



# Coalition Portal User Guide

Version 7.3

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## Document Revision History

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7.2	03/20/25	Flo Powell
7.3	12/04/25	Sara Bassoff

## Document Overview

This document provides a step-by-step guide for Coalition staff who are assisting families to navigate the Family Portal and providers to navigate the Provider Portal.

### Purpose of this Document

The purpose of this document is to provide coalition users with a reference document to successfully navigate and perform business processes included in Release 7.2 of EFS Mod.

### Intended Audience

The intended audience for this document includes staff responsible for processing School Readiness Program and/or VPK Program applications, as well as staff responsible for providing technical assistance to parent users of the Family Portal, in addition to staff responsible for processing Provider Portal profiles, contracts, enrollments, attendance, and reimbursement, as well as staff responsible for providing technical assistance to Provider Portal users.

### What's New in this User Guide?

Updated screenshots for the new SSO login redirect addressed with the latest Hot Fix.

## Assistance

If you have questions about any of the material in this User Guide or about any processes not covered by this guide, please contact the Division of Early Learning Service Desk at [Service.Desk@oel.myflorida.com](mailto:Service.Desk@oel.myflorida.com) or (850) 717-8600.

## Logging on to the Coalition Services Portal with Single Sign-On

Coalition users can access the Coalition Services Portal at <https://coalitionservices.floridaearlylearning.com>.

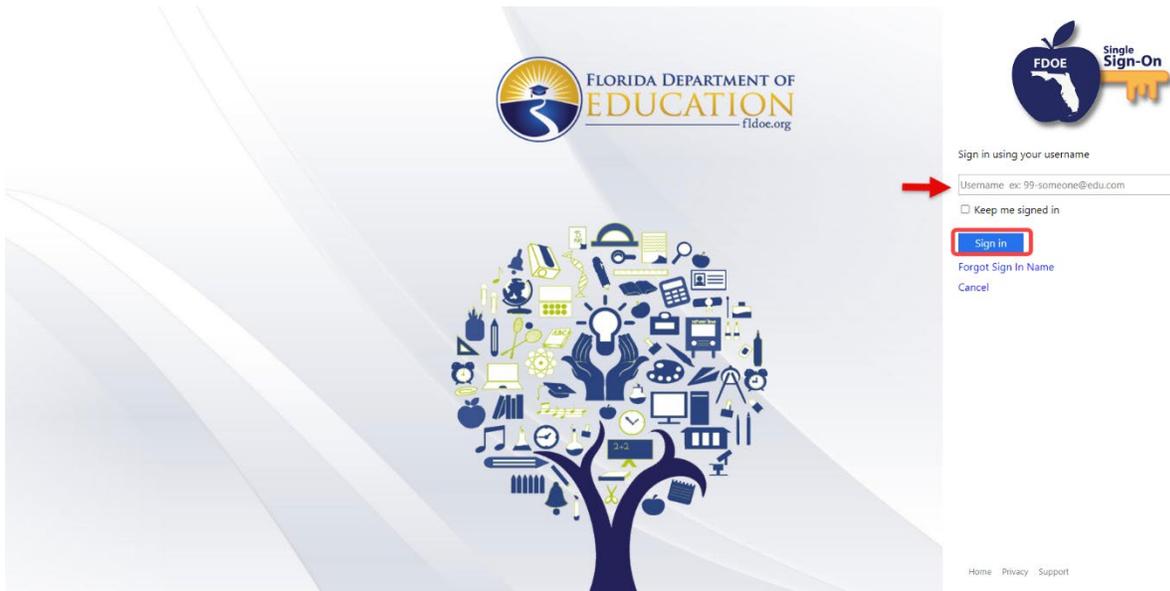
Navigate to the Coalition Portal. The following page will display.



Click **Hosted / Self-Registered Login**



The sign in page will display. Enter your username and click **Sign in**.



The following page will display. Enter your password and click **Continue**.



You will be prompted to send a one-time verification code at your established multi-factor authenticator. Click **Send Code.**



The Coalition Portal will display.

**Note:** The menus and/or links on your home page will vary depending on your assigned role in the portal.

## Creating a New Coalition Services Portal Account

To access the Coalition Services Portal, the coalition user must contact their LEA Admin to register an account.

## Re-Adding a Coalition User

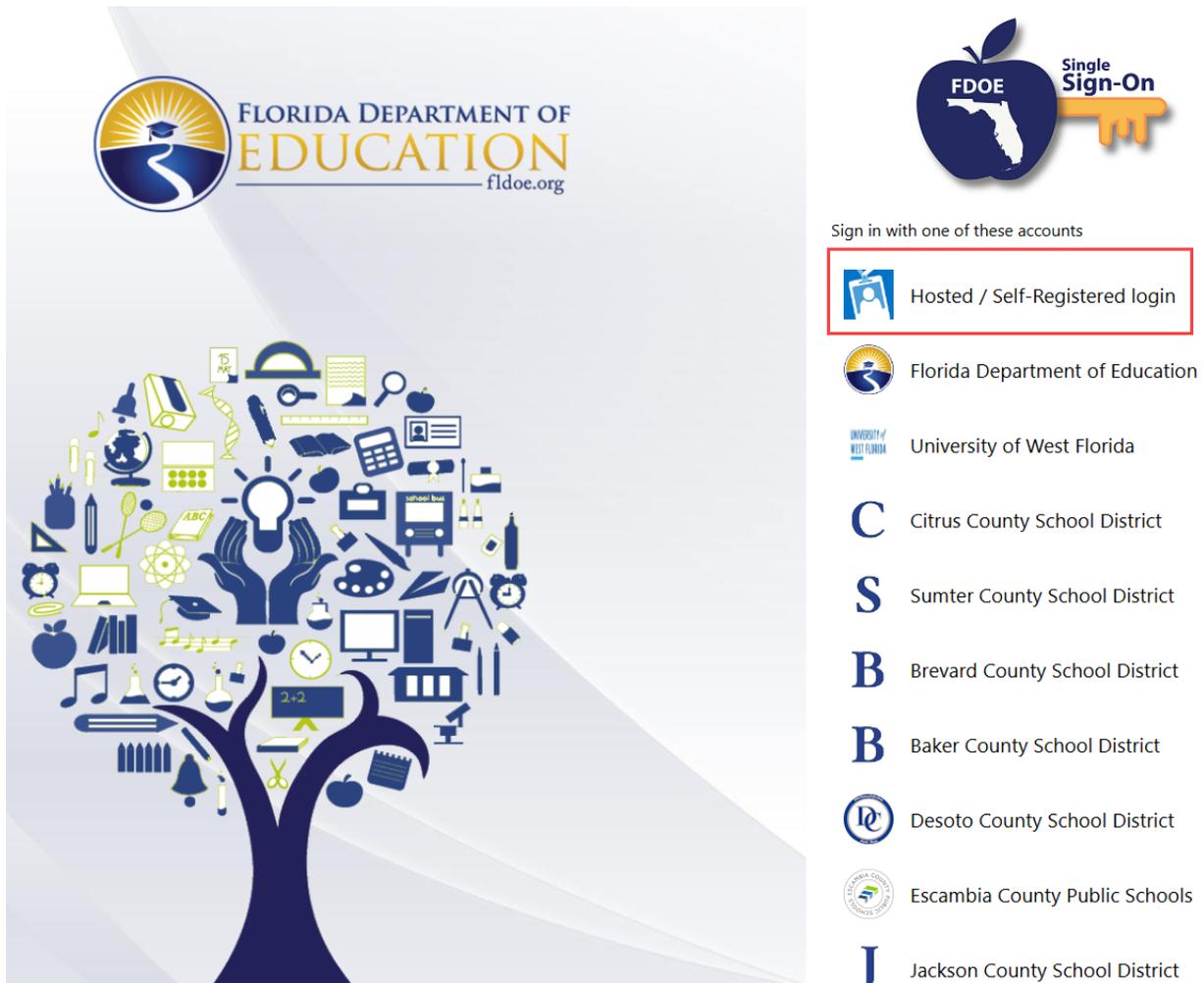
For changes to username, password, password recovery, MFA, refer to your LEA Admin(s). Account management will be handled in the FDOE Single Sign On (SSO) portal.

## Forgot Sign-in Name Process

Contact your LEA Admin(s) if you need assistance with your Sign-In Name.

## Forgot Password Process

Navigate to Coalition Portal. The FDOE Single Sign-On sign in page will display. Click **Hosted / Self-Registered login**.



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Single Sign-On

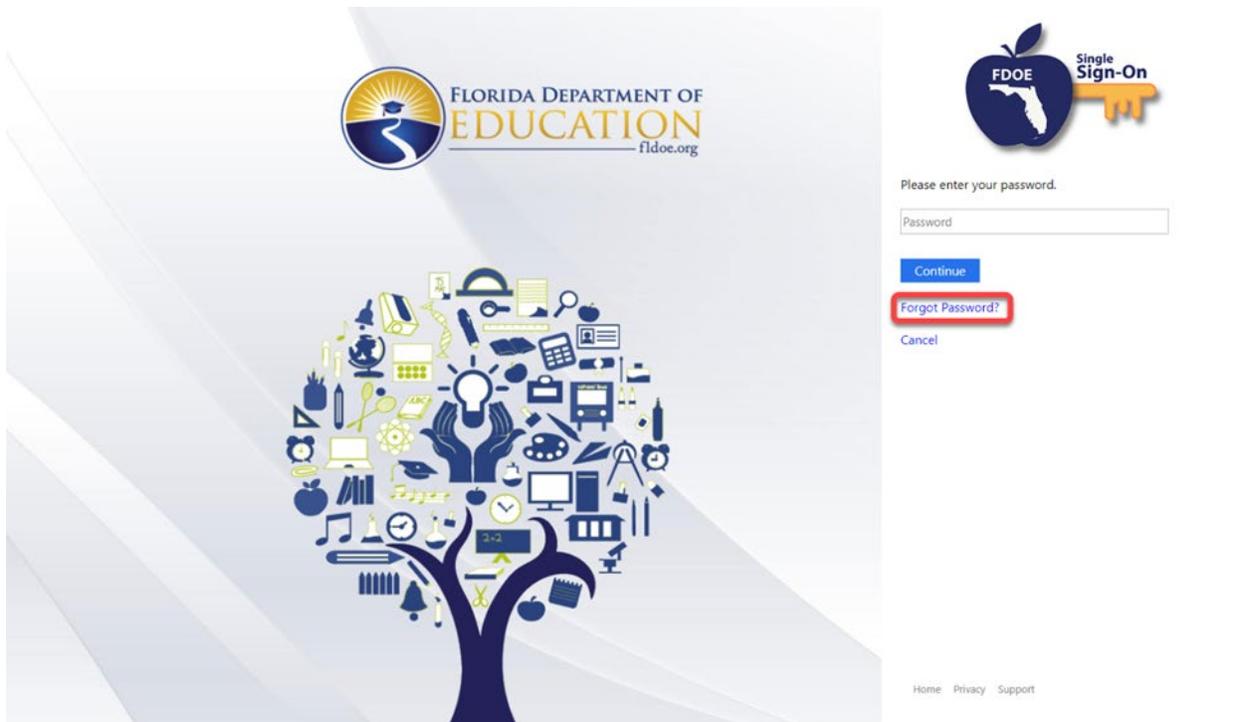
Sign in with one of these accounts

- Hosted / Self-Registered login**
- Florida Department of Education
- University of West Florida
- C** Citrus County School District
- S** Sumter County School District
- B** Brevard County School District
- B** Baker County School District
- D** Desoto County School District
- E** Escambia County Public Schools
- J** Jackson County School District

Enter your SSO username. Click **Sign In**.



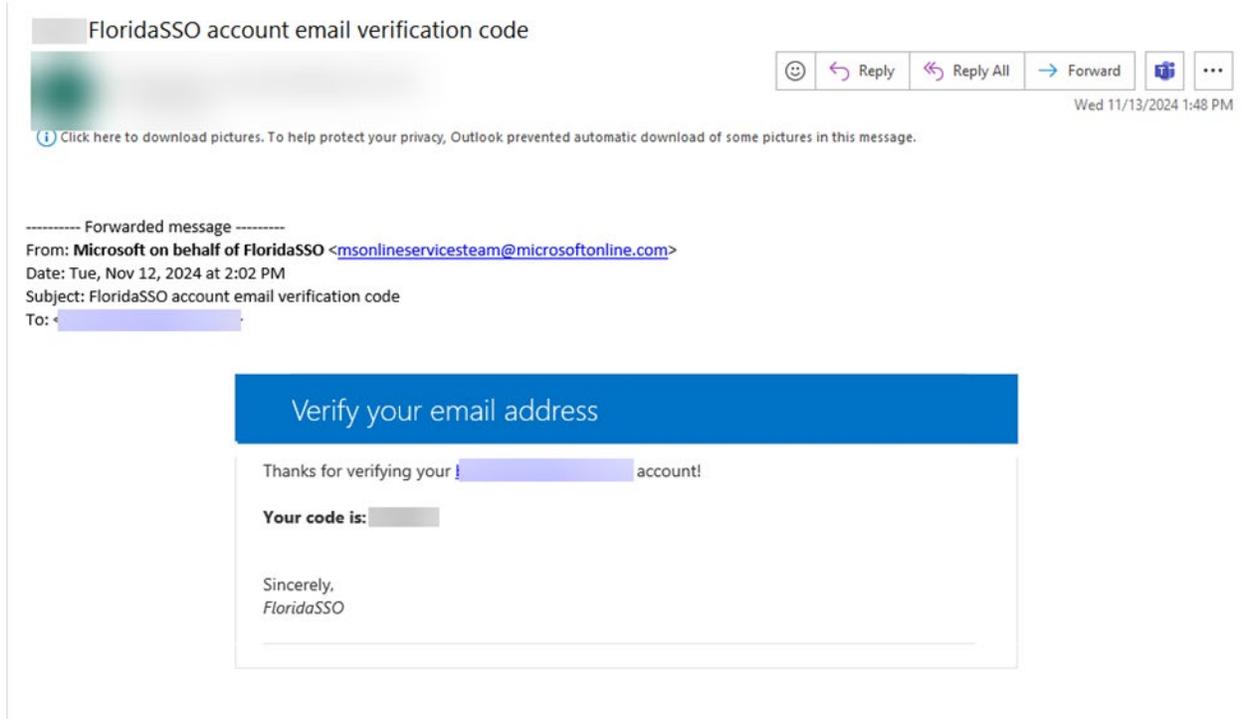
Click the **Forgot Password?** Link.

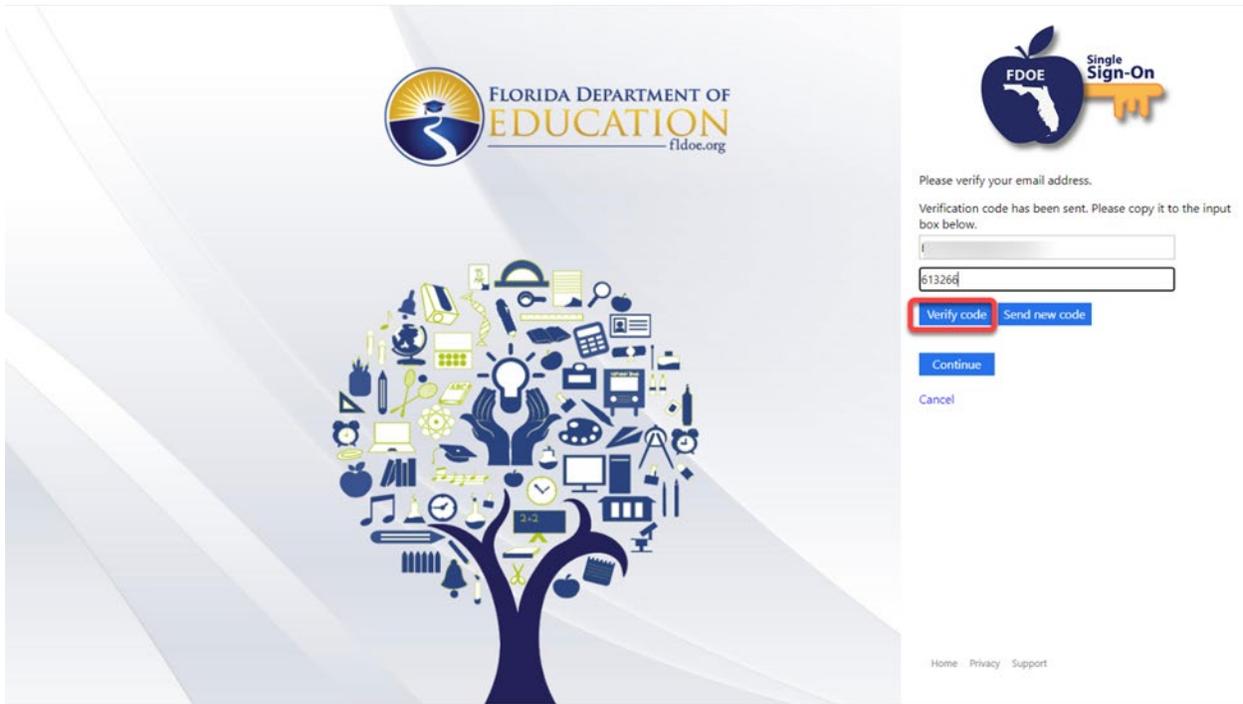


Verify the email address listed. Click **Send verification code**.

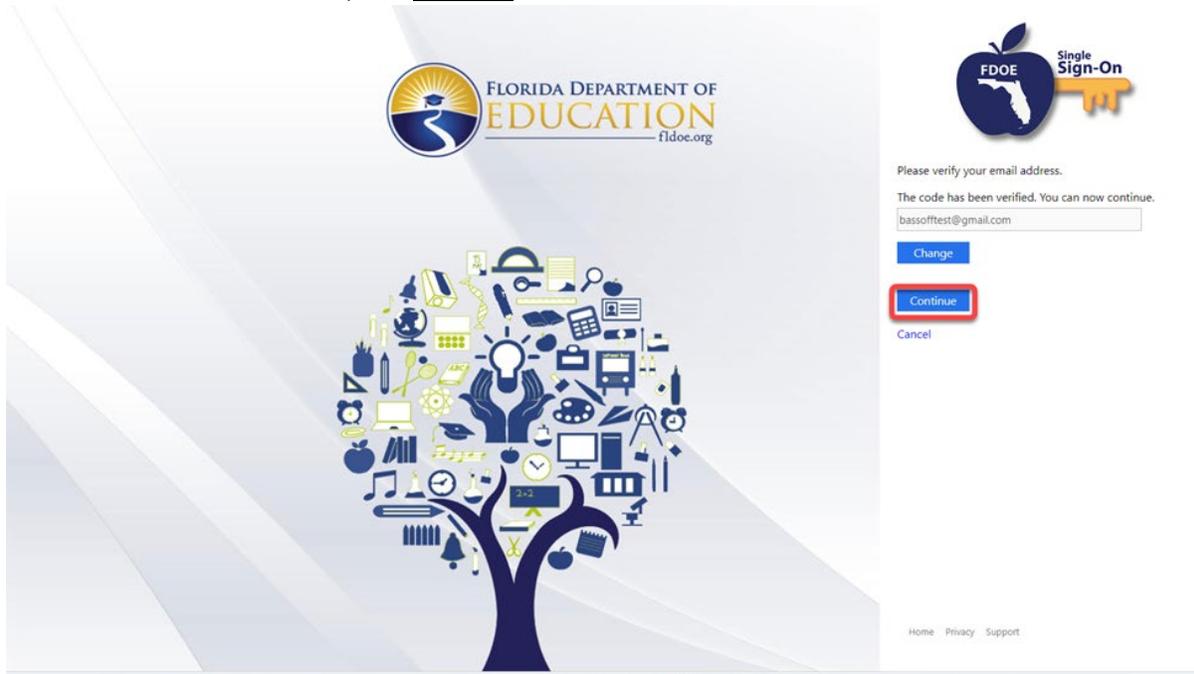


An email will be sent to the email address listed. Enter the code you received and click **Verify code**.





Once the code has been verified, click **Continue**.



Enter and reenter your new password. Click **Continue**.



The screenshot shows the Florida Department of Education (FDOE) Single Sign-On interface. On the left, there is a large graphic of a tree where the leaves are represented by various educational icons like a lightbulb, a book, a globe, and a calculator. Above the tree is the FDOE logo, which consists of a stylized sun and a path leading to a graduation cap, with the text "FLORIDA DEPARTMENT OF EDUCATION" and "fldoe.org" below it. On the right side of the screen, there is a "Single Sign-On" logo featuring a blue apple with a yellow keyhole and the text "Single Sign-On". Below this logo, the text "Please enter your new password." is displayed. There are two input fields: "New Password" and "Reenter Password". Red arrows point to each of these fields. Below the input fields are two buttons: "Continue" (highlighted with a red box) and "Cancel". At the bottom right, there are links for "Home", "Privacy", and "Support".

You will be prompted to send a code for multi-factor authentication. Click **Send Code**.



This screenshot shows the next step in the Florida Department of Education Single Sign-On process. It features the same educational tree graphic and FDOE logo on the left. On the right, the "Single Sign-On" logo is present. The text reads: "We have the following number on record for you. We can send a code via SMS or phone to authenticate you." Below this text, the phone number "XXX-XXX-9039" is displayed. There are two buttons: "Send Code" (highlighted with a red box) and "Call Me". A "Cancel" link is located below the buttons. At the bottom right, there are links for "Home", "Privacy", and "Support".

Enter the code sent to you. Click **Verify code**.

The screenshot shows the Florida Department of Education (FDOE) Single Sign-On interface. On the left, there is a large graphic of a tree where the foliage is composed of various educational icons like a globe, books, a lightbulb, and a microscope. The FDOE logo is at the top left. On the right, the 'Single Sign-On' logo features a blue apple with a white outline of Florida and a yellow key. Below the logo, a message states: 'We have the following number on record for you. We can send a code via SMS or phone to authenticate you.' A 'Phone Number' field shows 'XXX-XXX-XXXX' with a red arrow pointing to an empty input box. Below this are three buttons: 'Send a new code', 'Verify Code' (highlighted with a red box), and 'Cancel'. At the bottom right, there are links for 'Home', 'Privacy', and 'Support'.

The Coalition Portal will display.

The screenshot shows the home page of the Florida's Early Learning Coalition Services Portal. The top navigation bar includes links for 'Home', 'Provider', 'Reimbursement', 'Maintenance', 'CCR&R', 'Grant Application', and 'Admin Functions'. On the right, it says 'Hello [email address] Sign Out'. The main content area features a large banner with the text 'WELCOME TO FLORIDA'S EARLY LEARNING COALITION SERVICES PORTAL'. Below the banner is a blue button with a magnifying glass icon and the text 'Search SR Applications'.

**Note:** The menus and/or links on your home page will vary depending on your assigned role in the portal.

## Coalition User Roles

### Coalition Services Portal User Types:

- CP Admin: CP Admins can manage Provider Registrations, Funding details/Surveys, Temp Closures, Rates, Calendars, and CCR&R Searches.
- CP CCAA User: External Users (CCAA Users) can create CCAA intake forms through the Coalition Portal.
- LEA Admin\*: **SSO Role\*** LEA Admins can create and manage user roles.
- CP Dev Screening Manager: Dev Screening Managers can manage screenings and view related SR adhoc reports and eligibility details.
- CP SR Application Manager: SR Application Managers can manage and view SR application eligibility assignments and manage the wait list.
- CP SR Application Viewer: SR Application Viewers can view SR application eligibility assignments and view the wait list.
- CP VPK Application Manager: VPK Application Managers can manage and view VPK applications and enrollments.
- CP VPK Application Viewer: VPK Application Viewers can view VPK applications and enrollments.
- CP SR Contract Manager: SR Contract Managers can manage and view SR contracts, provider profiles, and documents.
- CP SR Contract Viewer: SR Contract Viewers can view SR contracts, provider profiles, and documents.
- CP VPK Contract Manager: VPK Contract Managers can manage and view VPK contracts, provider profiles, and documents.
- CP VPK Contract Viewer: VPK Contract Viewers can view VPK contracts, provider profiles, and documents.
- CP SR Reimbursement Manager: SR Reimbursement Managers can manage and view SR attendance, SR reimbursements, and have access to SR adhoc, provider and payment period reports.
- CP SR Reimbursement Viewer: SR Reimbursement Viewers can view SR attendance, SR reimbursements, Temporary Closures, and SR adhoc reports.
- CP VPK Reimbursement Manager: VPK Reimbursement Managers can manage and view VPK attendance, VPK reimbursements and have access to VPK adhoc and provider reports.
- CP VPK Reimbursement Viewer: VPK Reimbursement Viewers can view VPK attendance, VPK reimbursements and have access to VPK adhoc and Provider reports.
- CP VPK Fast Manager: VPK Fast Managers provide access to external services available to users. This may include integration with third-party applications, external databases, or APIs, allowing users to interact with external data sources or services seamlessly.

**Note: Role(s) allocation will be handled by the LEA Admin(s) of each coalition. Users may be assigned more than one role.**

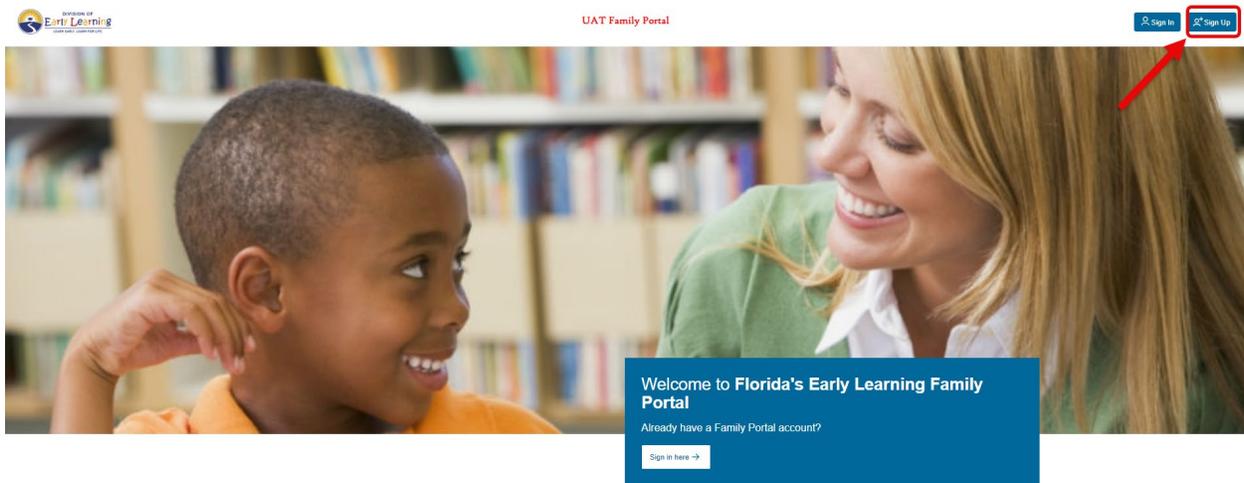
# FAMILY PROCESSES

With the latest update, the Family Portal is now Mobile-friendly.

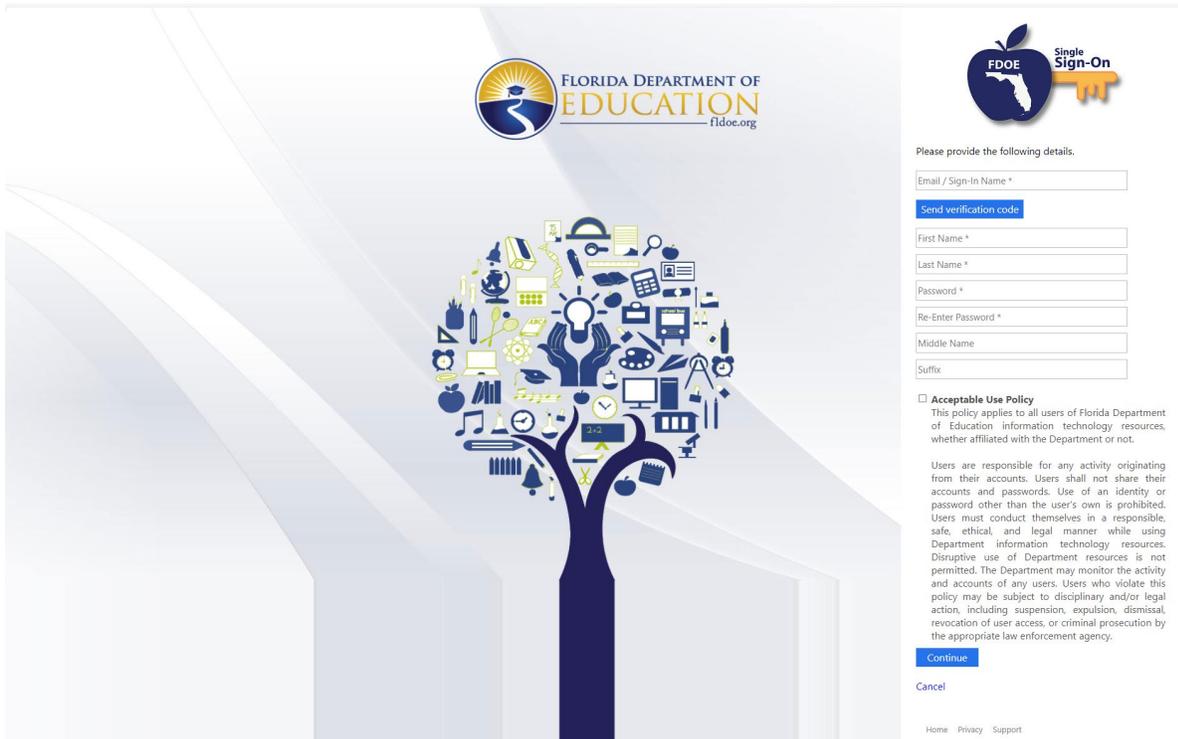
## Creating a Family Portal Account and Setting up Single Sign-On

First-time users must register for an account with Single Sign-on to access the Family Portal.

For a guided demonstration of this process, check out our “Family Portal Signing Up and Signing In” video at the following url: <https://www.youtube.com/watch?v=KexU97joF8>



Click the **Sign up** button to start the new account registration process and the following page will display:

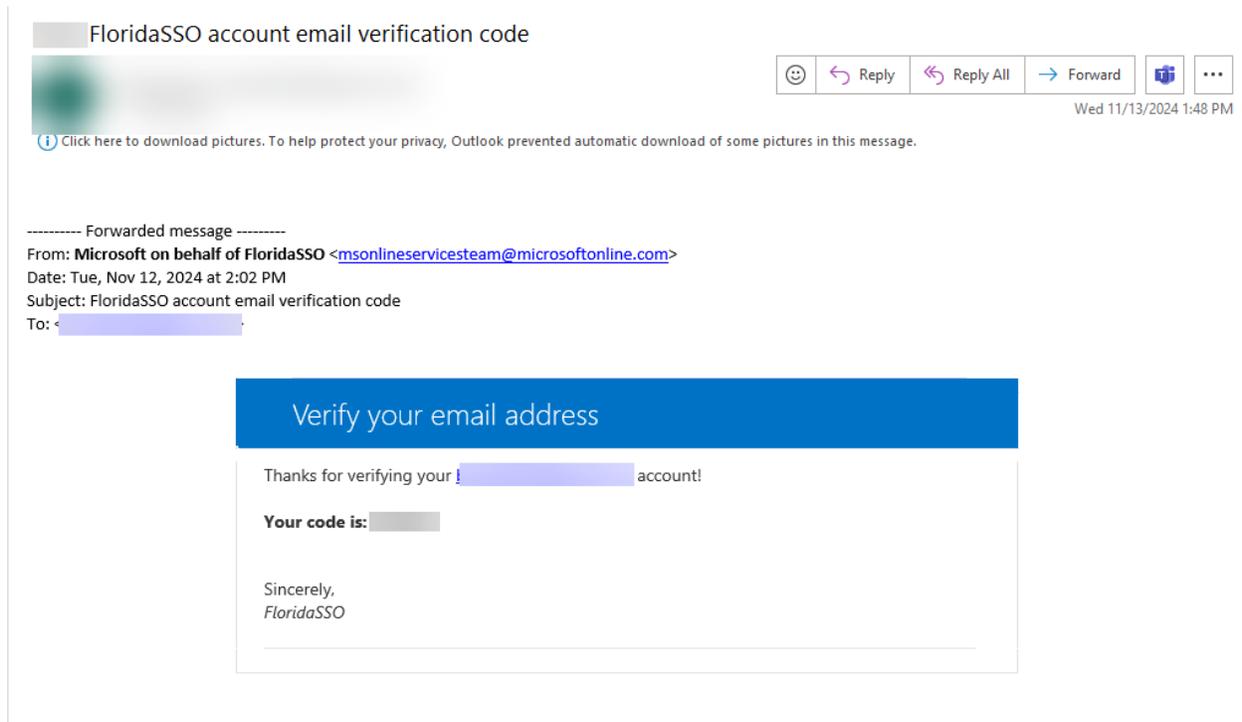


Enter your valid email address and click the **Send Verification Code** button.



The screenshot shows the Florida Department of Education logo on the left. On the right, there is a 'Single Sign-On' logo featuring an apple with a key. Below the logo, the text reads 'Please provide the following details.' There is a text input field containing 'validemail@test.com'. Below the input field is a blue button labeled 'Send verification code' which is highlighted with a red box.

The following email with your one-time verification code will be sent to the email address entered in the previous step:



The screenshot shows an email interface. At the top, the subject is 'FloridaSSO account email verification code'. Below the subject is a blurred image. To the right of the image are icons for Reply, Reply All, Forward, and a share icon. Below these icons is the date and time: 'Wed 11/13/2024 1:48 PM'. A message icon with an 'i' is followed by the text: 'Click here to download pictures. To help protect your privacy, Outlook prevented automatic download of some pictures in this message.' Below this is a 'Forwarded message' section with the following details: 'From: Microsoft on behalf of FloridaSSO <msonlineservicesteam@microsoftonline.com>', 'Date: Tue, Nov 12, 2024 at 2:02 PM', 'Subject: FloridaSSO account email verification code', and 'To: <[redacted]>'. The main body of the email is a white box with a blue header that says 'Verify your email address'. The text inside the box reads: 'Thanks for verifying your [redacted] account!', 'Your code is: [redacted]', and 'Sincerely, FloridaSSO'.

Enter the verification code in the text box that says "VerificationCode." Click **Verify code**.



The screenshot shows the Florida Department of Education logo on the left. On the right, there is a 'Single Sign-On' logo. Below the logo, the text reads 'Please provide the following details.' There are two text input fields. The first field contains 'validemail@test.com'. The second field contains 'VerificationCode'. Below the second input field is a blue button labeled 'Verify code' which is highlighted with a red box, and a blue button labeled 'Send new code'.

If you do not receive your one-time code, click **Send new code**, and a new one-time verification code will be sent to your email.



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Please provide the following details.

Verification code has been sent. Please copy it to the input box below.

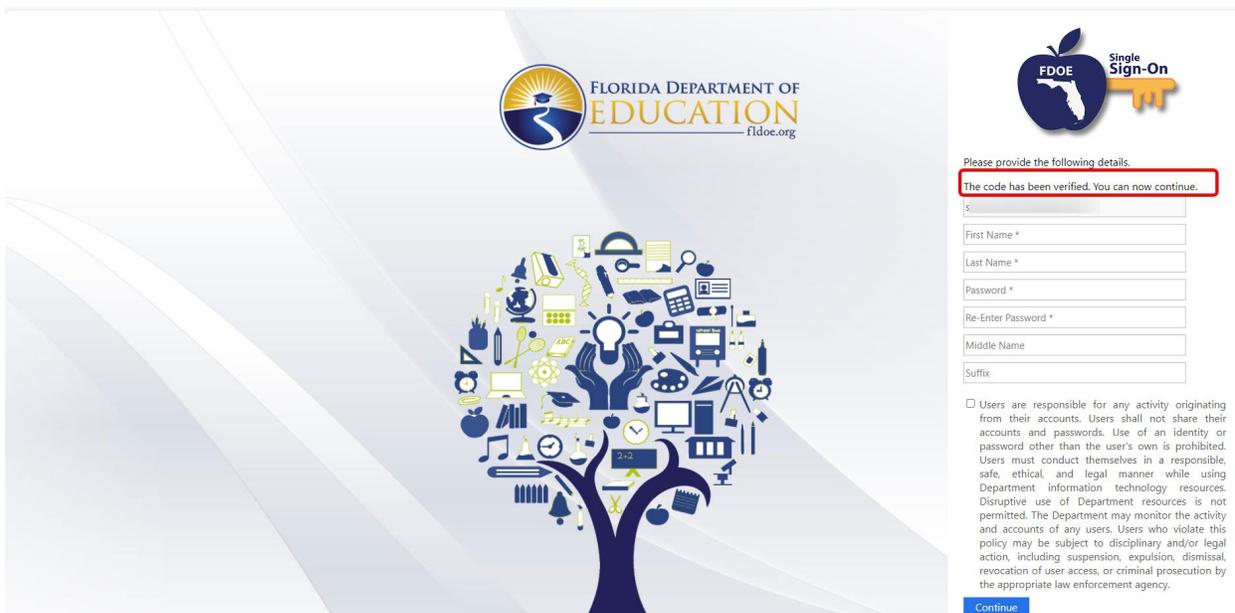
validemail@test.com

verificationCode

Verify code **Send new code**

**Note:** Though emails are expected within 1-2 minutes, in rare instances, please note that it may take up to 3-5 minutes to arrive. If you receive multiple codes in one verification attempt, the newest email will contain the valid code.

Once you have verified your code, “The code has been verified. You can now continue” will display.



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Single Sign-On

Please provide the following details.

**The code has been verified. You can now continue.**

First Name \*

Last Name \*

Password \*

Re-Enter Password \*

Middle Name

Suffix

Users are responsible for any activity originating from their accounts. Users shall not share their accounts and passwords. Use of an identity or password other than the user's own is prohibited. Users must conduct themselves in a responsible, safe, ethical, and legal manner while using Department information technology resources. Disruptive use of Department resources is not permitted. The Department may monitor the activity and accounts of any users. Users who violate this policy may be subject to disciplinary and/or legal action including suspension, expulsion, dismissal, revocation of user access, or criminal prosecution by the appropriate law enforcement agency.

Continue

Complete the relevant remaining fields.

FLORIDA DEPARTMENT OF  
**EDUCATION**  
fldoe.org

**FDOE** Single Sign-On

Please provide the following details.

The code has been verified. You can now continue.

First Name \*

Last Name \*

Password \*

Re-Enter Password \*

Middle Name

Suffix

Users are responsible for any activity originating from their accounts. Users shall not share their accounts and passwords. Use of an identity or password other than the user's own is prohibited. Users must conduct themselves in a responsible, safe, ethical, and legal manner while using Department information technology resources. Disruptive use of Department resources is not permitted. The Department may monitor the activity and accounts of any users. Users who violate this policy may be subject to disciplinary and/or legal action, including suspension, expulsion, dismissal, revocation of user access, or criminal prosecution by the appropriate law enforcement agency.

Continue

Fields containing an asterisk (\*) indicate that a field is required. The following fields are required:

- First Name
- Last Name
- Password
- Re-enter password

Fields not containing an asterisk (\*) are not required, and may not be applicable. The following fields are not required:

- Middle Name
- Suffix

Passwords must be at least 8 characters in length and contain at least one of each character type:

- Uppercase letter
- Lowercase letter
- Number
- Special Character

If your password does not contain one of each of the listed character types, the following error will display above the password field:

Last Name \*

The password must contain all of the following:

- a lowercase letter
- an uppercase letter
- a number
- a special character

•••

Once all the required fields have been completed, review the acceptable use policy. Check the box to indicate you have read and understood the information provided to you.

Test

Test

••••••••

••••••••

Middle Name

Suffix

**Acceptable Use Policy**

This policy applies to all users of Florida Department of Education information technology resources, whether affiliated with the Department or not.

Users are responsible for any activity originating from their accounts. Users shall not share their accounts and passwords. Use of an identity or password other than the user's own is prohibited. Users must conduct themselves in a responsible, safe, ethical, and legal manner while using Department information technology resources. Disruptive use of Department resources is not permitted. The Department may monitor the activity and accounts of any users. Users who violate this policy may be subject to disciplinary and/or legal action, including suspension, expulsion, dismissal, revocation of user access, or criminal prosecution by the appropriate law enforcement agency.

Continue

Cancel

Click **Continue**.

**Acceptable Use Policy**

This policy applies to all users of Florida Department of Education information technology resources, whether affiliated with the Department or not.

Users are responsible for any activity originating from their accounts. Users shall not share their accounts and passwords. Use of an identity or password other than the user's own is prohibited. Users must conduct themselves in a responsible, safe, ethical, and legal manner while using Department information technology resources. Disruptive use of Department resources is not permitted. The Department may monitor the activity and accounts of any users. Users who violate this policy may be subject to disciplinary and/or legal action, including suspension, expulsion, dismissal, revocation of user access, or criminal prosecution by the appropriate law enforcement agency.

**Continue**

[Cancel](#)

The following page will display:

**FLORIDA DEPARTMENT OF EDUCATION**  
fldoe.org

**Single Sign-On**

Please select a multi-factor authentication method.

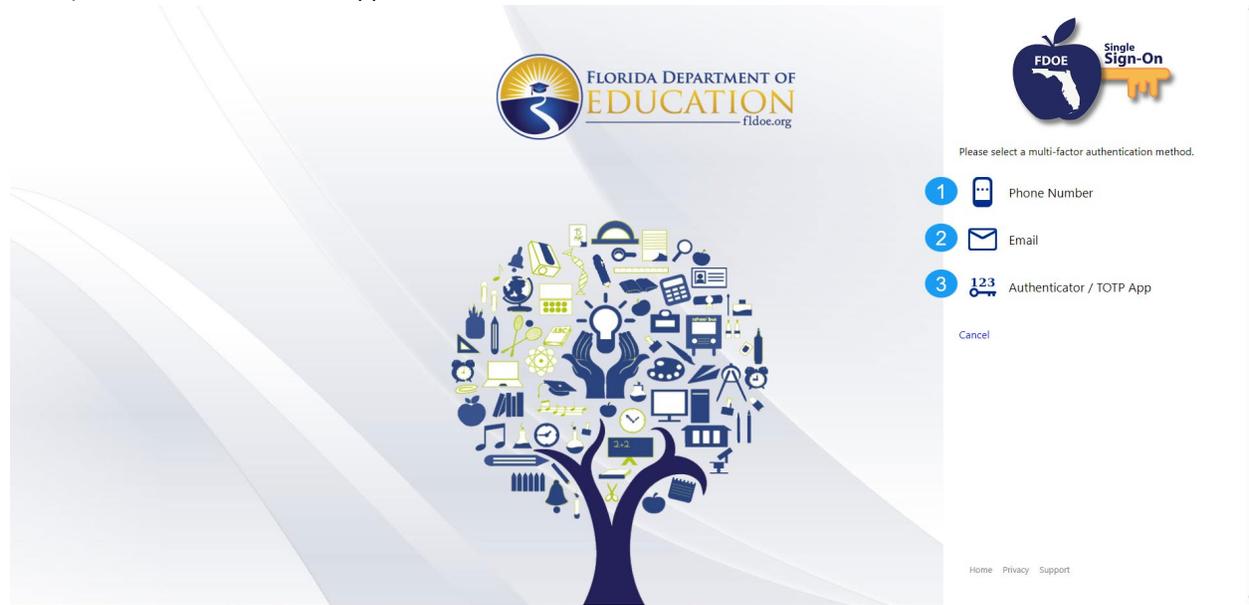
- Phone Number
- Email
- Authenticator / TOTP App

[Cancel](#)

[Home](#) [Privacy](#) [Support](#)

This page indicates the three options available to you for your multi-factor authentication.

