



Child Care Services Division
City of San Antonio

Billing Handbook

Information Line: 210-246-5200
Child Care Delivery System (CCDS)

Bexar County

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The City of San Antonio is an equal opportunity employer/program
Auxiliary aids and services are available upon request to
Individuals with disabilities
TDD/TTY 1-800-735-2989

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DEADLINES

CCS will reimburse the child care provider for services rendered on either a monthly or twice-monthly basis. Effective October 1, 2008, all payments will be made using Electronic Funds Transfer (EFT-direct deposit) or by Debit card. The billing form 2455 must be submitted after services are provided and after the last billing date. (On the 1st or 16th of the month, depending on the billing schedule.)

Billing will be returned to the provider if submitted prior to the acceptable date.

Once-a-month billing must be submitted by the eighth (8th) of the following month after child care services were provided (or next business day if the 8th is a weekend or holiday). Providers using the paper billing form may only bill once monthly.

Twice-a-month billing for the first (1st) half of the month must be submitted by the twenty-third (23rd) of the month after child care services were provided (or the next business day if the 23rd is a weekend or holiday).

Twice-a-month billing for the second (2nd) half of the month must be submitted by the eighth (8th) of the following month after child care services were provided (or the next business day if the 8th is a weekend or holiday).

Any bill submitted beyond the 20th of the following month will not be paid.

BILLING FOR SCHOOL-AGERS

If the public school is closed for **one to four (1-4) consecutive** days, the provider can bill the full-time rate **only when the child is present.**

If the public school is closed for **five (5) or more consecutive** days and the child requires full-time child care during this period, the provider can bill the **full-time rate whether the child is present or absent.**

If an authorized Provider holiday occurs during the **5 day** time period, the provider can bill this holiday at the **full-time rate using the 'AH' code.**

If a school has an early release, the provider may bill the full-time rate **only if the child requires full-time child care (6 hrs or more).**

Documentation on the contact log should be made in the above instances.

The documentation should include:

- Parent's name
- Child's name
- Name of district or school
- The Holiday being observed

PROVIDER AUTHORIZED HOLIDAYS

CCDS will reimburse Regulated child care providers up to nine holidays and the Texas Rising Star providers for up to twelve holidays. The days include CCDS set and provider-choice holidays.

The set holidays include:

1. New Year's Day
2. Independence Day
3. Labor Day
4. Thanksgiving Day
5. Day after Thanksgiving
6. Christmas Day

If the recognized holiday falls on a weekend then the provider will be reimbursed for either the Friday before or the Monday after the recognized holiday. The day that is reimbursed will coincide with the day the majority of area businesses are closed in observance of that particular holiday.

CCS will also reimburse the provider for each child currently enrolled when they are closed due to extenuating circumstances, such as icy roads (when the local school is also closed for that day), fire, electrical or gas outage, etc. for up to 5 business days per calendar year. **Providers must notify their assigned Provider Specialist of the closure (within 5 days of the closure) before payment can be authorized.**

If a provider decides to take additional days off (days exceeding the allowable set holidays), the days must be billed as "UH" Unauthorized Holiday.

TECHNICAL ASSISTANCE / PROVIDER NON-COMPLIANCE

Technical Assistance will be documented on a Provider Non-Compliance Form. A third non-compliance of the same type will result in a Service Improvement Agreement, to include closed intake for a period of one month. A fourth non-compliance will result in a Suspension of the Rate Schedule or Agreement for a period of three months. Any non-compliance beyond the 4th occurrence, within a 24 month period, will result in termination of the Rate Schedule or Agreement and ineligibility to re-apply for provider status for a period of six months.

ABSENCES

Report three (3) day no-parent-contact for new and Child Protective Services (CPS) enrollments.

Report five (5) day no-parent-contact for all clients. In the case of a Voluntary Withdrawal, please advise the parent to contact their Caseworker, the Provider will follow the 5-day no parent contact rule.

IMPORTANT

- There must be Contact Log documentation showing there was a call made to the Case Aide reporting no-parent-contact (NPC) on the day it occurred. If the provider fails to call and report the 3 or 5 day NPC, a Service Improvement Agreement may be issued.
- If a provider suspends a child from the center, the provider cannot bill for those days.

CONTACT LOG DOCUMENTATION

- Document all contact with all CCS staff.
- Ensure the date of entry for the contact coincides with date of contact.
- All 'AN' (notified absences) and 'I' (illnesses) entries on Form 2455 must have a contact entry on the contact log.
- All authorization numbers must be documented on the contact log, including effective date, amount of the parent fee and days authorized.
- Authorized staff must be available at all times to receive numbers from CCS. It is the provider's responsibility to ensure that the information is documented accurately.
- Contact your Provider Specialist If there is a change in authorized staff.

CONTACT NUMBERS AND EMAIL ADDRESSES

Provider Specialists		
Williamina Holme	246-5773	williamina.Holme@twc.state.tx.us
Yolanda Mejia	246-5258	yolanda.mejia@twc.state.tx.us
Phyllis Miller (rural)	362-5313	phyllis.miller@twc.state.tx.us

Provider Payments		
Dianne Cruz	246-5262	dianne.cruz@twc.state.tx.us

Case Aides		
Idahlia Espinoza	246-5707	idahlia.espinoza@twc.state.tx.us
Gloria Granado	246-5229	gloria.granado@twc.state.tx.us
Lisa Niemietz	246-5709	lisa.niemietz@twc.state.tx.us

BILLING CORRECTIONS

Providers have **five (5)** days from the date of contact by their Case Aide to make billing corrections on Form 2455. If after five (5) days, the Case Aide has not received a response, the form 2455 may be mailed/returned to the daycare for corrections or processed as submitted minus the errors.

The provider is responsible for submitting accurate billings.

REMEMBER:

- NO WHITE-OUT may be used on Form 2455.
- No pencils or erasable pens.
- Use **Blue** or **Black** ink only.
- Complete the Form 2455 as legible as possible.

CHECK DISCREPANCIES

All check discrepancies must be reported within **fifteen (15)** days from the date noted on the check. If no discrepancies are reported, CCDS will assume payment was made correctly and no further adjustments will be made.

Review Provider Check Proof for the following errors:

- Child not paid
- Incorrect number of units paid
- Incorrect rate paid
- Incorrect parent fee deducted

BILLING CODES**PLEASE REFER TO THESE CODES WHEN DOING YOUR BILLING:**

Code	Meaning	Count as Unit Billed?	Count as Day Absent?
P	Present	Yes	No
A	Absent - Parent/Guardian did not call, child did not attend	Yes	Yes
I	III	Yes	Yes
AN	Absence Notified - Parent/Guardian called, child did not attend	Yes	Yes
AH	Authorized Holiday - provider holiday agreed to in contract	Yes	No
CO	Court Ordered Visit	Yes	No
EM	Emergency closing - Inclement weather, facility issue, flooding, fire, etc. (Notify Provider Specialist within 5 days of the closure for authorization to use EM code.)	Yes	No
EX	Extenuating Circumstances - long term absence (must have CCDS approval) or for teen parents in high school who are not able to bring their child/children to the child care facility during a holiday period (two consecutive weeks maximum)	Yes	No
NS	Not Scheduled - child not scheduled to attend (ex: child authorized 5 out of 6 days)	Yes	No
UH	Unauthorized Holiday - facility holiday not agreed to in contract	No	No

For a sample copy of Form 2455, Contact Log or Check Proof, please contact your Provider Specialist.