that they can make other arrangements for their child's care. Please report holiday issues to your Reimbursement Specialist as soon as possible and prior to submitting the monthly attendance. This will avoid a delay in the processing of your site's attendance. It is highly recommended that providers review their site's paid holidays in their most current Exhibit 6. If any of these dates are wrong, if all 12 of the paid holidays that the site plans to observe were not recorded correctly, or if a Saturday or Sunday was chosen by mistake, then the provider will need to submit the corrections through their provider profile and complete a 20A/amendment. Please note that the 20A process takes up to 72 hours to complete so be sure to give plenty of notice ahead of the observed reimbursable holiday that the site wants to be reimbursed for in a future month. Remember corrections can only be processed prior to the reimbursable holiday date. We are not able to make any exceptions to this policy.



- f. If your site is closed unexpectedly for any reason which means that the site is not available to provide care to the children, this day then becomes an "N" and should be marked as a non-reimbursable day. This is done by clicking on the "X" and choosing Enrolled/Non-reimbursable as the reason. Please include a comment note so that the Reimbursement Specialist is aware of the reason that your site was closed for that day. Providers are self-employed subcontractors and provider closures other than the 12 approved reimbursable holidays from the certified contract are non-reimbursable unless there is an asterisk already these unexpected closures should be marked with an "N." This will avoid any overpayment for unapproved closure days. *****Temporary Closures that may be reimbursable require a very specific process that includes a 24-hour or less timely notification to the Coalition. The request needs to be submitted through the Temporary Closure Process Request function of the Provider Portal and requires the appropriate supporting documentation to also be attached to the request. An Unusual Incident Form may also need to be submitted depending on the reason for the temporary closure. Please refer to the requirements for notification in the statewide contract, the Provider Portal User Guide, and the "For Providers" section of the Coalition's website for the Unusual Incident Form if needed and other information pertaining to temporary closures if your site is affected by an event that would constitute the need for a temporary closure. A provider's personal reasons for closing are not reimbursable. This includes jury duty, illness of the provider or a family member, provider medical needs such as surgery, a death in the provider's family, etc. Temporary Closures are limited and are for events that affect the safety of the children enrolled in the provider's care. Generally, Temporary Closures are for emergency closures due to the declaration of an emergency per notification from our local or state emergency personnel and are for things like impending hurricanes or other extreme weather conditions. Temporary Closure requests are approved on a case-by-case basis. *****
- g. It is best for providers to record attendance throughout the month rather than at the end of the month. This will help providers save time at the end of each month. The recorded attendance and the sign in sign out sheet should match exactly for each child on the attendance roster. Be sure that every child is accounted for on the attendance roster and that attendance is not recorded solely based on the site's sign in sign out sheets or teacher/classroom roll as children that were intended to be termed or who need to be termed will likely be missed and unintentionally reimbursed. There should never be a discrepancy between the sign in sign out sheet and the electronic attendance! The system will not allow providers to record attendance into the future. As an example, if recording attendance today then the rest of the month would be blank making today the last day that one could record attendance until tomorrow.
- h. If, when a provider is recording the attendance, there is an issue that needs addressed such as an incorrect schedule (FT vs. PT, FTV or PTV), an incorrect care level (Infant through School Age), an incorrect copayment or a child is missing from the attendance particularly after the client has signed the Payment Certificate, then please call 727-400-4411 and address the issue with the Family Services' staff. It is important that these issues are corrected on the attendance roster **before** it is submitted for reimbursement. Providers should look at the attendance frequently to identify any issues and have them corrected prior to recording and submitting the attendance. The Reimbursement Specialists cannot correct enrollment/eligibility issues so please do not call your assigned Reimbursement Specialist. It is highly recommended that you submit your attendance for all the children that you can by the deadline so that most of the site's reimbursement will not be delayed. A provider should not hold off on submitting the monthly attendance pending an issue for one child. If



the Family Services' staff enroll a child late or the client signs the Payment Certificate late then that child will appear in your site's attendance for the enrolled month at the top of the attendance list without a status and it can be submitted separately at any given time. Attendance that is submitted in between due dates will be processed with the next service period in the next month's payment period. Sorry, no exceptions. Example: August 2023 attendance submitted on September 15, 2023, will be processed with September 2023's service period in the October 2023 payment period.