- 1) Phone Number
- 2) Email
- 3) Authenticator / TOPP App



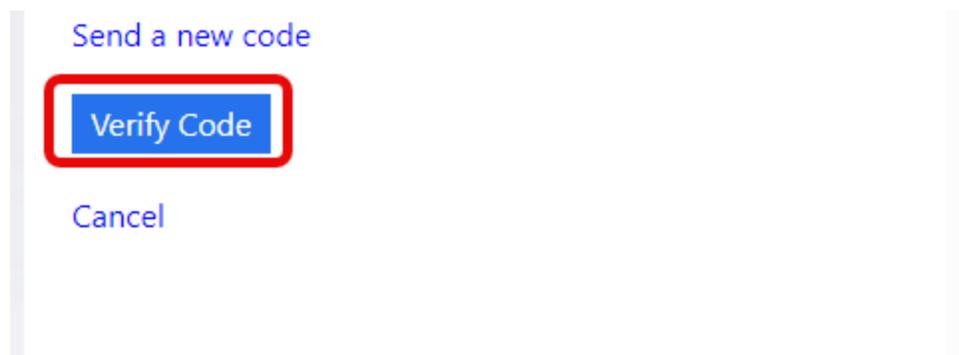
Select your desired mode of multi-factor authentication for your Family Portal account.

**Note:** The selection you make will hold for all future sign in attempts. For instance, if you selected email for your multi-factor authentication, any time you attempt to log in to your Family Portal account, you will receive your one-time verification code as an email. [For information on and for changing your multifactor authentication settings, please see your LEA Administrator.](#)

Once you select your preferred mode of contact for the Multi-factor authentication and entered the respective required information, click **Send Verification Code.**



A one-time verification code will be sent to you. Enter the Code and click **Verify Code.**



The following page will display with your SSO login. An email will be sent with the same information.

**Note:** Your SSO login will be in the format of 0-[your email address], as displayed in the images below.



FLDOE SSO LoginID for Family Test (Self-Registered)



☺ Reply Reply All Forward 📧 ⋮

Wed 11/13/2024 1:08 PM

----- Forwarded message -----

From: <DONOTREPLY@fldoe.org>  
Date: Tue, Nov 12, 2024 at 3:33 PM  
Subject: FLDOE SSO LoginID for Family Test (Self-Registered)  
To: <[redacted]>

Welcome!

You are receiving this email because a Florida Department of Education Single Sign-On (FLDOE SSO) account was created on your behalf. With one username and password, you will be able to access multiple FLDOE SSO resources from the Department's portal at (<https://fissoportal.fldoe.org/>) as authorized by your sponsoring organization.

Your username is: 0-[redacted].@gmail.com

Your password was set during your account registration.

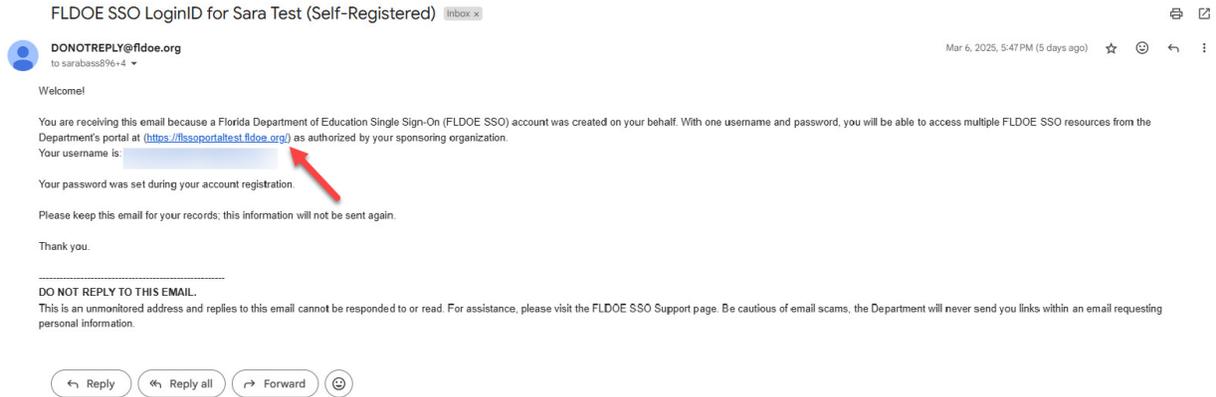
Please keep this email for your records; this information will not be sent again.

Thank you.

**DO NOT REPLY TO THIS EMAIL.**

This is an unmonitored address and replies to this email cannot be responded to or read. For assistance, please visit the FLDOE SSO Support page. Be cautious of email scams, the Department will never send you links within an email requesting personal information.

Click the link for the FLDOE SSO portal in the email



The FLDOE SSO home page will display. Click the **Guest Access** link.



Click the **Log In** button, then click **Hosted / Self-Registered login**.



FLORIDA DEPARTMENT OF  
**EDUCATION**  
fldoe.org

Log Out Menu

HOME ABOUT SUPPORT

## Guest Access

Guest accounts are for those **NOT** employed by a Florida public school district, college, university, or educational organization; and **NOT** K-12 students.

**Resources available to guest accounts are limited.**

If you are employed by a Florida public school district, college, university, or educational organization and you attend a college or university as a student, it's preferable to use your professional account over a guest account.

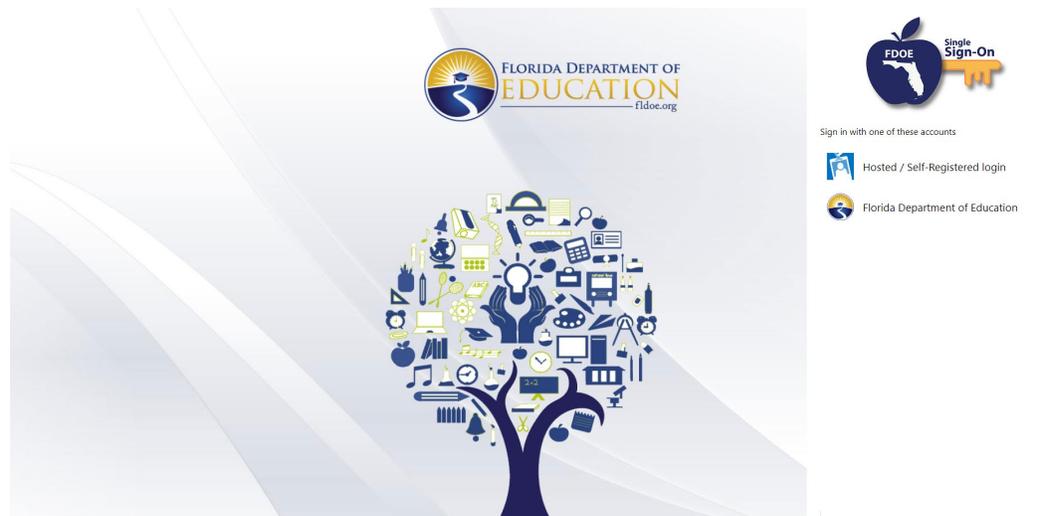
Click the Log-In button to enter your credentials or click the Create Account button to register for a guest account.

Guest Account Access

**LOG-IN**

**CREATE ACCOUNT**

The following page will display:



Click **Hosted / Self-Registered login**.



Enter the SSO Login provided to you. Click **Sign In**.

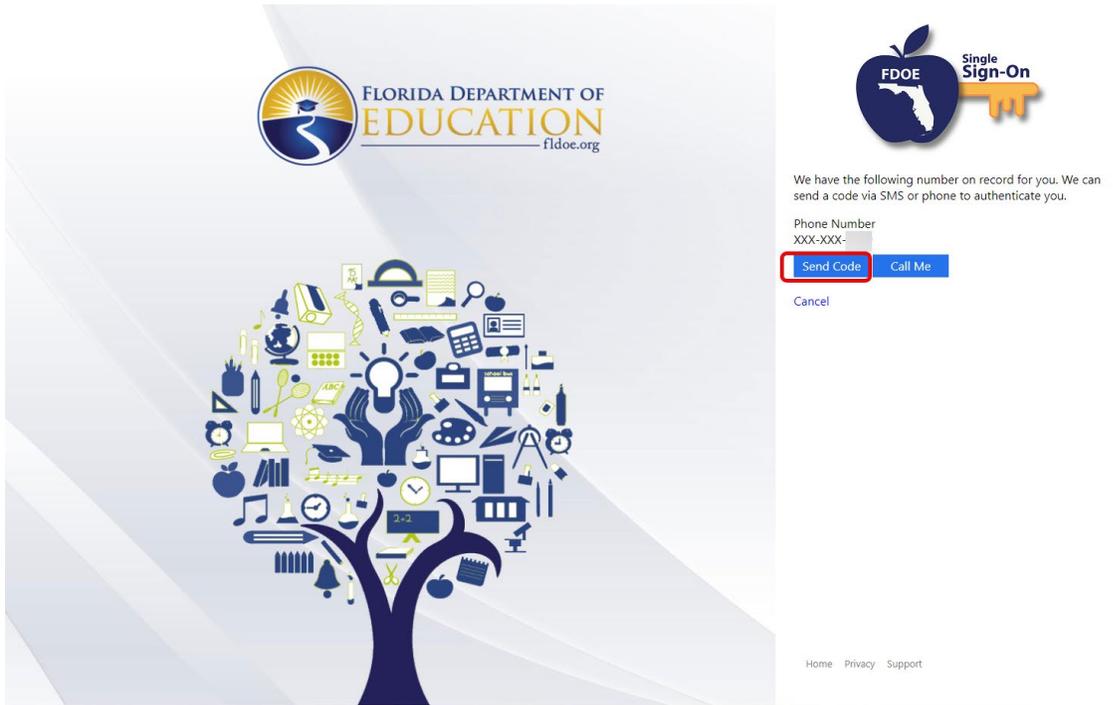


If you forgot your SSO login/username, click **Forgot Sign In Name**. An email will be sent to the email address provided during account creation.

Enter your password and click **Continue**.



You will now be prompted to send an authentication code to your selected mode of authentication. Click **Send Code**.



**Note:** The image above depicts the screen displayed for authentication through Phone Number. Authentication prompting screens for email and/or Authenticator/ TOTP app may vary.

Enter the code sent to you. Click **Verify Code**.



You will see the following page. Click the **Family Portal** button.

The screenshot shows the Florida Department of Education website. At the top left is the logo with the text "FLORIDA DEPARTMENT OF EDUCATION" and "fldoe.org". At the top right are links for "Log Out", "Menu", "HOME", "ABOUT", and "SUPPORT". A blue "MENU" button is on the left. The main heading is "Welcome Sara Test". Below it, text states: "The resources below are available for your use based on your role and permissions. To access the resource, click the tile below:". A green tile labeled "Family Portal" is highlighted with a red border. On the left, there are links for "User Profile" and "Applications".

The home page of the Family Portal will display.

The screenshot shows the "UAT Family Portal" home page. At the top left is the "DIVISION OF Early Learning" logo with the tagline "LEARN EARLY, LEARN FOR LIFE". At the top right is a "Sign Out" button. Below the header is a "Welcome back," message. A breadcrumb trail reads "Home > Family Portal > Family Profile". The main content area has three sections: 1. "Household at a Glance" with a table showing "Parents", "Other Household Members", "Children Needing Care", and "Total Household Size" (0). 2. "VPK Applications" with a message "There are no saved VPK applications associated with this account." and a "Create a new VPK application" button. 3. "School Readiness Applications" with a message "There are no saved School Readiness applications associated with this account." and a "Create a new School Readiness application" button.

Parents	Other Household Members	Children Needing Care	Total Household Size
			0

## Family Portal Returning User- Setting up Single Sign-On\*

Users who already have an existing account who are returning for the first time must register for an account with Single Sign-on to access the Family Portal.

For a guided demonstration of this process, check out our “Family Portal Signing Up and Signing In” video at the following url: [https://www.youtube.com/watch?v=\\_KexU97joF8](https://www.youtube.com/watch?v=_KexU97joF8)



Click the **Sign up** button to start the new account registration process and the following page will display:

Enter the email address associated with your existing Family Portal account and click the **Send Verification Code** button.



FLORIDA DEPARTMENT OF EDUCATION  
fldoe.org

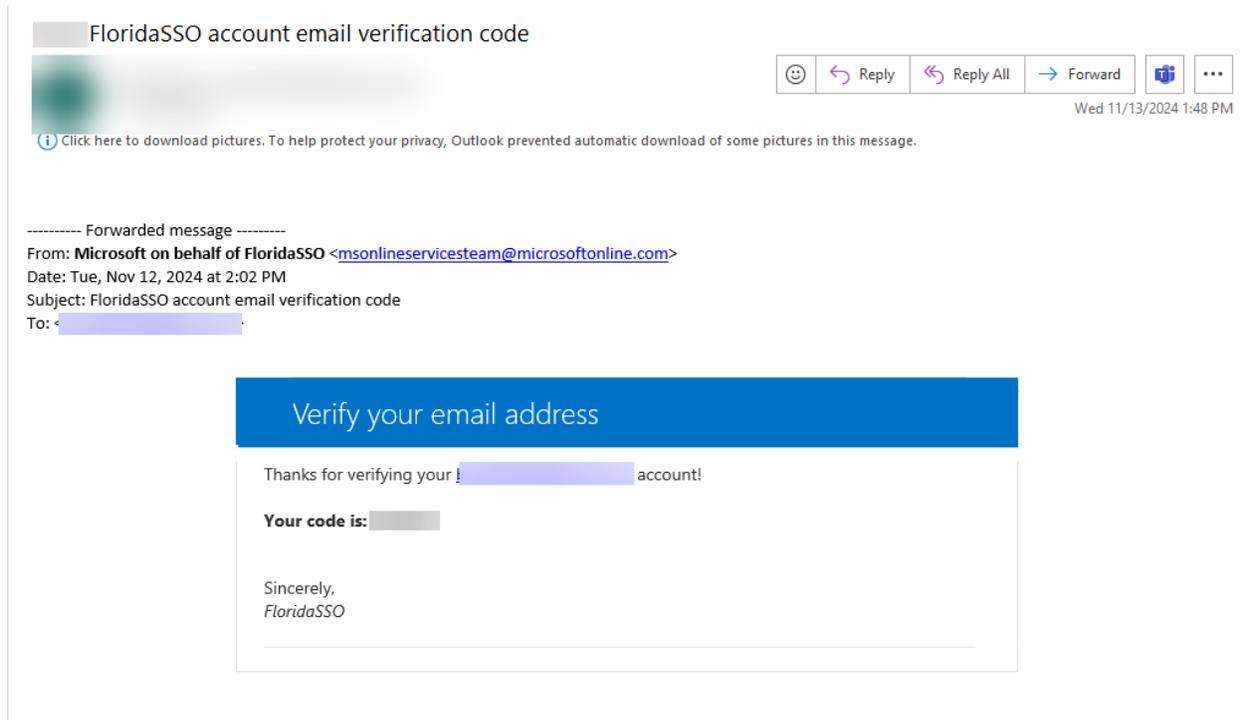
Single Sign-On

Please provide the following details.

validemail@test.com

Send verification code

The following email with your one-time verification code will be sent to the email address entered in the previous step:



FloridaSSO account email verification code

Click here to download pictures. To help protect your privacy, Outlook prevented automatic download of some pictures in this message.

----- Forwarded message -----  
From: Microsoft on behalf of FloridaSSO <msonlineserviceteam@microsoftonline.com>  
Date: Tue, Nov 12, 2024 at 2:02 PM  
Subject: FloridaSSO account email verification code  
To: [redacted]

Verify your email address

Thanks for verifying your [redacted] account!

Your code is: [redacted]

Sincerely,  
FloridaSSO

Enter the verification code in the text box that says "VerificationCode." Click **Verify code**.



FLORIDA DEPARTMENT OF EDUCATION  
fldoe.org

Single Sign-On

Please provide the following details.

Verification code has been sent. Please copy it to the input box below.

validemail@test.com

VerificationCode

Verify code Send new code

If you do not receive your one-time code, click **Send new code**, and a new one-time verification code will be sent to your email.



Please provide the following details.

Verification code has been sent. Please copy it to the input box below.

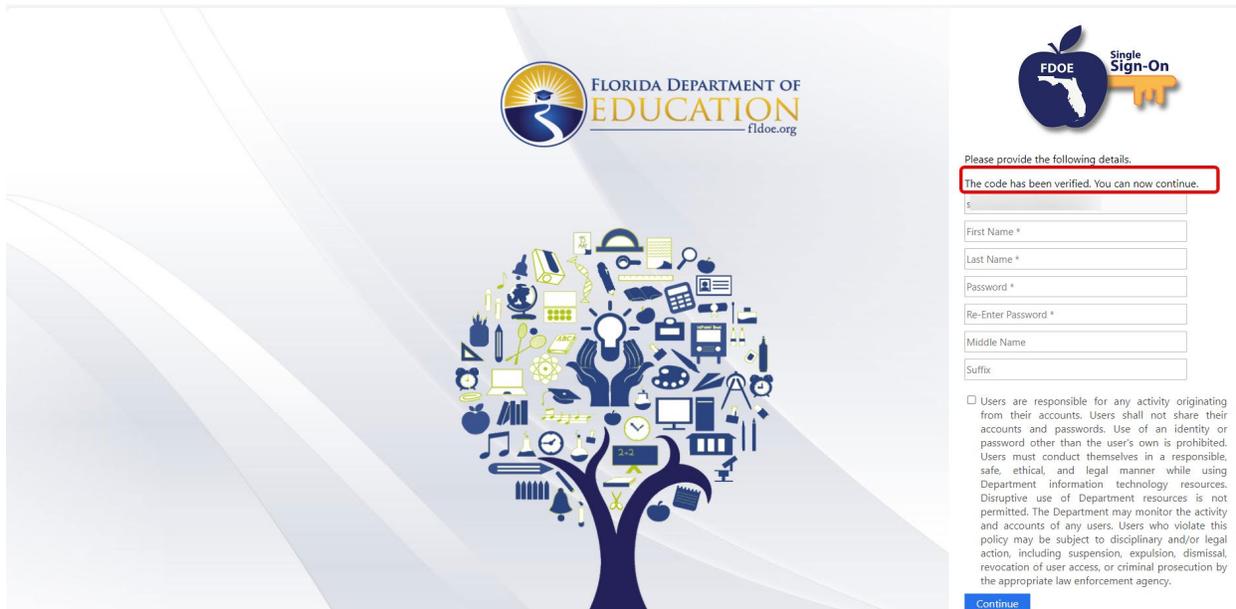
validemail@test.com

verificationCode

Verify code **Send new code**

**Note:** Though emails are expected within 1-2 minutes, in rare instances, please note that it may take up to 3-5 minutes to arrive. If you receive multiple codes in one verification attempt, the newest email will contain the valid code.

Once you have verified your code, “The code has been verified. You can now continue” will display.



FLORIDA DEPARTMENT OF EDUCATION fdoe.org

Single Sign-On

Please provide the following details.

**The code has been verified. You can now continue.**

First Name \*

Last Name \*

Password \*

Re-Enter Password \*

Middle Name

Suffix

Users are responsible for any activity originating from their accounts. Users shall not share their accounts and passwords. Use of an identity or password other than the user's own is prohibited. Users must conduct themselves in a responsible, safe, ethical, and legal manner while using Department information technology resources. Disruptive use of Department resources is not permitted. The Department may monitor the activity and accounts of any users. Users who violate this policy may be subject to disciplinary and/or legal action, including suspension, expulsion, dismissal, revocation of user access, or criminal prosecution by the appropriate law enforcement agency.

Continue

Complete the relevant remaining fields.

FLORIDA DEPARTMENT OF  
**EDUCATION**  
fldoe.org

Single Sign-On

Please provide the following details.

The code has been verified. You can now continue.

First Name \*

Last Name \*

Password \*

Re-Enter Password \*

Middle Name

Suffix

Users are responsible for any activity originating from their accounts. Users shall not share their accounts and passwords. Use of an identity or password other than the user's own is prohibited. Users must conduct themselves in a responsible, safe, ethical, and legal manner while using Department information technology resources. Disruptive use of Department resources is not permitted. The Department may monitor the activity and accounts of any users. Users who violate this policy may be subject to disciplinary and/or legal action, including suspension, expulsion, dismissal, revocation of user access, or criminal prosecution by the appropriate law enforcement agency.

Continue

Fields containing an asterisk (\*) indicate that a field is required. The following fields are required:

- First Name
- Last Name
- Password
- Re-enter password

Fields not containing an asterisk (\*) are not required, and may not be applicable. The following fields are not required:

- Middle Name
- Suffix

Passwords must be at least 8 characters in length and contain at least one of each character type:

- Uppercase letter
- Lowercase letter
- Number
- Special Character

If your password does not contain one of each of the listed character types, the following error will display above the password field:

Last Name \*

The password must contain all of the following:

- a lowercase letter
- an uppercase letter
- a number
- a special character

•••

Once all the required fields have been completed, review the acceptable use policy. Check the box to indicate you have read and understood the information provided to you.

Test

Test

••••••••

••••••••

Middle Name

Suffix

**Acceptable Use Policy**

This policy applies to all users of Florida Department of Education information technology resources, whether affiliated with the Department or not.

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Continue

Cancel

Click **Continue**.

Test

Test

.....

.....

Middle Name

Suffix

**Acceptable Use Policy**  
This policy applies to all users of Florida Department of Education information technology resources, whether affiliated with the Department or not.

Users are responsible for any activity originating from their accounts. Users shall not share their accounts and passwords. Use of an identity or password other than the user's own is prohibited. Users must conduct themselves in a responsible, safe, ethical, and legal manner while using Department information technology resources. Disruptive use of Department resources is not permitted. The Department may monitor the activity and accounts of any users. Users who violate this policy may be subject to disciplinary and/or legal action, including suspension, expulsion, dismissal, revocation of user access, or criminal prosecution by the appropriate law enforcement agency.

**Continue**

[Cancel](#)

The following page will display:



This page indicates the three options available to you for your multi-factor authentication.

- 1) Phone Number

- 2) Email
- 3) Authenticator/ TOTP app

Select your desired mode of multi-factor authentication for your Family Portal account.

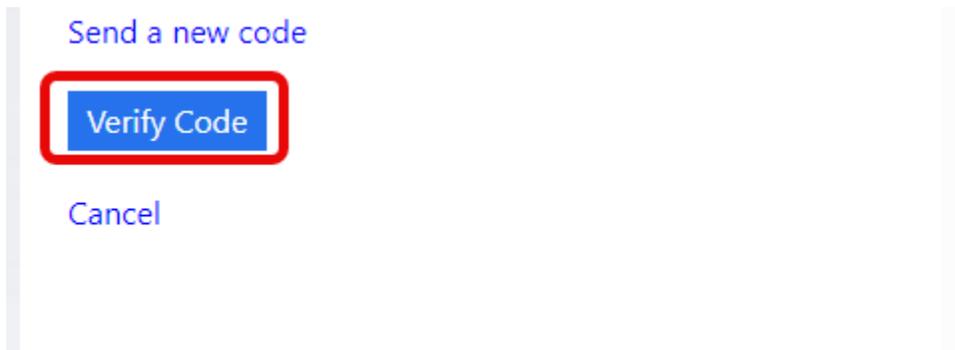
**Note:** The selection you make will hold for all future sign in attempts. For instance, if you selected email for your multi-factor authentication, any time you attempt to log in to your family portal account, you will receive your one-time verification code as an email. For information on and for changing your multifactor authentication settings, please see your LEA Administrator.



Once you have selected your preferred mode of contact for the multi-factor authentication and entered the respective required information, click **Send Code.**



A one-time verification code will be sent to you. Enter the Code and click **Verify Code.**



The following page will display with your SSO login. An email will be sent with the same information.



FLDOE SSO LoginID for Family Test (Self-Registered)

☺   ↩ Reply   ↩ Reply All   → Forward   📧   ⋮

Wed 11/13/2024 1:08 PM

----- Forwarded message -----

From: <DONOTREPLY@fldoe.org>  
Date: Tue, Nov 12, 2024 at 3:33 PM  
Subject: FLDOE SSO LoginID for Family Test (Self-Registered)  
To: <[redacted]>

Welcome!

You are receiving this email because a Florida Department of Education Single Sign-On (FLDOE SSO) account was created on your behalf. With one username and password, you will be able to access multiple FLDOE SSO resources from the Department's portal at (<https://flssoportal.fldoe.org/>) as authorized by your sponsoring organization.

Your username is: 0-[redacted]:@gmail.com

Your password was set during your account registration.

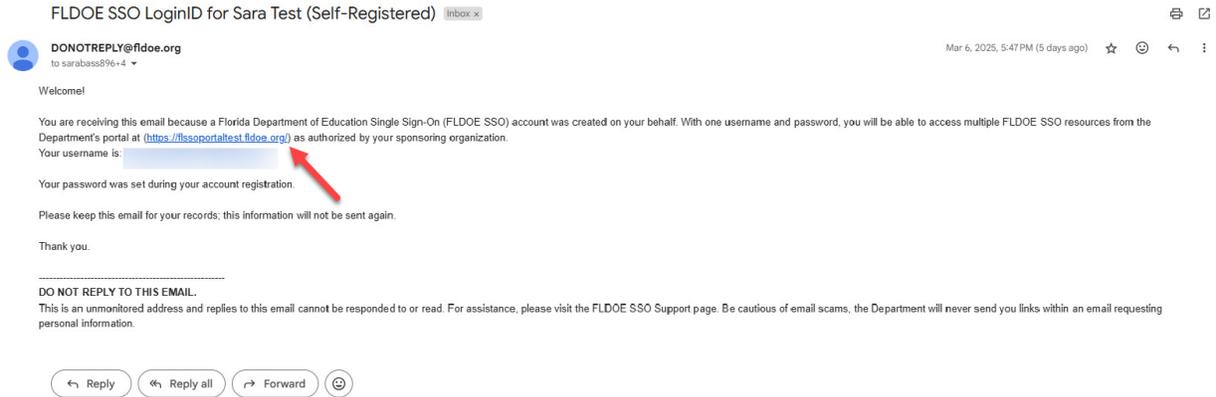
Please keep this email for your records; this information will not be sent again.

Thank you.

-----  
**DO NOT REPLY TO THIS EMAIL.**

This is an unmonitored address and replies to this email cannot be responded to or read. For assistance, please visit the FLDOE SSO Support page. Be cautious of email scams, the Department will never send you links within an email requesting personal information.

Click the link for the FLDOE SSO portal in the email



The FLDOE SSO home page will display. Click the **Guest Access** link.



Click the **Log In** button, then click **Hosted / Self-Registered login**.



## Guest Access

Guest accounts are for those **NOT** employed by a Florida public school district, college, university, or educational organization; and **NOT** K-12 students.

**Resources available to guest accounts are limited.**

If you are employed by a Florida public school district, college, university, or educational organization and you attend a college or university as a student, it's preferable to use your professional account over a guest account.

Click the Log-In button to enter your credentials or click the Create Account button to register for a guest account.

Guest Account Access

**LOG-IN**

**CREATE ACCOUNT**

FLORIDA DEPARTMENT OF EDUCATION fldoe.org

Single Sign-On

Sign in with one of these accounts

- Hosted / Self-Registered login**
- Florida Department of Education
- Alachua County School District
- Baker County School District
- Bradford County School District
- Brevard County School District
- Broward County School District
- Charlotte County School District
- Citrus County School District
- Clay County School District

Enter the SSO Login provided to you. Click **Sign In**.

FLORIDA DEPARTMENT OF  
**EDUCATION**  
fldoe.org

Sign in using your username

0- emailaddress@mail.com

Keep me signed in

**Sign in**

[Forgot Sign In Name](#) [Cancel](#)

[Home](#) [Privacy](#) [Support](#)

If you forgot your SSO login/username, click **Forgot Sign In Name**. An email will be sent to the email address provided during account creation.

Enter your password and click **Continue**.

FLORIDA DEPARTMENT OF  
**EDUCATION**  
fldoe.org

Please enter your password.

.....

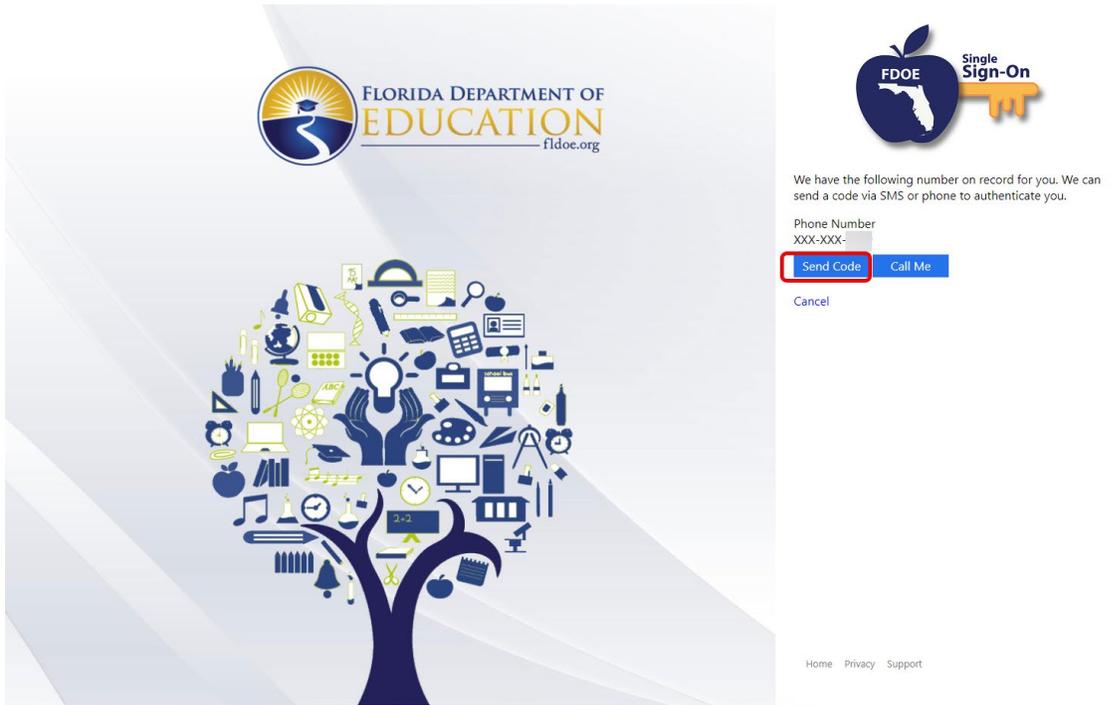
**Continue**

[Forgot Password?](#)

[Cancel](#)

[Home](#) [Privacy](#) [Support](#)

You will now be prompted to send an authentication code to your selected mode of authentication. Click **Send Code**.



**Note:** The image above depicts the screen displayed for authentication through Phone Number. Authentication prompting screens for email and/or Authenticator/ TOTP app may vary.

Enter the code sent to you. Click **Verify Code**.



You will see the following page. Click the **Family Portal** button.

The home page of the Family Portal will display.

**Household at a Glance**

Parents	Other Household Members	Children Needing Care	Total Household Size
Del Test Parent (adult, female)	Del Test Other Member (adult, female)	Del Test Child 1 (18M, female, age 5) Del Test Child 2 (18M, male, age 5) Del Test Child 3 (18M, male, age 5) Del Test Child 4 (18M, female, age 5)	6

**VPK Applications**

There are no saved VPK applications associated with this account. Click the Create a new VPK application button to create a new VPK application.

[Create a new VPK application](#)

**School Readiness Applications**

Parent Name	Confirmation Number	Status	Last Updated	Action	View Application
DEL Test Parent	SR_00148947	ready	10/20/24	<a href="#">View application</a>	<a href="#">Download Application</a>
DEL Test Parent	SR_00148946	ready	10/20/24	<a href="#">View application</a>	<a href="#">Download Application</a>
DEL Test Parent	SR_00148935	ready	10/20/24	<a href="#">View application</a>	<a href="#">Download Application</a>

**School Readiness Funding**

Child Name	Screenings and Assessments	EY Number	Status	Enrollment Status	Provider Name	Payment Certificate
DEL Test Child 1	<a href="#">Screening History</a>	EY_00109993	Eligible	-	-	-
DEL Test Child 2	<a href="#">Screening History</a>	EY_00109994	Eligible	-	-	-
DEL Test Child 3	<a href="#">Screening History</a>	EY_00109992	Pending Eligibility	-	-	-
DEL Test Child 4	<a href="#">Screening History</a>	EY_00109996	Pending Eligibility	-	-	-

[Update Eligibility](#)

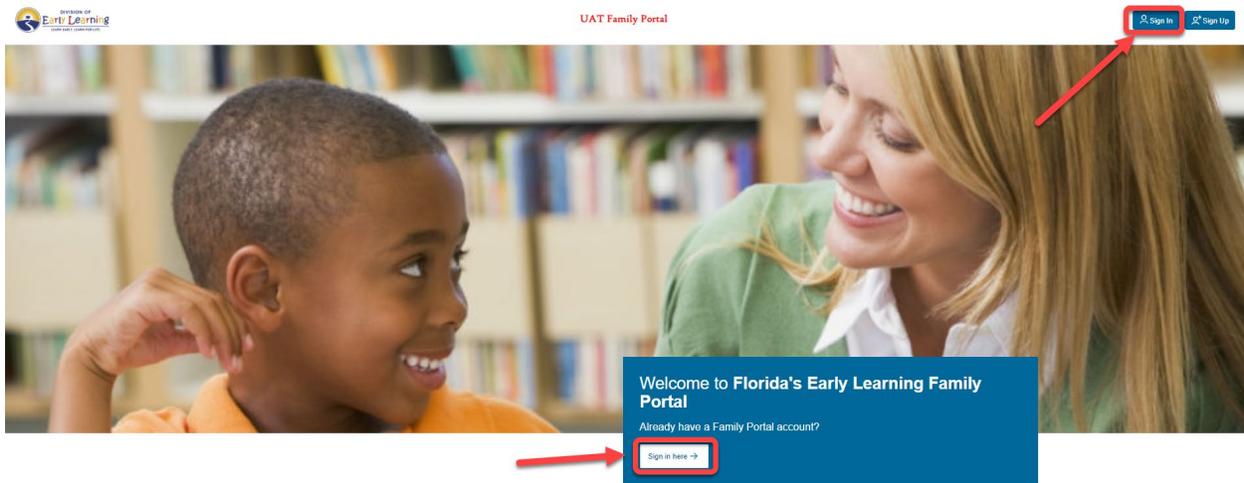
**Helpful Links**

Baby Navigator - Resources to support your child's learning and development. The Division of Early Learning invites you to join Baby Navigator to access resources that will help you support your child's early learning. Join Baby Navigator from pregnancy until your baby is 18 months old. Everything is free for families. To join Baby Navigator, text ELC to 855-962-2301 or scan our QR code.

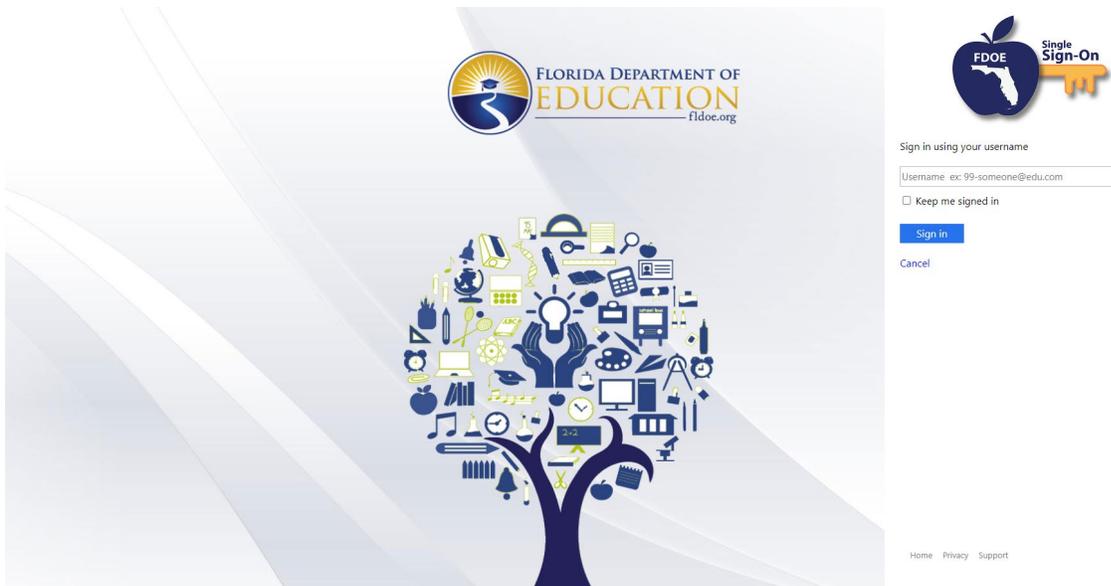
## Returning User with Single Sign-on

### Log on Process

Family Portal users who have already created a Family Portal account can log on from the Family Portal welcome page by clicking one of the **Sign in** buttons.



Clicking either button will direct to Single Sign-On. The Following page will display:



Enter the username you received during the Single Sign-On set up process. Click **Sign in**.



The Password page will display. Enter your password and click **Continue**.



You will be prompted to send a one-time verification code at your established multi-factor authenticator. Click **Send Code**.



**Note:** Phone number was chosen as the multifactor authenticator for this account. Screens pertaining multifactor authentication through email and/or authenticator application may differ.

A code will be sent to you. Enter the code you receive and click **Verify Code**



The home page of the Family Portal will display.

The screenshot shows the UAT Family Portal interface. At the top left is the Florida Department of Education logo with the text 'Division of Early Learning'. To the right is the text 'UAT Family Portal' and a 'Logout' button. Below the header, a welcome message reads 'Welcome back, sara.bassoff-familyprod@gmail.com'. A breadcrumb trail shows 'Home > Family Portal > Family Profile'. The main content area is titled 'Household at a Glance' and includes a table with columns for 'Parents', 'Other Household Members', 'Children Needing Care', and 'Total Household Size'. Below this are sections for 'VPK Applications' and 'School Readiness Applications', each with a 'Create a new' button. At the bottom is a 'Helpful Links' section featuring 'Baby Navigator'.

## Password Recovery

If the Family Portal user cannot remember the password or wishes to change their password, the user will need to follow the forgot password process in the FDOE Single Sign-On Portal.

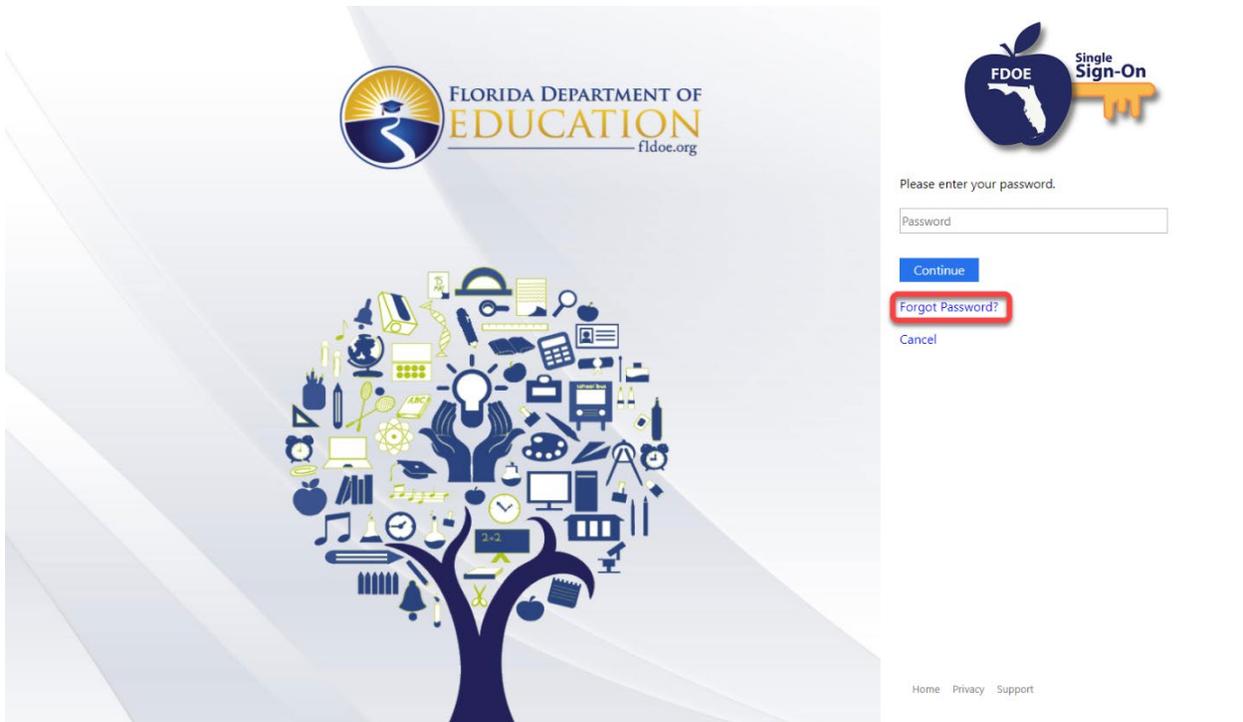
To begin the forgot password process in Single Sign-On, click one of the **Sign In** buttons on the Family Portal home page.

This screenshot shows the same Family Portal home page as above, but with a large image of a smiling woman and child overlaid. A blue overlay box in the bottom right corner contains the text 'Welcome to Florida's Early Learning Family Portal' and 'Already have a Family Portal account?'. A red box highlights the 'Sign in here ->' link within this overlay. Another red box highlights the 'Sign In' button in the top right corner of the page header. A red arrow points from the 'Sign in here ->' link to the 'Sign In' button.

The FDOE Single Sign-On sign in page will display. Enter your SSO username. Click **Sign In**.



Click the **Forgot Password?** link.



Verify the email address listed. Click **Send verification code**.

The screenshot shows the Florida Department of Education (FDOE) Single Sign-On verification interface. On the left, there is a large graphic of a tree where the leaves are represented by various educational icons like a lightbulb, microscope, and books. The FDOE logo is at the top center. On the right, there is a text input field for the email address, a "Send verification code" button (highlighted with a red box), a "Continue" button, and a "Cancel" link. At the bottom right, there are links for "Home", "Privacy", and "Support".

An email will be sent to the email address listed. Enter the code you received and click **Verify code**.

The screenshot shows an email titled "FloridaSSO account email verification code". The sender is "Microsoft on behalf of FloridaSSO <msonlineserviceteam@microsoftonline.com>". The email body contains a blue header "Verify your email address" and a message: "Thanks for verifying your [redacted] account!". Below this, it says "Your code is: [redacted]". The email is signed "Sincerely, FloridaSSO". The email interface includes standard Outlook controls like "Reply", "Reply All", "Forward", and a timestamp of "Wed 11/13/2024 1:48 PM".



Once the code has been verified, click **Continue**.



Enter and reenter your new password. Click **Continue**.



You will be prompted to send a code for multi-factor authentication. Click **Send Code**.

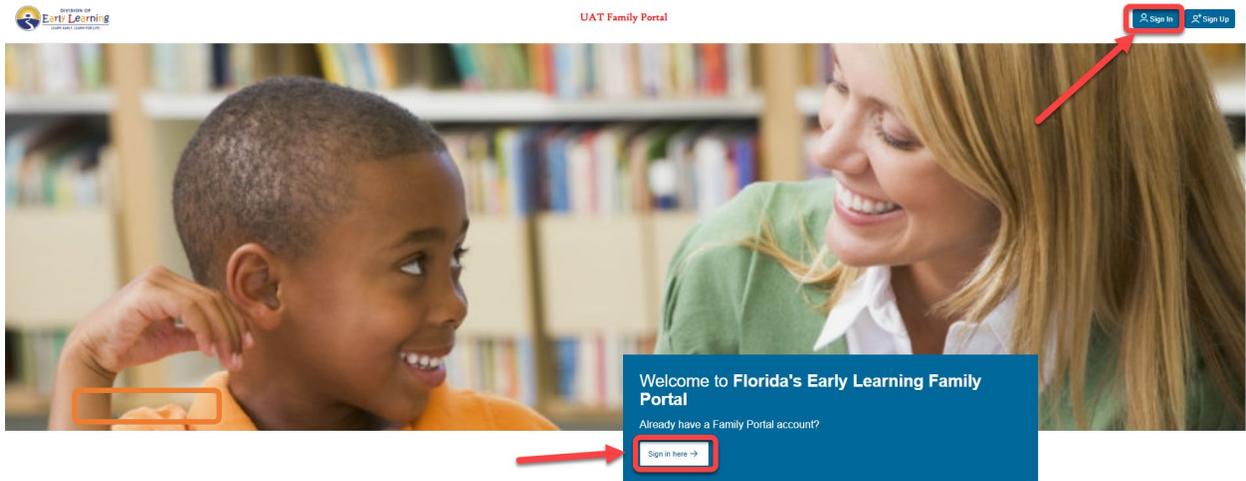


Enter the code sent to you. Click **Verify code**.

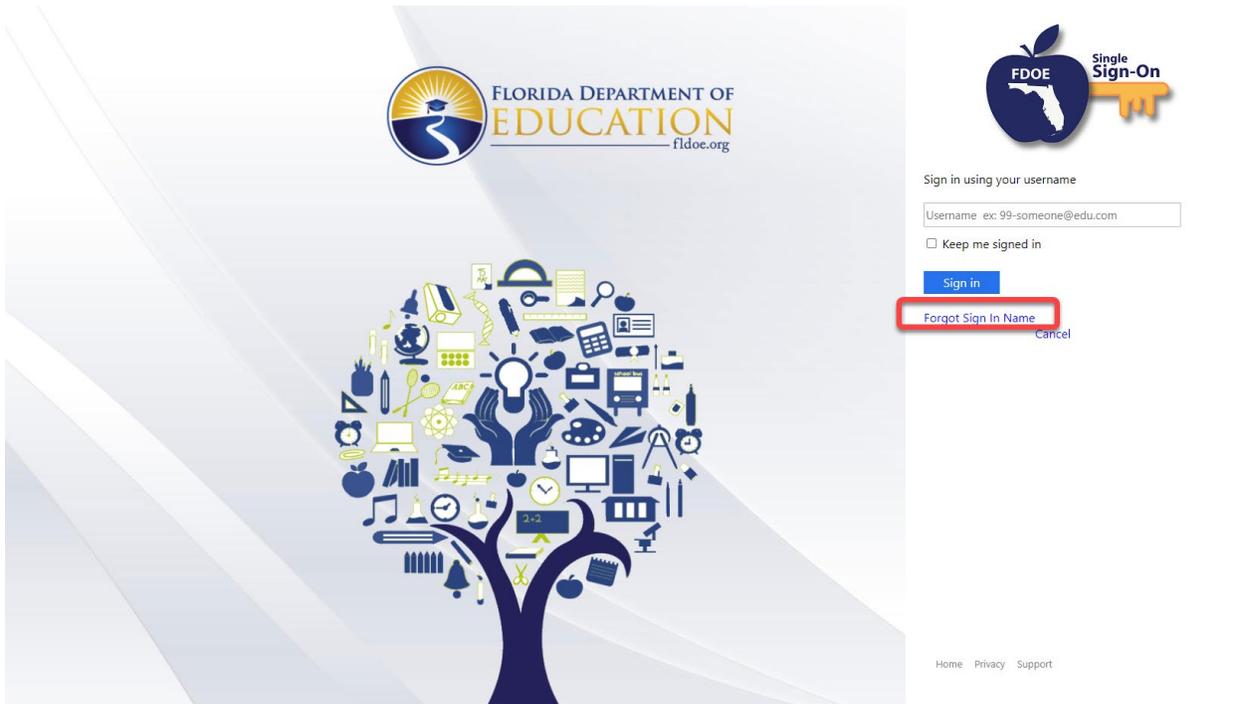


### Forgot Sign In Name Process

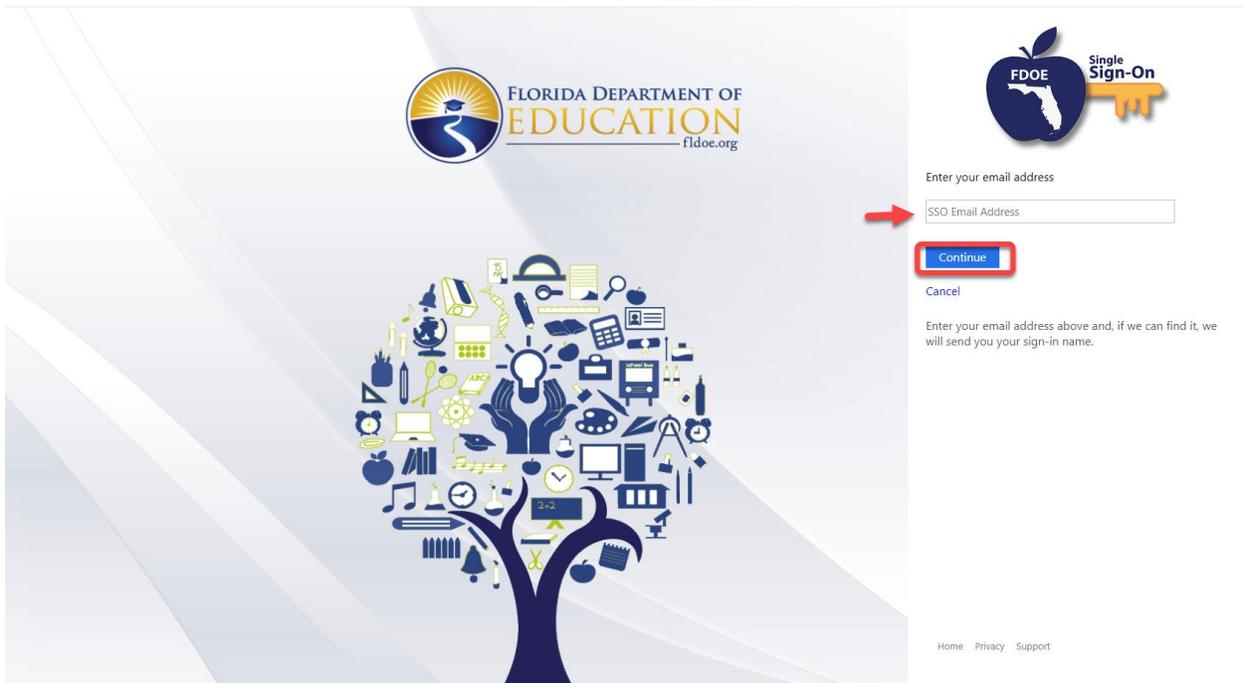
To begin the Forgot Sign In Name process in Single Sign-On, click one of the **Sign In** buttons on the Family Portal home page.



The FDOE Single Sign-On sign in page will display. Click **Forgot Sign In Name**.



Enter your SSO email address. Click **Continue**.



The following message will display. If a sign in name associated with the email address provided is found, an email will be sent.



If a sign-in name associated with this email address can be found, we will send an email containing that sign-in name.

Please give a few minutes for the email to arrive and don't forget to check your junk mail in case it is delivered there.

Home Privacy Support

Florida DOE: Registered SSO Usernames

[Redacted]

☺ Reply Reply All Forward 📧 ⋮

Thu 11/14/2024 2:28 PM

-----  
From: <[DONOTREPLY@fldoe.org](mailto:DONOTREPLY@fldoe.org)>  
Date: Thu, Nov 14, 2024 at 2:26 PM  
Subject: Florida DOE: Registered SSO Usernames  
To: <[Redacted]>

Per your request, we have provided the username(s) registered with our service.

Registered username(s):

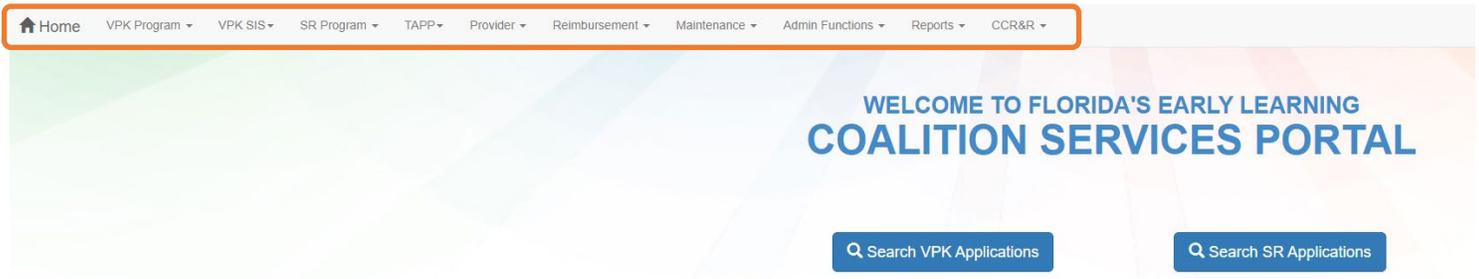
- Family [Redacted] ([0-t \[Redacted\]@gmail.com](mailto:[Redacted]@gmail.com)): Self-Registered

If you didn't request this information, please change your password, and report it to your administrator.

Thank you for choosing our services.

## Coalition Services Portal Main Page Navigation

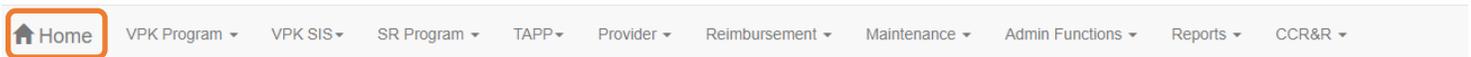
The Navigation Bar is near the top of the page.



**Note:** The menus and submenus available to a Coalition user is dependent on the user's role.

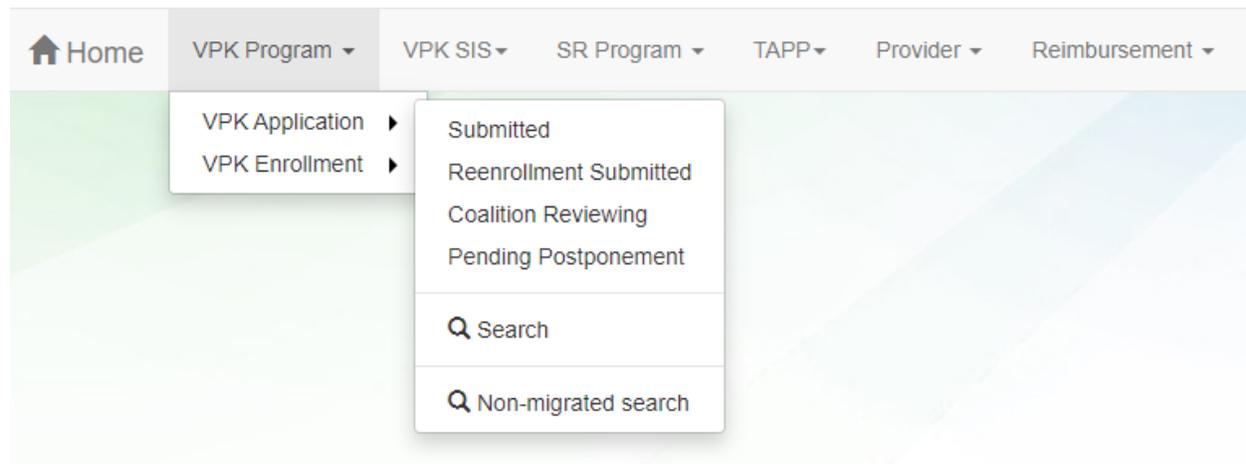
### Home Button

The **Home** button will take the coalition user to the Coalition Services Portal main page.



### VPK Program Tab

Click the *VPK Program* tab to activate the dropdown menu.

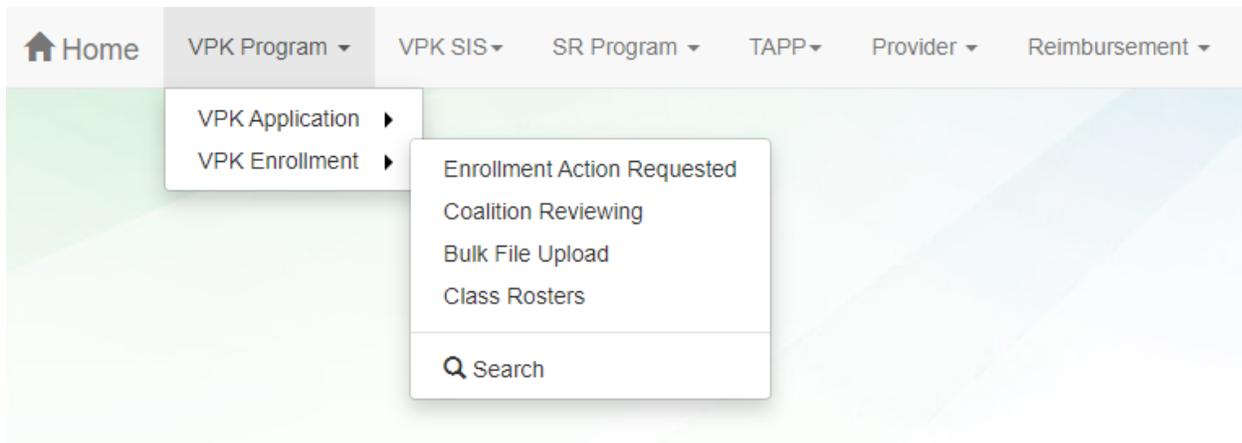


**VPK Application > Submitted** – Display all active VPK applications in Submitted status.

**VPK Application > Reenrollment Submitted** – Search for all VPK reenrollment applications in submitted status.

**VPK Application > Coalition Reviewing** – Search for all submitted VPK applications marked **Coalition Reviewing**.

**VPK Application > Pending Postponement** – Search for all VPK pending postponement applications.



**VPK Enrollment > Enrollment Action Requested** – Display all VPK enrollments that need coalition action.

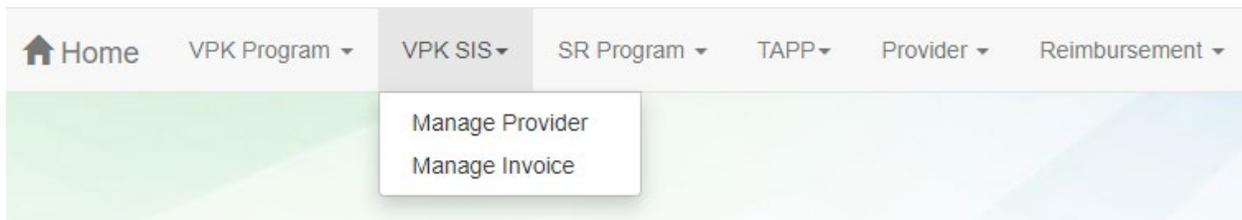
**VPK Enrollment > Coalition Reviewing** – Display VPK enrollments that need to be approved or rejected.

**VPK Enrollment > Bulk File Upload** – Upload VPK enrollment data for providers.

**VPK Enrollment > Class Rosters** – Allow a search for a provider’s class roster.

## VPK SIS Tab

Click the *VPK SIS* tab to activate the dropdown menu.

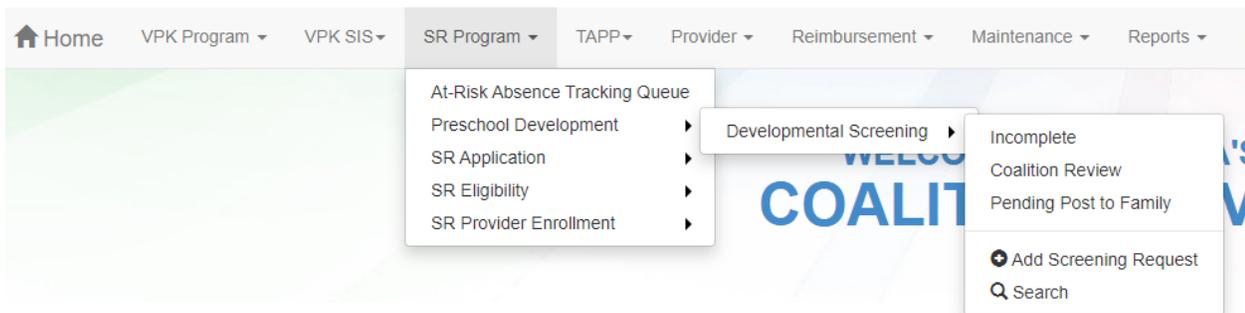
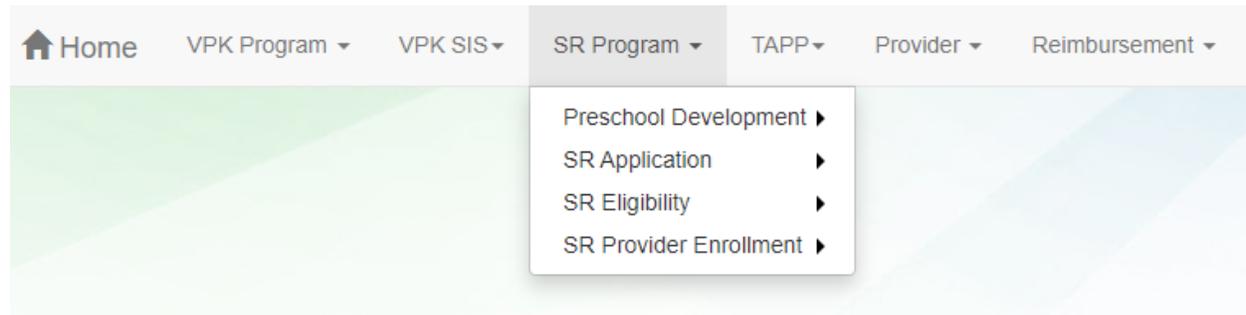


**VPK SIS > Manage Provider** – Add or edit existing VPK SIS providers.

**VPK SIS > Manage Invoice** – Create, manage, and process a VPK SIS invoice.

## SR Program Tab

Click the *SR Program* tab to activate the dropdown menu.



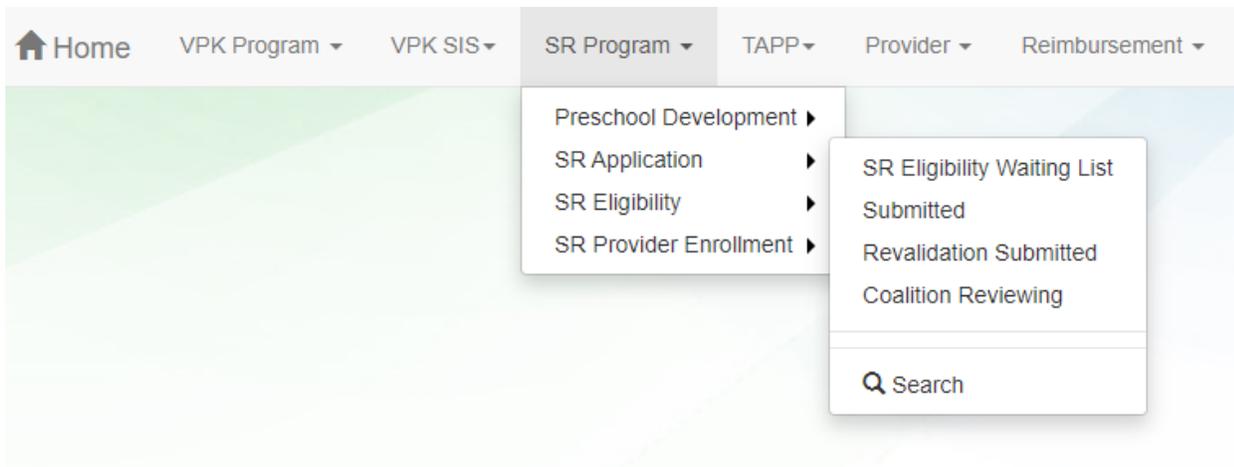
**Preschool Development > Developmental Screening** – Display all outstanding screening requests to be completed.

**Preschool Development > Developmental Screening > Incomplete** – Display the screenings that are incomplete.

**Preschool Development > Developmental Screening > Coalition Review** – Display all outstanding screening responses to be processed.

**Preschool Development > Developmental Screening > Pending Post to Family** – Display all approved screenings that need to be posted to the Family Portal.

**Preschool Development > Developmental Screening > Add Screening Request** – Allows coalition to initiate a screening.

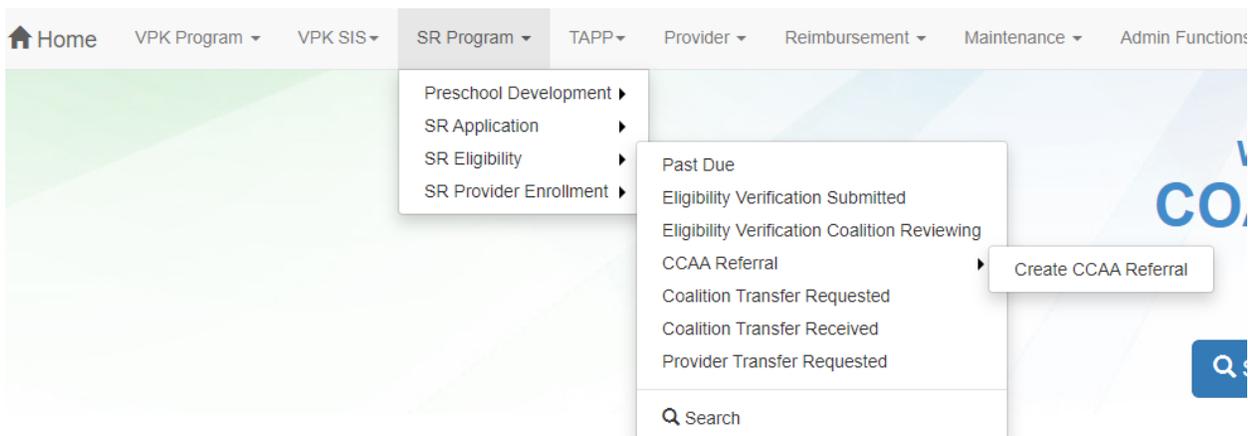


**SR Application > SR Eligibility Waiting List** – Display all applications in **Active** status that are awaiting funding notification. This was formerly the Waiting List that contained **Active-Waiting** applications.

**SR Application > Submitted** – Display all SR applications in **Submitted** status.

**SR Application > Revalidation Submitted** – Display all SR applications in **Revalidation Submitted** status.

**SR Application > Coalition Reviewing** – Display all SR applications awaiting coalition action.



**SR Eligibility > Past Due** – Display eligibility verifications with a **Past Due** status.

**SR Eligibility > Eligibility Verification Submitted** – Display eligibility verifications with a **Submitted** status.

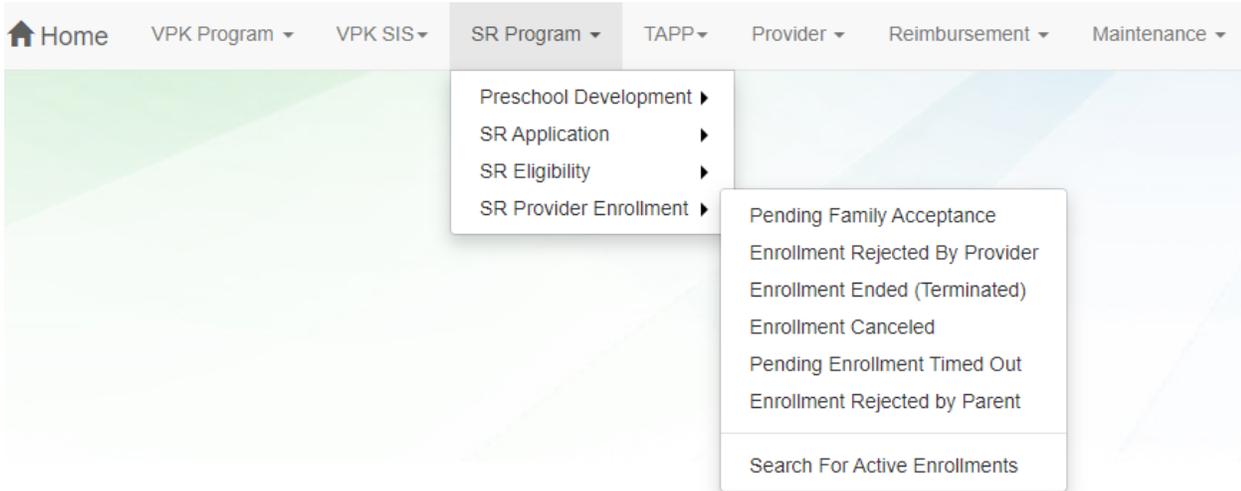
**SR Eligibility > Eligibility Verification Coalition Reviewing** – Display eligibility verifications with a **Coalition Reviewing** status.

**SR Eligibility > CCAA Referral > Create CCAA Referral** – Create a referral by completing an intake form.

**SR Eligibility > Coalition Transfer Request** – Display requests to transfer eligibility out of and into the coalition.

**SR Eligibility > Coalition Transfer Received** – Display requests to transfer eligibility out of the coalition or to another provider within the coalition with a status of **Transfer Received**.

**SR Eligibility > Provider Transfer Requested** – Display requests to transfer eligibility to another provider.



**SR Program > SR Provider Enrollment** - Display enrollments awaiting action from the Parent, Provider and/or Coalition:

- Pending Family Acceptance
- Enrollment Rejected By Provider
- Enrollment Ended
- Enrollment Canceled
- Pending Enrollment Timed Out (**NOTE:** after 5 days for the provider)
- Enrollment Rejected by Parent

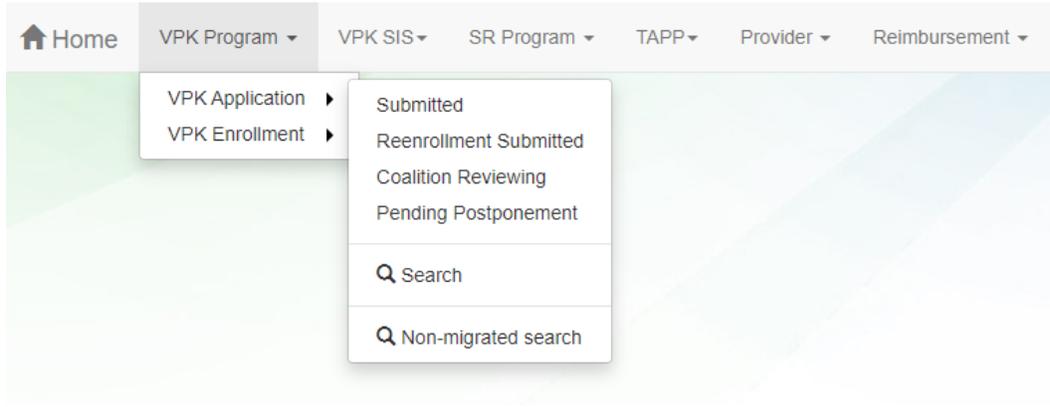
Click Here For Filtering Tips

Show 10 entries Clear All Filters Search:

Child Name	Eligibility Verification Number	Provider Site	Status	Days In Status	Parent(s)	Zipcode	Billing Group	Eligibility Code	Care Level	Eligibility Start Date	Redetermination Due Date	Acknowledge
	<a href="#">EV_0000160719</a>	Boys & Girls Clubs of Bay County (Margaret K. Lewis EL.)	Rejected by Provider	196		32401	BG8	SRMT	SCH	07/14/2021	07/14/2022	<a href="#">Acknowledge</a>
	<a href="#">EV_0000611083</a>	Little Butterflies Childcare and Learning Center	Rejected by Provider	174		32401	BG1	11	TWOYR	08/24/2021	02/25/2022	<a href="#">Acknowledge</a>
	<a href="#">EV_0000607314</a>	Little Butterflies Childcare and Learning Center	Rejected by Provider	174		32401	BG1	11	INF	08/24/2021	02/25/2022	<a href="#">Acknowledge</a>
	<a href="#">EV_0000647406</a>	BEACH KIDS ACADEMY	Rejected by Provider	167		32408	BG8	ECON	TWOYR	07/21/2021	07/21/2022	<a href="#">Acknowledge</a>

**NOTE:** Clicking the Eligibility Verification Number link will open the child's eligibility details. Clicking **Acknowledge** will remove the record from this queue.

The **Search** function allows a coalition user to quickly search for VPK child applications/enrollments or School Readiness applications/eligibilities in any status.



VPK Application Search

By Person Info

Person Type  Child  Primary Parent

First Name   
(starts with)

Last Name   
(starts with)

Date of Birth

Parent Phone Number

By Application Info

Certificate Number

County for Services

Program Year

VPK Session

Record Phase  VPK Application  VPK Reenrollment

Application Status

VPK Enrollment Search

By Person Info

Person Type  Child  Primary Parent

First Name   
(starts with)

Last Name   
(starts with)

Date of Birth

Parent Phone Number

By Enrollment Info

Enrollment ID

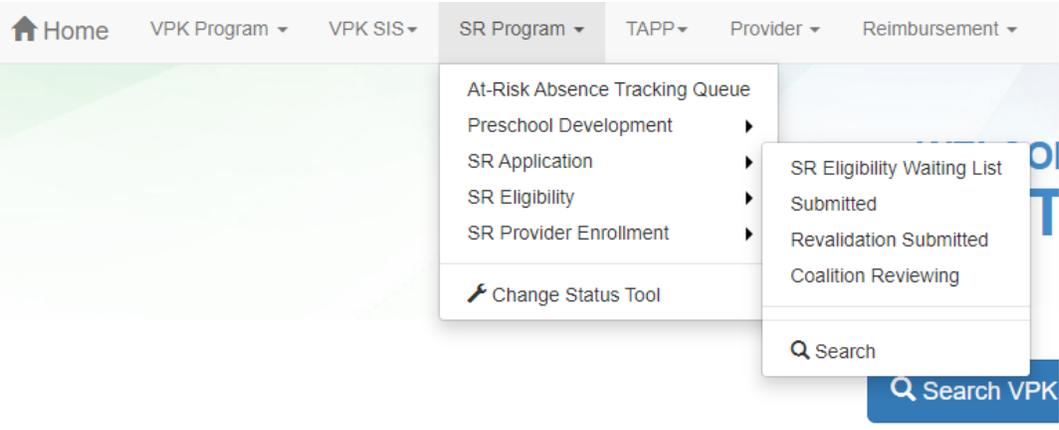
Certificate Number

County for Services

Program Year

VPK Session

Enrollment Status



Search For A School Readiness Application

Search Type:  Child  Parent

First Name:  (starts with) Last Name:  (starts with)

SSN:  Zip:

County:  Confirmation Number:

Child Status:  Application Status:

Parent Phone Number:

Search For A School Readiness Eligibility Verification

Coalition:  Priority:

Eligibility Verification Number:

Household Process Code:

Household Status Code:

Child Status Code:

Include Past Due?  Yes  No

Parent Name: First Name  (starts with) Last Name  (starts with)

Child Name: First Name  (starts with) Last Name  (starts with)

Child Age:  to

Child Date of Birth:  to

Funding Type:  SR  Local

CCAA:  Yes  No

Assigned Counselor:

Assigned Date:  to

County:  Zip Code:

Last Updated Date:  to

Coalition Transfer:  Requested  In  Out

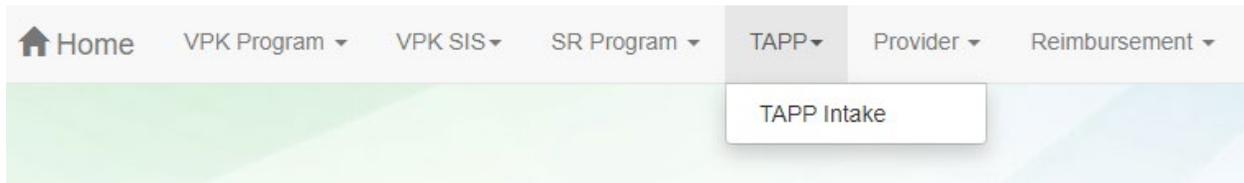
Family Requested for Provider Transfer:  Yes  No

Parent Phone Number:

**NOTE:** To ensure accurate searches, click the work queues dropdown menu when changing search terms (child name, confirmation numbers, etc.) or starting a new search. Do not use the Back button on the internet browser.

## TAPP Tab

Click the *TAPP* tab and then click **TAPP Intake** to capture Teenage Parent Program (TAPP) information.



## Provider Tab

Click the *Provider* tab to display a dropdown menu. More information on *Provider* tab options is in the “Provider Portal User Guide.”

## Reimbursement Tab

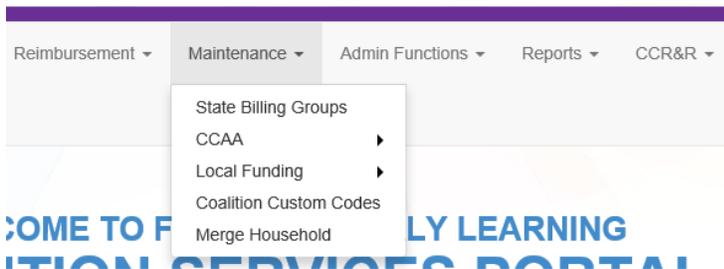
Click the *Reimbursement* tab to display a dropdown menu. More information on *Reimbursement* tab options is in the “Provider Portal User Guide.”

## Maintenance Tab

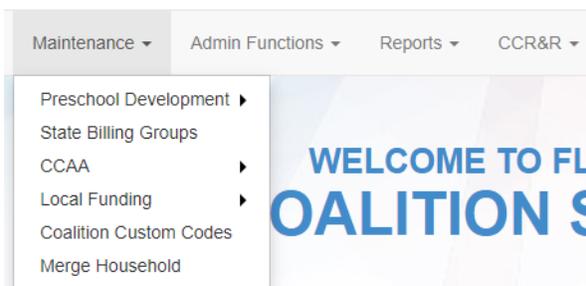
Click the *Maintenance* tab to display a dropdown menu.

**State Billing Groups** – Display available billing groups.

**CCAA > Referring Agencies** – Display local referring agencies in the coalition.



**Coalition Custom Codes** – Create custom codes for case notes, status records, and provider notes.



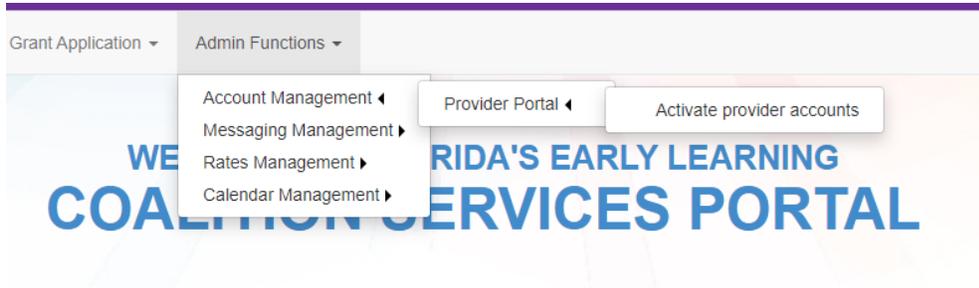
**Local Funding > Local Funding Agencies** – Display local and match funders within the coalition.

**Local Funding > Local Funding County Settings** – Display counties in a coalition with local funding opportunities for families that do not qualify for SR funding.

## Account Management Tab

Coalition User Managers and DEL Admins will have access to the Account Management screen. Coalition User Managers will have no other access in the system. The Coalition Manager Role will be assigned to a user (requires an email address not currently active in EFSM) via a Cherwell ticket submitted to Production Support. The user account will not have to be registered. Once created, an email is sent from [DONOTREPLY@oel.myflorida.com](mailto:DONOTREPLY@oel.myflorida.com) to the new email address on the Cherwell ticket with a password to login to the Coalition Portal as the Coalition User Manager.

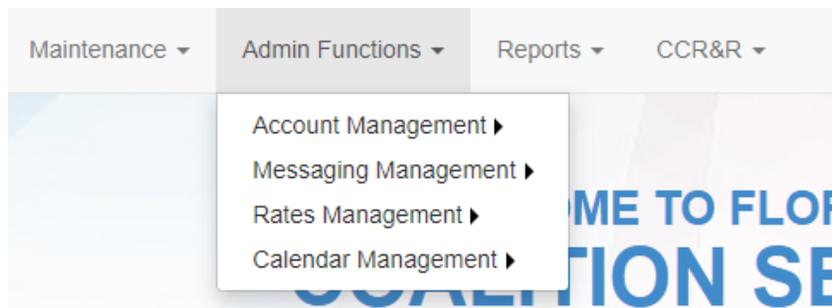
**Account Management > Provider Portal > Activate provider accounts.**



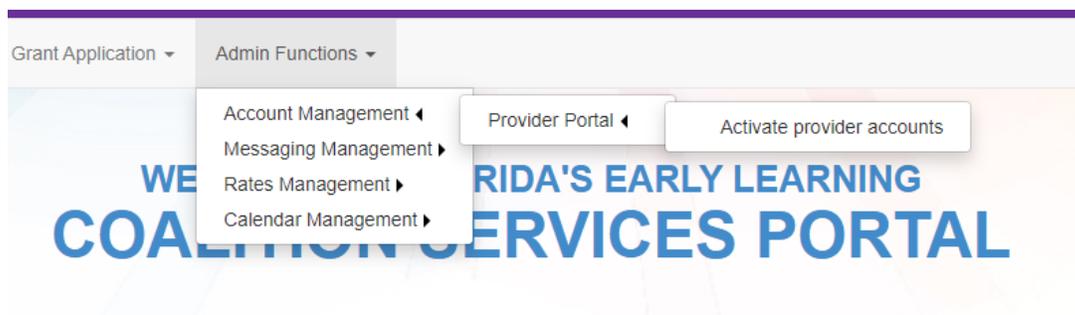
## Admin Functions Tab

CP Admins and DEL admins will be able to view and access the *Admin Functions* tab.

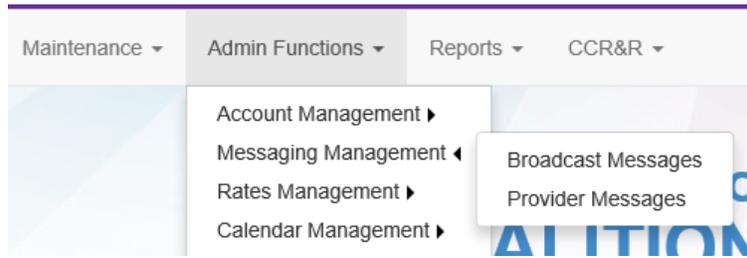
**Note:** Additional user roles may have access to one or more of the submenus under the *Admin Functions* tab. Only CP Admins and DEL admins will have access to all submenus.



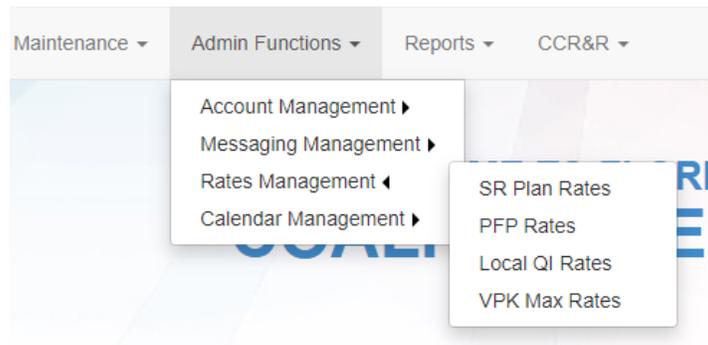
**Account Management > Provider Portal > Activate provider accounts – Activate provider accounts.**



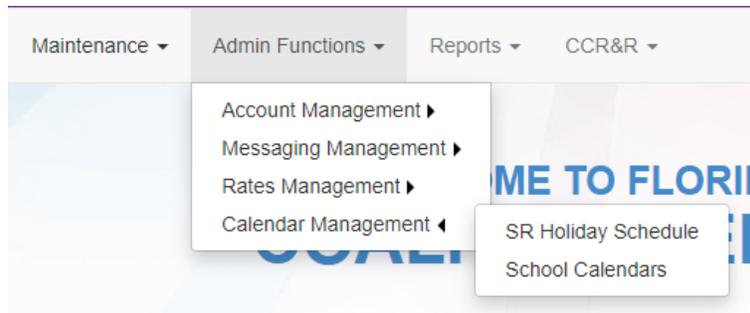
**Messaging Management** – Send messages to individual providers (Provider Messages), providers based on services (SR, VPK, CCR&R), or all providers in the coalition service area (Broadcast Messages).