- If a child is no longer attending and the provider was not able to end the enrollment through the enrollment tab using the instructions in the Provider Portal User Guide or the Tip Sheet, the provider should contact Family Services at 727-400-4411. If there are days ion between electronic attendance and a keyed termination date and the site should not receive any reimbursement, please record "N"s for all of the days of the month that the site does not want to be reimbursed so that your site will not be overpaid. Reimbursement staff does not know this information, so we must rely on the providers to record this correctly when submitting the attendance. Please make a note as to why you are recording "N"s for a child for the month. The note should say child was terminated on specific date or whatever the situation may be. Reimbursement Specialists do not key terminations noted at the time attendance is being processed. It is the provider's responsibility to make sure the termination is keyed in a timely manner. There is no way for a provider to record a "T" through the attendance screen. A "T" will only be placed when the enrollment is terminated through the Enrollment Tab. Please be sure that all enrollments for the child are terminated at the same time. There may be more than one enrollment row due to care level changes because the child had a birthday that month or due to a change in client's eligibility: a change in copayment, or a schedule change, a redetermination, a funding rollover, etc. A provider can review all rows for a child if they filter out that child by name in the filter box within the cancel/term screen.
- j. When attendance is rejected during processing, the provider receives a generic email notification regarding the rejection. The provider can go to the attendance and click on one of the children's names that has REJ in red next to it and they can then read the reason the attendance was rejected. The number one reason is a discrepancy between the recorded attendance and the submitted sign in sign out sheet. The second biggest reason is the sign in sign out sheet was not submitted. Other reasons, include absences not being recorded as Ns for non-reimbursable when the RJOA Form is not attached to the 4th A, or required information is missing from the sign in sign out sheet that validates attendance information such as the time in and the time out including the AM and PM designation and other exceptions such as provider closures not recorded in closure calendar screen or conflicts with reimbursable holiday closures per Exhibit 6 in the latest contract or amendment. It is very important that providers take care of needed corrections as quickly as possible and re-submit the attendance or the children will not be included in the sites on time reimbursement. Any late resubmissions will result in a delay in reimbursement for those children until the next reimbursement processing period.

3. Attendance and Absences

- a. The "X"s populate automatically on the attendance. This means the child was present. Click on an "X" to record an absence and choose the reason for the absence.
- b. The system marks absences as "A"s in the provider's view but when the attendance is viewed by the Reimbursement Specialist, the first 3 "A"s are marked "E"s for excused absences and the rest remain "A"s.



c. If the provider has a Request for Justification of Extended Absence (RJOA) Form (be sure to only use the RJOA Form that is effective July 1, 2023) and the supporting documentation, if it is required for the code being recorded as the reason for the absence, it must be attached to the fourth (4th) "A" or 4th absence. Please make a comment that states all the dates that the RJOA Form and the documentation covers. Reimbursement Specialists will see these notes when they are processing the attendance. This helps the Reimbursement Specialists process attendance efficiently. Please do not put all absences on the RJOA Form. The RJOA Form is only needed for absence #4 through #13. Three (3) or less absences do not need an RJOA Form and any three (3) are automatically excused and should not be on the RJOA Form.



Request for Justification of Extended Absences (RJOA) Form

Child's Name:	 	 			
DATE MM/DD/YY					
CODE #					

Extraordinary Circumstance Code List for Reimbursement:

- **Code 1**. Hospitalization of the child or parent with appropriate documentation such as a doctor's note or the hospital admission or hospital discharge document.
- Code 2. Illness requiring at home stay (no handwritten parent statement is needed).
- **Code 3**. Death in the immediate family with appropriate documentation such as an obituary, a death certificate, a memorial card, or a document from the funeral home.
- Code 4. Court ordered visitation with appropriate documentation such as the order from the court.
- **Code 5**. Unforeseen documented military deployment or exercise of the parent with appropriate documentation such as military order of deployment or reserve duty.
- **Code 6**. Doctor appointments or other health related appointments such as therapy or routine doctor visits with documentation from the appointment.
- d. If there is no RJOA Form and supporting documentation, if it is required, please <u>do not</u> record "A"s. These absences will then become non-reimbursable days and providers should code them as such by clicking on the "X" and choosing <u>Enrolled/Non-Reimbursable</u> as the reason for the absence. This will record an "N" and the Reimbursement Specialists will quickly know that no form or documentation has been attached for absences beyond three (3). Reimbursement Specialists will not spend time changing non-reimbursable "A"s to "N"s. Please help avoid the possibility of overpayments by marking these days correctly. If the RJOA Form and the supporting documents, if required are not attached to the 4th "A". then extended absences <u>will not</u> be considered for reimbursement.



- e. <u>Please know that the Reimbursement Specialists will not look for the Request for Justification of Extended Absence Form in any other location other than those forms that are attached to the 4th "A" on the electronic attendance.</u>
- f. Please do not upload the absence form and documentation for the current month's absences to any folder in the document library, as they will not be reimbursed. The RJOA form must be attached to the 4th absence to be reimbursed at the same time as the attendance roster.
- g. When uploading documents, there is no need to call to see if the Reimbursement Team has received them. If the provider can see their uploaded documents in the site's document library folder, then the Reimbursement Specialist can also see them. Providers should always confirm for themselves, though, that they can see their uploaded documents. Please be sure that documents are uploaded to the correct folder, as staff does not receive any notification that documents were uploaded. We only look in the folder in which we expect to see the documents uploaded. For example, sign in sign out sheets are uploaded monthly to the folder labeled Monthly Sign in out Sheets. The sign in sign out sheets will not be considered as received if we cannot find them in the correct folder. Please always alphabetize sign in sign out sheets before uploading them.