**Rates Management** – Manage SR Plan, PFP, Local QI, and VPK rates.

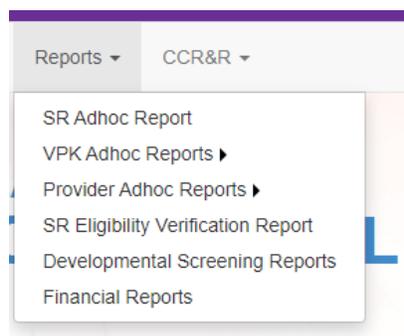


**Calendar Management** – Set reimbursable closure days for providers within the coalition service area and school district calendars.



## Reports Tab

Click the *Reports* tab to display the list of available reports.



**SR Adhoc Report** – Create a detailed report of SR applications, using several filters.

**VPK Adhoc Reports** – Create a detailed report of VPK applications and VPK payments, using several filters.

**Provider Adhoc Reports** – See Provider Processes section.

**SR Eligibility Verification Report** – Create a detailed report of Eligibility Verifications.

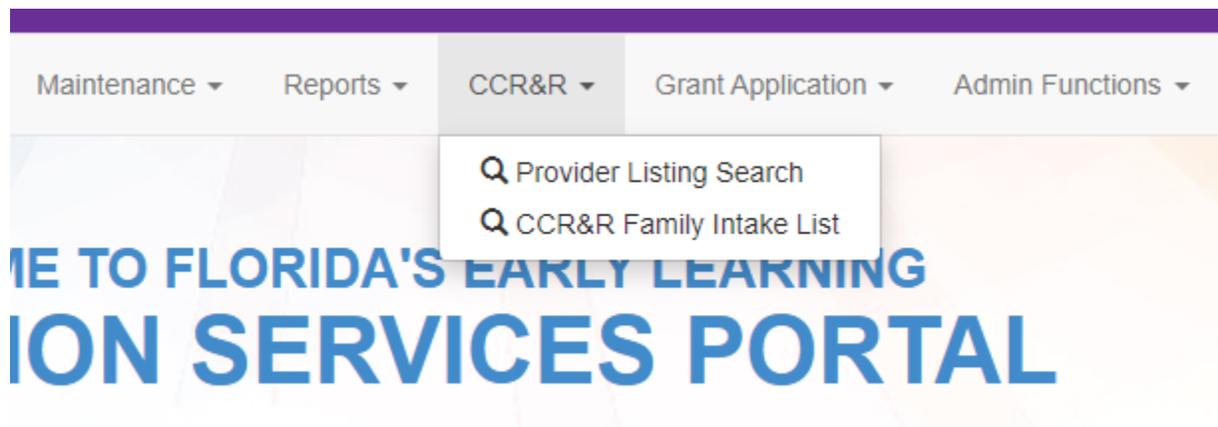
**Developmental Screening Reports** – Create a detailed report of developmental screenings and follow ups.

**Financial Reports** – Create a 5045 report and coalition invoices from current and past service/payment periods, using several filters.

### CCR&R Provider Listing

When a family completes the Eligibility Verification (EV) process, a provider can be selected. The list of providers available to the family comes from the CCR&R Provider Listing. For a provider to appear in a provider listing search, the profile status must have been Active at one point. If the provider has not had an Active profile, the provider will not appear in a provider listing search. For example, a provider completing a profile for the first time will have an Incomplete, then a Submitted profile, and then a Coalition Reviewing profile, but will not appear in the provider listing search until the profile status is Active. A provider who has an Active profile status but then makes edits to the profile, causing it to change to an Incomplete status, will still display in the provider listing search.

To view the CCR&R Provider Listing Search, click **CCR&R**, then **Provider Listing Search**.



Select search parameters and click **Search**. Click **+ advanced search** for more search parameters.

A screenshot of the 'Provider Listing Search' form. The form is titled 'Basic Search' and includes several search criteria: 'Provider Program Type' with checkboxes for VPK, SR, VPKSIS Only, and CCRR Only; 'Coalition' (required), 'County', 'City', and 'Zip Code' (all dropdown menus); 'Doing Business As' (text input); 'Program Year' (dropdown menu); and '# of Providers' (text input with '10' entered). There are 'Reset' and 'Search' buttons at the bottom right. A '+ advanced search' link is located in the top right corner of the form area.

Provider Listing Search ← advanced search

Basic Search

Provider Program Type  VPK  SR  VPK/SIS Only  CCRR Only

Coalition\*  County  City  Zip Code

Doing Business As  Program Year  # of Providers

Advanced Search

Accredited  Special Needs  Faith Based  Not For Profit  Military Child Care  Gold Seal

Open Time  Close Time  24-hour Care

Curriculum Types  My Program Type Description  Accreditation Types  Care Levels  Days of Care

Provider Program Types  Languages  Transportation  Meal Types  Provider Types  Discount Types

[Reset](#) [Search](#)

After clicking **Search**, click on the provider's name in the search results to see provider details. The search results can be exported to Excel.

CCR&R Provider Listing Search Results

[Click Here For Filtering Tips](#)

Show  entries

[Clear All Filters](#) Search:  [Export to Excel](#)

Provider ID	Provider Name	Provider Program Type	County Name	Address	Provider Type	Hours of Operation	Contact Number	Services Provided	Gold Seal Level	Child Age Groups
<input type="text" value="Filter"/>										
	F...	VPK, SR	Alachua		Center	M-F 7:00am-6:00pm	(352) 373-0108	Summer Care	Not a Gold Seal provider	6 Weeks - 5 Years



CCR&R Provider Details

---

**Provider Type:** Center

**URL:**

**Email:**

**Phone:**

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
x	✓	✓	✓	✓	✓	x

**Hours of Operation:** M-F 7:00am-6:00pm ;

**Early Dropoff:** ✓

**Extended Stay:** ✓

**Ages served:** 6 Weeks - 5 Years

---

SR	VPK	Not for Profit	Faith based	Transportation
✓	✓	✓	✓	Near public transportation

---

Programs offered	Meals provided
> Summer Care	> Afternoon Snack
	> Morning Snack

---

> Gold Seal	x
> Character Development Program	✓
> Therapeutic services offered	✓
> Military Childcare offered	x
> Program equipped to care for children with special needs	x
> Is facility wheelchair accessible	x
> Program participates in a Quality Rating System	x

---

Enhanced Schedule	Languages Spoken	Accreditation	Curriculum
> Full-time	> English		> Learn Every Day & Nemours
> Full Year			BrightStart! Superset Preschool
> Part time			Curriculum (3 to K)
> Early/Extended Care			> Learn Every Day for Infant, Toddler & Twos (Birth to 3)

---

**My Program Type Description**

- > Faith-Based
- > Fenced Yard
- > Limited TV viewed
- > On-site screenings
- > School System Weather Days
- > Smoke Free

---

Weekly rates and fees								VPK Rates	
	Infant	1 year old	2 year old	3 year old	4 year old	5 year old	School Age	VPK Weekly	
Full Time	\$199.77	\$185.91	\$169.75	\$151.27	\$151.27	\$151.27	\$0.00	Full Time	\$118.94
Part Time	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	Part Time	\$80.83

---

Additional Fees				Discounts	
> Application Registration	One time	Per Child	\$200.00	> Scholarships	
> Early Drop Off	Monthly	Per Child	\$50.00	> Sibling Discount	
> Extended Stay	Monthly	Per Child	\$50.00		
> Late Payment	Weekly	Per Child	\$10.00		
> Late Pickup	Per minute	Per Child	\$2.00		
> Returned Check	As needed	Per Family	\$25.00		
> Supplies/Materials	Annual	Per Child	\$100.00		
> Waiting List Registration	One time	Per Child	\$200.00		

---

Training / Education	Staff to Child Ratio						
	Infant	1 year old	2 year old	3 year old	4 year old	VPK	5 year old
> 40/45 HR INTRO CHILD CARE							
> AA/AS EARLY CHILDHOOD OR RELATED FIELD	1:4	1:6	1:9	1:12	1:15	1:11	1:15
> BA EARLY CHILDHOOD OR RELATED FIELD							
> DIRECTOR CREDENTIAL ADV							
> DIRECTOR CREDENTIAL LEVEL 1							
> EARLY (EMERGENT) LITERACY							
> FCCCH 30 HOUR TRAINING							
> FCCPC/ECPC/CCAC/CDAE							
> GED/HIGH SCHOOL							
> MA DEGREE EARLY CHILDHOOD							
> NATL EARLY CHILDHOOD CERT							
> VPK DIRECTOR CREDENTIAL							

**SR CLASS® Composite Score**

5.29

out of 7.00

Participates in School Readiness Child Assessment: No

View Provider Inspection Report: <https://caressearch.myffamilies.com/PublicSearch>

This provider is a School Readiness (SR) Program provider. All School Readiness providers are required to have an annual program assessment using CLASS®.

CLASS® is an observation-based tool that measures the quality of teacher-child interactions in the classroom. Using trained, certified observers, the CLASS® tool measures how classroom interactions and experiences help children develop language and learn new concepts, how the classroom is organized to manage children's attention, time and behavior, and the responsiveness and sensitivity of the classroom environment to children's emotions, which helps develop their ability to interact with others. For more information about CLASS® and your School Readiness provider's composite score, please contact your local early learning coalition.

Close

## CCR&R Provider Intake Process

As a CCR&R Specialist, you will have the ability to capture and report call details from providers that exist in EFSM, potential providers and other organizations that contact CCR&R for information or services.

There are 6 sections of the CCR&R Provider Intake/Contact Process:

- Navigation
- CCR&R Provider Intake / Contact Home Page
- Provider Search
- Contact Details
- Adding a New Provider
- Viewing Business Call Log History
- Editing Call Log Notes

### Navigation

The screenshot shows the top navigation bar of the PROD SUPPORT ~ Coalition website. The header includes the logo for the Division of Early Learning (LEARN EARLY. LEARN FOR LIFE.) and the title PROD SUPPORT ~ Coalition. The navigation menu contains the following items: Home, VPK Program, VPK SIS, SR Program, TAPP, Provider, Reimbursement, Maintenance, Reports, CCR&R, Grant Application, and Admin Functions. A dropdown menu is open under the CCR&R item, showing three options: Provider Listing Search, CCR&R Family Intake List, and CCR&R Provider Intake / Contact. The latter option is highlighted with a red box. Below the navigation bar, the main content area features the text WELCOME TO FLORIDA'S EARLY LEARNING COALITION SERVICES PORTAL and two search buttons: Search VPK Applications and Search SR Applications.

## Provider Intake/Home Page

The Provider Intake/Home Page is comprised of two sections.

- **Provider Search:** Searches for a provider in EFS Mod or a business that was previously created using the CCR&R Intake / Contact Process (see Add New Provider section below for additional details)
- **Contact Details:** Captures who is contacting CCR&R and why

CCR & R Provider Intake / Contact

Look for providers that match your desired search criteria.

County  
--please select a value--

Provider Name

**Provider Search Section**

[Click to view history](#) [+ Add new provider](#)

Details of Selected Childcare Provider

Name	Provider ID
Location	Provider Type
County	
Contact Name	
Contact Phone Number	
Contact Email Address	

Contact details

Contact Name

Contact Number

Method of Contact

--- select ---

Contact Email

Reason for call

Notes

0 / 500

[Reset](#) [Save](#)

## Provider Search

1. Enter the county where the provider is located
2. Start typing the name of the provider or business. A list of providers will appear. Hovering over a provider name will display the details in the Details of Selected Childcare Provider section to help the user select and verify the provider
3. Scroll through the provider names until the desired provider is displayed. In this example, "A Child's Academy 2" is the desired provider
4. Verify the provider name and address in the Details of Selected Childcare Provider to ensure the correct provider is selected
5. Click the Provider Name on the selection list to select that provider and proceed to the Contact Details section

**NOTE:** If the provider is not found and is willing to provide business details, proceed to the Adding New Provider section of this document. If the Provider is not willing to provide business details, proceed to the Contact Details section.

Once a provider is selected, complete the Contact Details section.

CCR & R Provider Intake / Contact

Look for providers that match your desired search criteria.

County  
Alachua **Step 1**

Provider Name  
ACA **Step 2**

A Child's Academy  
**A Child's Academy 2** **Step 5**  
A to Z Professional Child Care Academy LLC  
Angel's Christian Academy LLC  
Angel's Christian Academy LLC (2)  
BEGINNING PRECIOUS STEPS LEARNING ACADEM  
Bhaktivedanta Academy  
BUSY BEE AND BUTTERFLY CHRISTIAN ACADEMY  
Central Kids Learning Academy

**Step 3**

**Step 4**

**Details of Selected Childcare Provider**

Name	Provider ID
A Child's Academy 2	11503
Location	Provider Type
5240 NW 8TH AVE	PROVIDER
GAINESVILLE, FL, 32605	
County	<b>Step 4</b>
Alachua	
Contact Name	
Gabriel Graves	
Contact Phone Number	
(352) 548-4899	
Contact Email Address	
info@achildsacademy.com	

## Contact Details Only

This section captures why the provider contacted CCR&R. Contact details are to be entered at each provider interaction.

The examples below cover 3 scenarios:

- The provider is found via the Provider Search (see Example 1)
- The provider is not willing to provide business details and could not be found in the provider search, nor is it a legally operating company and can't be created as a new provider (see Example 3)
- A new provider record is needed (see Creating New Provider)

CCR&R must enter a Contact detail record to receive credit for the customer interaction.

1. Enter Contact Name of the person requesting information (non-required field)
2. Enter Contact Number of the person requesting information (non-required field)
3. Enter Method of Contact from drop down menu (required field)
4. Enter Contact Email of the person requesting information (non-required field)
5. Reason For Call: A drop down list where the user may select one or more values. If the user selects "Other" or includes "Other" with additional values, the notes field is required
6. Notes may be entered for any contact detail created, not only when "Other" is selected as a Reason For Call
7. Click **Save**

**NOTE:** Steps 1, 2, and 4 are not required, but users should make every effort to obtain and enter the requested information

Example 1

Provider found via search, and the Contact Detail Record is completed.

Look for providers that match your desired search criteria.

County: Alachua

Provider Name: A Child's Academy 2

Click to view history

+ Add new provider

Details of Selected Childcare Provider

Name	A Child's Academy 2	Provider ID	11503
Location	5240 NW 8TH AVE GAINESVILLE, FL, 32605	Provider Type	PROVIDER
County	Alachua		
Contact Name	Gabriel Graves		
Contact Phone Number	(352) 548-4899		
Contact Email Address	info@achildsacademy.com		

Contact details

Contact Name: Mike Jones

Contact Number: (850)850-8594

Method of Contact: Phone

Contact Email: mj@emails.com

Reason for call: CHILD CARE TRAINING/DCF REQUIREMENTS, COMMUNICABLE DISEASE

Notes: Up to 500 characters can be entered.

36 / 500

Reset Save

Example 2

Provider is not willing to provide contact information and therefore cannot be searched for, or they are not a legally operating company. In these cases, only the Contact Detail section is to be completed.

CCR & R Provider Intake / Contact

Look for providers that match your desired search criteria.

County  
--please select a value--

Provider Name

[Click to view history](#) [+Add new provider](#)

**This section is not completed**

Details of Selected Childcare Provider

Name	Provider ID
Location	Provider Type
County	
Contact Name	
Contact Phone Number	
Contact Email Address	

Contact details

Contact Name

Contact Number

Method of Contact \*  
Phone

Reason for call \*  
SR GENERAL INQUIRY

Notes  
Did not want to provide Business Information

44 / 500

[Reset](#) [Save](#)

**CCC&R User attempts to get as much information as possible**

**Mandatory entries are: Method of Contact, Reason For Call and Notes if "Other" is selected**

**No contact history will be available for this call however,**

## Add New Provider

Only create a new provider if the search returns no results, the caller is a legally operating provider/business, **AND** is willing to provide business organization details.

The add new Business section only appears on the home page when the **Add New Provider** button is selected.

1. From the Home Page Click the **+Add new provider** button
2. A new section in the middle of the home page displays, titled Add New Business
3. To create a new provider, the CCR&R user must enter the Business Organization Name, Contact #, Email Address, and Contact Name. The remaining fields are optional, but effort should be made to capture all information
4. Complete the Contact Details section
5. Click **Save**

**NOTE:** The new provider will not exist in EFS Mod, as there is no provider profile.

The screenshot shows the 'CCR & R Provider Intake / Contact' interface. It is divided into several sections:

- Search Section:** Includes a search criteria area with 'County' and 'Provider Name' dropdowns, a 'Click to view history' button, and a '+ Add new provider' button. A red arrow labeled 'Step 1' points to the '+ Add new provider' button, and another red arrow labeled 'Step 2' points to the 'Add new Business' section below.
- Details of Selected Childcare Provider:** A table with columns for Name, Location, County, Contact Name, Contact Phone Number, and Contact Email Address. The Provider ID and Provider Type columns are currently empty.
- Add new Business:** A form with the following fields:
  - Business / Organization Name: Jane's Angels
  - Contact Number: (904)569-2365
  - Email Address: jane@email.com
  - Contact Name: Jane
  - Business Type: Provider
  - Address line 1: 1123 Jane Street
  - Address line 2: (empty)
  - City: Jacksonville
  - State: FL
  - Zip Code: 31145
  - County: DuvalA red box highlights this section, and a red arrow labeled 'Step 3' points to the 'Business Type' dropdown. Red text notes: 'CCR&R User to capture Business/Organization Name, Contact Phone Number, Email Address and Contact Name at a minimum.' and 'By capturing the above the New Provider becomes searchable in the Prover Search Section above'. Another red note says 'Always attempt to complete all fields'.
- Contact details:** A form with the following fields:
  - Contact Name: Mike
  - Contact Number: (904)852-1365
  - Method of Contact: Phone
  - Contact Email: mike@email.com
  - Reason for call: CHILD CARE TRAINING/DCF REQUIREMENTS
  - Notes: (empty text area)Red text notes: 'CCR&R User is asked to try and complete as many fields as possible in this section not just the required ones.' At the bottom of this section are 'Reset' and 'Save' buttons.

## Business Call Log History

To view the last 10 contact details for a provider, click the **History** button. Details are available for existing providers and those created with the Add New Provider process.

1. Search for a provider by entering the County and Provider Name and click the provider
2. Select the **Click to view History Button** and the Business Call Log History window displays

CCR & R Provider Intake / Contact

Look for providers that match your desired search criteria.

County: Alachua

Provider Name: A Child's Academy

**Step 1**

**Click to view history** **+ Add new provider**

**Step 2**

**Details of Selected Childcare Provider**

Name: A Child's Academy  
 Location: 3401 NW 34TH ST  
 GAINESVILLE, FL. 32605  
 County: Alachua  
 Contact Name: Rebecca Patrick  
 Contact Phone Number: (352) 371-3360  
 Contact Email Address: office@achildsacademy.com

Provider ID: 11605  
 Provider Type: PROVIDER

**Contact details**

Contact Name:   
 Contact Number:   
 Method of Contact: --- select ---  
 Contact Email:   
 Reason for call:   
 Notes:   
 0 / 500

**Reset** **Save**

Notes for a contact record may be updated by clicking the **Edit Note** button.

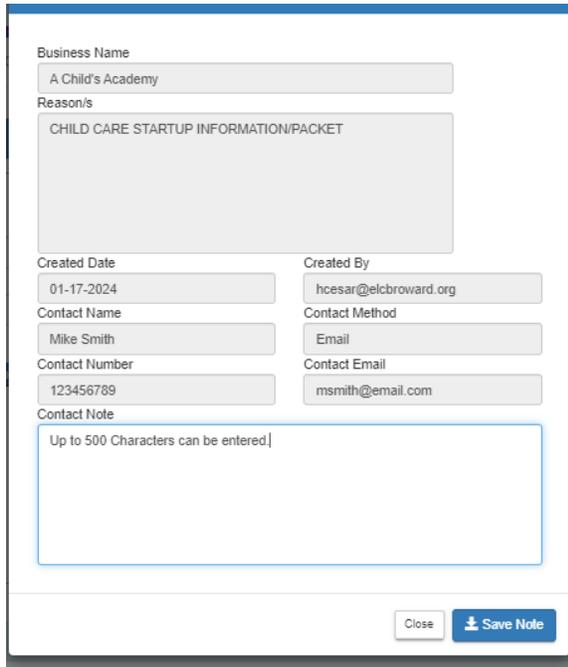
Business Call log history

Created Date	Reason For Call	Call Contact Name	Call Notes	CCR&R User	Last Modified Date	
01-18-2024	CHILD CARE STARTUP INFORMATION/PACKET.CHILD CARE TRAINING/DCF REQUIREMENTS,COMMUNICABLE DISEASE,FAMILY ENGAGEMENT/CONSUMER EDUCATION,OTHER/UNKNOWN	John Smith	Emergency Closures		01-18-2024	<b>Edit Note</b>
01-17-2024	CURRICULUM,INCLUSION SERVICES,OTHER/UNKNOWN	Brian	Brian does not want contact		01-18-2024	<b>Edit Note</b>

### Editing a Call Log Note

After clicking the **Edit Note** button, the Edit Call Log note screen will appear. The details of the call log display.

1. Click in the Contact Notes field to update
2. Click **Save Note** button



The screenshot displays the 'Edit Call Log Note' interface. It features several input fields and buttons:

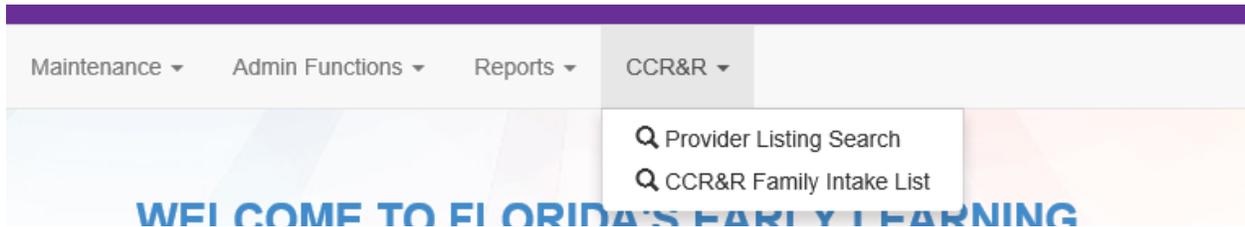
- Business Name:** A Child's Academy
- Reason/s:** CHILD CARE STARTUP INFORMATION/PACKET
- Created Date:** 01-17-2024
- Created By:** hcesar@elcbroward.org
- Contact Name:** Mike Smith
- Contact Method:** Email
- Contact Number:** 123456789
- Contact Email:** msmith@email.com
- Contact Note:** A text area with a placeholder message: 'Up to 500 Characters can be entered.'

At the bottom right, there are two buttons: a 'Close' button and a blue 'Save Note' button with a download icon.

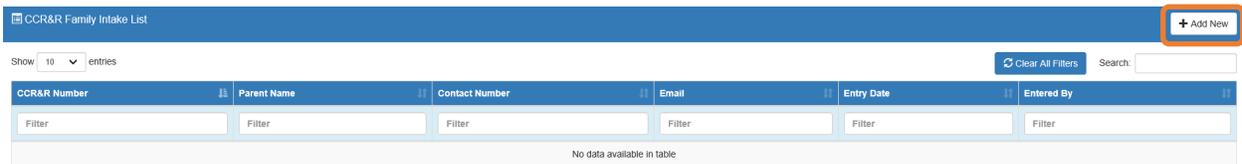
## CCR&R Intake Process

CCR&R staff capture family data when contacted by families who are not yet being served. The coalition user is able to capture family information and child care request information for a family when the family contacts the coalition for information, but the family has not, and may not, complete an SR or VPK application.

To capture family information, click **CCR&R Family Intake List**.



The following screen will display. Click the **Add New** button.



Complete the form and click **Save**. The **Add Another Child** button allows additional children to be added to the household.

CCR&R Intake Form

Contact Details	
Primary Contact Number *	5555555555 <small>Example: (850) 555-1234</small>
Primary Contact Email *	test@test.com
Primary Parent's Details	
Primary Parent's First Name *	Test
Primary Parent's Middle Name	
Primary Parent's Last Name *	Tester
Primary Parent's Ethnicity	<input type="radio"/> Hispanic <input type="radio"/> Non-Hispanic <input checked="" type="radio"/> Prefer not to answer
Primary Parent's Race(s) <small>Check those that apply.</small>	<input type="checkbox"/> Asian <input type="checkbox"/> Hawaiian / Pacific <input type="checkbox"/> Black <input type="checkbox"/> US Indian / Alaskan <input type="checkbox"/> White <input checked="" type="checkbox"/> Prefer not to answer
Primary Parent's Gender	<input checked="" type="radio"/> Male <input type="radio"/> Female
Primary Parent's Marital Status	Select <span>▼</span>
Primary Parent's Date of Birth <small>[MM/DD/YYYY]</small>	

**Primary Parent's Address**

Address Line 1

Address Line 2 (Apt, Suite, etc)

City \*

County \*

State

Zip Code \*

---

**Additional Information**

Primary Language \*

Referred By

Request Additional Services

Comments

---

**Child Needing Care Details**

Child's First Name

Child's Middle Name

Child's Last Name

Child's Ethnicity  Hispanic  Non-Hispanic  Prefer not to answer

Child's Race(s) *Check those that apply.*  Asian  Hawaiian / Pacific  Black  US Indian / Alaskan  White  Prefer not to answer

Child's Gender  Male  Female

Child's Date of Birth \*   
[MM/DD/YYYY]

Parent Relationship to Child \*

[Remove Child](#)

[+ Add Another Child](#)

[Cancel](#) [Save](#)

The saved form will display. Click **Cancel** to exit.



To edit a record, click a **CCR&R Number**.

CCR&R Family Intake List [+ Add New](#)

Show  entries [Clear All Filters](#) Search:

CCR&R Number	Parent Name	Contact Number	Email	Entry Date	Entered By
<input type="text" value="Filter"/>					
<b>45</b>	Test Tester	(555) 555-5555	test@test.com	7/6/2018 7:34:08 PM	jim.ledbetter@oel.myflorida.com

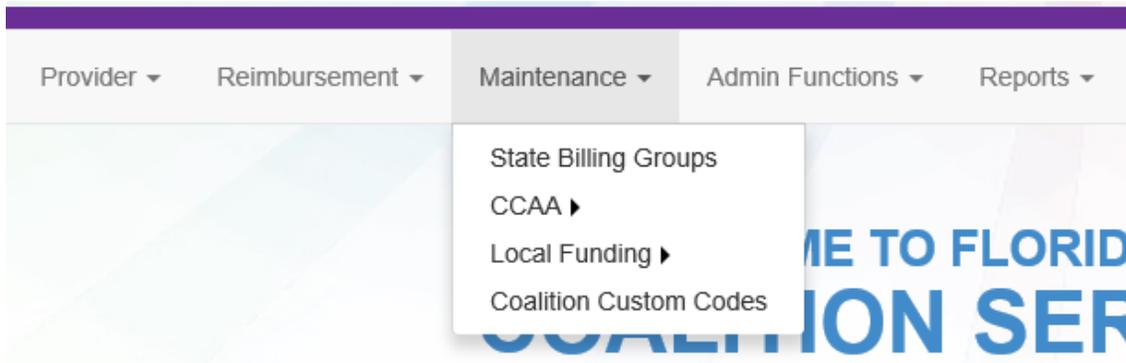
Click the **Edit** button at the bottom of the page to make edits, then click **Save**. Children can also be added and removed when editing a CCR&R record.

Child Needing Care Details	
Child's First Name	<input type="text"/>
Child's Middle Name	<input type="text"/>
Child's Last Name	<input type="text"/>
Child's Ethnicity	<input type="radio"/> Hispanic <input type="radio"/> Non-Hispanic <input type="radio"/> Prefer not to answer
Child's Race(s) <i>Check those that apply.</i>	<input type="checkbox"/> Asian <input type="checkbox"/> Hawaiian / Pacific <input type="checkbox"/> Black <input type="checkbox"/> US Indian / Alaskan <input type="checkbox"/> White <input type="checkbox"/> Prefer not to answer
Child's Gender	<input type="radio"/> Male <input type="radio"/> Female
Child's Date of Birth * <small>[MM/DD/YYYY]</small>	<input type="text" value="07/01/2018"/>
Parent Relationship to Child *	<input type="text" value="Parent/Step Parent"/>
<input type="button" value="Remove Child"/>	

## Coalition Custom Codes

Custom codes can be created by a CP Admin to allow flexibility in case notes, status records, and provider notes.

In the *Maintenance* tab, click **Coalition Custom Codes**.



The following screen will display. Select a **Code Type** and click **Add Custom Code** to create a new code.

Coalition Custom Codes

Show  entries Search:

Code Type:

Code	Description	Active	Start Date	End Date	Action
<input type="text" value="Filter"/>					
No data available in table					

Complete the **Code** and **Description** fields and enter a **Start Date**. An **End Date** is not required. Click **Save**.

**Add a Custom Code** ✕

**Code Type \***  **Code \***  **Description \***  **Text**

**Start Date \*** MM/DD/YYYY  **End Date** MM/DD/YYYY

The new code is available. An **Edit** button and **Delete** button are displayed.

Coalition Custom Codes

Code Type:

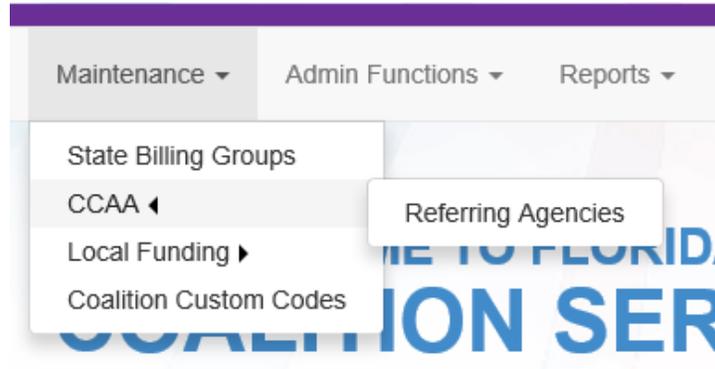
Show  entries Search:

Code	Description	Active	Start Date	End Date	Action
<input type="text" value="Filter"/>					
Test	Test	Yes	7/9/2018		<input type="button" value="Edit"/> <input type="button" value="Delete"/>

## Child Care Application and Authorization (CCAA) Referring Agencies

Active referring agencies will appear in a dropdown list of referring agencies on the CCAA referral intake form.

In the *Maintenance* tab, click **CCAA**, then click **Referring Agencies**.



The following screen will display. Click **Create New Referring Agency**.

Local Referring Agencies List 13 Total Records

[Create New Referring Agency](#)

Show : 10 entries ▾ First < 1 2 > Last

Edit	Authorization Code	Name	Active
<input type="checkbox"/>	33-12321	Teen Parent Program 2	✓
<input type="checkbox"/>	33-123456	ELC of Big Bend	✓
<input type="checkbox"/>	33-123TAPP	Testing2	✓
<input type="checkbox"/>	33-12521	Tallahassee Technical College	✓
<input type="checkbox"/>	33-2344	test	✓
<input type="checkbox"/>	33-333	friday	✓
<input type="checkbox"/>	33-3757588	tuesday	✗
<input type="checkbox"/>	33-DFDF454	wednesday	✓
<input type="checkbox"/>	33-N/A	Jay J Mack	✓
<input type="checkbox"/>	33-TEST	Test 4	✓

[Edit Referring Agency](#)

Select the Agency Category and complete the fields marked with a red asterisk. Click **Save**.

Referring Agency - Create Record

Agency Category \* COORD - Coordinating Agency  
DCF - DCF  
WT - WT Contracted Provider  
PRIV - Privatization Provider  
TAPP - Teenage Parent Plan  
LOC - Local Referring Agency

Agency Name \*

Authorization Code \*

Address Line 1 \*

Address Line 2

City \*

State \*

Zip Code \*

Agency Phone \*

Agency Fax

Agency Email \*

Additional Contacts	
Primary Contact	<input type="checkbox"/>
Contact Person	<input type="text"/>
Primary Phone Number	<input type="text"/>
Secondary Phone Number	<input type="text"/>
Email	<input type="text"/>
Primary Contact	<input type="checkbox"/>
Contact Person	<input type="text"/>
Primary Phone Number	<input type="text"/>
Secondary Phone Number	<input type="text"/>
Email	<input type="text"/>

Type of Referral \*  AT-RISK  DOMESTIC VIOLENCE  HOMELESS  RELATIVE CARE GIVER  TANF  TCC  TAPP  LOCAL

Is Active

Created By: ledbetter.kiwanis+7@gmail.com  
Last Modified By: ledbetter.kiwanis+7@gmail.com

Created Date: 7/6/2018  
Last Modified Date: 7/6/2018

**NOTE:** The **Is Active** checkbox is automatically checked. If the referring agency is no longer active, uncheck the checkbox.

To edit an existing referring agency, check the **Edit** checkbox for an agency and click **Edit Referring Agency** to edit the agency.

Local Referring Agencies List 13 Total Records

Create New Referring Agency

Show: 10 entries

First « 1 2 » Last

Edit	Authorization Code	Name	Active
<input type="checkbox"/>	33-12321	Teen Parent Program 2	✓
<input type="checkbox"/>	33-123456	ELC of Big Bend	✓
<input type="checkbox"/>	33-123TAPP	Testing2	✓
<input type="checkbox"/>	33-12521	Tallahassee Technical College	✓
<input type="checkbox"/>	33-2344	test	✓
<input type="checkbox"/>	33-333	friday	✓
<input type="checkbox"/>	33-3757588	tuesday	✗
<input type="checkbox"/>	33-DFDF454	wednesday	✓
<input type="checkbox"/>	33-N/A	Jay J Mack	✓
<input type="checkbox"/>	33-TEST	Test 4	✓

Edit Referring Agency

Once edits are complete, click **Save**.

Referring Agency - Edit Record

Agency Category: LOC - Local Referring Agency

Agency Name: Teen Parent Program 2

Authorization Code: 33-12321

Address Line 1: 458 Drone Avenue

Address Line 2:

City: Tallahassee

State: FL

Zip Code: 32308

Agency Phone: (850)678-1234

Agency Fax:

Agency Email: test.test@gmail.com

**Additional Contacts**

Primary Contact	<input type="checkbox"/>
Contact Person	
Primary Phone Number	
Secondary Phone Number	
Email	
Primary Contact	<input type="checkbox"/>
Contact Person	
Primary Phone Number	
Secondary Phone Number	
Email	

Type of Referral:  AT-RISK  DOMESTIC VIOLENCE  HOMELESS  RELATIVE CARE GIVER  TANF  TCC  TAPP  LOCAL

Is Active:

Save Cancel

Created By: cmoneyb2+911@gmail.com  
Last Modified By: cmoneyb2+911@gmail.com

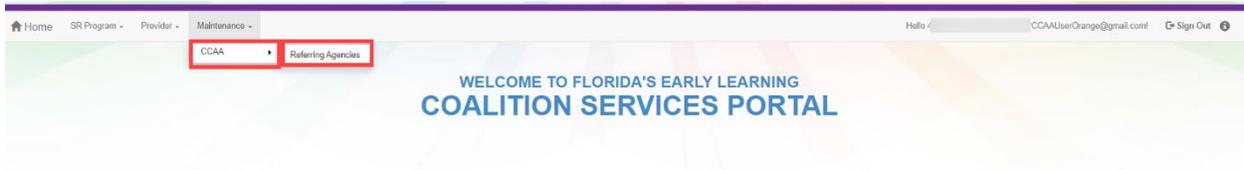
Created Date: 5/23/2018  
Last Modified Date: 5/23/2018

## CCAA Users

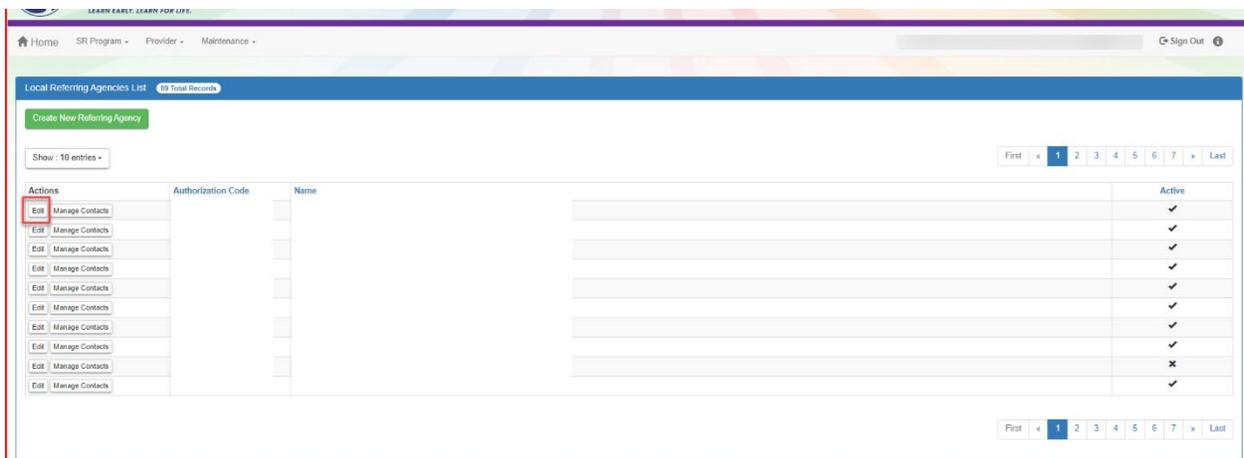
Coalition Users in CCAA User Role must be a contact for the local agency or agencies for which they need to create referrals.

For agencies where the CCAA user is not a contact but should be, the CCAA user must add themselves as a contact before attempting to create a referral.

To add a new contact, navigate to Maintenance > CCAA > Referring Agencies.



The Local Referring Agencies List will be displayed. Locate the appropriate agency. Click **Edit**.



The Edit screen for the agency will display. Click **Manage Contacts**.

Referring Agency - Edit Record

Agency Category \*

Agency Name \*

Authorization Code \*

Address Line 1 \*

Address Line 2

City \*

State \*

Zip Code \*

Agency Phone \*

Agency Fax

Agency Email \*

Require Manager Approval on External User Referrals  **Manage Contacts**

Type of Referral \*  AT-RISK  DOMESTIC VIOLENCE  HOMELESS  RELATIVE CARE GIVER  TANF  TCC  TAPP  LOCAL

Is Active

Created By: malicea@4cflorida.org Created Date: 4/9/2021  
 Last Modified By: malicea@4cflorida.org Last Modified Date: 4/9/2021

Click **Add Contact**. Enter the required fields and click **Continue**.

Home SR Program - Provider - Maintenance - Sign Out

Manage Contacts for

Show  entries.

Search:

Actions	Primary Contact	First Name	Last Name	Primary Phone Number	Secondary Phone Number	Email	External User
	<input type="text" value="Filter"/>						

There are no contacts that are accessible by this user.

Showing 0 to 0 of 0 entries

**Add Contact**

Primary Contact

First Name \*

Last Name \*

Primary Phone Number \*

Secondary Phone Number

Email \*

External User

Cancel Continue

The contact will display in the grid.

Manage Contacts for Community Partnership for Children 1 Total Records Add Contact

Return to Agency List

Show 10 entries.

Clear All Filters Search: Export to Excel

Actions	Primary Contact	First Name	Last Name	Primary Phone Number	Secondary Phone Number	Email	External User
Edit Delete	No	Test	Test	(111) 111-1111		contact@mail.com	No

Showing 1 to 1 of 1 entries.

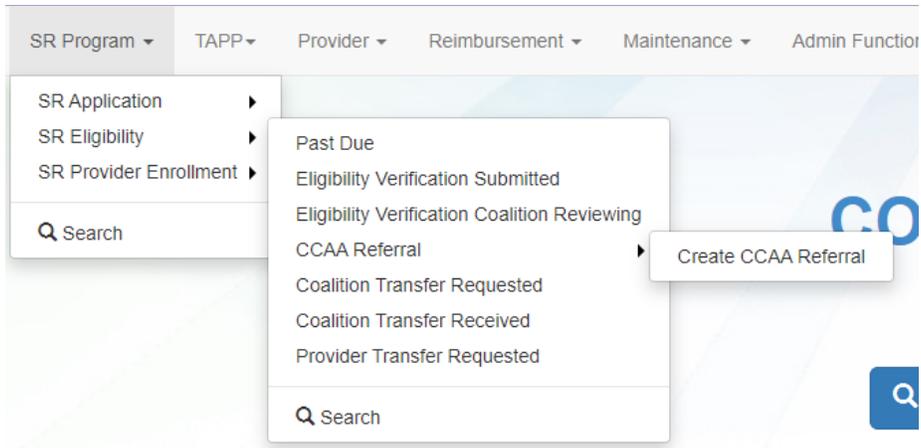
Previous 1 Next

## Child Care Application and Authorization (CCAA) Intake Process

The CCAA Data Entry by Coalition feature is used in situations where the coalition receives a referral document from a referring agency on behalf of a family that does not have a profile in the EFS Modernization system. This is most common in At-Risk referral cases; however, this functionality can be used in any CCAA Referral scenario to create a household and assign eligibility for referred children and families.

**NOTE:** The CCAA intake process allows coalition users to identify the physical county of residence and families receiving RCMA services.

In the *SR Program* tab, click **SR Eligibility**, then **CCAA Referral**, and then **Create CCAA Referral**.



Select the **Agency Category** and complete the fields marked with a red asterisk. Click **Continue**.

Referring Agency Details	
Agency Category *	<input type="text" value="Select Agency Category"/> <ul style="list-style-type: none"> <li>COORD - Coordinating Agency</li> <li>DCF - DCF</li> <li>WTF - WTF Contracted Provider</li> <li>PRIV - Privatization Provider</li> <li>TAPP - Teenage Parent Plan</li> <li>LOC - Local Referring Agency</li> </ul>
Agency Name *	<input type="text"/>
Referral Number	<input type="text"/>
FAHS Investigation Intake number <small>(Florida Abuse Hotline Information System)</small>	<input type="text"/>
Referral Start Date *	<input type="text" value="MM/DD/YYYY"/>
Referral End Date *	<input type="text" value="MM/DD/YYYY"/>
DCF Placement & Care / Custody *	<input type="radio"/> Yes <input checked="" type="radio"/> No
Authorizing Worker From Referring Agency *	<input type="text"/>
Comments	<input style="height: 100px;" type="text"/>
Primary Parents Details	
Primary Parent's First Name *	<input type="text"/>
Primary Parent's Middle Name	<input type="text"/>
Primary Parent's Last Name *	<input type="text"/>
Primary Parent's Ethnicity *	<input type="radio"/> Hispanic <input type="radio"/> Non-Hispanic <input type="radio"/> Prefer not to answer
Primary Parent's Race(s) <i>Check those that apply.</i> *	<input type="checkbox"/> Asian <input type="checkbox"/> Hawaiian / Pacific <input type="checkbox"/> Black <input type="checkbox"/> US Indian / Alaskan <input type="checkbox"/> White <input type="checkbox"/> Prefer not to answer
Primary Parent's Gender *	<input type="radio"/> Male <input type="radio"/> Female
Primary Parent's Marital Status *	<input type="text" value="-- select --"/>
Primary Parent's Date of Birth *	<input type="text" value="MM/DD/YYYY"/>

Primary Parent's Address	
Address Line 1 *	<input type="text"/>
Address Line 2 (Apt, Suite, etc)	<input type="text"/>
City *	<input type="text"/>
County *	--please select a value--
State	FLORIDA
Zip Code *	<input type="text"/>

---

Child Needing Care Details	
Child's First Name *	<input type="text"/>
Child's Middle Name	<input type="text"/>
Child's Last Name *	<input type="text"/>
Child's Ethnicity *	<input type="radio"/> Hispanic <input type="radio"/> Non-Hispanic <input type="radio"/> Prefer not to answer
Child's Race(s) <i>Check those that apply.</i> *	<input type="checkbox"/> Asian <input type="checkbox"/> Hawaiian / Pacific <input type="checkbox"/> Black <input type="checkbox"/> US Indian / Alaskan <input type="checkbox"/> White <input type="checkbox"/> Prefer not to answer
Child's Gender *	<input type="radio"/> Male <input type="radio"/> Female
Child's Date of Birth * [MM/DD/YYYY]	<input type="text"/>

Eligibility Details For Child	
Billing Group Code *	-- select eligibility group --
Eligibility Code *	-- select eligibility code --
Priority *	01
Purpose for Care *	BOTH EMPLOYMENT AND EDUCATION/TRAINING

[Add Another Child](#)

[Previous](#)

[Continue](#)

The Household at a Glance screen displays. Click **Upload Document** and select a file.

Eligibility Verification Active
Eligibility Verification Number: **175**

Assign Counselor Change Household Status
Case Notes Add Note

- Household at a Glance
- Contact Information
- Children Needing Care
- Parents
- Other Household Members
- CCAA Referral Information
- Employment
- School/Training
- Alimony and Child Support Income
- Other Income
- Deductions
- Totals
- Documents

**Household at a Glance...**
Household ID: 1488

**Children Needing Care**

Child First CCAA Child Last CCAA (child, male, age 1)

**Parents**

Parent First CCAA Parent Last CCAA (adult, male)

**Other Household Members**

**Total Household Income Calculations**

Employment income: \$0

Alimony and child support income: \$0

Other income: \$0

Alimony and child support deductions: \$0

Total annual gross income: \$0

**Contact Information**
History Update Account

**Primary Address**

250 Marriott Drive  
Tallahassee, Florida 32399  
Leon County

**Primary Parent**

Email: Not On File  
Primary phone: (999) 999-9999

**Family Portal Account**

Account Not Found

**Children Needing Care**
History Change Status

Child First CCAA Child Last CCAA (child, male, age 1) Change

Eligibility status: Eligible

Enrollment status: Not Enrolled

Date of birth: 07/10/2017

Ethnicity: Prefer not to answer

Race(s): Prefer not to answer

Care days: (no care days selected)

Care types: (no care types selected)

Citizenship: Unknown

Age verification: Unknown

Medicaid eligibility: Unknown

Current Authorization Period: 07/10/2018 - 07/09/2019

Required information is missing or invalid.

Eligibility

Enroll

Edit

- Household at a Glance
- Contact Information
- Children Needing Care
- Parents
- Other Household Members
- CCAA Referral Information
- Employment
- School/Training
- Alimony and Child Support Income
- Other Income
- Deductions
- Totals
- Documents

**Parents**

Parent First CCAA Parent Last CCAA (adult, male, primary parent) History Edit

Date of birth: 07/10/1998  
 Ethnicity: Prefer not to answer  
 Races: Prefer not to answer  
 Marital status: Single  
 Email: Fake.Parent First CCAA.Parent Last CCAA13719982016710@oel.admin  
 Primary phone: (999) 999-9999  
 Disabled: No  
 Disability documentation: No documents available  
 Required information is missing or invalid.

Add Parent...

**Other Household Members**

Your application contains no people listed as other household members.

Add Other Household Member...

**CCAA Referral Information**

Child Last CCAA Child First CCAA Edit Remove

Referring Agency: test  
 Referral Number:  
 Referral Start Date: 07/10/2018  
 Referral End Date: 07/10/2019  
 Referring Agency Staff Name: test test  
 Comments:

Do you have a form from another agency titled Child Care Application and Authorization? No

CCAA Referral Documentation

There are no attached documents of this type.

Upload Document...

**Employment**

Parent First CCAA Parent Last CCAA

Parent First CCAA is not currently employed.

Add Job... History

**School/Training**

Parent First CCAA Parent Last CCAA

Parent First CCAA is not currently attending a school or training facility.

Add School or Training Facility... History

**Alimony and Child Support Income**

Parent First CCAA Parent Last CCAA

No alimony or child support income. Edit

Omit Alimony  
 Omit Child Support

History

**Other Income**

No one in the household is receiving additional income.

Add Other Income... History

**Deductions**

Parent First CCAA Parent Last CCAA

No alimony or child support payments. Edit

Omit Alimony  
 Omit Child Support

History

**Totals**

Totals information goes here...

**Documents**

Additional Documentation

There are no attached documents of this type.

Upload Document...

Career Source Regional Workforce Welfare Transition Program Participant

There are no attached documents of this type.

Upload Document...

- Contact Information
- Children Needing Care
- Parents
- Other Household Members
- CCAA Referral Information
- Employment
- School/Training
- Alimony and Child Support Income
- Other Income
- Deductions
- Totals
- Documents

After a document is uploaded, an **Associate Children** button is displayed to enable additional children to be linked to the referral.

**NOTE:** Children added on the CCAA referral cannot be removed. Children added to the EV with an Eligibility status of “(new)” can be removed.

CCAA Referral Information

<p>Child Last CCAA Child First CCAA</p> <p>Referring Agency: test</p> <p>Referral Number:</p> <p>Referral Start Date: 07/10/2018</p> <p>Referral End Date: 07/10/2019</p> <p>Referring Agency Staff Name: test test</p> <p>Comments:</p>	<p>Edit Remove</p>
--	--------------------

Do you have a form from another agency titled Child Care Application and Authorization? No

<p>CCAA Referral Documentation</p> <p>TEST.docx</p> <p>Upload Document...</p>	<p>View</p> <p>Associate Children</p>
---	---------------------------------------

## School Readiness Application Status Definitions

With the deployment of Release 3.0, School Readiness application and child statuses have changed. Also, the child status, not the application status (as in the past), indicates if the family is waiting for services or receiving services.

Here is a chart of the old and new statuses:

OLD SR APPLICATION STATUS	NEW SR APPLICATION STATUS
Active - Waiting	ACTIVE
Active - Pending Documents	
Active - Eligible	
Active - Pending Update	Active - Pending Update
Coalition Reviewing	Coalition Reviewing
Inactive	Inactive
Incomplete	Incomplete
Rejected	Rejected
Submitted	Submitted
Revalidation Submitted	Revalidation Submitted
Revalidation Incomplete	Revalidation Incomplete

OLD CHILD STATUS	NEW CHILD STATUS
Active - Waiting	Waiting
Active - Pending Documents	Pending
Active - Eligible	Eligible
Terminated	Terminated

## Application Statuses

### Incomplete

The application is not complete. The parent has to complete the required fields, upload the required document, certify, sign and submit the application.

Coalitions cannot change the status of an **Incomplete** application; however, coalition users have read-only access to look at an incomplete school readiness application to assist the parent in completing the application if needed.

No child status is assigned to a child listed on an application that is in **Incomplete** status.

### Revalidation Incomplete

The parent has started an application to revalidate their eligibility to remain on the waiting list. The parent has to complete the required fields, upload the required document, certify, sign and submit the application.

Coalitions cannot change the status of a **Revalidation Incomplete** application; however, they have read-only access to look at an incomplete application to assist the parent in completing the application if needed.

The child status assigned to a child listed on an application that is in **Revalidation Incomplete** status will default to the child status that is assigned to the child on the **Active** application.

### Submitted

The application has been completed and submitted by the parent for the coalition to review. The application is not editable by the parent while in **Submitted** status.

No child status is assigned to a child listed on an application that is in **Submitted** status.

### Revalidation Submitted

The application has been completed and submitted by the parent for the coalition to review. The application is not editable by the parent while in **Revalidation Submitted** status.

The status of the child will carry over from the previous application.

When the status of this application is changed, the previous application status will automatically change to **Inactive**.

### Coalition Reviewing

Upon opening a **Submitted** application, the system will automatically change the status of the application to **Coalition Reviewing**.

No child status is assigned while the application is in a **Coalition Reviewing** status.

### Active (Previously Active – Waiting, Active – Pending Documents, Active – Eligible)

The **Active – Waiting** application status is no longer needed, as this occurs when the child status is set to **Waiting**.

The **Active – Eligible** application status is no longer needed, as this occurs when the child status is set to **Eligible**.

The **Active – Pending Documents** application status is no longer needed, as this occurs when the child status is set to **Pending**.

## Active – Pending Update

**Active – Pending Update** is used when a change needs to be made to the application by the family.

If a parent calls the coalition to report they have changed jobs or moved, the coalition can manually change the status of the application to **Active – Pending Update**, and this will allow the parent to update their application. If the coalition manually changes the application status to **Active – Pending Update**, the family has 15 days to make changes, and after 15 days, the application will become **Coalition Reviewing**.

When an application status is set to **Active**, the system will calculate a revalidation notification date of 180 days.

On day 150, the system will change the status of the **Active** application to **Active – Pending Update** and will send the parent an email notifying them they have 30 days to update their application to remain on the waiting list.

When the parent submits an updated application, the status will change to **Revalidation Submitted**.

## Inactive

The application is no longer active. Inactivating an application should only occur when an application has been placed in **Active** status.

Prior to the changing the status of an application to **Inactive**, the child status must be changed to **Terminated**.

## Rejected

The application is missing information that is necessary to make a decision regarding a customer's potential eligibility. Upon rejection, the application is editable only by the parent.

After 30 days, a **Rejected** application will automatically be set to **Inactive** and the children **Terminated**.

**Rejected** status is used to return the application to the parent for edits prior to placing the application in one of the **Active** statuses.

## Child Statuses

### Waiting

The coalition has reviewed the application and determined that the family may meet eligibility requirements based on the information submitted, but the coalition does not have funding to authorize eligibility for the family; therefore, the application is placed on a list of families who are waiting for funding.

A nightly automated process at DEL checks for 13-year-olds with a **Waiting** child status and automatically sets the child status to **Terminated**.

### Pending

Authorization of eligibility can be established without placing a child on the waiting list for funding, pending the parent submitting the required documents in an eligibility interview.

### Eligible

The coalition has reviewed the application and supporting document(s), and determined the family meets program requirements and eligibility can be authorized.

A nightly automated process at DEL checks for 13-year-olds with an **Active** child status and automatically sets the child status to **Terminated**.

## Terminated

If the parent fails to revalidate the application, the system will automatically change the child status to **Terminated** on day 181 and will change the application status to **Inactive**.

After 30 days, a **Rejected** application will automatically be set to **Inactive** and the children **Terminated**.

A nightly automated process at DEL checks for 13-year-olds with an **Active** child status and automatically sets the child status to **Terminated**.

## Coalition User Task Bar

At the top and bottom of the application is a list of buttons used to maintain and process School Readiness applications.

	Click to add a case note.
	Click to log an application owner contact attempt.
	Click to verify user uploaded documents.
	Click to change the status of an application.
	Click to view all case notes regarding the application.
	Click to view all contact attempts.
	Click to download the family's SR application.

## Adding a Case Note

The coalition user must click the **Add Note** button to add a Case Note. 

The Case Note entry window will pop up, allowing the coalition user to add a description and a note up to 1,000 characters. Select a **Custom Code Type** and **Custom Code**. If no custom codes are available in the dropdown, see the Custom Codes section. Click the **Save** button to add the Case Note.

Case Note ×

**Description:**  
Select code...

**Custom Code Type**  **Custom Code**

**Note:**

(Up to 1000 characters. 1000 characters remaining.)

Case Note ×

**Description:**  
Select code...

**Custom Code Type**

**Custom Code**

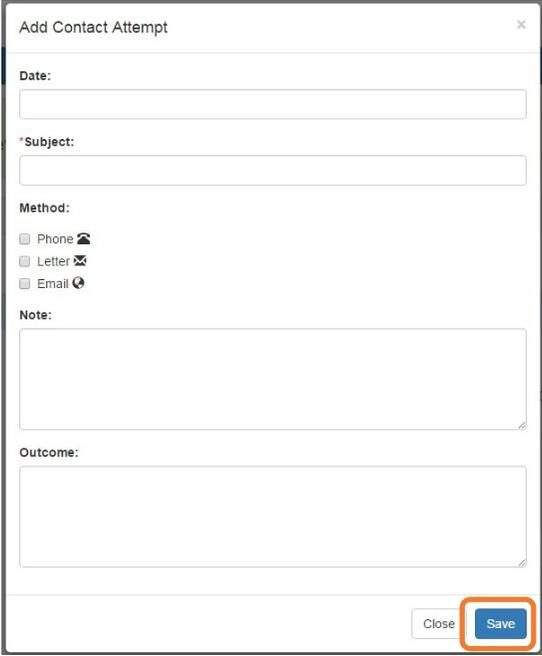
**Note:**

(Up to 1000 characters. 1000 characters remaining.)

## Adding a Contact Attempt

The coalition user must click the **Add Contact Attempt** button to add a Contact Attempt entry. 

The contact attempt entry window will pop up, allowing you to add a date, subject, method, note and outcome. Click the **Save** button to add the Contact Attempt.



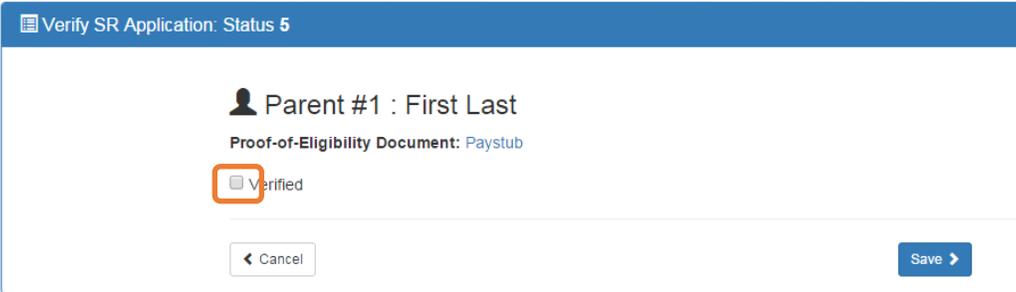
The dialog box titled "Add Contact Attempt" contains the following fields and options:

- Date:** A text input field.
- Subject:** A text input field.
- Method:** A group of three radio buttons:
  - Phone 📞
  - Letter ✉️
  - Email 📧
- Note:** A large text area for notes.
- Outcome:** A large text area for the outcome.
- At the bottom right, there are two buttons: "Close" and "Save". The "Save" button is highlighted with an orange border.

## Verify Attached Documents

The coalition user can view and verify attached documents by clicking the **Verify** button. 

To view the Proof-of-Eligibility Document, click the link to open the document in a new browser tab. The coalition user will also have the option to click the **Verified** checkbox.



The dialog box titled "Verify SR Application: Status 5" displays the following information:

- Parent #1 : First Last**
- Proof-of-Eligibility Document:** [Payscale](#)
- A checkbox labeled "Verified" is checked and highlighted with an orange border.
- At the bottom, there are two buttons: "Cancel" and "Save".

Once verified, the date and time of the verification, as well as the coalition user will appear. Once the coalition user is finished, click the **Save** button to return to the application.

Verify SR Application: Status **Coalition Reviewing**

**Parent #1 : test test**

**Proof-of-Eligibility Document:** [School Enrollment Form](#)

**Verified**

— Verified by : jim.ledbetter@oel.myflorida.com Verified Date: 7/29/2016 5:30:20 PM

### Change Application Status

Once the coalition user is ready to update the status of an application, click the **Change Application Status** button.



Once the new status is selected, the coalition has the ability to add a comment and click the **Save** button.

SR Application: Change Status **Coalition Reviewing**

**Application Status:** \*

Coalition Reviewing

**Comments:**

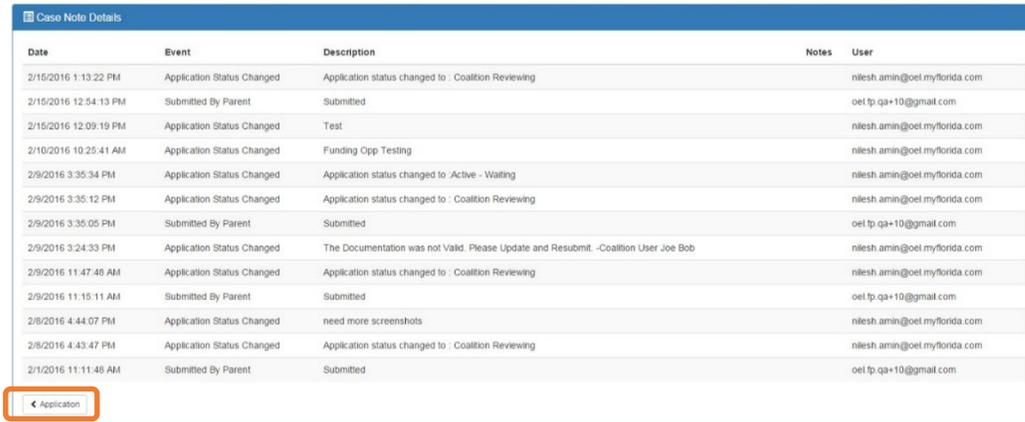
Note: In case of rejection this comment will be included in the Email Notification to the parent

## View Case Notes

The coalition user can view Case Notes by clicking the **View Case Notes** button.



To get back to the School Readiness Application, the coalition user will click the **<Application** button. Do not use the Back button on the internet browser.



Date	Event	Description	Notes	User
2/15/2016 1:13:22 PM	Application Status Changed	Application status changed to : Coalition Reviewing		nilesh.amin@oet.myflorida.com
2/15/2016 12:54:13 PM	Submitted By Parent	Submitted		oet.tp.qa+10@gmail.com
2/15/2016 12:09:19 PM	Application Status Changed	Test		nilesh.amin@oet.myflorida.com
2/10/2016 10:25:41 AM	Application Status Changed	Funding Opp Testing		nilesh.amin@oet.myflorida.com
2/9/2016 3:35:34 PM	Application Status Changed	Application status changed to : Active - Waiting		nilesh.amin@oet.myflorida.com
2/9/2016 3:35:12 PM	Application Status Changed	Application status changed to : Coalition Reviewing		nilesh.amin@oet.myflorida.com
2/9/2016 3:35:05 PM	Submitted By Parent	Submitted		oet.tp.qa+10@gmail.com
2/9/2016 3:24:33 PM	Application Status Changed	The Documentation was not Valid. Please Update and Resubmit. -Coalition User Joe Bob		nilesh.amin@oet.myflorida.com
2/9/2016 11:47:48 AM	Application Status Changed	Application status changed to : Coalition Reviewing		nilesh.amin@oet.myflorida.com
2/9/2016 11:15:11 AM	Submitted By Parent	Submitted		oet.tp.qa+10@gmail.com
2/8/2016 4:44:07 PM	Application Status Changed	need more screenshots		nilesh.amin@oet.myflorida.com
2/8/2016 4:43:47 PM	Application Status Changed	Application status changed to : Coalition Reviewing		nilesh.amin@oet.myflorida.com
2/1/2016 11:11:48 AM	Submitted By Parent	Submitted		oet.tp.qa+10@gmail.com

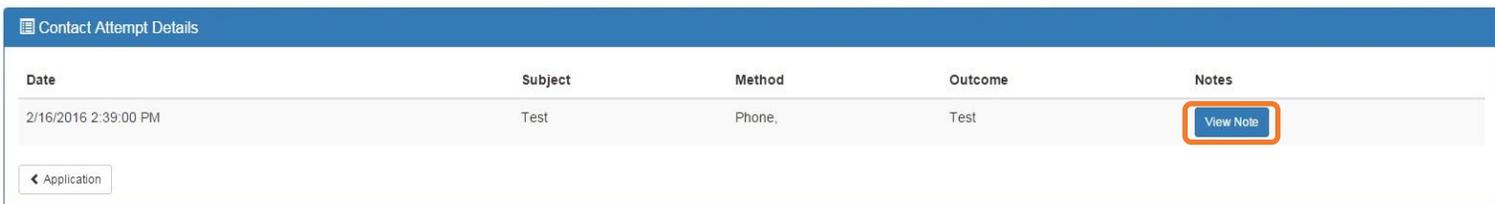
[← Application](#)

## View Contact Attempts

The coalition user can view Contact Attempts by clicking the **View Contact Attempts** button.



Once on the Contact Attempt Details page, click the **View Note** button to view any notes regarding the contact attempt. To get back to the School Readiness application, the coalition user will click the **<Application** button. Do not use the Back button on the internet browser.



Date	Subject	Method	Outcome	Notes
2/16/2016 2:39:00 PM	Test	Phone,	Test	<a href="#">View Note</a>

[← Application](#)

Clicking the **View Note** button should display the following:



## Download SR-01

The coalition user can view the family's SR application by clicking the **Download SR-01** button.

 Download SR-01

## Processing a School Readiness Application

The first step in processing a School Readiness Application is to search for **Submitted** applications. To begin the review, the coalition user will click the **Confirmation Number** link of the record assigned to review.

Search Results - Status: Submitted 1 Total Records

Show : 10 entries ▾

Confirmation Number	Parents	Original Submission Date	Application Status	Date Last Updated	Updated By
<a href="#">SR_0000000026</a>	First Last	2/1/2016	Submitted	2/15/2016	oel.fp.qa+10@gmail.com

The following page will display:

Review Application - Status **Coalition Reviewing** Household #HR\_0001663279 Confirmation Number # SR\_0000011926

✓ The application is complete. Please review the application before approving or rejecting.

+ Add Note + Add Contact Attempt + Non SR Funding + Verify Change Application Status View Case Notes View Contact Attempts Download SR-01

### Parents

+ Add a Parent

Parent #1:

Ethnicity: **Non-Hispanic**  
 Races: **White**  
 Gender: **Female**  
 Marital Status: **Single**  
 Date Of Birth: **07/13/2000**  
 SSN: [REDACTED]  
 Person ID: [REDACTED]

Primary [REDACTED] ✓  
 Are you currently homeless or located at a Domestic Violence Shelter: **✗ No**

Primary Residence Address  
 Is this a RCMA family?   
 Fort Myers, Florida 33907  
 County: **Lee**  
 Family is not displaced.

Email: [REDACTED]  
 Preferred Method of Contact: **Primary Contact Number**  
 Primary language spoken at home: **English**

Do you have a form from another agency titled Child Care Application and Authorization?: **✗ No**  
 Are you currently working at least 20 hours per week, or if there are two parents in the household, are both of you working for a combined 40 hours per week?: **✗ No**  
 Are you currently searching for a job?: **✗ No**  
 Are you currently employed but working less than 20 hours per week?: **✓ Yes**  
 Are you currently enrolled and attending school?: **✗ No**  
 In School and Working?: **✗ No**  
 Are you disabled or unable to work as documented by a physician or a letter from the Social Security Administration awarding you disability benefits?: **✗ No**  
 Are you currently active duty (serving full-time) in the US Military?: **✗ No**  
 Are you a member of either a National Guard Unit or Military Reserve Unit?: **✗ No**

Employer: **J**  
 How often do you get paid?: **Bi-weekly**  
 Rate of Pay: **\$10.00**  
 Number of hours per week worked: **10 hrs/week**  
 Annual Income: **\$5,200.00**

Employer Address  
 Florida  
 Phone: [REDACTED]

Child support and/or alimony that is deducted from your paycheck: **✗ No**

+ Add a Child Information

### Children Needing Care

test double email

Ethnicity: **Prefer not to answer**  
 Races: **Prefer not to answer**  
 Gender: **Female**  
 Date Of Birth: **10/25/2010**  
 SSN: [REDACTED]  
 Parent #1's Relationship to child: **Parent/Step Parent**  
 Citizen or lawfully entered alien for permanent residence?: **✓ Yes**  
 Have an individual Educational Plan (IEP) or Individual Family Service Plan (IFSP)?: **✗ No**  
 Have a 504 designation?: **✗ No**  
 Participated in a Head Start program?: **✗ No**  
 Child Care is needed on the following days: **Monday, Tuesday, Wednesday, Thursday, Friday**  
 Type of care is needed: **Full-time**

Child Status  
 Child Status: **Active - Waiting**  
 Eligibility: **WRC-RCI**  
 Priority: **9**  
 Status Change Date: **01/18/2017**  
 Reason: **NIA**  
 Original Waiting List Date: **N/A**  
 Revalidation Notification Date: **02/23/2017**  
 Revalidation Due Date: **N/A**

Eddie Munster

Ethnicity: **Non-Hispanic**  
 Races: **Prefer not to answer**  
 Gender: **Male**  
 Date Of Birth: **12/08/2012**  
 SSN: [REDACTED]  
 Parent #1's Relationship to child: **Parent/Step Parent**  
 Citizen or lawfully entered alien for permanent residence?: **✓ Yes**  
 Have an individual Educational Plan (IEP) or Individual Family Service Plan (IFSP)?: **✗ No**  
 Have a 504 designation?: **✗ No**  
 Participated in a Head Start program?: **✗ No**  
 Child Care is needed on the following days: **Monday, Tuesday, Wednesday, Thursday, Friday**  
 Type of care is needed: **Full-time**

Child Status  
 Child Status: **Active - Waiting**  
 Eligibility: **BGS-TCC**  
 Priority: **9**  
 Status Change Date: **01/18/2017**  
 Reason: **NIA**  
 Original Waiting List Date: **N/A**  
 Revalidation Notification Date: **02/23/2017**  
 Revalidation Due Date: **N/A**

+ Add a Household Member

+ Add Note + Add Contact Attempt + Verify Change Application Status View Case Notes View Contact Attempts Download SR-01

## Coalition Reviewing Status

Confirmation Number	Parents	Original Submission Date	Application Status	Date Last Updated	Updated By
SR_0000000026	First Last	2/1/2016	Submitted	2/15/2016	oel.fp.qa+10@gmail.com

Once the coalition user clicks the **Confirmation Number** link, the status of the application is systematically changed to **Coalition Reviewing**. An automated email message from **DONOTREPLY@oel.myflorida.com** is sent to the Family Portal user's email address, notifying them that the application is being reviewed by the early learning coalition.

Also, an automated Case Note will be recorded to reflect the status change and user name of the user who is reviewing the application.

The application can be changed to **Rejected** or set to one of the **Active** statuses, based on local application processes. If the application does not have the information needed to determine if the family is potentially eligible for funding, the application should be **Rejected**. If the application appears to meet eligibility requirements and no funding is available in the coalition services area, the child status should be changed to **Waiting**. If funding is available but additional documents are needed to authorize eligibility during an eligibility interview, the child status should be changed to **Pending**. If funding is available and eligibility and enrollment have been entered, the child status should be changed to **Active**.

**NOTE:** Coalition users can select families receiving RCMA services with an "Is this a RCMA family" checkbox under Primary Residence Address.

## Rejected Status

To reject an application, the coalition user must click the **Change Application Status** button.

Once on the Change Application Status page, select **Rejected** in the Application Status dropdown menu.

Application Status: \*

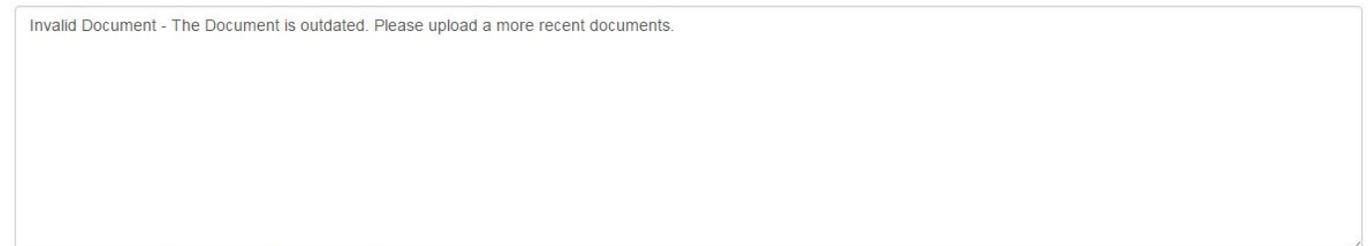


Enter the reason for the rejection in the comments section; the comment will be included in the automated email sent to the Family Portal user from **DONOTREPLY@oel.myflorida.com**. After entering all required fields, click **Save** to proceed.

Application Status: \*



Comments:



*Note: In case of rejection this comment will be included in the Email Notification to the parent*

The status has been updated at the top of the application.

School Readiness Application - Status: **Rejected** Confirmation Number #: SR\_000000026

The School Readiness application Status : Rejected

Once in **Rejected** status, the SR Application Manager will not be able to edit the application until the application is resubmitted by the family.

### Inactive Status

To change an application status from **Inactive** to **Active** or **Coalition Reviewing**, the coalition user must click the **Change Application Status** button.

Once on the Change Application Status page, select **Active** or **Coalition Reviewing** in the Application Status dropdown menu.

Change SR Application and Child Status

Application Status: **Inactive**

Application Status\*

- Active
- Inactive**
- Coalition Reviewing

Inactivation Reason\*

Other

Comments\*

Note: In the case of rejection or inactivation, this comment will be included in the email notification that is sent to the parent.

Save Cancel

Click **Save** to proceed.

## Active Statuses

To activate services for a child, the coalition user must click the **Change Household Status** button.

Select one of the **Active** child status types:

- **Waiting**: Puts the children listed in need of care on the application on the waiting list until funding is available.
- **Pending**: Contact has been made to the parent that funding is available and additional documentation is required during an eligibility interview to authorize services.
- **Active**: Eligibility has been authorized and child enrollment(s) have been made.

## Changing Child Statuses

When a child is removed from the waiting list due to authorization of eligibility, the child status should be changed from **Waiting** to **Active**.

When a child is removed from the waiting list due to non-compliance or ineligibility, the child status should be changed from **Waiting** to **Terminated**.

If a child's eligibility and enrollment are terminated, the child status must be **Terminated** and the application status changed to **Inactive**.

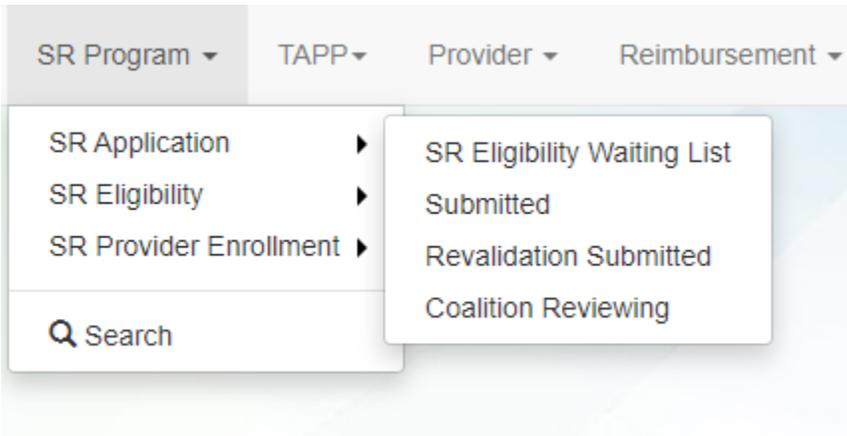
The Revalidation Notification Date will system-populate based on the original waiting list date entered when the application status was changed to **Waiting**. This process should display 150 days from the original waiting list date entered and will change to reflect a new 150-day period each time a revalidation occurs.

## SR Eligibility Process

Once funding becomes available for a child, the coalition user will send a funding notification to the family.

### Generate Funding Notification

Under the **SR Program** dropdown menu, select **SR Application**, then **SR Eligibility Waiting List**.



**NOTE:** All household statuses will display, but the child status must be **Waiting** for the application to display on the Waiting List. A funding notification can be sent to household statuses of **Coalition Reviewing**, **Active**, and **Active – Pending Update**. Household statuses of **Inactive**, **Revalidation Incomplete**, or **No Status** (see below with a grayed-out status and a grayed-out checkbox) will display on the waiting list but cannot be sent a funding notification.

<input type="checkbox"/>	<a href="#">SR_0000001883</a>	P1 CT03	C1 CT03	Leon	Revalidation Incomplete
<input type="checkbox"/>	<a href="#">SR_0000001883</a>	P1 CT03	C2 CT02	Leon	Revalidation Incomplete
<input type="checkbox"/>	<a href="#">SR_0000001873</a>	Jamie York	Clarence york	Leon	Inactive
<input type="checkbox"/>	<a href="#">SR_0000001881</a>	Thomas Scott	Michael Carter	Leon	Inactive
<input type="checkbox"/>	<a href="#">SR_0000001853</a>	Pamela Smith	Jamie Smith	Leon	Active
<input type="checkbox"/>	<a href="#">SR_0000001839</a>	P1 TS04	C2 TS04	Leon	Active
<input type="checkbox"/>	<a href="#">SR_0000001836</a>	Brick City	Onion Latham	Leon	Active

The SR Waiting List will display. For each child that has available funding, check the **Send Funding Notification** checkbox, and check the **Generate PDF** box, if a physical copy of the notification is needed. Then, click the **Generate Funding Notification** button. The **Show entries** dropdown displays 10, 25, 50, 100, 1000, or all records.

School Readiness Waiting List 40 Total Records

Show 10 entries Clear All Filters Search:

Send Funding Notification Select All	Generate PDF Select All	Confirmation Number	Household ID	Parent First Name	Parent Last Name	Child First Name	Child Last Name	County	Status	Date of Birth	Age	Priority	Billing Group	Eligibility	Original Wait List Date
<input type="checkbox"/>	<input type="checkbox"/>	SR_00010	786520					Leon	Inactive		4y 5m	4	BG8	ECON	01/04/2022
<input type="checkbox"/>	<input type="checkbox"/>	SR_00010	1897798					Leon	Active		2y 4m	4	BG8	ECON	03/23/2022
<input type="checkbox"/>	<input type="checkbox"/>	SR_00010	1897798					Leon	Active		2y 4m	4	BG8	ECON	03/23/2022
<input type="checkbox"/>	<input type="checkbox"/>	SR_00010	1897570					Leon	Active		2y 7m	4	BG8	ECON	03/23/2022
<input type="checkbox"/>	<input type="checkbox"/>	SR_00010	1888402					Taylor	Active		2y 4m	4	BG8	ECON	03/23/2022
<input type="checkbox"/>	<input type="checkbox"/>	SR_00010	1888402					Taylor	Active		7y 2m	4	BG8	ECON	03/23/2022
<input type="checkbox"/>	<input type="checkbox"/>	SR_00010	1888402					Taylor	Active		3y 8m	4	BG8	ECON	03/23/2022
<input type="checkbox"/>	<input type="checkbox"/>	SR_00010	1685517					Leon	Active		9y 0m	4	BG8	ECON	03/23/2022
<input type="checkbox"/>	<input type="checkbox"/>	SR_00010	1685517					Leon	Active		9y 0m	4	BG8	ECON	03/23/2022
<input type="checkbox"/>	<input type="checkbox"/>	SR_00010	1685517					Leon	Active		10y 9m	4	BG8	ECON	03/23/2022

Showing 1 to 10 of 40 entries. Previous 1 2 3 4 Next

[Generate Funding Notification](#)

Once a funding notification has been generated for a child, the child will be removed from the School Readiness Waiting List screen.

The parent will receive an email from [DONOTREPLY@oel.myflorida.com](mailto:DONOTREPLY@oel.myflorida.com).

**NOTE: Due to continuing updates, the email text displayed below may differ from the email the parent receives.**

**Notice of School Readiness Funding From The ELC of the Big Bend Region**

Hello,

The ELC of the Big Bend Region would like you to know they now have funding to assist you with paying for child care.

**IMPORTANT NOTE:** You must respond by **08/05/2018** or your application will expire and you will have to reapply for the waitlist.

You will need to provide the following documents to determine your eligibility as well as your parent copayment. Please remember, you may be asked for additional documents to support your eligibility for services.

**Identity**

Please provide one of the following documents to verify your identity:

- Florida Driver's License
- Valid picture identification (must be government issued)

**Child Documentation**

Provide at least one of the following documents to verify the child's age:

- An original or certified copy of the child's birth record,
- An original or certified copy of the child's certificate of baptism or other religious record of the child's birth, with an affidavit stating that the certificate is true and correct,
- An insurance policy on the child's life which has been in force for at least 2 years,
- A passport or certificate of the child's arrival in the United States,
- An immunization record signed by a public health officer or licensed practicing physician, or A valid military dependent identification card.
- Proof of guardianship – court ordered documents (if applicable)

**Family Size**

Please provide at least one of the following documents to verify your family size:

- Documentation of civil status (proof of separation/divorce), if applicable.
- Child Care Authorization form from referring agency
- Food Stamp Award Letter

### Residency

Provide at least one of the following documents to verify residency:

- Utility bill (electric, gas, water), cable, internet or home phone bill dated within 12 months of the date the child application is submitted.
- Current and signed residential rental agreement or receipt from rental payment dated within 12 months of the date the child application is submitted.
- Government-issued document (e.g., Florida driver's license, Florida identification card, property tax assessment showing a homestead exemption), or
- Military order showing that the child's parent is a service member in the United States Armed Forces and is assigned to duty and resides in Florida when the child attends the school readiness program (e.g., permanent change of station).
- Current proof of residence with your name (examples: lease/mortgage statement signed by all parties, property taxes, current utility bill, current mail from FOOD Stamps/Medicaid (within the last 30 days), paystubs).
- If living with someone - Provide their residency document and a notarized statement written by homeowner confirming their address and that you and child(ren) live in their home, if applicable

### Education/Academic Activity

If you are currently enrolled in school, please provide the following documents:

- Current school schedule with your name on official school letterhead
- Proof of enrollment from an accredited educational institution.

### Employment

If you are currently employed, please provide the following (as applicable):

Current and consecutive paystubs from employment income (must be working at least 20 hours per week):

- four (4) weekly paystubs, or
- two (2) biweekly paystubs, or
- two (2) semi-monthly paystubs, or
- one (1) monthly paystub, or
- Self-Employment-
  - Business account ledgers, or
  - Written documentation from customers or contractors, or
  - Federal tax returns

Verification of Employment (VOE) and Loss of Income form completed by your employer. Verification of Employment may be submitted if applicant has been working less than 4 weeks with current employer.

State employees may submit a printout of hours worked from People First website.

### Earned/ Unearned Income

Please provide the following documents as applicable:

- Proof of all other earned and unearned income within the last four (4) weeks (child support, alimony, social security, veterans' benefits, unemployment, or adoption subsidy, etc.)
- Social security letter must be dated for current year and give a description of the reason the income is awarded (i.e. disabled child; dependent of wage earner; survivors' benefits, etc)
- Physician disability statement confirming the parent is exemption from work requirement and providing recommendation for child care (MUST be dated and signed by the physician only).
- If income such as child support or alimony is ordered but not received, submit current documentation/printout confirming non-receipt.
- Proof of Relative Caregivers/Relative Caretaker (TANF) funds by obtaining the current printout from DCF Access web account (must print detail pages that show the names of the children served)
- For self-employment and cash payment jobs ? call the office and ask to speak with a specialist for more information.

If the above documents are not available, you have any questions about the required documents, or need assistance with uploading the documents, please call the ELC of the Big Bend Region and ask to speak with a specialist for more information.

If you have any questions about the required documents or need assistance uploading documents, please contact the early learning coalition at the number listed below. The ELC of the Big Bend Region also provides Child Care Resource and Referral (CCR&R) services. CCR&R is the front door for family services in your county. CCR&R staff will let you know about community resources, child care options and other information that may be of assistance to you. Please contact your early learning coalition and ask to speak to a CCR&R specialist for further assistance.

Thank you,

ELC of the Big Bend Region  
(866) 973-9030  
<http://www.elcbigbend.org/>

The child status changes to **Pending Eligibility**. The family has 30 days to respond to the funding notification by completing the Eligibility Verification Wizard or the notification will expire, and the coalition will determine if the child should be placed back on the waiting list or terminate the SR Application.

**School Readiness Funding** [Download Consumer Education Statement](#)

The following table shows the School Readiness funding status for all of the children in your household.

Child Name	Screenings and Assessments	EV Number	Status	Notification Expiration Date	Enrollment Status	Provider Name	Payment Certificate
DEI Test Child 1	<a href="#">Screening History</a>	EV_005109383	Pending Eligibility	10/30/2024	-	-	-
DEI Test Child 2	<a href="#">Screening History</a>	EV_005109384	Pending Eligibility	10/30/2024	-	-	-

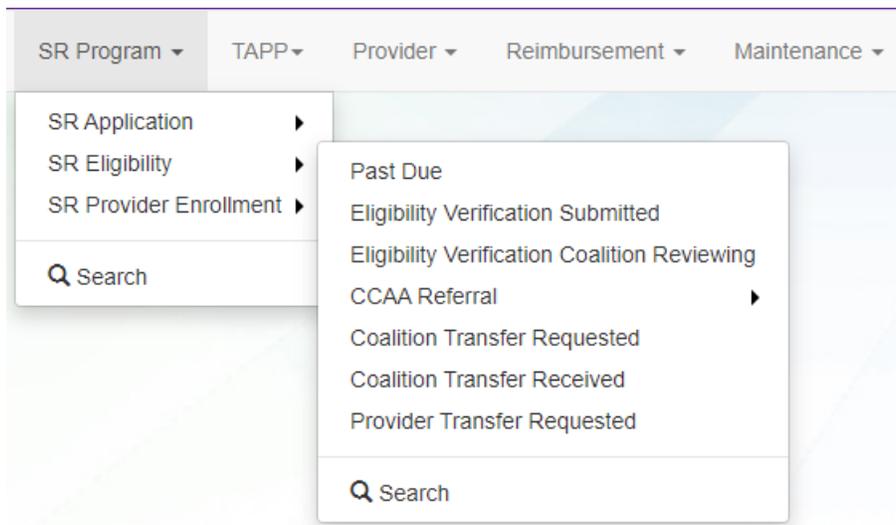
TO VIEW HISTORICAL PAYMENT CERTIFICATES AND/OR TERMS & CONDITIONS [CLICK HERE](#)  
 Please click the Verify Eligibility button to begin (or continue) the process of verifying your family's eligibility.