4. Payment Validation and Monitoring

- a. When processing the provider attendance, the Reimbursement Specialists will compare the submitted electronic attendance to the authorized signatures on the submitted sign in sign out sheets. This will ensure that the provider's payments reflect actual attendance and will help to avoid overpayments and the need for adjustments to be processed.
- b. The Coalition will review, and correct payment validation issues discovered while processing the monthly electronic attendance.
- c. The Coalition will adjust payments, as needed, because of attendance validation issues and non-compliance with attendance and monitoring requirements per Rule 6M, the Statewide SR Contract, and other written Coalition policies regarding attendance and monitoring.
- d. If extensive and/or serious discrepancies are found and there is a reasonable belief and supporting evidence that a provider knowingly or intentionally may have committed fraud or misrepresentation. The Coalition will take appropriate action, such as:
 - Referral of the matter and supporting evidence to the Division of Early Learning Inspector General's Office and the Department of Financial Services, Public Assistance Fraud Unit
 - ii. Termination of provider's contract/agreement
 - iii. Refusing re-entry to any new or existing School Readiness or Voluntary Prekindergarten funded Programs as a program owner, stakeholder, officer, fiscal officer, or director of a program
 - iv. Denying further participation in new or existing School Readiness or Voluntary Prekindergarten Early Learning Programs as a program owner, stakeholder, officer, fiscal officer, or director of a program
- e. Reimbursement staff will review the monthly sign in sign out sheets and compare them to the submitted monthly electronic attendance. This process is completed every month of the fiscal year barring any unforeseen Provider Portal system issues that may affect SR reimbursement processing and that would lead to a delay in the timely delivery of provider SR reimbursement by the contractual deadline of the 20th of the month.



f. Reimbursement staff will make necessary payment adjustments for children who do not have a corresponding signature in accordance with Rule 6M, Coalition established monitoring policies and standard audit requirements and practices.

5. Adjustments

- a. If the provider receives the Request for Justification of Extended Absences form (RJOA) and the documentation <u>after</u>, <u>and only if after the attendance has already been submitted</u>, then those absences will be reimbursed by adjustment with a future service period. In this case, <u>only</u>, providers should upload the RJOA form and the documentation to the Monthly Adjustment Request folder. A Monthly Adjustment Request Form is also required as a cover sheet when requesting adjustments for late RJOA Forms. Please label the file with the month/year it pertains to and with the child's name. Example: September 2023 Smith, J. Late RJOA Form. Providers should also email their site's Reimbursement Specialist to advise them that a late RJOA Form with a Monthly Adjustment Request Form and any backup documentation, if required, was uploaded/submitted to the Monthly Adjustment Request folder. The Portal currently does not notify the ELC staff when a document has been uploaded. These requests will be reimbursed as soon as possible with a future payment period. Keep in mind that adjustment requests fall into the 60-day adjustment request rule.
- b. Providers must submit any Monthly Adjustment Request forms for errors with the May and June reimbursement by July 25th. This is due to the fiscal year ending on June 30th. The Monthly Adjustment Request forms that are received after the July 25th deadline will NOT be processed. This requirement also applies to the late submission of any un-submitted attendance or the re-submission of any rejected attendance for any prior months' attendance from July through June of the fiscal year. A provider who does not meet the July 25th submission deadline for adjustment requests, or does not submit any un-submitted attendance, as well as re-submit any rejected attendance by the July 25th submission deadline will forego receiving the adjustment and the reimbursement dollars forever.



MONTHLY ADJUSTMENT REQUEST FORM (MARF)

Provider Site Name:_		Provider Portal ID#:							
Adjustment Month a	nd Year (MM/YYYY):_								
Please print so information is legible.									
Child's First Name	Child's Last Name	Date of Birth	Reason for Adjustment						

6. Reimbursement Reports

a. Once each month's reimbursement has been completely processed and the payment period is officially closed, the Provider Reimbursement Detail Reports are available by clicking on the Attendance Tab and choosing Detailed Reimbursement Reports option. Providers can run these



detailed reports by Service Period Month (the month that the care was provided) or by Payment Period Month (the month that the attendance was processed and reimbursed). Also, if your site serves children funded through local funding or VPK funding then you will need to run that report separately from the SR report by clicking on the down arrow and choosing the report for that funding. EFT receipt sheets are uploaded for SR and Local funding on or before the 20th of every month to the Monthly Reimbursement Report folder in your Provider Portal document library. EFT receipts are uploaded for VPK on or before the last business day of the month to the Monthly Reimbursement Report folder in your Provider Portal document library. Please review the EFTs as there is a definition as to what each dollar amount received is for such as SR, SR Plus or PTPP funding or a prior period due to an adjustment or late attendance. For VPK, the definition might be for the provider advance payment or the reversal of the advance payment for the prior month which is automatic when the actual/true attendance is processed.