[Verify Eligibility](#)

## Eligibility Verification

Once a parent responds to the funding notification, the eligibility must be verified.

From the *SR Program* tab, select **SR Eligibility**, then **Search**.



Enter the first and/or last name of the parent or child, and click **Search**.

Search For A School Readiness Eligibility Verification

Eligibility Verification Number <input type="text"/> Household Process Code <input type="text"/> Household Status Code <input type="text"/> Child Status Code <input type="text"/> Include Past Due? <input type="radio"/> Yes <input type="radio"/> No <input type="button" value="Refresh"/> Parent Name First Name <input type="text"/> Last Name <input type="text"/> Child Name First Name <input type="text"/> Last Name <input type="text"/> Child Age <input type="text"/> to <input type="text"/> Child Date of Birth <input type="text"/> to <input type="text"/>	Priority <input type="text" value="Select One"/> Funding Type <input type="radio"/> SR <input type="radio"/> Local <input type="button" value="Refresh"/> CCAA <input type="radio"/> Yes <input type="radio"/> No <input type="button" value="Refresh"/> Assigned Counselor <input type="text" value="Select One"/> Assigned Date <input type="text" value="MM/DD/YYYY"/> to <input type="text" value="MM/DD/YYYY"/> County <input type="text"/> Zip Code <input type="text"/> Last Updated Date <input type="text" value="MM/DD/YYYY"/> to <input type="text" value="MM/DD/YYYY"/> Coalition Transfer <input type="radio"/> Requested <input type="radio"/> In <input type="radio"/> Out <input type="button" value="Refresh"/> Family Requested for Provider Transfer <input type="radio"/> Yes <input type="radio"/> No <input type="button" value="Refresh"/>
---	---

Click the **Eligibility Verification (EV) Number** of the child for whom the funding notification was sent.

Search Results

Click Here For Filtering Tips

Show 10 search results. [Assign Counselor](#) [Clear All Filters](#)

Eligibility Verification Number	Child Name	Assigned Counselor	Date of Birth	Age	Parent Name	SR Process	SR Status	Days in SR Status	SR Status Change Date
Filter	Filter	Filter	Filter	Filter	Filter	Filter	Filter	Filter	Filter
<input type="checkbox"/> EV_0000		Unassigned		4			Active	0	04/26/2019

...

[← Return to Search](#)

[Assign Counselor](#) [Clear All Filters](#) Search:

Child Status	Billing Group	Eligibility Code	Priority	Assigned Date	Past Due	CCAA	Last Updated Date	Zip Code	County	Coalition Transfer Requested	Coalition Transferring In	Coalition Transferring Out	Provider Transfer
Filter	Filter	Filter	Filter	Filter	Filter	Filter	Filter	Filter	Filter	Filter	Filter	Filter	Filter
Terminated	BG1	FAM	1	N/A	No	No	N/A	33145	Miami-Dade	False	False	False	False

The EV status is **Submitted – Eligibility Verification**, and the child status is **Pending Eligibility**.

Eligibility Verification **Submitted – Eligibility Verification** Eligibility Verification Number: **6300**

[Assign Counselor](#) [Change Household Status](#) [Case Notes](#) [Add Note](#)

**Household at a Glance...** **Household ID: 1344**

<b>Children Needing Care</b> Test Tester JR (child, male, age 0)	<b>Parents</b> Test Tester (adult, male) esdasd esdasd (adult, female)	<b>Other Household Members</b>	<b>Total Household Income Calculations</b> Employment income: <b>\$41,600</b> Alimony and child support income: <b>\$0</b> Other income: <b>\$0</b> Alimony and child support deductions: <b>\$0</b> Total annual gross income: <b>\$41,600</b>
---	--	--------------------------------	--

**Contact Information**

<b>Primary Address</b> <a href="#">Change</a>	<b>Primary Parent</b> Email: ledbetter.kivans+8@gmail.com Primary phone: (555) 555-5555	<b>Family Portal Account</b> ledbetter.kivans+8@gmail.com	<a href="#">History</a> <a href="#">Edit</a>
---	---	--	---

**Children Needing Care**

Test Tester JR (child, male, age 0) <a href="#">Change</a> <b>Eligibility status:</b> Pending Eligibility <b>Enrollment status:</b> Not Enrolled Date of birth: 05/10/2018 Ethnicity: Prefer not to answer Races: Prefer not to answer Care days: Monday-Friday Care types: Fulltime Citizenship: US Citizen or Qualified Alien Age verification: Verified Medicaid eligibility: Not eligible	<a href="#">History</a> <a href="#">Change Status</a> <a href="#">Edit</a>
---	--

[Add Child](#)

**Parents**

Not Test Tester (adult, male, primary parent) Date of birth: 05/10/2000 Ethnicity: Prefer not to answer Races: Prefer not to answer Marital status: Divorced Email: ledbetter.kivans+9@gmail.com Primary phone: (777) 777-7777 Disabled: No Disability documentation: No documents available	<a href="#">History</a> <a href="#">Edit</a>
--	---

[Add Parent](#)

**Other Household Members**

Your application contains no people listed as other household members.

[Add Other Household Member](#)

**CCAA Referral Information**

Tester Not Test Referring Agency: test Referral Number: 123 Referral Start Date: 05/10/2018 Referral End Date: 05/10/2019 Referring Agency Staff Name: Comments:	<a href="#">Edit</a> <a href="#">Remove</a>
--	---

Do you have a form from another agency titled Child Care Application and Authorization? No

**CCAA Referral Documentation**  
There are no attached documents of this type.

[Upload Document](#)

- Children Needing Care
- Parents
- Other Household Members
- CCAA Referral Information
- Employment**
- School/Training
- Alimony and Child Support Income
- Other Income
- Deductions
- Totals
- Documents

**Employment**

**Not Test Tester** [Edit](#) [Remove](#)

**OEL**

Location: Florida  
 Schedule: 40 hours per week, Monday-Friday  
 Pay: \$10.00 per hour, paid monthly  Omit

[Add Job...](#)

[History](#)

**School/Training**

**Not Test Tester**

Not Test is not currently attending a school or training facility.

[Add School or Training Facility...](#)

[History](#)

**Alimony and Child Support Income**

**Not Test Tester** [Edit](#)

No alimony or child support income.

Omit Alimony  
 Omit Child Support

[History](#)

**Other Income**

No one in the household is receiving additional income.

[Add Other Income...](#) [History](#)

**Deductions**

**Not Test Tester** [Edit](#)

\$100 per month paid in alimony, \$122 per month paid in child support.

Omit Alimony  
 Omit Child Support

[History](#)

**Totals**

Totals information goes here...

**Documents**

**Additional Documentation**

There are no attached documents of this type.

[Upload Document...](#)

**Career Source Regional Workforce Welfare Transition Program Participant**

There are no attached documents of this type.

[Upload Document...](#)

**NOTE:** Coalition users can determine if families receive RCMA services with an “RCMA Family” Yes or No answer under Primary Address.

## Add a Child to an Eligibility Verification

### Scenario 1

To add a new child, the coalition can trigger the Eligibility Verification Wizard for the family to complete. Click the **Add Child...** button to add a child to the Children Needing Care section.

Children Needing Care

<p><b>DEL Test Child 1</b> (child, female, age 5) <b>Eligibility status:</b> Pending Eligibility <b>Enrollment status:</b> Not Enrolled <b>Date of birth:</b> 02/10/2019 <b>Ethnicity:</b> Prefer not to answer <b>Races:</b> Prefer not to answer <b>Care days:</b> Monday-Friday <b>Care types:</b> Fulltime <b>Citizenship:</b> US Citizen or Qualified Alien <b>Age verification:</b> Unknown <b>Medicaid eligibility:</b> Unknown <b>Terms and Conditions:</b> N/A <b>Allow Developmental Screening:</b> N/A <b>Allow Child Assessment:</b> N/A <b>Person ID:</b> 7494034 <b>Eligibility verification ID:</b> EV_0001096983</p> <p>History Change Status Edit</p>	<p><b>DEL Test Child 2</b> (child, male, age 5) <b>Eligibility status:</b> Pending Eligibility <b>Enrollment status:</b> Not Enrolled <b>Date of birth:</b> 02/10/2019 <b>Ethnicity:</b> Prefer not to answer <b>Races:</b> Prefer not to answer <b>Care days:</b> Monday-Friday <b>Care types:</b> Fulltime <b>Citizenship:</b> None <b>Age verification:</b> Unknown <b>Medicaid eligibility:</b> Unknown <b>Terms and Conditions:</b> N/A <b>Allow Developmental Screening:</b> N/A <b>Allow Child Assessment:</b> N/A <b>Person ID:</b> 7494035 <b>Eligibility verification ID:</b> EV_0001096984</p> <p>History Change Status Edit</p>
--	---

Add Child

Enter the required child information and click **Save**.

Add Child Needing Care

**First Name \***

**Middle Name**

**Last Name \***

**Suffix**

**Ethnicity \***  Hispanic  Non-Hispanic  Prefer not to answer

**Races (select all that apply) \***  Asian  Hawaiian / Pacific  Black  US Indian / Alaskan  White  Prefer not to answer

**Sex \***  Male  Female

**Date of Birth \***

**SSN**

**Days on which childcare is needed (select all that apply) \***

- Monday
- Tuesday
- Wednesday
- Thursday
- Friday
- Saturday
- Sunday

**Types of care needed (select all that apply) \***

- Fulltime
- Parttime
- Before School
- After School
- Days School is out

Save Cancel

he child now has a status of **Added**.

Children Needing Care

<p>DEL Test Child 3 (child, male, age 5) <b>Added</b></p> <p><b>Eligibility status:</b> (new) <b>Date of birth:</b> 03/01/2019 <b>Ethnicity:</b> Prefer not to answer <b>Races:</b> Prefer not to answer <b>Care days:</b> Monday-Friday <b>Care types:</b> Fulltime, Parttime <b>Citizenship:</b> Unknown <b>Age verification:</b> Unknown <b>Medicaid eligibility:</b> Unknown <b>Terms and Conditions:</b> N/A <b>Allow Developmental Screening:</b> N/A <b>Allow Child Assessment:</b> N/A <b>Person ID:</b> 7494078</p> <p>History Change Status Edit Remove</p>	<p>DEL Test Child 1 (child, female, age 5)</p> <p><b>Eligibility status:</b> Pending Eligibility <b>Enrollment status:</b> Not Enrolled <b>Date of birth:</b> 02/10/2019 <b>Ethnicity:</b> Prefer not to answer <b>Races:</b> Prefer not to answer <b>Care days:</b> Monday-Friday <b>Care types:</b> Fulltime <b>Citizenship:</b> US Citizen or Qualified Alien <b>Age verification:</b> Unknown <b>Medicaid eligibility:</b> Unknown <b>Terms and Conditions:</b> N/A <b>Allow Developmental Screening:</b> N/A <b>Allow Child Assessment:</b> N/A <b>Person ID:</b> 7494034 <b>Eligibility verification ID:</b> EV_0001096983</p> <p>History Change Status Edit</p>
<p>DEL Test Child 2 (child, male, age 5)</p> <p><b>Eligibility status:</b> Pending Eligibility <b>Enrollment status:</b> Not Enrolled <b>Date of birth:</b> 02/10/2019 <b>Ethnicity:</b> Prefer not to answer <b>Races:</b> Prefer not to answer <b>Care days:</b> Monday-Friday <b>Care types:</b> Fulltime <b>Citizenship:</b> None <b>Age verification:</b> Unknown <b>Medicaid eligibility:</b> Unknown <b>Terms and Conditions:</b> N/A <b>Allow Developmental Screening:</b> N/A <b>Allow Child Assessment:</b> N/A <b>Person ID:</b> 7494035 <b>Eligibility verification ID:</b> EV_0001096984</p> <p>History Change Status Edit</p>	

Add Child

Children Needing Care

<p>DEL Test Child 3 (child, male, age 5) <b>Added</b></p> <p><b>Eligibility status:</b> (new) <b>Date of birth:</b> 03/01/2019 <b>Ethnicity:</b> Prefer not to answer <b>Races:</b> Prefer not to answer <b>Care days:</b> Monday-Friday <b>Care types:</b> Fulltime, Parttime <b>Citizenship:</b> Unknown <b>Age verification:</b> Unknown <b>Medicaid eligibility:</b> Unknown <b>Terms and Conditions:</b> N/A <b>Allow Developmental Screening:</b> N/A <b>Allow Child Assessment:</b> N/A <b>Person ID:</b> 7494078</p> <p>History <b>Change Status</b> Edit Remove</p>	<p>DEL Test Child 1 (child, female, age 5)</p> <p><b>Eligibility status:</b> Pending Eligibility <b>Enrollment status:</b> Not Enrolled <b>Date of birth:</b> 02/10/2019 <b>Ethnicity:</b> Prefer not to answer <b>Races:</b> Prefer not to answer <b>Care days:</b> Monday-Friday <b>Care types:</b> Fulltime <b>Citizenship:</b> US Citizen or Qualified Alien <b>Age verification:</b> Unknown <b>Medicaid eligibility:</b> Unknown <b>Terms and Conditions:</b> N/A <b>Allow Developmental Screening:</b> N/A <b>Allow Child Assessment:</b> N/A <b>Person ID:</b> 7494034 <b>Eligibility verification ID:</b> EV_0001096983</p> <p>History Change Status Edit</p>
<p>DEL Test Child 2 (child, male, age 5)</p> <p><b>Eligibility status:</b> Pending Eligibility <b>Enrollment status:</b> Not Enrolled <b>Date of birth:</b> 02/10/2019 <b>Ethnicity:</b> Prefer not to answer <b>Races:</b> Prefer not to answer <b>Care days:</b> Monday-Friday <b>Care types:</b> Fulltime <b>Citizenship:</b> None <b>Age verification:</b> Unknown <b>Medicaid eligibility:</b> Unknown <b>Terms and Conditions:</b> N/A <b>Allow Developmental Screening:</b> N/A <b>Allow Child Assessment:</b> N/A <b>Person ID:</b> 7494035 <b>Eligibility verification ID:</b> EV_0001096984</p> <p>History Change Status Edit</p>	

Add Child

Click **Change Status** for the child.

Not Test Tester (child, male, age 8) Changed

**Eligibility status:** (new)  
**Date of birth:** 07/01/2010  
**Ethnicity:** Prefer not to answer  
**Races:** Prefer not to answer  
**Care days:** Monday-Friday  
**Care types:** Before School, After School, Days School is out  
**Citizenship:** Unknown  
**Age verification:** Unknown  
**Medicaid eligibility:** Unknown

History  
 Change Status  
 Edit Remove

Change the New Status to **Pending Eligibility** and click **Save**.

Current Status (new)

New Status\* Pending Eligibility

Save Cancel

### Children Needing Care

**DEL Test Child 3** (child, male, age 5) Added

**Eligibility status:** Pending Eligibility  
**Enrollment status:** Not Enrolled  
**Date of birth:** 03/01/2019  
**Ethnicity:** Prefer not to answer  
**Races:** Prefer not to answer  
**Care days:** Monday-Friday  
**Care types:** Fulltime, Parttime  
**Citizenship:** Unknown  
**Age verification:** Unknown  
**Medicaid eligibility:** Unknown  
**Terms and Conditions:** N/A  
**Allow Developmental Screening:** N/A  
**Allow Child Assessment:** N/A  
**Person ID:** 7494078  
**Eligibility verification ID:** EV\_0001096992

Required information is missing or invalid.

History  
 Change Status  
 Edit

To allow the family to update the EV, set the EV Household Status to **Pending Update**. Click **Change Household Status**.

**Eligibility Verification** Active

[Assign Counselor](#) [Change Household Status](#)

Select **Pending Update** for the New Status, enter Comments, and click **Save**.

**Change Household Eligibility Status**

Current Status: Active

New Status\*: Pending Update

Review Period:

Comments\*: Complete the Eligibility Wizard for the new child. |

[Save](#) [Cancel](#)

The EV Household Status is now **Pending Update – Update**.

**Eligibility Verification** Pending Update - Update

[Assign Counselor](#) [Change Household Status](#)

The family will receive an email from **DONOTREPLY@oel.myflorida.com**.

Hello,

You have requested the ELC of the Big Bend Region to open your Family Portal account for you to make any necessary updates. If you did not make this request, please contact the ELC of the Big Bend Region as soon as possible. To access your family portal account, go to: <https://familyservices.floridaearlylearning.com/>

The ELC of the Big Bend Region also provides Child Care Resource and Referral (CCR&R) services. CCR&R is the front door for family services in your county. CCR&R staff will let you know about community resources, child care listings and other information that may be of assistance to you. Please contact your early learning coalition and ask to speak to a CCR&R specialist for further assistance.

If you have any questions you may contact the ELC of the Big Bend Region at the number listed below.

Thank you,

ELC of the Big Bend Region  
8669739030  
<http://www.elcbigbend.org/>

**Please do not reply to this message. Replies to this message are routed to an unmonitored mailbox. If you have questions, please contact your early learning coalition.**

The family will see an **Update Eligibility** button on their Family Portal Profile page.

**School Readiness Funding** [Download Consumer Education Statement](#)

The following table shows the School Readiness funding status for all of the children in your household.

Child Name	Screenings and Assessments	EV Number	Status	Enrollment Status	Provider Name	Payment Certificate
DEL Test Child 1	<a href="#">Screening History</a>	EV_000109083	Pending Eligibility	-	-	-
DEL Test Child 2	<a href="#">Screening History</a>	EV_000109084	Pending Eligibility	-	-	-

TO VIEW HISTORICAL PAYMENT CERTIFICATES AND/OR TERMS & CONDITIONS CLICK HERE  
Please click the Update Eligibility button to update your family's eligibility.

[Update Eligibility](#)

When the family clicks **Update Eligibility**, the Eligibility Verification Wizard is launched.

**UAT Family Portal** [Logout](#)

Home > Family Portal > Eligibility Verification Wizard

**Welcome To The Eligibility Verification Wizard**

The Early Learning Coalition may have funding available to assist in paying for child care. But first, we need your help in confirming that your child is still eligible. This Eligibility Verification Wizard will guide you through the processes of:

1. Verifying your existing information (and updating whatever may have changed), and
2. Uploading documents that validate the information you've provided.

When you're ready to begin, click **Start**.

[← Previous Step](#) [Start](#)

The family will click the green **Yes** or red **No** button in each section.

Home > Family Portal > Eligibility Verification Wizard

1. Household  
2. Employment  
3. School/Training  
4. Other Income  
5. Alimony and Child Support  
6. Child Provider Information  
7. Documents  
8. Review and Submit

### Household Address

Our records indicate the following primary address for your household:

Select if you are currently homeless or located at a Domestic Violence Shelter

Address Line 1\*  
3151 N University Dr

Address Line 2 (Apt, Suite, etc)

City\*  
Coral Springs

County\*  
Broward

Are you a RCMA family?

State\*  
Florida

Zip Code\*  
33065

Proof of Residency\*  
Attach the documentation necessary to establish the household's proof of residency.

Proof of Residency\*  View

Is this information accurate and complete?

**Yes** It is accurate and complete.  **No** I need to update the information.

Previous Step Next Step

The **Next Step** button is disabled until the family chooses a **Yes** or **No** button.

Home > Family Portal > Eligibility Verification Wizard

1. Household  
2. Employment  
3. School/Training  
4. Other Income  
5. Alimony and Child Support  
6. Child Provider Information  
7. Documents  
8. Review and Submit

### Household Address

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City\*  
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County\*  
Broward

Are you a RCMA family?

State\*  
Florida

Zip Code\*  
33065

Proof of Residency\*  
Attach the documentation necessary to establish the household's proof of residency.

Proof of Residency\*  View

Is this information accurate and complete?

**Yes** It is accurate and complete.  **No** I need to update the information.

Previous Step Next Step

- 1. Household
- 2. Employment
- 3. School/Training
- 4. Other Income
- 5. Alimony and Child Support
- 6. Child Provider Information
- 7. Documents
- 8. Review and Submit

### Children Needing Care

Our records indicate that the following people reside in your household as children needing care.

<b>DEL Test Child 3 (Child, Male, Age 5)</b>	
<b>Eligibility status</b> Pending Eligibility	<b>Care days</b> Monday-Friday
<b>Enrollment status</b> Not Enrolled	<b>Care types</b> Fulltime, Parttime
<b>Date of birth</b> 03/01/2019	<b>Terms and Conditions</b> N/A
<b>Ethnicity</b> Prefer not to answer	<b>Allow Developmental Screening</b> N/A
<b>Races</b> Not Enrolled	<b>Allow Child Assessment</b> N/A
<b>Additional information is needed.</b>	
<b>DEL Test Child 1 (Child, Female, Age 5)</b>	
<b>Eligibility status</b> Pending Eligibility	<b>Care days</b> Monday-Friday
<b>Enrollment status</b> Not Enrolled	<b>Care types</b> Fulltime
<b>Date of birth</b> 02/10/2019	<b>Terms and Conditions</b> N/A
<b>Ethnicity</b> Prefer not to answer	<b>Allow Developmental Screening</b> N/A
<b>Races</b> Not Enrolled	<b>Allow Child Assessment</b> N/A
<b>DEL Test Child 2 (Child, Male, Age 5)</b>	
<b>Eligibility status</b> Pending Eligibility	<b>Care days</b> Monday-Friday
<b>Enrollment status</b> Not Enrolled	<b>Care types</b> Fulltime
<b>Date of birth</b> 02/10/2019	<b>Terms and Conditions</b> N/A
<b>Ethnicity</b> Prefer not to answer	<b>Allow Developmental Screening</b> N/A
<b>Races</b> Not Enrolled	<b>Allow Child Assessment</b> N/A
<b>Is this information accurate and complete?</b>	
<input checked="" type="radio"/> <b>Yes</b> It is accurate and complete.	<input type="radio"/> <b>No</b> I need to update the information.

← Previous Step

Next Step →

- 1. Household
- 2. Employment
- 3. School/Training
- 4. Other Income
- 5. Alimony and Child Support
- 6. Child Provider Information
- 7. Documents
- 8. Review and Submit

### Children Needing Care

Use the **Add** and **Remove** buttons to update the list of children needing care. When everything looks good, click **Yes**.

<b>DEL Test Child 3 (Child, Male, Age 5)</b>		<b>Edit</b>
<b>Eligibility status</b> Pending Eligibility	<b>Care days</b> Monday-Friday	
<b>Enrollment status</b> Not Enrolled	<b>Care types</b> Fulltime, Parttime	
<b>Date of birth</b> 03/01/2019	<b>Terms and Conditions</b> N/A	
<b>Ethnicity</b> Prefer not to answer	<b>Allow Developmental Screening</b> N/A	
<b>Races</b> Not Enrolled	<b>Allow Child Assessment</b> N/A	
<b>Additional information is needed.</b>		
<b>DEL Test Child 1 (Child, Female, Age 5)</b>		<b>Edit</b>
<b>Eligibility status</b> Pending Eligibility	<b>Care days</b> Monday-Friday	
<b>Enrollment status</b> Not Enrolled	<b>Care types</b> Fulltime	
<b>Date of birth</b> 02/10/2019	<b>Terms and Conditions</b> N/A	
<b>Ethnicity</b> Prefer not to answer	<b>Allow Developmental Screening</b> N/A	
<b>Races</b> Not Enrolled	<b>Allow Child Assessment</b> N/A	
<b>DEL Test Child 2 (Child, Male, Age 5)</b>		<b>Edit</b>
<b>Eligibility status</b> Pending Eligibility	<b>Care days</b> Monday-Friday	
<b>Enrollment status</b> Not Enrolled	<b>Care types</b> Fulltime	
<b>Date of birth</b> 02/10/2019	<b>Terms and Conditions</b> N/A	
<b>Ethnicity</b> Prefer not to answer	<b>Allow Developmental Screening</b> N/A	
<b>Races</b> Not Enrolled	<b>Allow Child Assessment</b> N/A	
<b>+ Add Child</b>		
<b>Is this information accurate and complete?</b>		
<input checked="" type="radio"/> <b>Yes</b> It is accurate and complete.	<input type="radio"/> <b>No</b> I need to update the information.	

← Previous Step

Next Step →

- 1. Household
- 2. Employment
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- 8. Review and Submit

### Children Needing Care

Please update the child information for DEL Test Child 3, and then click **Save** to save your changes. Or click **Cancel** to discard your changes.

**First Name** \*

**Middle Name**

**Last Name** \*

**Suffix**

**Ethnicity** \*

Hispanic  Non-Hispanic  Prefer not to answer

**Races (select all that apply)** \*

Asian  Hawaiian / Pacific  Black  US Indian / Alaskan  White  Prefer not to answer

**Gender** \*

Male  Female

**Date of Birth** \*

**SSN**

**Proof of U.S. Citizenship Or Qualified Alien** \*

Save

Cancel

- 1. Household
- 2. Employment
- 3. School/Training
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- 5. Alimony and Child Support
- 6. Child Provider Information
- 7. Documents
- 8. Review and Submit

### Children Needing Care

Please update the above information for DEL VET CRR 3, and then click **Save** to save your changes. Or click **Cancel** to discard your changes.

**First Name\***

DEL Test

**Middle Name**

**Last Name\***

Child 3

**Suffix**

**Ethnicity\***

Hispanic  Non-Hispanic  Prefer not to answer

**Race (select all that apply)\***

Asian  Hawaiian / Pacific  Black  US Indian / Alaskan  White  Prefer not to answer

**Gender\***

Male  Female

**Date of Birth\***

03/01/2019

**SSN**

**Days on which childcare is needed (select all that apply)\***

Monday  
 Tuesday  
 Wednesday  
 Thursday  
 Friday  
 Saturday  
 Sunday

**Types of care needed (select all that apply)\***

Fulltime  
 Parttime  
 Before School  
 After School  
 Days School is out

**Proof of Age and Citizenship\***

Attach the documentation necessary to establish the child's proof of age and U.S. citizenship.

**Proof of Age**

test doc .docx View Delete

[Upload Another Document](#)

**Proof of U.S. Citizenship Or Qualified Alien**

test doc 1.docx View Delete

[Upload Another Document](#)

A proof-of-age document is required.  
A proof-of-citizenship document is required.

**Save**

**Cancel**

- 1. Household
- 2. Employment
- 3. School/Training
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- 7. Documents
- 8. Review and Submit

### Children Needing Care

Use the **Add** and **Remove** buttons to update the list of children needing care. When everything looks good, click **Yes**.

<p><b>DEL Test Child 3 (Child, Male, Age 5)</b></p> <p><b>Eligibility status</b> Pending Eligibility</p> <p><b>Enrollment status</b> Not Enrolled</p> <p><b>Date of birth</b> 03/01/2019</p> <p><b>Ethnicity</b> Prefer not to answer</p> <p><b>Races</b> Not Enrolled</p>	<p><b>Care days</b> Monday-Friday</p> <p><b>Care types</b> Fulltime, Parttime</p> <p><b>Terms and Conditions</b> N/A</p> <p><b>Allow Developmental Screening</b> N/A</p> <p><b>Allow Child Assessment</b> N/A</p>	Edit
<p><b>DEL Test Child 1 (Child, Female, Age 5)</b></p> <p><b>Eligibility status</b> Pending Eligibility</p> <p><b>Enrollment status</b> Not Enrolled</p> <p><b>Date of birth</b> 02/10/2019</p> <p><b>Ethnicity</b> Prefer not to answer</p> <p><b>Races</b> Not Enrolled</p>	<p><b>Care days</b> Monday-Friday</p> <p><b>Care types</b> Fulltime</p> <p><b>Terms and Conditions</b> N/A</p> <p><b>Allow Developmental Screening</b> N/A</p> <p><b>Allow Child Assessment</b> N/A</p>	Edit
<p><b>DEL Test Child 2 (Child, Male, Age 5)</b></p> <p><b>Eligibility status</b> Pending Eligibility</p> <p><b>Enrollment status</b> Not Enrolled</p> <p><b>Date of birth</b> 02/10/2019</p> <p><b>Ethnicity</b> Prefer not to answer</p> <p><b>Races</b> Not Enrolled</p>	<p><b>Care days</b> Monday-Friday</p> <p><b>Care types</b> Fulltime</p> <p><b>Terms and Conditions</b> N/A</p> <p><b>Allow Developmental Screening</b> N/A</p> <p><b>Allow Child Assessment</b> N/A</p>	Edit

+ Add Child

Is this information accurate and complete?

**Yes** It is accurate and complete.
  **No** I need to update the information.

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Home > Family Portal > Eligibility Verification Wizard

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### Parents

Our records indicate that the following people reside in your household as parents.

<p><b>DEL Test Parent (Adult, Female, Primary Parent)</b></p> <p><b>Date of birth</b> 09/30/2000</p> <p><b>Ethnicity</b> Prefer not to answer</p> <p><b>Races</b></p>	<p><b>Marital status</b> Single</p> <p><b>Email</b> sara.bassoff-familyprod@gmail.com</p> <p><b>Primary phone</b> (010) 101-0101</p> <p><b>Disabled</b> No</p> <p><b>Disability documentation</b> No documents available.</p>
---	---

Is this information accurate and complete?

**Yes** It is accurate and complete.
  **No** I need to update the information.

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### Other Household Members

In addition to the parents and any children needing care, our records indicate that the following people reside in your household, either as adults or as children not needing care.

<p><b>DEL Test Other Member (Adult, Female)</b></p> <p><b>Date of birth</b> 03/15/1999</p> <p><b>Ethnicity</b> Prefer not to answer</p> <p><b>Races</b></p>	<p><b>Relationship to primary parent</b> Sibling</p>
---	--

Is this information accurate and complete?

**Yes** It is accurate and complete.
  **No** I need to update the information.

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- 1. Household
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### Child Care Application And Authorization Referral

**Child Care Application and Authorization Form\***  
 Do you have a form from another agency titled Child Care Application and Authorization (CCAA)?  
 Yes  No

Is this information accurate and complete?  
 **Yes** It is accurate and complete.  **No** I need to update the information.

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- 1. Household
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### Employment Information

Excellent! Now let's make sure we've got current employment information for the adults in your household. In this section, we'll have you confirm or update the following information for each adult.

- Their current list of employers.
- Their weekly schedule for each job.
- Their income for each job.

When you're ready to continue, click **Next**.

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- 1. Household
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### Employment Information

Our records indicate that the adults in your household currently hold the following jobs.

**DEL Test Other Member**  
 DEL is not currently employed.

**DEL Test Parent**  
 DEL  
 Location  
 1313 SAN LUIS RD, TALLAHASSEE, Florida 32304  
 Schedule  
 20 hours per week, Tuesday-Friday  
 Pay  
 \$15.00 per hour, paid bi-weekly  
 Industry  
 Government

Is this information accurate and complete?  
 **Yes** It is accurate and complete.  **No** I need to update the information.

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- 1. Household
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### School/Training Information

Wonderful! Now let's make sure we've got current school/training information for the adults in your household. In this section, we'll have you confirm or update the following information for each adult.

- The list of schools and training facilities that they are currently attending.
- Their weekly class schedule for each school or facility.

When you're ready to continue, click **Next**.

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- 1. Household
- 2. Employment
- 3. School/Training
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- 5. Alimony and Child Support
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### School/Training Information

Our records indicate that the adults in your household currently attend the following schools and training facilities.

**DEL Test Other Member**  
 DEL is not currently attending a school or training facility.

**DEL Test Parent**  
 School  
 Location  
 0000 N University Dr, Coral Springs, Florida 33071  
 Schedule  
 12 hours per week, Wednesday-Friday  
 Educational Hours Calculation  
 Quarter

Is this information accurate and complete?  
 **Yes** It is accurate and complete.  **No** I need to update the information.

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### Other Income

Perfect! You're half way there. Now let's make sure we've got current information about any unearned income that your household receives. In this section, we'll have you confirm or update the following information.

- The household members that receive unearned income.
- The amount and source of the unearned income.

When you're ready to continue, click Next.

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### Other Income

Our records indicate that your household members receive the following unearned income.

No one in the household is receiving additional income.  
Is this information accurate and complete?

**Yes** It is accurate and complete.
  **No** I need to update the information.

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- 1. Household
- 2. Employment
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- 5. Alimony and Child Support
- 6. Child Provider Information
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### Alimony And Child Support

Great! Now let's make sure we've got current information about your alimony and child support payments. In this section, we'll have you confirm or update the following information.

- The adults in your household that are making alimony and child support payments.
- The amounts of the payments.

When you're ready to continue, click Next.

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- 7. Documents
- 8. Review and Submit

### Alimony And Child Support

#### Payments

Our records indicate that the parents in your household pay the following amounts in alimony and child support.

#### DEL Test Parent

No alimony or child support payments.

#### Income

Our records indicate that the parents in your household receive the following amounts in alimony and child support.

#### DEL Test Parent

No alimony or child support income.

Is this information accurate and complete?

**Yes** It is accurate and complete.
  **No** I need to update the information.

← Previous Step Next Step →

When the parent clicks **Yes**, the following confirmation message will display. Click **Save**.

**Certify Alimony Child Support**

Do you certify that this household does not receive Alimony Payments?  Yes  No  
 Do you certify that this household does not receive Child Support Payments?  Yes  No

Save
Cancel

- 1. Household
- 2. Employment
- 3. School/Training
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- 5. Alimony and Child Support
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- 8. Review and Submit

### Provider Selections

Wonderful! You're in the home stretch. Now let's make sure we know your childcare provider preferences. In this section, we'll have you select childcare providers for your children. The Early Learning Coalition will refer to your selections when enrolling your children with School Readiness childcare providers. If you need help finding a child care provider, the early learning coalition provides CHN Care Resource and Referral (CCR&R) services. A CCR&R Specialist will ask you a series of questions regarding your children and family and will help you locate a School Readiness provider in your area. CCR&R staff can also let you know about community resources, child care options and other information. If you would like a CCR&R Specialist to contact you with more information, please contact your local early learning coalition. When you're ready to continue, click Next.

- 1. Household
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### Provider Selections

For each child (maximum, you may specify up to three providers for your Early Learning Coalition to consider when placing your child. Our records indicate the following provider selections. If these are all the ones you want, simply click **Yes**. Otherwise, click **No**.

DEL Test Child 3  
A provider selection is required.  
**Additional information is needed.**  
DEL Test Child 1  
Assistance in selecting a provider has been requested for DEL.  
DEL Test Child 2  
Assistance in selecting a provider has been requested for DEL.

Is this information accurate and complete?

**Yes** It is accurate and complete.
  **No** I need to update the information.

- 1. Household
- 2. Employment
- 3. School/Training
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- 5. Alimony and Child Support
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- 7. Documents
- 8. Review and Submit

### Provider Selections

Use the **Add** and **Remove** buttons to update your provider selections, making up to three selections per child. When everything looks good, click **Yes**.

DEL Test Child 3  
A provider selection is required.  
 or  I need help selecting a childcare provider.  
**Additional information is needed.**  
DEL Test Child 1  
Assistance in selecting a provider has been requested for DEL.  
 or  I need help selecting a childcare provider.  
DEL Test Child 2  
Assistance in selecting a provider has been requested for DEL.  
 or  I need help selecting a childcare provider.

Is this information accurate and complete?

**Yes** It is accurate and complete.
  **No** I need to update the information.

- 1. Household
- 2. Employment
- 3. School/Training
- 4. Other Income
- 5. Alimony and Child Support
- 6. Child Provider Information
- 7. Documents
- 8. Review and Submit

### Provider Selections

Use the **Add** and **Remove** buttons to update your provider selections, making up to three selections per child. When everything looks good, click **Yes**.

DEL Test Child 3  
A provider selection is required.  
 or  I need help selecting a childcare provider.  
**Additional information is needed.**  
DEL Test Child 1  
Assistance in selecting a provider has been requested for DEL.  
 or  I need help selecting a childcare provider.  
DEL Test Child 2  
Assistance in selecting a provider has been requested for DEL.  
 or  I need help selecting a childcare provider.

Is this information accurate and complete?

**Yes** It is accurate and complete.
  **No** I need to update the information.

The family can enter a search parameter and click **Search** to find a provider.

**Provider Selections**  
Please select a childcare provider for DEL Test Child 3, and then click Save.

Step 1: Search the Childcare Provider Listing  
Type all or part of the childcare provider's name and address, then click **SEARCH**.

County: Howard

Provider Name\*  
please enter a provider name

Or Enter Provider

Details of Selected Childcare Provider

Name  
Location

Please contact the provider for more information on any additional fees and charges that may be applied once your child is enrolled.

Save Cancel

**Provider Selections**  
Use the **Add** and **Remove** buttons to update your provider selections, making up to three selections per child. When everything looks good, click **Yes**.

DEL Test Child 3  
A provider selection is required.  
Add Provider Selection or  need help selecting a childcare provider

Additional information is needed.  
DEL Test Child 1  
Assistance in selecting a provider has been requested for DEL.  
Add Provider Selection or  need help selecting a childcare provider

DEL Test Child 2  
Assistance in selecting a provider has been requested for DEL.  
Add Provider Selection or  need help selecting a childcare provider

Is this information accurate and complete?  
 Yes It is accurate and complete.  No I need to update the information.

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Request Help with Provider Selection

Do you want to request help with provider selection for DEL Test Child 3?

Yes No

**Provider Selections**  
Use the **Add** and **Remove** buttons to update your provider selections, making up to three selections per child. When everything looks good, click **Yes**.

DEL Test Child 3  
Assistance in selecting a provider has been requested for DEL Test.  
Add Provider Selection or  need help selecting a childcare provider

DEL Test Child 1  
Assistance in selecting a provider has been requested for DEL.  
Add Provider Selection or  need help selecting a childcare provider

DEL Test Child 2  
Assistance in selecting a provider has been requested for DEL.  
Add Provider Selection or  need help selecting a childcare provider

Is this information accurate and complete?  
 Yes It is accurate and complete.  No I need to update the information.

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### Attach Supporting Documents

One last step! Let's make sure that we can verify the information that you've provided. In this final section, we'll have you upload documentation that validates the information in your application. Here are some examples:

- Identification: birth certificate, driver's license, etc.
- Proof of residency: current utility bill, paystub, etc.
- Proof of employment: paystubs, employment/income verification form, etc.

The actual list of documents that we need will depend on the information you have provided. When you're ready to continue, click **Next**.

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### Attach Supporting Documents

When you've completed all the sections and everything looks good, click **Yes**.

#### Additional Documentation ⌵

 test doc.docx [View](#) [Delete](#)

[↑ Upload Another Document](#)

#### Career Source Regional Workforce Welfare Transition Program Participant ⌵

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[↑ Upload Another Document](#)

Is this information accurate and complete?

**Yes** It is accurate and complete.

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- 1. Household
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### Review And Household Totals Verification

Not all fields are required to complete your application. An asterisk (\*) indicates required fields and income fields are the source of age.

If anything looks incorrect, click **Back** to return to the Submit page where you can edit and submit your Eligibility Information. Or, you need to make corrections to your information, use the corresponding **Back** buttons to go back and edit your information.

<b>Household Address</b>	Est
3151 N University Dr Coral Springs, Florida 33066 Broward County RCMA Family, Inc	
<b>Has CCAA Form</b>	Est
Do you have a form from another agency titled Child Care Application and Authorization? No	
<b>Children Needing Care</b>	Est
<b>DEL Test Child 3 (Child, Male, Age 5)</b>	
<b>Eligibility status</b>	Care days
Pending Eligibility	Monday-Friday
<b>Enrollment status</b>	Care types
Not Enrolled	Fulltime, Parttime
<b>Date of birth</b>	Terms and Conditions
03/01/2019	N/A
<b>Ethnicity</b>	Allow Developmental Screening
Prefer not to answer	N/A
<b>Races</b>	Allow Child Assessment
Not Enrolled	N/A
<b>DEL Test Child 1 (Child, Female, Age 5)</b>	
<b>Eligibility status</b>	Care days
Pending Eligibility	Monday-Friday
<b>Enrollment status</b>	Care types
Not Enrolled	Fulltime
<b>Date of birth</b>	Terms and Conditions
02/16/2019	N/A
<b>Ethnicity</b>	Allow Developmental Screening
Prefer not to answer	N/A
<b>Races</b>	Allow Child Assessment
Not Enrolled	N/A
<b>DEL Test Child 2 (Child, Male, Age 5)</b>	
<b>Eligibility status</b>	Care days
Pending Eligibility	Monday-Friday
<b>Enrollment status</b>	Care types
Not Enrolled	Fulltime
<b>Date of birth</b>	Terms and Conditions
02/16/2019	N/A
<b>Ethnicity</b>	Allow Developmental Screening
Prefer not to answer	N/A
<b>Races</b>	Allow Child Assessment
Not Enrolled	N/A
<b>Parents</b>	Est
<b>DEL Test Parent (Adult, Female, Primary Parent)</b>	
<b>Date of birth</b>	Marital status
09/30/2000	Single
<b>Employer</b>	Email
Prefer not to answer	inc1835off-familjornal@gmail.com
<b>Races</b>	Primary phone
	(313) 101-0191
	Disabled
	No
	Disability documentation
	No documents available.
<b>Other Household Members</b>	Est
<b>DEL Test Other Member (Adult, Female)</b>	
<b>Date of birth</b>	Relationship to primary parent
03/16/1999	Sibling
<b>Employer</b>	
Prefer not to answer	
<b>Races</b>	
<b>Employment</b>	Est
<b>DEL Test Other Member</b>	
DEL is not currently employed.	
DEL Test Parent	
DEL	
<b>Location</b>	
1313 SAN LUIS RD, TALLAHASSEE, Florida 32304	
<b>Schedule</b>	
20 hours per week, Tuesday-Friday	
<b>Pay</b>	
\$15.00 per hour, paid bi-weekly	
<b>Industry</b>	
Government	
<b>School/Training</b>	Est
<b>DEL Test Other Member</b>	
DEL is not currently attending a school or training facility.	
DEL Test Parent	
School	
<b>Location</b>	
0000 N University Dr, Coral Springs, Florida 33071	
<b>Schedule</b>	
12 hours per week, Wednesday-Friday	
<b>Educational Hours Calculation</b>	
Quarter	
<b>Alimony and Child Support Paid</b>	Est
<b>DEL Test Parent</b>	
No alimony or child support payments.	
<b>Alimony and Child Support Received</b>	Est
<b>DEL Test Parent</b>	
No alimony or child support income.	
<b>Other Income</b>	Est
No one in the household is receiving additional income.	
<b>Provider Selections</b>	Est
<b>DEL Test Child 3</b>	
Assistance in identifying a provider has been requested for DEL Test Child 3.	
<b>DEL Test Child 1</b>	
Assistance in identifying a provider has been requested for DEL Test Child 1.	
<b>DEL Test Child 2</b>	
Assistance in identifying a provider has been requested for DEL Test Child 2.	
<b>Household Size and Income Totals</b>	
<b>Size and Annual Income Calculations</b>	Children Needing Care
Household size: 6	DEL Test Child 1 (child, female, age 5)
Employment income: \$15,000	DEL Test Child 2 (child, male, age 5)
Alimony and child support income: \$0	DEL Test Child 3 (child, male, age 5)
Other income: \$0	
Alimony and child support deductions: \$0	Parents
Total annual gross income: \$15,000	DEL Test Parent (adult, female)
	Other Household Members
	DEL Test Other Member (adult, female)
Is the household size, total household income, and related household information accurate and complete?	
<input checked="" type="radio"/> Yes <b>Be accurate and complete.</b>	

← Previous Step

Next Step →

To submit the Eligibility Verification, the family must check the **Certify by Electronic Signature** checkbox, enter a parent name, and click **Submit Eligibility Verification**.