- b. The detailed reimbursement reports will reflect what was reimbursed for each child whether for the current month's service period or whether there were any adjustments processed for any prior service period. Providers should verify that their monthly reimbursement is accurate by reviewing the Reimbursement Detail Report each month. Any errors or discrepancies must be reported to the Coalition within 60 days of receipt of the reimbursement with the exception of the months of May and June. The provider should submit a Monthly Adjustment Request Form by uploading it to the Provider Portal document library folder titled Monthly Adjustment Request. The details of the error should be explained on the form and any supporting documentation necessary to support the error should also be uploaded with the form. Providers should send an email to their Reimbursement Specialist if they have submitted a Monthly Adjustment Request Form to the document library.
- 7. Issues or questions about client eligibility and child enrollments should be directed to the Family Services Department and not the Reimbursement Department. Providers can call the Family Services' Team at 727-400-4411. If you must leave a message, please be sure to give as much detailed information as you can so that staff can be prepared to answer your question thoroughly when they respond back to you.
- 8. It is best to call or email your assigned Reimbursement Specialist first before contacting the Reimbursement Supervisor if you have any question or concern about your site's reimbursement. The Reimbursement Specialists manage every aspect of their assigned caseloads; therefore, they have the most current information about your site's attendance, your site's sign in sign out sheets, your site's RJOA Forms, your site's monthly reimbursements and adjustments. They can help a provider in their caseload better than anyone else in the Reimbursement Department. Telephone calls to the Supervisor are gladly welcomed; however, calls should only be made to the Supervisor when the assigned Reimbursement Specialist is unavailable for more than one business day, is unable to answer the provider's question or when the provider's reimbursement related issue cannot be resolved through the site's assigned Reimbursement Specialist and therefore, needs to be escalated to the Supervisor level.
- 9. Providers should check their email regularly and carefully read all communications from the Coalition. Email is not only our primary way of communicating with providers but also the Division of Early Learning's way of communicating with providers. Be sure to click on the links, which are sometimes highlighted in blue ink, to read any linked resources or attachments. This will help your site stay informed



and help your site understand what is being requested or what is required. It is the provider's responsibility to be aware of any communication sent from the ELC or the DEL. Email communication is referred to in the statewide contract and providers must have a valid email that they have personal access to and can receive emails from the Coalition at. The ELC also posts information on our website at www.elcpinellas.net. Our website is a very good place to find general information for all providers or updates, so we suggest looking there for answers to questions that you might have. There are resources and forms available under the "For Providers" tab in the menu bar at the top of the screen. Also, under "About Us" and then "Media" are copies of all of the communications that the Coalition has sent out to the providers.

10. VERY IMPORTANT REMINDER: The Reimbursement Specialists do not send email reminders or make telephone calls to providers to remind them that the sign in sign out sheets are due when the attendance is due. If both the attendance and the sign in sign out sheets are not received by the due date, then site's attendance will not be processed. This means that the provider will not receive reimbursement until the next month once they have met the requirements. Unfortunately, there are no exceptions to this policy. Providers should think of this as their timesheet and submit everything that is required on time to be reimbursed on the 20th of each month and avoid a delay in their monthly reimbursement. It is very important that providers always verify that their site's attendance has been submitted by looking for the submitted message in the top right-hand corner of the attendance screen. This submitted confirmation message should be considered the site's confirmation that the attendance was received; therefore, there is no need to call or email the Reimbursement Specialist to confirm that the attendance was received by the Coalition. If there is an emergency or an unusual circumstance that prevents a provider from complying with the requirements, it is critical that the provider advise their site's Reimbursement Specialist BEFORE the attendance due date so that the issue can be resolved to the best of each party's ability and within the constraints of the process. There are two screenshots inserted below. The first one shows the unsubmitted status of the attendance written in red ink and the second one shows the submission status written in green ink with the date and name of the person who submitted the attendance. Providers should look here if there is a question as to the submission status of their monthly attendance. Again, the Reimbursement Specialists do not notify providers if their monthly attendance is not submitted by the due date. Please be conscientious of this for your site's own benefit.



These are the screenshots of submitted message and unsubmitted message.