1. Household
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8. Review and Submit!

### Submit

Ready to submit your Eligibility Verification? Here's what you need to do:

**Step 1: Read the certification statement.**  
Please read through the following certification statement, and be sure that you agree with it.

**By signing this form, I certify that:**

- I have examined this verification and, to the best of my knowledge and belief, the information provided is true and correct.
- I give consent to the Division of Early Learning and/or the Department of Financial Services to request all information relating to my eligibility and to make inquiry into all statements of information given.
- I understand that if I give false information, sign inaccurate attendance documents or fail to report changes in my circumstances that would affect my eligibility for services or the level of my services, my case may be referred to law enforcement for investigation and possible prosecution.
- I give consent to the Division of Early Learning to use computer matches with other government agency systems pursuant to interagency agreements to verify the information that I've presented.
- I understand information on this form may be shared with other state and local agencies for the purposes of program administration and public assistance fraud prevention.
- I understand that upon the submission of my verification, the early learning coalition will review it and send me instructions on how to proceed.
- I certify that my family's total assets do not exceed \$1,000,000.

**Step 2: Sign and submit the verification.**  
In the Parent Signature box below, select the checkbox labeled **Certify by Electronic Signature**, type the primary parent's full name into the **Signature** field, and then click the **Submit Eligibility Verification** button to submit your verification.

**Parent Signature**

I hereby certify that the household income information I provided is true and complete to the best of my knowledge. I understand that if I knowingly give wrong information, I may be liable for prosecution under state law and that School Readiness services may be terminated. I also understand that if any changes occur to the information on this worksheet, I will notify the coalition of those changes within ten (10) calendar days.

**Certify by Electronic Signature**

**Signature\***

Del Test Parent

(Parent's Full Name)

**Verification Completion Date**

10/07/2024



**UAT Family Portal**

[Logout](#)

Home > Family Portal > Eligibility Verification Wizard

1. Household
2. Employment
3. School/Training
4. Other Income
5. Alimony and Child Support
6. Child Provider Information
7. Documents
8. Review and Submit!

**Congratulations! You Have Successfully Submitted Your Eligibility Verification.**

Your early learning coalition will now review your verification and contact you soon about your child's eligibility for funding.

The family will receive an email from **DONOTREPLY@oel.myflorida.com**.

Hello,

The ELC of the Big Bend Region has received the documents you submitted in the Family Portal to assist you with child care payments.

The ELC will review these documents and notify you on the status of your application within in 10 calendar days through the Family Portal account or your preferred contact method listed in your application.

The ELC of the Big Bend Region also provides Child Care Resource and Referral (CCR&R) services. CCR&R is the front door for family services in your county. CCR&R staff will let you know about community resources, child care listings and other information that may be of assistance to you. Please contact your early learning coalition and ask to speak to a CCR&R specialist for further assistance.

If you have any questions please contact the ELC of the Big Bend Region at the number listed below.

Thank you,

ELC of the Big Bend Region  
8669739030  
<http://www.elcbigbend.org/>

**Please do not reply to this message. Replies to this message are routed to an unmonitored mailbox. If you have questions, please contact your [early learning coalition](#).**

## Scenario 2

If the SR application was set to **Pending Update**, the household was updated by the family, the child was added to the Waiting List by the coalition, and then a Funding Notification was sent, the Eligibility Verification Wizard has been skipped. To update the EV, there are two options: the family comes in to the coalition to update the EV, or the coalition sets the EV Household Status to **Pending Update** to allow the family to update the EV.

To update the EV at the coalition, click the **Edit** button for the new child.

### Children Needing Care

<p><b>DEL Test Child 3</b> (child, male, age 5) <span>Changed</span></p> <p><b>Eligibility status:</b> Pending Eligibility <b>Enrollment status:</b> Not Enrolled <b>Date of birth:</b> 03/01/2019 <b>Ethnicity:</b> Prefer not to answer <b>Races:</b> Prefer not to answer <b>Care days:</b> Monday-Friday <b>Care types:</b> Fulltime, Parttime <b>Citizenship:</b> None <b>Age verification:</b> Not verified <b>Medicaid eligibility:</b> Unknown <b>Terms and Conditions:</b> N/A <b>Allow Developmental Screening:</b> N/A <b>Allow Child Assessment:</b> N/A <b>Person ID:</b> 7494078 <b>Eligibility verification ID:</b> EV_0001096992</p> <p>History Change Status Edit</p>	<p><b>DEL Test Child 4</b> (child, female, age 5) <span>Added</span></p> <p><b>Eligibility status:</b> Pending Eligibility <b>Enrollment status:</b> Not Enrolled <b>Date of birth:</b> 01/01/2019 <b>Ethnicity:</b> Prefer not to answer <b>Races:</b> Prefer not to answer <b>SSN:</b> - - - - - <b>Care days:</b> Monday-Thursday <b>Care types:</b> Fulltime <b>Citizenship:</b> Unknown <b>Age verification:</b> Unknown <b>Medicaid eligibility:</b> Unknown <b>Terms and Conditions:</b> N/A <b>Allow Developmental Screening:</b> N/A <b>Allow Child Assessment:</b> N/A <b>Person ID:</b> 7494079 <b>Eligibility verification ID:</b> EV_0001096996 <b>Required information is missing or invalid.</b></p> <p>History Change Status Edit</p>
<p><b>DEL Test Child 1</b> (child, female, age 5) <span>Changed</span></p> <p><b>Eligibility status:</b> Eligible <b>Enrollment status:</b> Not Enrolled <b>Date of birth:</b> 02/10/2019 <b>Ethnicity:</b> Prefer not to answer <b>Races:</b> Prefer not to answer <b>Care days:</b> Monday-Friday <b>Care types:</b> Fulltime <b>Citizenship:</b> US Citizen or Qualified Alien <b>Age verification:</b> Verified <b>Medicaid eligibility:</b> Unknown <b>Current authorization period:</b> 10/08/2024 - 10/07/2025 <b>Terms and Conditions:</b> N/A <b>Allow Developmental Screening:</b> N/A <b>Allow Child Assessment:</b> N/A <b>Person ID:</b> 7494034 <b>Eligibility verification ID:</b> EV_0001096983</p> <p>History Change Status Eligibility Edit</p>	<p><b>DEL Test Child 2</b> (child, male, age 5) <span>Changed</span></p> <p><b>Eligibility status:</b> Eligible <b>Enrollment status:</b> Not Enrolled <b>Date of birth:</b> 02/10/2019 <b>Ethnicity:</b> Prefer not to answer <b>Races:</b> Prefer not to answer <b>Care days:</b> Monday-Friday <b>Care types:</b> Fulltime <b>Citizenship:</b> None <b>Age verification:</b> Verified <b>Medicaid eligibility:</b> Not eligible <b>Current authorization period:</b> 10/08/2024 - 10/07/2025 <b>Terms and Conditions:</b> N/A <b>Allow Developmental Screening:</b> N/A <b>Allow Child Assessment:</b> N/A <b>Person ID:</b> 7494035 <b>Eligibility verification ID:</b> EV_0001096984</p> <p>History Change Status Eligibility Edit</p>

Then, complete the missing required information in red and click **Save**.

### Edit Child Needing Care

**First Name\***

**Middle Name**

**Last Name\***

**Suffix**

**Ethnicity\***  Hispanic  Non-Hispanic  Prefer not to answer

**Races (select all that apply)\***  Asian  Hawaiian / Pacific  Black  US Indian / Alaskan  White  Prefer not to answer

**Sex\***  Male  Female

**Date of Birth\***

**SSN**

**Days on which childcare is needed (select all that apply)\***

- Monday
- Tuesday
- Wednesday
- Thursday
- Friday
- Saturday
- Sunday

**Types of care needed (select all that apply)\***

- Fulltime
- Parttime
- Before School
- After School
- Days School is out

**Proof of Age and Citizenship\*** Attach the documentation necessary to establish the child's proof of age and U.S. citizenship.

**Proof of Age\***

There are no attached documents of this type.

**Proof of U.S. Citizenship Or Qualified Alien\***

There are no attached documents of this type.

A proof-of-age document is required.  
A proof-of-citizenship document is required.

**Citizenship\*** Is the child a U.S. Citizen or Qualified Alien?

Yes  No

The U.S. Citizen or Qualified Alien field is required.

**Age Verification\*** Has the child's age been verified?

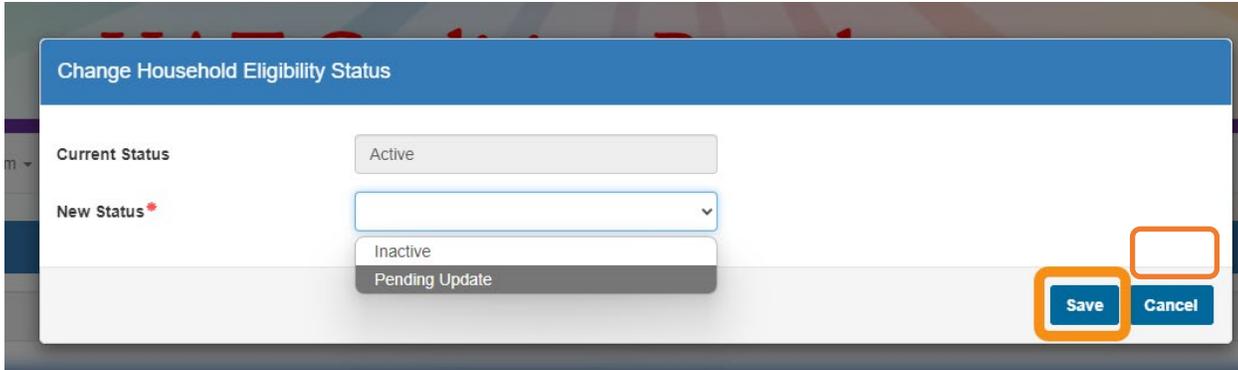
Yes  No

The Verification of Age field is required.

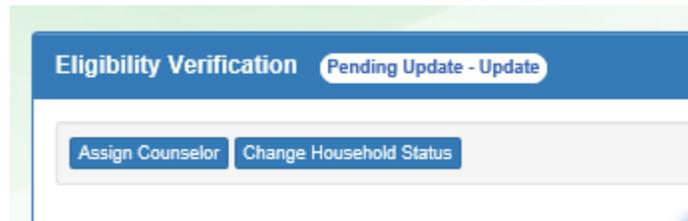
To allow the family to update the EV, set the EV Household Status to **Pending Update**. Click **Change Household Status**.



Select **Pending Update** for the New Status and click **Save**.



The EV Household Status is now **Pending Update – Update**.



The family will receive an email from **DONOTREPLY@oel.myflorida.com**.

Hello,

You have requested the ELC of the Big Bend Region to open your Family Portal account for you to make any necessary updates. If you did not make this request, please contact the ELC of the Big Bend Region as soon as possible. To access your family portal account, go to: <https://familyservices.floridaearlylearning.com/>

The ELC of the Big Bend Region also provides Child Care Resource and Referral (CCR&R) services. CCR&R is the front door for family services in your county. CCR&R staff will let you know about community resources, child care listings and other information that may be of assistance to you. Please contact your early learning coalition and ask to speak to a CCR&R specialist for further assistance.

If you have any questions you may contact the ELC of the Big Bend Region at the number listed below.

Thank you,

ELC of the Big Bend Region  
8669739030  
<http://www.elcbigbend.org/>

**Please do not reply to this message. Replies to this message are routed to an unmonitored mailbox. If you have questions, please contact your early learning coalition.**

The family will see an **Update Eligibility** button on their Family Portal Profile page.

**School Readiness Funding** [Download Consumer Education Statement](#)

The following table shows the School Readiness funding status for all of the children in your household.

Child Name	Screenings and Assessments	EV Number	Status	Enrollment Status	Provider Name	Payment Certificate
DEL Test Child 1	<a href="#">Screening History</a>	EV_0010109883	Eligible	-	-	-
DEL Test Child 2	<a href="#">Screening History</a>	EV_0010109884	Eligible	-	-	-
DEL Test Child 3	<a href="#">Screening History</a>	EV_0010109892	Pending Eligibility	-	-	-
DEL Test Child 4	<a href="#">Screening History</a>	EV_0010109295	Pending Eligibility	-	-	-

TO VIEW HISTORICAL PAYMENT CERTIFICATES AND/OR TERMS & CONDITIONS [CLICK HERE](#)

Please click the **Update Eligibility** button to update your family's eligibility.

**Update Eligibility**

When the family clicks **Update Eligibility**, the Eligibility Verification Wizard is launched.

Home > Family Portal > Eligibility Verification Wizard

### Welcome To The Eligibility Verification Wizard

The Early Learning Coalition may have funding available to assist in paying for child care. But first, we need your help in confirming that your child is still eligible.

The Eligibility Verification Wizard will guide you through the processes of:

1. Verifying your existing information (and updating whatever may have changed), and
2. Uploading documents that validate the information you've provided.

When you're ready to begin, click **Start**.

← Previous Step Start

Home > Family Portal > Eligibility Verification Wizard

- 1. Household
- 2. Employment
- 3. School/Training
- 4. Other Income
- 5. Alimony and Child Support
- 6. Child Provider Information
- 7. Documents
- 8. Review and Submit!

### Household Information

Let's begin by making sure we've got current information about your household. In this section, we'll have you confirm or update the following information:

- The primary address for your household.
- The list of children in your household who need care.
- The list of parents in your household, along with their contact information.
- The list of other people in your household, including adults and children not needing care.
- The required CCAA documentation (if applicable).

When you're ready to continue, click **Next**.

← Previous Step Next Step

Home > Family Portal > Eligibility Verification Wizard

- 1. Household
- 2. Employment
- 3. School/Training
- 4. Other Income
- 5. Alimony and Child Support
- 6. Child Provider Information
- 7. Documents
- 8. Review and Submit!

### Household Address

Our records indicate the following primary address for your household.

Select if you are currently homeless or located at a Domestic Violence Shelter

**Address Line 1 \***  
3151 N University Dr

**Address Line 2 (Apt, Suite, etc)**

**City \***  
Coral Springs

**County \***  
Broward

**Are you a RCMA family?**

**State \***  
Florida

**Zip Code \***  
33065

**Proof of Residency \***  
Attach the documentation necessary to establish the household's proof of residency.

**Proof of Residency \***   
 test doc.docx View

Is this information accurate and complete?

**Yes** It is accurate and complete.  **No** I need to update the information.

← Previous Step Next Step

- 1. Household
- 2. Employment
- 3. School/Training
- 4. Other Income
- 5. Alimony and Child Support
- 6. Child Provider Information
- 7. Documents
- 8. Review and Submit

### Children Needing Care

Our records indicate that the following parent reside in your household as children needing care.

<b>DEL Test Child 3 (Child, Male, Age 5)</b> <b>Eligibility status</b> Pending Eligibility <b>Enrollment status</b> Not Enrolled <b>Date of birth</b> 03/11/2019 <b>Ethnicity</b> Prefer not to answer <b>Races</b> Not Enrolled		<b>Care days</b> Monday-Friday <b>Care types</b> Fulltime, Parttime <b>Terms and Conditions</b> N/A <b>Allow Developmental Screening</b> N/A <b>Allow Child Assessment</b> N/A	
<b>DEL Test Child 4 (Child, Female, Age 5)</b> <b>Eligibility status</b> Pending Eligibility <b>Enrollment status</b> Not Enrolled <b>Date of birth</b> 01/01/2019 <b>Ethnicity</b> Prefer not to answer <b>Races</b> Not Enrolled		<b>SSN</b> ____-____-____ <b>Care days</b> Monday-Thursday <b>Care types</b> Fulltime <b>Terms and Conditions</b> N/A <b>Allow Developmental Screening</b> N/A <b>Allow Child Assessment</b> N/A	
<p style="color: red;">Additional information is needed.</p>			
<b>DEL Test Child 1 (Child, Female, Age 5)</b> <b>Eligibility status</b> Eligible <b>Enrollment status</b> Not Enrolled <b>Date of birth</b> 02/10/2019 <b>Ethnicity</b> Prefer not to answer <b>Races</b> Not Enrolled		<b>Care days</b> Monday-Friday <b>Care types</b> Fulltime <b>Current authorization period</b> 10/06/2024 - 10/07/2025 <b>Terms and Conditions</b> N/A <b>Allow Developmental Screening</b> N/A <b>Allow Child Assessment</b> N/A	
<b>DEL Test Child 2 (Child, Male, Age 5)</b> <b>Eligibility status</b> Eligible <b>Enrollment status</b> Not Enrolled <b>Date of birth</b> 02/10/2019 <b>Ethnicity</b> Prefer not to answer <b>Races</b> Not Enrolled		<b>Care days</b> Monday-Friday <b>Care types</b> Fulltime <b>Current authorization period</b> 10/06/2024 - 10/07/2025 <b>Terms and Conditions</b> N/A <b>Allow Developmental Screening</b> N/A <b>Allow Child Assessment</b> N/A	
<p>Is this information accurate and complete?</p> <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid green; padding: 5px; display: flex; align-items: center;"> <input checked="" type="radio"/> <b>Yes</b> <small>It is accurate and complete.</small> </div> <div style="border: 2px solid orange; padding: 5px; display: flex; align-items: center;"> <input type="radio"/> <b>No</b> <small>I need to update the information.</small> </div> </div>			
<a href="#">← Previous Step</a>		<a href="#">Next Step →</a>	

#### DEL Test Child 4 (Child, Female, Age 5)

**Eligibility status**  
Pending Eligibility  
**Enrollment status**  
Not Enrolled  
**Date of birth**  
01/01/2019  
**Ethnicity**  
Prefer not to answer  
**Races**  
Not Enrolled

**SSN**  
\_\_\_\_-\_\_\_\_-\_\_\_\_  
**Care days**  
Monday-Thursday  
**Care types**  
Fulltime  
**Terms and Conditions**  
N/A  
**Allow Developmental Screening**  
N/A  
**Allow Child Assessment**  
N/A

Additional information is needed.

Edit

- 1. Household
- 2. Employment
- 3. School/Training
- 4. Other Income
- 5. Alimony and Child Support
- 6. Child Provider Information
- 7. Documents
- 8. Review and Submit

### Children Needing Care

Please update the **DOB** information for **DEL TEST CHILD 4**, and then click **Save** to save your changes. Or click **Cancel** to discard your changes.

**First Name \***  
DEL Test

**Middle Name**

**Last Name \***  
Child 4

**Suffix**  
▼

**Ethnicity \***  
 Hispanic  Non-Hispanic  Prefer not to answer

**Races (select all that apply) \***  
 Asian  Hawaiian / Pacific  Black  US Indian / Alaskan  White  Prefer not to answer

**Gender \***  
 Male  Female

**Date of Birth \***  
01/01/2019

**SSN**  
\_\_\_\_-\_\_\_\_-\_\_\_\_

**Days on which childcare is needed (select all that apply) \***  
 Monday  
 Tuesday  
 Wednesday  
 Thursday  
 Friday  
 Saturday  
 Sunday

**Types of care needed (select all that apply) \***  
 Fulltime  
 Parttime  
 Before School  
 After School  
 Days School is out

**Proof of Age and Citizenship \***  
 Attach the documentation necessary to establish the child's proof of age and U.S. citizenship.

**Proof of Age \*** ⓘ

**Proof of U.S. Citizenship Or Qualified Alien \*** ⓘ

A proof-of-age document is required.  
 A proof-of-citizenship document is required.

Save

Cancel

- 1. Household
- 2. Employment
- 3. School/Training
- 4. Other Income
- 5. Alimony and Child Support
- 6. Child Provider Information
- 7. Documents
- 8. Review and Submit

### Children Needing Care

Please update the **DOB** information for **DEL Test Child 4**, and then click **Save** to save your changes. Or click **Cancel** to discard your changes.

**First Name \***  
DEL Test

**Middle Name**

**Last Name \***  
Child 4

**Suffix**

**Ethnicity \***  
 Hispanic  Non-Hispanic  Prefer not to answer

**Races (select all that apply) \***  
 Asian  Hawaiian / Pacific  Black  US Indian / Alaskan  White  Prefer not to answer

**Gender \***  
 Male  Female

**Date of Birth \***  
01/01/2019

**SSN**

**Days on which childcare is needed (select all that apply) \***  
 Monday  
 Tuesday  
 Wednesday  
 Thursday  
 Friday  
 Saturday  
 Sunday

**Types of care needed (select all that apply) \***  
 Fulltime  
 Parttime  
 Before School  
 After School  
 Days School is out

**Proof of Age and Citizenship \***  
 Attach the documentation necessary to establish the child's proof of age and U.S. citizenship.

**Proof of Age \***

test doc .docx View Delete

[Upload Another Document](#)

**Proof of U.S. Citizenship Or Qualified Alien \***

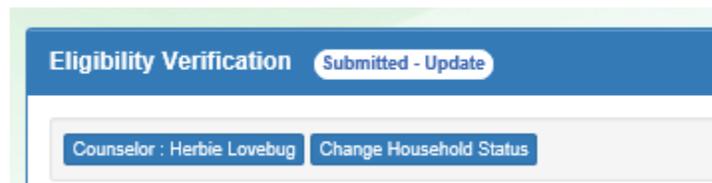
test doc 1 .docx View Delete

[Upload Another Document](#)

A proof-of-age document is required  
 A proof-of-citizenship document is required

Save
Cancel

After the family completes and submits the Eligibility Verification Wizard, the EV Household Status is **Submitted – Update**.



The family will receive an email from **DONOTREPLY@oel.myflorida.com**.

Hello,

The ELC of the Big Bend Region has received the documents you submitted in the Family Portal to assist you with child care payments.

The ELC will review these documents and notify you on the status of your application within in 10 calendar days through the Family Portal account or your preferred contact method listed in your application.

The ELC of the Big Bend Region also provides Child Care Resource and Referral (CCR&R) services. CCR&R is the front door for family services in your county, CCR&R staff will let you know about community resources, child care listings and other information that may be of assistance to you. Please contact your early learning coalition and ask to speak to a CCR&R specialist for further assistance.

If you have any questions please contact the ELC of the Big Bend Region at the number listed below.

Thank you,

ELC of the Big Bend Region  
8669739030  
<http://www.elcbigbend.org/>

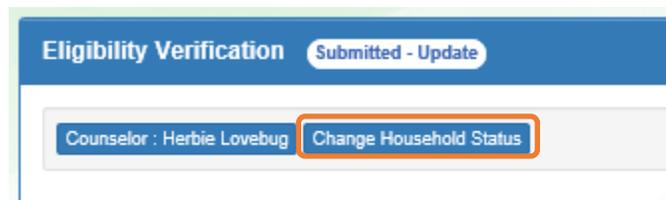
**Please do not reply to this message. Replies to this message are routed to an unmonitored mailbox. If you have questions, please contact your [early learning coalition](#).**

Use the search feature and enter the first and last name of the parent or child or the EV Number. Click the **EV Number**.

Eligibility Verification Number	Child Name	Assigned Counselor	Date of Birth	Age	Parent Name	SR Process	SR Status	Days in SR Status	SR Status Change Date
EV_0000		Unassigned		4			Active	0	04/26/2019

### Eligibility Verification Review

Once the family has completed the EV Wizard, the coalition must review the EV. Click **Change Household Status**.



Select Active, or Coalition Reviewing if more review is needed. Click **Save**.

Change Household Eligibility Status

Current Status: Submitted

New Status: Active, Coalition Reviewing, Inactive, Rejected

Save Cancel

## Assign Eligibility

Set the Household Status to **Active**. The **Eligibility** button will then display. Click the **Eligibility** button.

<b>Not Test Tester IV (child, male, age 0)</b> Eligibility status: <b>Pending Eligibility</b> Enrollment status: Not Enrolled Date of birth: 07/01/2018 Ethnicity: Prefer not to answer Races: Prefer not to answer Care days: Monday-Friday Care types: Fulltime Citizenship: Unknown Age verification: Unknown Medicaid eligibility: Unknown	History Change Status <b>Eligibility</b> Edit
--	--

Click **Add Eligibility Assignment...**

Update Eligibility

### Eligibility Assignments

There are no eligibility assignments for this child.

**Add Eligibility Assignment...**

**Current Eligibility Map**

Save Cancel

Complete the Add Eligibility Assignment screen, and click **OK**.

### Add Eligibility Assignment

#### Funding Details

**Funder Type\***  
 SR  Local

**Billing Group\***  **Eligibility Code\***  **Match Funder\***

**Eligibility Begin Date\***  **Eligibility End Date\***  **Purpose-for-Care Review Date**

---

#### Care Information

**Priority\***  **Level of Care\***  **Purpose for Care\***

Rilya Wilson Reporting Requirements **Authorized Unit of Care\***

---

#### Co-Payment

**Total Household Members**  **Full time Co-payment Amount**  **Part time Co-payment Amount**

**Full Time Co-payment Waiver or Reduction**

Full Time Co-payment is Waived or Reduced

**Reduction Amount\***  **Co-payment Reduction or Waiver Reason\***

**Additional Waiver or Reduction Details**

**Part Time Co-payment Waiver or Reduction**

Part Time Co-payment is Waived or Reduced

**Reduction Amount\***  **Co-payment Reduction or Waiver Reason\***

**Additional Waiver or Reduction Details**

**Resulting Full Time Co-payment Amount**  **Resulting Part Time Co-payment Amount**

The Full-Time and Part-Time co-payment amounts are calculated based on the number of people in the household and the total annual household income. If changes are made to either the household size or the annual income, click the **Recalculate** button to update the assessed co-payment amounts.

If a co-payment waiver or reduction is approved, enter the Reduction Amount, and select the reduction or waiver reason for both the Full-Time and Part-Time amounts. Click **OK**.

**NOTE:** The amount entered in the Reduction Amount field is not the new total for the co-payment, but the actual amount of the reduced co-payment. Amounts that result in a negative full-time and part-time copayment amount (ex: -1.00) cannot be saved. Resulting copayment amounts that are greater than the highest approved full-time and part-time amounts for the program year cannot be saved. Resulting copayment amounts must be between \$0.00 and the highest approved amount in the coalition sliding fee schedule.

**Co-Payment** Recalculate

**Total Household Members**  **Full time Co-payment Amount** \$ 2.5 **Part time Co-payment Amount** \$ 1.25

**Full Time Co-payment Waiver or Reduction**

Full Time Co-payment is Waived or Reduced

**Reduction Amount**  **Co-payment Reduction or Waiver Reason**

**Additional Waiver or Reduction Details**

**Part Time Co-payment Waiver or Reduction**

Part Time Co-payment is Waived or Reduced

**Reduction Amount**  **Co-payment Reduction or Waiver Reason**

**Additional Waiver or Reduction Details**

**Resulting Full Time Co-payment Amount** \$ 1.50 **Resulting Part Time Co-payment Amount** \$ 1.25

OK Cancel

After the **OK** button is clicked, the Update Eligibility screen will display. Click **Save**, or click the **Update** button to continue making edits.

### Update Eligibility

#### Eligibility Assignments

Eligibility Code	Begin Date	End Date	Billing Group	Match Funder	Actions
<i>Current Authorization Period (07/06/2018 - 07/05/2019)</i>					Update
ECON	07/06/2018	07/05/2019	BG8	Any	Update End Eligibility

Add Eligibility Assignment... Add Next Authorization Period...

#### Current Eligibility Map

**Current Authorization Period**  
07/06/2018 - 07/05/2019

**Eligibility Assignment**  
07/06/2018 - 07/05/2019

Save Cancel

## Assign Eligibility- SR Plus

When a household's income falls within an eligible range for SR Plus, the **SR Plus** Funder type will display on the Add Eligibility Assignment page.

To proceed with SR Plus for an eligible household, select the option from the Funder Type section. **SRPLS** will populate as the Billing Group, and **SRPL** will populate as the Eligibility Code.

**NOTE:** The SR Plus selection will be made available based solely on income. However, this funding type should only be used when the SR family is no longer eligible for SR due to being over income.

SR Plus will become available with release **R7.1**. SR Plus will only be applicable to eligibility assignments created on or after the **R7.1** release date.

### Add Eligibility Assignment

#### Funding Details

**Funder Type\***

SR  Local  E-TAPP  P-TAPP  SRPlus

**Billing Group\***

**Eligibility Code\***

**Match Funder**

**Eligibility Begin Date\***

**Eligibility End Date\***

**Purpose-for-Care Review Date**

---

#### Care Information

**Priority\***

**Level of Care ⓘ\***

**Purpose for Care\***

Rilya Wilson Reporting Requirements

**Copay in Effect\***

---

#### Co-Payment

**Total Household Members**

**Full time Co-payment Amount**

**Part time Co-payment Amount**

**Full Time Co-payment Waiver or Reduction**

Full Time Co-payment is Waived or Reduced

**Reduction Amount\***

**Co-payment Reduction or Waiver Reason\***

**Additional Waiver or Reduction Details**

Complete the Add Eligibility Assignment Screen, and Click **Ok**

## Add Eligibility Assignment

### Funding Details

#### Funder Type\*

SR  Local  E-TAPP  P-TAPP  SRPlus

#### Billing Group\*

SRPLS

#### Eligibility Code\*

SRPL

#### Match Funder

#### Eligibility Begin Date\*

06/21/2025

#### Eligibility End Date\*

06/20/2026

#### Purpose-for-Care Review Date

### Care Information

#### Priority\*

#### Level of Care ⓘ\*

In School

#### Purpose for Care\*

Rilya Wilson Reporting Requirements

#### Copay in Effect\*

### Co-Payment

[Recalculate](#)

#### Total Household Members

3

#### Full time Co-payment Amount

\$ 21.53

#### Part time Co-payment Amount

\$ 16.25

#### Full Time Co-payment Waiver or Reduction

Full Time Co-payment is Waived or Reduced

#### Reduction Amount\*

\$ 0

#### Co-payment Reduction or Waiver Reason\*

Additional Waiver or Reduction Details

OK

Cancel

Like traditional SR, the Full-Time and Part-Time co-payment amounts are calculated based on the number of people in the household and the total annual household income. If changes are made to either the household size or the annual income, click the **Recalculate** button to update the assessed co-payment amounts.

Decreases in SR Plus co-payments can only be made at the time of redetermination. If a co-payment reduction is approved, enter the Reductions Amount, and select the reduction reason for both the Full-Time and Part-Time amounts. Waivers are not permissible during SR Plus. Click **OK**.

**NOTE:** The amount entered in the Reduction Amount field is not the new total for the co-payment, but the actual amount of the reduced co-payment. Amounts that result in a negative full-time and part-time copayment amount (ex: -1.00) cannot be saved. Resulting copayment amounts that are greater than the highest approved full-time and part-time amounts for the program year cannot be saved. Resulting copayment amounts must be between \$0.00 and the highest approved amount in the coalition sliding fee schedule.

Co-Paymen

Recalculate

Total Household Members

3

Full time Co-payment Amount

\$ 2

Part time Co-payment Amount

\$ 1

Full Time Co-payment Waiver or Reduction

Full Time Co-payment is Waived or Reduced

Reduction Amount \*

\$ 0

Co-payment Reduction or Waiver Reason \*

Additional Waiver or Reduction Details

Part Time Co-payment Waiver or Reduction

Part Time Co-payment is Waived or Reduced

Reduction Amount \*

\$ 0

Co-payment Reduction or Waiver Reason \*

Additional Waiver or Reduction Details

Resulting Full Time Co-payment Amount

\$ 0.00

Resulting Part Time Co-payment Amount

\$ 0.00

OK

Cancel

## Archiving Eligibility Documents

An Archive button is available for all Eligibility documents on the Eligibility Verification screen.

### Eligibility Documents Sections

- Contact Information – Proof of Residency
- Child Edit Info – Proof of Age and Citizenship
- Parent Edit Info – Required Document
- Other Household Member – Proof of Identify
- Employment – Proof of Employment
- School Training – Proof of School/Training
- Other Income – Proof of Other Household Income
- Documents – All types

Users are able to click **Archive** and remove the document from the documents listed on the EV. When the user hovers over **Archive**, a Tool Tip displays stating: **“Document will be removed from this list and stored in the Household Document Hub.”** Archiving the document will also create a household case note.

#### Proof of Residency\*

Attach the documentation necessary to establish the household's proof of residency.

The screenshot displays a user interface for uploading documents under the heading "Proof of Residency\*". Below the heading is a list of three documents, each with a "View" and "Verify" button. The "REFERRAL-.pdf" and "HOMELESS VERIFICATION LETTER.pdf" documents also have an "Archive" button, which is highlighted with a red box. At the bottom of the list is an "Upload Document..." button.

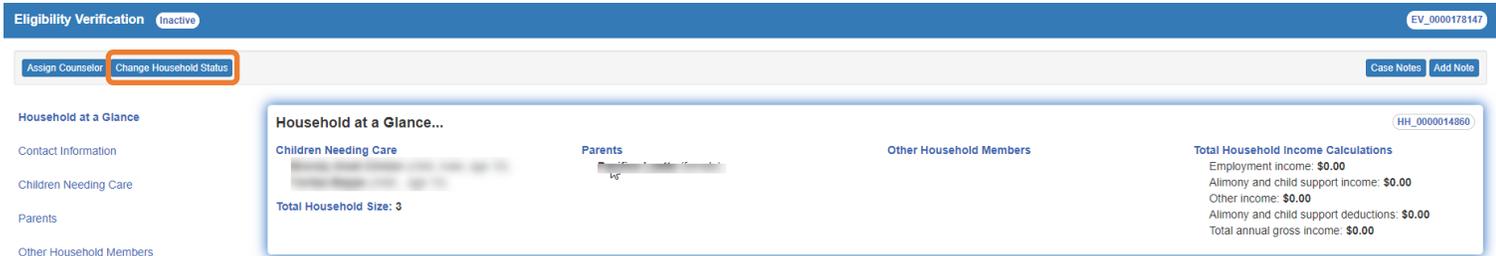
Document Name	View	Verify	Archive
REFERRAL-.pdf	View	Verify	Archive
HOMELESS VERIFICATION LETTER.pdf	View	Verify	Archive
Fake Proof Of Address.docx	View	Verify	Delete

Upload Document...

## Reactivating a Household

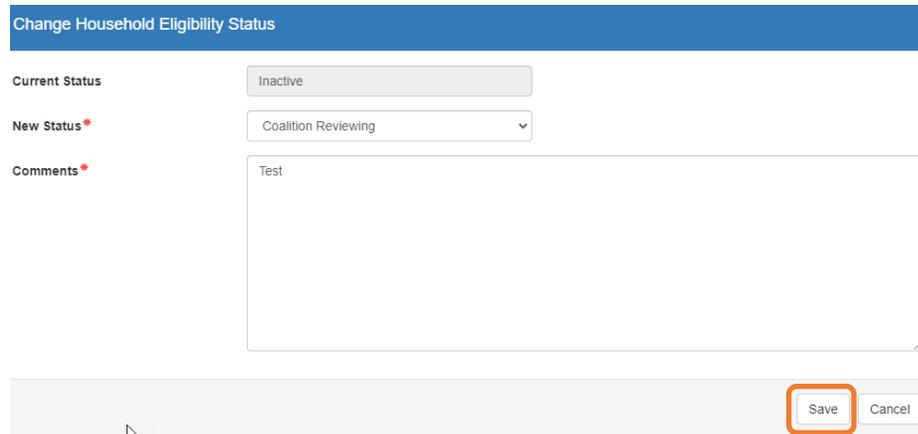
An **Inactive** household can be reactivated to allow the creation of a new eligibility verification number, eligibility assignment, and SR enrollment for children needing care.

From the Eligibility Verification screen, click **Change Household Status**.



The screenshot shows the 'Eligibility Verification' interface with the status 'Inactive'. The 'Change Household Status' button is highlighted with a red box. The main content area displays 'Household at a Glance...' with a 'Total Household Size: 3' and 'Total Household Income Calculations' showing \$0.00 for various income and deduction categories.

The only household status option is **Coalition Reviewing**. Enter a Comment, and click **Save**.

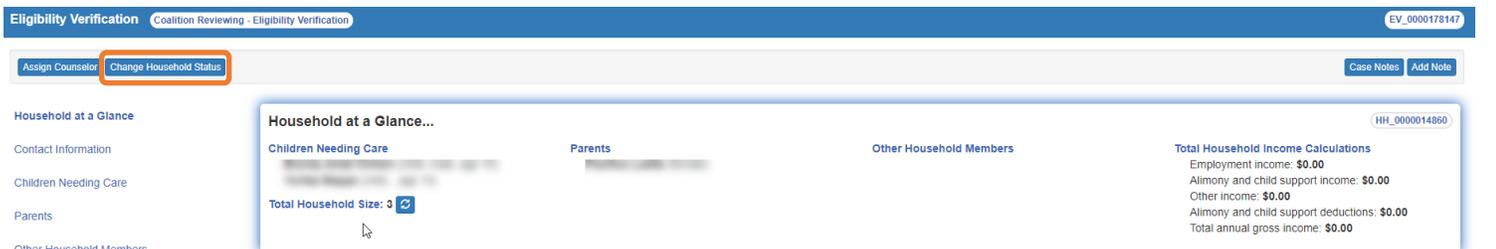


The form is titled 'Change Household Eligibility Status'. It contains the following fields:

- Current Status:** Inactive
- New Status\*:** Coalition Reviewing
- Comments\*:** Test

At the bottom right, the 'Save' button is highlighted with a red box, and a 'Cancel' button is also visible.

The status is now **Coalition Reviewing – Eligibility Verification**. After review, click **Change Household Status** to change the status.



The screenshot shows the 'Eligibility Verification' interface with the status 'Coalition Reviewing - Eligibility Verification'. The 'Change Household Status' button is highlighted with a red box. The main content area displays 'Household at a Glance...' with a 'Total Household Size: 3' and 'Total Household Income Calculations' showing \$0.00 for various income and deduction categories.

Each child's Eligibility Verification status is **Inactivated**, so the applicable child(ren) in the Children Needing Care section must be reactivated. Click **Change Status**.

(child, female, age 5)  
Eligibility status: **Terminated**  
Enrollment status: Not Enrolled  
Date of birth: 0  
Ethnicity: Prefer not to answer  
Races: Prefer not to answer  
Care days: Monday-Friday  
Care types: Fulltime  
Citizenship: Unknown  
Age verification: Unknown  
Medicaid eligibility: Unknown  
Current authorization period: 05/14/2020 - 02/15/2021  
Terms and Conditions: N/A  
Allow Developmental Screening: N/A  
Allow Child Assessment: N/A  
Person ID: 1755733  
Eligibility verification ID: EV\_0000420684 **Inactivated**

History  
Change Status  
Eligibility  
Enrollments  
Edit Remove

Select **Pending Eligibility** under New Status and click **Save**.

Current Status: Terminated  
New Status: Pending Eligibility  
Save Cancel

The child's status is now **Pending Eligibility**. A new EV number is generated for the child. Repeat the process for any additional children who are eligible for services.

JANE DOE (child, female, age 5) **Changed**  
Eligibility status: **Pending Eligibility**  
Enrollment status: Not Enrolled  
Date of birth: 01/02/2017  
Ethnicity: Prefer not to answer  
Races: Prefer not to answer  
Care days: Monday-Friday  
Care types: Fulltime  
Citizenship: Unknown  
Age verification: Unknown  
Medicaid eligibility: Unknown  
Terms and Conditions: N/A  
Allow Developmental Screening: N/A  
Allow Child Assessment: N/A  
Person ID: 1755733  
Eligibility verification ID: EV\_0000723501

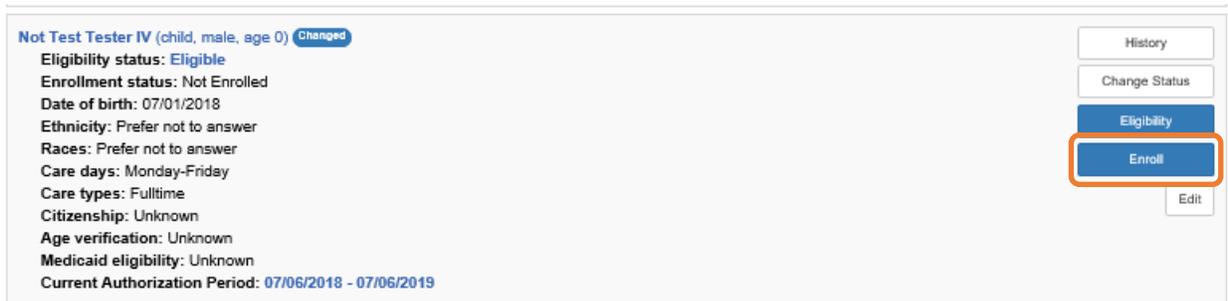
History  
Change Status  
Eligibility  
Enrollments  
Edit

Now, the available household statuses are **Active**, **Inactive**, and **Rejected**. Select the new status and click **Save**.

Change Household Eligibility Status  
Current Status: Coalition Reviewing  
New Status: Active  
Save Cancel

## SR Enrollment Process

Now, an **Enroll** button is displayed for the child. Click **Enroll**. The Enrollments window will display. This window displays all the child's provider enrollments.

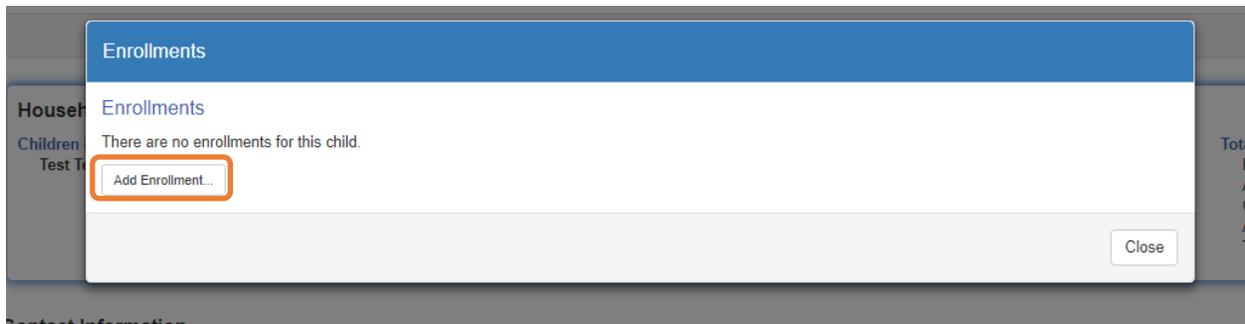


Not Test Tester IV (child, male, age 0) Changed

Eligibility status: Eligible  
Enrollment status: Not Enrolled  
Date of birth: 07/01/2018  
Ethnicity: Prefer not to answer  
Races: Prefer not to answer  
Care days: Monday-Friday  
Care types: Fulltime  
Citizenship: Unknown  
Age verification: Unknown  
Medicaid eligibility: Unknown  
Current Authorization Period: 07/06/2018 - 07/06/2019

History  
Change Status  
Eligibility  
**Enroll**  
Edit

Click **Add Enrollment...**



Enrollments

Enrollments

There are no enrollments for this child.

Add Enrollment...

Close

The Add Enrollments window will display. If the family selected a provider when on the Eligibility Verification Wizard, the provider selection will display. If the family did not select a provider, the coalition user is able to search and select a provider on behalf of the family.

**Add Enrollment**

Select a Provider for Cristiano Urse\*

There are no provider selections for this child.

Other:

Details of Selected Provider

Name	Provider ID	Hours of Business
Location	Provider Type	Child Ages
Contact Phone Number	Profile Status	<input type="button" value="View Provider Profiles"/>
Contact Email Address	Program Year	<input type="button" value="View Provider Rates"/>
	Gold Seal Type	<input type="button" value="View Provider Contracts"/>

Enrollment Start Date\*

Continuation of Services\* Is this enrollment a continuation of services with the selected provider?  
 Yes  No

Eligibility Information

Eligibility Begin Date	Eligibility End Date	Level of Care
Full time Co-payment \$	Part time Co-payment \$	Copay in Effect

Override Copay in Effect

The enrollment start date cannot be prior to the child’s eligibility start date. The enrollment start date is the first day the provider will be able to record attendance for the child on the provider attendance roster.

Non-school age children do not require a school calendar to be assigned. The child’s Childcare Enrollment Schedule is what sets the child’s attendance schedule at the provider. Every day marked with a unit of care will be considered as an authorized day of care at that provider location. All days not marked with a unit of care will be considered as non-reimbursable days.

## Enrolling a Special Needs Child

The Special Needs indicator will be available on the Add Enrollment page for enrollments with eligibility assignments that start 7/1/2022 or later. When enrolling a child that is deemed to have special needs, select the “Has Special Needs” checkbox. Then, select the special needs rate (10%, 15%, or 20%) that was negotiated with the provider.

Override Copay in Effect

School Calendar  Apply Holiday Unit of Care Flip?  Yes  No

School Holiday Unit of Care

School Day Unit of Care

**Special Needs**  Child has special needs.  
Special Needs Rate\*

**Childcare Enrollment Schedule**

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
<input type="text" value="FT"/>	<input type="text"/>	<input type="text"/>				

**Enrollment Schedule Note**

**Initial Enrollment Action\***

Assign to provider for confirmation or rejection.  
 Enroll on behalf of provider.

**NOTES:**

- If the provider indicated on their profile Services tab that they are not equipped to care for children with special needs, a message pops-up notifying the user of this; however, it is informational only and does not stop the enrollment. The user can proceed with the enrollment with that provider or select a different provider.

The screenshot displays a web interface for adding enrollment. A modal dialog box is open, titled "Specials Needs Not Supported By Provider". The dialog contains the following text: "The provider has indicated that their program is not equipped to care for children with special needs. You may continue with the enrollment or select a different provider." An "OK" button is visible in the bottom right corner of the dialog, highlighted with an orange border.

The background form is titled "Add Enrollment" and includes the following sections:

- Eligibility Information**
  - Eligibility Begin Date: 07/26/2022
  - Full time Co-payment: \$2.00
- Override Copay in Effect**: [Dropdown menu]
- School Calendar**: 12 - DCPS [Dropdown menu]
- School Holiday Unit of Care**: FT [Dropdown menu]
- School Day Unit of Care**: FT [Dropdown menu]
- Special Needs**
  - Child has special needs.
  - Special Needs Rate\* [Dropdown menu]
- Apply Holiday Unit of Care Flip?\***  Yes  No

- Special needs rates are calculated using the coalition infant care reimbursement rates. If there is not an SR reimbursement rate plan for the period that coincides with the enrollment start date, a rate plan needs to be created.

## Initial Enrollment Action

In the Initial Enrollment Action section, there are two options.

- **Option 1 – Assign to the provider for confirmation or rejection.** This option places the enrollment request in the provider’s queue to accept or reject the enrollment. The provider has 5 calendar days to complete the enrollment or rejection or the system will automatically terminate the enrollment request and the coalition user will be required to submit another enrollment request.
- **Option 2 – Enroll on behalf of provider.** This option allows the coalition user to accept the enrollment on behalf of the provider without sending an enrollment request and waiting up to 5 calendar days for response.

After selecting Option 1 or 2, click **Save**.

**Add Enrollment**

Select a Provider for Cristiano Ursei\*

Other: FAMILY DAY CARE HOME, LLC

**Details of Selected Provider**

<b>Name</b> FAMILY DAY CARE HOME, LLC	<b>Provider ID</b> 10057	<b>Hours of Business</b> M-F 7:00am-6:00pm ;
<b>Location</b> Duval	<b>Provider Type</b> Family Child Care Home	<b>Child Ages</b> 12 MO - 12 YR
<b>Contact Phone Number</b> (904)	<b>Profile Status</b> Incomplete	<input type="button" value="View Provider Profiles"/>
<b>Contact Email Address</b> hfd daycare.learningcenter@gmail.com	<b>Program Year</b> 2022 - 2023	<input type="button" value="View Provider Rates"/>
	<b>Gold Seal Type</b> Not a Gold Seal provider	<input type="button" value="View Provider Contracts"/>

**Enrollment Start Date \*** 07/26/2022

**Continuation of Services \*** Is this enrollment a continuation of services with the selected provider?  
 Yes  No

**Eligibility Information**

<b>Eligibility Begin Date</b> 07/26/2022	<b>Eligibility End Date</b> 07/26/2023	<b>Level of Care</b> In School
<b>Full time Co-payment</b> \$2.00	<b>Part time Co-payment</b> \$1.00	<b>Copay in Effect</b> FT

**Override Copay in Effect**

**School Calendar** 12 - DCPS   Yes  No

**School Holiday Unit of Care** FT

**School Day Unit of Care** FT

**Special Needs**  Child has special needs.  
**Special Needs Rate \*** 20%

**Childcare Enrollment Schedule**

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
FT <input type="text"/>	<input type="text"/>	<input type="text"/>				

**Enrollment Schedule Note**

**Initial Enrollment Action \***

Assign to provider for confirmation or rejection.  
 Enroll on behalf of provider.

## Enrollment Option 1

The coalition user has the ability to override the enrollment request and complete the enrollment on the provider's behalf in the event the provider is not able to do so. The coalition user is also able to cancel the enrollment request if the provider requests not to have the enrollment or the family changes their mind prior to the enrollment being completed.

**Enrollments**

Enrollments for Cristiano Ursei (4 years old)

**Pending Provider Approval**

FAMILY DAY CARE HOME, LLC

<b>Level of Care</b>	<b>Full Time Copayment</b>	<b>School Calendar</b>	<b>Calendar Applied</b>	<b>Provider ID</b>	
In School	\$2.00	12 - DCPS		10057 ( <a href="#">View Profile</a> )	<input type="button" value="Cancel"/>
<b>Has Special Needs</b>	<b>Special Needs Rate</b>	<b>Part Time Copayment</b>	<b>School Holiday Unit of Care</b>	<b>Location</b>	<input type="button" value="End"/>
Yes	20%	\$1.00	FT	Duval County	<input type="button" value="Repair"/>
<b>Age at Enrollment Start</b>	<b>Copayment in Effect</b>	<b>Care Days</b>	<b>Enrollment Schedule Note</b>	<b>Contact Phone</b>	<input type="button" value="History"/>
4 years	FT	M T W R F Sa Su FT FT FT FT FT	N/A	(904) 781-4640	<input type="button" value="Payment Certificate"/>
<b>Enrollment Period</b>	<b>Billing Group / Eligibility</b>	<b>Match Funder ID</b>		<b>Contact Email</b>	
07/26/2022 - N/A	BG8 / ECON	911 (04-BG8, BG8)		@gmail.com	
<b>Attendance</b>					
N/A - N/A					

**Past Enrollments**  
There are no past enrollments for this child.

## Enrollment Option 2

The completion of the enrollment is now dependent on the family verifying the Terms and Conditions and signing the Payment Certificate on the Family Portal. The child's enrollment will not be completed and the provider will not be able to begin marking attendance for the child until the family completes the enrollment.

**Enrollments**

Enrollments for Cristiano Ursei (4 years old)

**Pending Family Acceptance**

FAMILY DAY CARE HOME, LLC

<b>Level of Care</b>	<b>Full Time Copayment</b>	<b>School Calendar</b>	<b>Calendar Applied</b>	<b>Provider ID</b>	
In School	\$2.00	12 - DCPS		10057 ( <a href="#">View Profile</a> )	<input type="button" value="Cancel"/>
<b>Has Special Needs</b>	<b>Special Needs Rate</b>	<b>Part Time Copayment</b>	<b>School Holiday Unit of Care</b>	<b>Location</b>	<input type="button" value="End"/>
Yes	20%	\$1.00	FT	Duval County	<input type="button" value="Repair"/>
<b>Age at Enrollment Start</b>	<b>Copayment in Effect</b>	<b>Care Days</b>	<b>Enrollment Schedule Note</b>	<b>Contact Phone</b>	<input type="button" value="History"/>
4 years	FT	M T W R F Sa Su FT FT FT FT FT	N/A	(904) 781-4640	<input type="button" value="Payment Certificate"/>
<b>Enrollment Period</b>	<b>Billing Group / Eligibility</b>	<b>Match Funder ID</b>		<b>Contact Email</b>	
07/26/2022 - N/A	BG8 / ECON	911 (04-BG8, BG8)		@gmail.com	
<b>Attendance</b>					
N/A - N/A					

**Past Enrollments**  
There are no past enrollments for this child.

## Additional SR Enrollment Functionality

### Enrollments

Enrollments for (5 years old)

#### Current Enrollments

Enrolled		ST THOMAS CHILD DEVELOPMENT CENTER															
<b>Level of Care</b> 60 < 72 Months	<b>Full Time Copayment</b> \$4.00	<b>School Calendar</b> 63 - DCPS - Sch & Non-Sch Days	<b>Provider ID</b> [REDACTED] (View Profile)														
<b>Age at Enrollment Start</b> 5 years	<b>Part Time Copayment</b> \$2.00	<b>School Holiday Unit of Care</b> N/A	<b>Location</b> [REDACTED]														
<b>Enrollment Period</b> 01/17/2019 - N/A	<b>Copayment in Effect</b> FT	<b>Care Days</b>	<b>Duval County</b> [REDACTED]														
<b>Attendance</b> 01/17/2019 - N/A	<b>Billing Group / Eligibility</b> BG8 / ECON	<table border="1"> <tr> <td>M</td><td>T</td><td>W</td><td>R</td><td>F</td><td>Sa</td><td>Su</td> </tr> <tr> <td>FT</td><td>FT</td><td>FT</td><td>FT</td><td>FT</td><td></td><td></td> </tr> </table>	M	T	W	R	F	Sa	Su	FT	FT	FT	FT	FT			<b>Contact Phone</b> [REDACTED]
M	T	W	R	F	Sa	Su											
FT	FT	FT	FT	FT													
	<b>Match Funder ID</b> N/A		<b>Contact Email</b> [REDACTED]														

2 Cancel  
3 End  
1 Repair  
 Update  
 History  
 Payment Certificate

#### Past Enrollments

Level of Care Change (Admin Termination)		ST THOMAS CHILD DEVELOPMENT CENTER															
<b>Level of Care</b> 48 < 60 Months	<b>Full Time Copayment</b> \$4.00	<b>School Calendar</b> 63 - DCPS - Sch & Non-Sch Days	<b>Provider ID</b> [REDACTED] (View Profile)														
<b>Age at Enrollment Start</b> 4 years	<b>Part Time Copayment</b> \$2.00	<b>School Holiday Unit of Care</b> N/A	<b>Location</b> [REDACTED]														
<b>Enrollment Period</b> 06/29/2018 - 01/16/2019	<b>Copayment in Effect</b> FT	<b>Care Days</b>	<b>Duval County</b> [REDACTED]														
<b>Attendance</b> 06/29/2018 - N/A	<b>Billing Group / Eligibility</b> BG8 / ECON	<table border="1"> <tr> <td>M</td><td>T</td><td>W</td><td>R</td><td>F</td><td>Sa</td><td>Su</td> </tr> <tr> <td>FT</td><td>FT</td><td>FT</td><td>FT</td><td>FT</td><td></td><td></td> </tr> </table>	M	T	W	R	F	Sa	Su	FT	FT	FT	FT	FT			<b>Contact Phone</b> [REDACTED]
M	T	W	R	F	Sa	Su											
FT	FT	FT	FT	FT													
<b>Termination Reason</b>	<b>Match Funder ID</b> N/A		<b>Contact Email</b> [REDACTED]														

History  
 Payment Certificate

Close

#### Notes:

- 1) **IF THE REPAIR FEATURE DOES NOT LOOK CORRECT, PLEASE PRESS 'CTRL+F5' TO REFRESH THE PAGE. YOU SHOULD ONLY NEED TO DO THIS ONCE.**
- 2) **Cancel** will remove the record from the listing.
- 3) Last Attendance Date will no longer be user entered when ending enrollment. It will now be populated when the provider submits their final attendance roster.

## Cancel

Click the **Cancel** button to initiate the Cancel process.

**?** Cancel Pending Enrollment

---

You have requested to cancel the enrollment with **Testy Tots LLC.**

Upon canceling this enrollment:

- The enrollment will no longer appear in this enrollment listing or on the provider enrollment and attendance rosters.
- Any attendance that has already been recorded by the provider will be removed.
- The provider will not be able to submit attendance for this enrollment.

Do you want to cancel the enrollment for **C1 EA-02?**

---

- 1) (Coalitions) The enrollment will no longer appear under the enrollment listing page.
- 2) (Providers) The enrollment will no longer appear under provider enrollments or attendance roster. Any attendance recorded that have not been submitted will be removed. The Provider will no longer be able to submit attendance for this enrollment record.
- 3) If the provider has already submitted attendance for this enrollment record, then they will not get the option to cancel it.

## Repair

Click the **Repair** button to initiate the Repair process.

### Repair Mode

**Repair Mode** will result in changes to an existing enrollment record without ending the existing enrollment and creating a new one. As such, it is intended only for correcting issues with an existing enrollment record, and not for addressing routine changes that can occur during the enrollment period. Use the Update feature for routine changes.

**Repair Mode** may only be used on enrollment records for which attendance has not yet been submitted.

- 1) In Repair mode you will be able to overwrite an existing enrollment record in the event an error has occurred.
- 2) Repair mode should NOT be used to address routine changes. For example, a Funding Transfer or a change in copay.
- 3) Repair mode should only be used to fix errors. For example, data was entered incorrectly or ended incorrectly.
- 4) If the Copayment Amount has been modified after the family has signed their Payment Certificate, then a new Payment Certificate will be generated and the family will need to re-sign it. The Enrollment Status should be in Pending Family Acceptance and you should notify the parent.

Anticipated Start Date \*

Last Day of Service \*

Enrollment Status \*

Repair Mode will allow you to undo Enrollment Terminations

Eligibility Information

Eligibility Begin Date 06/04/2018	Eligibility End Date 06/04/2019	Level of Care 60 < 72 Months
Full time Co-payment \$9.98	Part time Co-payment \$4.99	Copay in Effect FT

Full time Copayment Amount \*

Part time Copayment Amount \*

Repair Mode will allow you to fix incorrect Co-payment values on the enrollment level

Override Copay in Effect

School Calendar

School Holiday Unit of Care

School Day Unit of Care

Childcare Enrollment Schedule

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
<input type="text"/>						

## End Enrollment

Click the **End Enrollment** button to initiate the End Enrollment process.

### End Enrollment

**End Enrollment Reason\***

**Last Day of Service\***

**Is there a past due parent fee?\***  Yes  No

**Past Due Parent Fee Amount** \$

**Is there a payment plan in place?**  Yes  No

**Please attach payment plan document.**  No file chosen

'Last Day of Service' should be considered the last day you will allow the provider to mark attendance and get paid for.



### Confirm Confirm End Enrollment

Ending the enrollment on this day means that reimbursements will not be provided for services after this date.  
End this enrollment with the specified dates?

## Change SR Termination Effective Date

If attendance has not been submitted for the month of the current termination date, click the **View Termination Details** button on the enrollment.

Provider ID 24536	Cancel
Location Home Court Tallahassee, 32303 KREPS ISLAND County	End
Contact Phone (111) 123-1234	Repair
Contact Email msschool@krepsisland.edu	Update
	<b>View Termination Details</b>
	History
	Payment Certificate

Then, click **Change termination effective date.**

### SR Enrollment Termination Details

Termination details for School age Child.

Termination Reason:	2-Over Stimulation	
Effective Date:	08/26/2023	<b>Change termination effective date</b>
Last Attendance Date:	N/A	
Past Due Parent Fee:	None	

Close

In the Change Termination Effective Date pop-up window, enter the new Termination Effective Date and enter a comment in the Termination Date Change Reason field. Click **Save.**

### Change Termination Effective Date

Termination Effective Date\*

Termination Effective Date is last day of service + 1 day. Ex. If the child's last day of service is 01/15/2023, the Termination Effective Date is 01/16/2023.

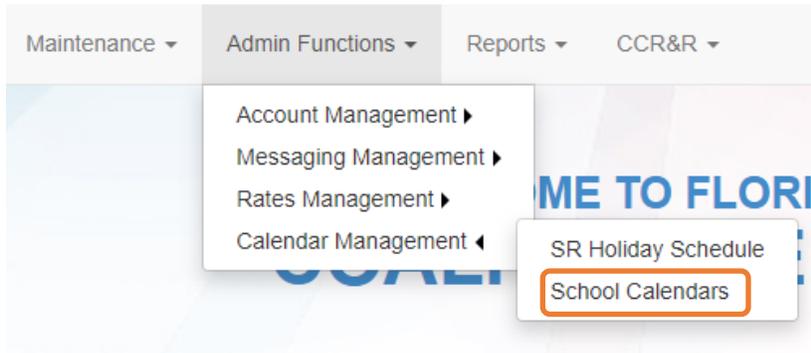
Termination Date Change Reason\*

**Save** Cancel

## School Calendar

The School Calendar is created by the coalition, based on the school board/school district academic calendar. The dates on the School Calendar are used in enrollment and provider attendance to show care levels for school-age children. For example, a child may receive PT care during the school year, but FT care during the summer. The date that the care level changes from PT to FT and back to PT is based on the school calendar.

To create a School Calendar, go to **Admin Functions > Calendar Management > School Calendars**.



Click **+ Create New Calendar**.



Fill in the School Name field, select the County, and select the First Day and Last Day of instruction. Click **Save**.

A screenshot of the 'Create School Calendar' form. The form title is 'Create School Calendar for ELC of Northwest Florida'. It contains the following fields:

- 'School Name\*' with an empty text input field.
- 'Select County\*' with a dropdown menu.
- 'Calendar Instruction Dates' section with 'First Day\*' set to '01/01/2022' and 'Last Day\*' set to '01/31/2022'.
- 'Calendar Instructional Days\*' section with checkboxes for 'Monday', 'Tuesday', 'Wednesday', 'Thursday', 'Friday', 'Saturday', and 'Sunday'. 'Monday' through 'Friday' are checked.

At the bottom right, there are 'Save' and 'Cancel' buttons. The 'Save' button is highlighted with an orange border.

School Name\*

Select County\*

Calendar Instruction Dates

First Day\*

Last Day\*

Calendar Instructional Days\*

Monday  Tuesday  Wednesday  Thursday  Friday  Saturday  Sunday

Save

Cancel

Click **+ New Closed Date** to select the days school is closed.

School Name\*

Select County\*

Calendar Instruction Dates

First Day\*

Last Day\*

Calendar Instructional Days\*

Monday  Tuesday  Wednesday  Thursday  Friday  Saturday  Sunday

Search:

School Closed Dates	
+ New Closed Date	
No data available in table	

Showing 0 to 0 of 0 entries

Previous Next

Save

Cancel

An individual day can be selected, or check the Date Range checkbox, and select multiple days.

📅 School Closed Date(s) ✕

---

Select Closed Date or **\*Date Range**

📅 School Closed Date(s) ✕

---

Select Closed Date or **\*Date Range**

Once all closed dates are entered, click **Save**.

📅 Create School Calendar for ELC of Northwest Florida ✕

---

School Name\*

Select County\*

Calendar Instruction Dates

First Day\*  Last Day\*

**Calendar Instructional Days\***

Monday  Tuesday  Wednesday  Thursday  Friday  Saturday  Sunday

Search:

	School Closed Dates	+ New Closed Date
1.	1/18/2022	<input type="button" value="Remove"/>
2.	1/19/2022	<input type="button" value="Remove"/>
3.	1/20/2022	<input type="button" value="Remove"/>

Showing 1 to 3 of 3 entries Previous **1** Next

Click the **Show Calendars** button to see all School Calendars under the Master School Calendar.

Enrollment School Calendars + Create New Calendar

Show 10 entries Search:

Show All Coalitions		Show Removed Calendars		Calendar Information			
School ID	Coalition	County	Name	Open	Closed		
43	ELC of Hillsborough	Hillsborough	Hillsborough County Public Schools			<a href="#">Show Calendars</a> <a href="#">Add Calendar</a>	
220	ELC of Hillsborough	Hillsborough	2021-2022			<a href="#">Hide Calendars</a> <a href="#">Add Calendar</a>	
Calendar ID	Start	End	Instructional Days	Open	Closed		
720	9/1/2021	5/31/2022	Mon, Tue, Wed, Thu, Fri	189	6	<a href="#">Edit</a> <a href="#">Remove</a>	

Showing 1 to 2 of 2 entries Previous 1 Next

Enrollment School Calendars + Create New Calendar

Show 10 entries Search:

Show All Coalitions		Show Removed Calendars		Calendar Information			
School ID	Coalition	County	Name	Open	Closed		
43	ELC of Hillsborough	Hillsborough	Hillsborough County Public Schools			<a href="#">Hide Calendars</a> <a href="#">Add Calendar</a>	
Calendar ID	Start	End	Instructional Days	Open	Closed		
550	8/24/2020	5/28/2021	Mon, Tue, Wed, Thu, Fri	172	28	<a href="#">Edit</a> <a href="#">Remove</a>	
160	8/12/2019	5/29/2020	Mon, Tue, Wed, Thu, Fri	176	36	<a href="#">View</a> <a href="#">Remove</a>	
1	8/10/2018	5/31/2019	Mon, Tue, Wed, Thu, Fri	180	37	<a href="#">View</a> <a href="#">Remove</a>	
220	ELC of Hillsborough	Hillsborough	2021-2022			<a href="#">Show Calendars</a> <a href="#">Add Calendar</a>	

Showing 1 to 2 of 2 entries Previous 1 Next

In this example, the Master School Calendar 43 has Calendar IDs 1, 160, and 550 for each year.

Enrollment School Calendars

Show 10 entries

Show All Coalitions		Show Removed Calendars	
School ID	Coalition	County	
43	ELC of Hillsborough	Hillsborough	
Calendar ID	Start	End	
550	8/24/2020	5/28/2021	
160	8/12/2019	5/29/2020	
1	8/10/2018	5/31/2019	
220	ELC of Hillsborough	Hillsborough	

Showing 1 to 2 of 2 entries

## Pending Family Acceptance Emails

SR families who have child records in Pending Family Acceptance status will receive an email notification with instructions to log in to the Family Portal to sign their payment certificate. The email notification will continue to be sent every five days until the payment certificate is signed and the child record is in the Enrolled, Canceled or Terminated status.

Hello,

Your child's enrollment with the child care provider you selected requires your electronic signature on the payment certificate in order to complete the enrollment. The payment certificate authorizes payment for services from the state to the child care provider. Failure to sign the payment certificate could result in the child's enrollment being ended and out-of-pocket expenses to accrue.

Please log into your family portal account to review and sign the payment certificate. Once logged in, scroll down to the School Readiness Funding section and click the "Sign" button in the Payment Certificate column.

<ELC NAME> also provides Child Care Resource and Referral (CCR&R) services. CCR&R is the front door for family services in your county. CCR&R staff will let you know about community resources, child care options and other information that may be of assistance to you. Please contact your early learning coalition and ask to speak to a CCR&R specialist for further assistance.

## Sign SR Enrollment Payment Certificate and Terms & Conditions

After the provider approves the enrollment, the family will receive the following email from [DONOTREPLY@oel.myflorida.com](mailto:DONOTREPLY@oel.myflorida.com).

OELSystemTest@oel.myflorida.com

7:15 PM (21 minutes ago) ☆

to me ▾

Hello,

The application you submitted for assistance in paying for child care has been approved by the ELC of the Big Bend Region.

Please log into your family portal account to review the Parental Rights and Responsibilities/Terms and Conditions. Once you have agreed to the terms and conditions you must electronically sign your child's payment certificate in order to confirm your child's enrollment with the child care provider.

The ELC of the Big Bend Region also provides Child Care Resource and Referral (CCR&R) services. CCR&R is the front door for family services in your county. CCR&R staff will let you know about community resources, child care options and other information that may be of assistance to you. Please contact your early learning coalition and ask to speak to a CCR&R specialist for further assistance.

Thank you,

ELC of the Big Bend Region  
8669739030  
<http://www.elcbigbend.org/>

**Please do not reply to this message. Replies to this message are routed to an unmonitored mailbox. If you have question, please contact your [early learning coalition](#).**

When the Family Portal user logs on to the Family Services Portal, click the **Sign** button for the Payment Certificate.

### School Readiness Funding

The following table shows the School Readiness funding status for all of the children in your household.

Child Name	EV Number	Status	Enrollment Status	Provider Name	Payment Certificate
	EV_	Eligible	Pending Family Acceptance		

The following screen will display.

I understand I have the right to be notified of decisions made regarding my services and the right to appeal any decision, including reductions to or termination of services.	<input type="checkbox"/>
I understand that services will be provided based on placement priorities (sections 1002.87 and 1002.305, if 2.), and availability of funding. I must notify on or before my last day of authorized care or my services will be terminated. If termination occurs, I will be fully responsible for my child care costs. To qualify for services, I must submit a new application to the Family Portal.	<input type="checkbox"/>
I understand my information may be shared with other state and local agencies for the purposes of program administration and public assistance fraud prevention.	<input type="checkbox"/>
SR - I understand that if this is my first 12-month-eligibility determination, or subsequent 12-month-eligibility determination where my income remains at or below 100% of the federal poverty level (FPL), it is my responsibility to report within 14 calendar days of any change of circumstances related to: <ul style="list-style-type: none"><li>• Address</li><li>• Temporary/Non-temporary work or education</li><li>• Family size</li><li>• Failure to maintain attendance at a job training or education program</li><li>• Income exceeds 80% of the state median income (SMI)</li></ul>	<input type="checkbox"/>
SR - I understand that after my first eligibility determination for subsequent 12-month-eligibility periods, where my income exceeds 100% federal poverty level and I am considered to be in graduated phase out from the program, it is my responsibility to report within 10 calendar days of any change of circumstances related to: <ul style="list-style-type: none"><li>• Address</li><li>• Temporary/Non-temporary work or education</li><li>• Family size</li><li>• Failure to maintain attendance at a job training or education program</li><li>• Income exceeds 80% of the state median income (SMI)</li><li>• Any changes in income</li></ul>	<input type="checkbox"/>
SR PL03 - I understand that I am responsible for the payment of all child care expenses in excess of the amount of the subsidy and that at any time within my 12-month-eligibility determination where my income remains above 80% state median income (SMI) and below or at 100% SMI, it is my responsibility to report within 14 calendar days any change to: <ul style="list-style-type: none"><li>• Address</li><li>• Work</li><li>• Family size</li><li>• Family income</li></ul>	<input type="checkbox"/>
I understand that the coalition or contractor will not discriminate against my family on the basis of race, national origin, ethnic, background, sex, religious affiliation or disability.	<input type="checkbox"/>
I understand that if an assessed parent enrolls in the coalition or contractor for participation in the School Readiness (SR) Program, I must satisfactorily fulfill my engagement obligation before I will be allowed to transfer to another SR Program provider. Satisfactory fulfillment of the engagement obligation is defined as immediate payment of the outstanding engagement obligation or establishment of a repayment plan for the outstanding engagement obligation.	<input type="checkbox"/>
I understand that I have the right to unattended access to my child during normal hours of child care provider operation and whenever the child is in the provider's care.	<input type="checkbox"/>
I understand that I have the right to confidentiality of my child's or children's information and the right to inspect, review and request a copy of my child's or children's SR records.	<input type="checkbox"/>
I understand that as a parent, I have the right to choose from a variety of child care categories, including center-based care, faith-based care, family child care and informal child care to the extent authorized in the state's Child Care and Development Fund State Plan that the United States Department of Health and Human Services approved pursuant to 45 CFR s. 98.36.	<input type="checkbox"/>
I accept the coalition/contractor's determination of my income and household size used to access my parent subsidy.	<input type="checkbox"/>
I understand that if I give false information, sign inaccurate attendance assessments or fail to report changes in my circumstances that would affect my eligibility for services or the level of my services, my case may be referred to law enforcement for investigation and possible prosecution.	<input type="checkbox"/>
I certify that the information given in my application is true and complete to the best of my knowledge.	<input type="checkbox"/>
<input type="button" value="Next"/>	

After the parent reads each statement, and clicks the checkbox for each statement, the statement box will collapse, and a green checkmark will appear.

+

I understand that services will be provided based on placement priorities (section 1002.87, F.S.), and availability of funding. I must recertify on or before my last day of authorized care or my services will be terminated. If termination occurs, I will be fully responsible for my child care costs. To reapply for services, I must submit a new application in the Family Portal.

-

Once all boxes have been checked, a pop-up window will display for developmental screening and child assessment authorizations. After clicking **Yes** or **No**, the parent will click the **Save** button.

 Update Needed

Authorization For Developmental Screening

We encourage you to complete the developmental screening of your child. It is an important step to determine if he/she is developing typically or may need extra support.

Want to know more about screening? [Click here](#)

I give my permission to screen my child. I also give permission to share the results with my child care provider and other agencies to make a plan to help my child in the classroom.

Yes  
 No

Authorization For Child Assessment

Child assessments help you and your child care provider know how your child grows and changes over time and whether your child meets the typical developmental milestones in playing, learning, speaking, behaving, and moving. Providers conduct this assessment by observing your child over time during their typical day. This information can be used to provide personalized education planning supports for your child.

I give permission to assess my child. I also give permission to share the results with my child care provider and other agencies for the purpose of developing intervention plans or program improvement.

Yes  
 No

**Save**

After clicking **Save**, the parent will click **Accept** to accept the terms and conditions and continue or click **Decline** to submit terms and conditions and decline the enrollment.



If Accept is clicked a pop-up window is displayed to capture the parent's electronic signature. Once the full name is entered, click **Yes** and the Payment Certificate will be displayed.

**Terms and Conditions Electronic Signature** ✕

You are about to electronically sign the Parental Rights and Responsibilities/Terms and Conditions.

Full Name: \*

Click **Yes** to confirm your electronic signature.

A case note will be created with a link that when clicked, will generate a PDF for the Terms and Conditions Accepted

Household Case Notes							
Show 10 entries.		Search: <input type="text"/>					
Date	Code	Custom Code	Event	Description	Notes	User	
10/26/2023 7:31:11 AM	ENRSACPT		Family Accepted SR Enrollment	SR enrollment was accepted by family. Child: Hale A'Nye Porfirio (ID: 7052705). Enrollment status: Enrolled, Provider ID: 839, Enrollment (anticipated) start date: 10/26/2023.		kalebs925@gmail.com	
10/26/2023 7:24:44 AM	<b>ENRSTERMS</b>		<b>Family Accepted SR Enrollment Terms &amp; Conditions</b>	SR enrollment terms & conditions were accepted by family.		kalebs925@gmail.com	

## Parental Rights and Responsibilities/Terms and Conditions

Child Name: [REDACTED]

Child Date of Birth: [REDACTED]

Accepted By: [REDACTED]

Signed by Parent/Guardian: [REDACTED]

Signed by Date: [REDACTED]

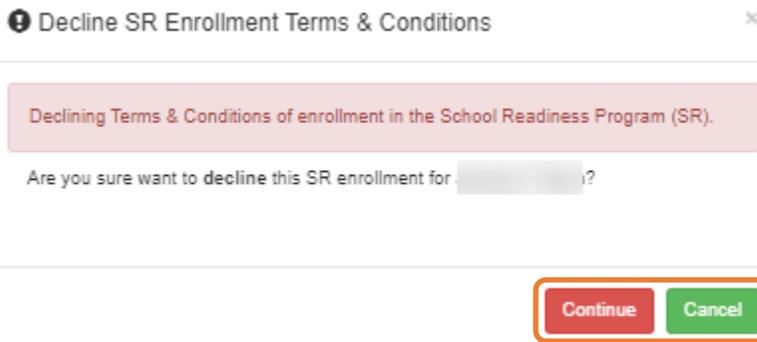
Terms ID: [REDACTED]

1. I understand I have the right to be notified of decisions made regarding my services and the right to appeal any decision, including reductions in or termination of services.
  2. I understand that services will be provided based on placement priorities (sections 1002.87 and 1002.935, F.S.), and availability of funding. I must recertify on or before my last day of authorized care or my services will be terminated. If termination occurs, I will be fully responsible for my child care costs. To reapply for services, I must submit a new application in the Family Portal.
  3. I understand my information may be shared with other state and local agencies for the purposes of program administration and public assistance fraud prevention.
  4. SR - I understand that if this is my first 12-month eligibility determination, or subsequent 12-month eligibility determination where my income remains at or below 150% of the federal poverty level (FPL), it is my responsibility to report within 14 calendar days of any change of circumstances related to:
    - o Address
    - o Temporary/Non-temporary work or education
    - o Family size
    - o Failure to maintain attendance at a job training or education program
    - o Income exceeds 85% of the state median income (SMI)
  5. SR - I understand that after my first eligibility determination for subsequent 12-month eligibility periods, where my income exceeds 150% federal poverty level and I am considered to be in graduated phase-out from the program, it is my responsibility to report within 10 calendar days of any change of circumstances related to:
    - o Address
    - o Temporary/Non-temporary work or education
    - o Family size
    - o Failure to maintain attendance at a job training or education program
    - o Income exceeds 85% of the state median income (SMI)
    - o Any changes in income
  6. SR PLUS - I understand that I am responsible for the payment of all child care expenses in excess of the amount of the subsidy and that at any time within my 12-month eligibility determination where my income remains above 85% state median income (SMI) and below or at 100% SMI, it is my responsibility to report within 14 calendar days any change to:
    - o Address
    - o Work
    - o Family size
    - o Family income
  7. I understand that the coalition or contractor will not discriminate against my family on the basis of race, national origin, ethnic, background, sex, religious affiliation or disability.
  8. I understand that if I am assessed a parent copay by the coalition or contractor for participation in the School Readiness (SR) Program, I must satisfactorily fulfill my copayment obligation before I will be allowed to transfer to another SR Program provider. Satisfactory fulfillment of the copayment obligation is defined as immediate payment of the outstanding copayment obligation or establishment of a repayment plan for the outstanding copayment obligation.
-

9. I understand that I have the right to unlimited access to my child during normal hours of child care provider operation and whenever the child is in the provider's care.
10. I understand that I have the right to confidentiality of my child's or children's information and the right to inspect, review and request a copy of my child's or children's SR records.
11. I understand that as a parent, I have the right to choose from a variety of child care categories, including center-based care, faith-based care, family child care and informal child care to the extent authorized in the state's Child Care and Development Fund State Plan that the United States Department of Health and Human Services approved pursuant to 45 CFR s. 98.30.
12. I accept the coalition's/contractor's determination of my income and household size used to assess my parent copay.
13. I understand that if I give false information, sign inaccurate attendance documents or fail to report changes in my circumstances that would affect my eligibility for services or the level of my services; my case may be referred to law enforcement for investigation and possible prosecution.

14. I certify that the information given in my application is true and complete to the best of my knowledge.

If the parent clicks **Decline**, a pop-up window will display.



The parent can click **Cancel** and then click **Accept** to accept the terms and conditions.

After **Continue** is clicked, the Enrollment Status will be blank and the **Sign** button for the payment certificate is no longer visible.

School Readiness Funding							Download Consumer Education Statement
The following table shows the School Readiness funding status for all of the children in your household.							
Child Name	Screenings and Assessments	EV Number	Status	Enrollment Status	Provider Name	Payment Certificate	
[redacted]	<a href="#">Screening History</a>	EV [redacted]	Eligible	-	-	-	

On the EV, the Eligibility Status will remain **Eligible**, but the Enrollment Status will change to **Enrollment Ended (Terminated)**.

Changed

**Eligibility status:** Eligible

**Enrollment status:** Enrollment Ended (Terminated)

**Date of birth:** [redacted]

**Ethnicity:** Prefer not to answer

**Races:** Prefer not to answer

**Care days:** Monday-Friday

**Care types:** Fulltime

**Citizenship:** US Citizen or Qualified Alien

History

Change Status

Eligibility

Enrollments

Edit

After clicking **Accept**, the payment certificate will display.

Non-transferable Child Care Certificate  
School Readiness (SR)/SR Plus Program

Certificate Number: [REDACTED]  
HouseholdID: [REDACTED]

\* This certificate is not valid for care arranged after: 8/21/2025

---

**PARENT INFORMATION**

Name: [REDACTED]	Home Phone: [REDACTED]	Contact Email: [REDACTED]
Home Address: [REDACTED]	City: [REDACTED]	State: FL Zip: [REDACTED]

---

**ENROLLED CHILD INFORMATION**

Name: [REDACTED]	Date of Birth: [REDACTED]	Age at Enrollment: 4	Child Person ID: [REDACTED]
------------------	---------------------------	----------------------	-----------------------------

---

**PROVIDER INFORMATION**

Provider: [REDACTED]	Phone: [REDACTED]	Provider Site Address: [REDACTED]
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---

**ENROLLMENT INFORMATION**

Eligibility Start Date: 8/22/2024	Eligibility Redetermination Due Date: 7/16/2024
Rilya Wilson Reporting Requirement: No	Referring Agency Phone: N/A
Assigned ELC Counselor: [REDACTED]	Referring Agency Email: N/A

Provider Daily Reimbursement Rates:	Full-Time: \$38.00	Part-Time: \$28.50	Special Needs Rate: \$0.00
Parent Daily Co-Pay**:	Full-Time: \$20.68	Part-Time: \$10.34	
Enrollment Start: 8/22/2024	Enrollment End: 8/21/2025		
Billing Group: SRPLS	Eligibility: SRPL		
Care Level: PR4	School Calendar Name:	School Holiday Unit of Care:	

\*\* Parent co-payment is what the parent is responsible for paying (today). Additional fees may also be applied; contact your provider for more details.

Unit of Care / Day of Care:	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
	FTFT	FTFT	FTFT	FTFT			

---

I certify by use of this certificate that I am exercising my choice of provider for my child. Other placement options in licensed, license-exempt, and registered facilities and homes have been explained to me. DEL, the early learning coalition, and its contracted subrecipient, if applicable, are indemnified from all possible liability for payments to the provider that I select and from liability for the quality of care my child receives. I understand that I have access to my children and may visit the provider's setting at any time during care hours.

Signature of Parent:	[REDACTED]	Date: 8/22/2024
	<input checked="" type="checkbox"/> By Electronic Signature	
Signature of Provider:	[REDACTED]	Date: 8/22/2024
	<input type="checkbox"/> By Electronic Signature	
Signature of Early Learning Coalition Counselor:	[REDACTED]	Date: 8/22/2024
	<input checked="" type="checkbox"/> By Electronic Signature	

The parent will check the By **Electronic Signature** checkbox and sign the full name as it appears on the SR application and click **Yes**.

**Payment Certificate Electronic Signature** ✕

You are about to electronically sign the SR Enrollment Payment Certificate.

Full Name: \*

Click "Yes" to confirm your electronic signature.

**Yes** Cancel

Then, click **Submit**.

**Privacy Act Statement:** Social security numbers are requested on this form under s. 119.071(5)(a)2., F.S., for use in the records and data systems of the Office of Early Learning (OEL) and Early Learning Coalitions. Social security numbers will be used for routine data requests, state and federal reporting requirements, identification, and to verify eligibility for the School Readiness Program including, but not limited to, family income. Submission of social security numbers on this form is voluntary and not a condition of enrollment in the School Readiness Program.

I certify that by use of this certificate that I am exercising my choice of caregiver for my child. Other placement options in licensed and subcontract facilities and homes have been explained to me. OEL, the early learning coalition, and its contracted provider, if applicable, are indemnified from and its contract provider are indemnified from all possible liability for payments to the caregiver that I select and from liability for the quality of care my child receives. I understand that I have access to my children at any time and that I may visit the provider's setting at any time during care hours.

Signature of Parent:	<input type="text"/> (E-Signed)	Date:	3/24/2022
	<input checked="" type="checkbox"/> By Electronic Signature		
Signature of Provider:	<u>Bernice Rodriguez (E-Signed, On Behalf of Provider)</u>	Date:	3/22/2022
	<input type="checkbox"/> By Electronic Signature		
Signature of Early Learning Coalition Counselor:	<u>Bernice Rodriguez (E-Signed)</u>	Date:	3/22/2022
	<input checked="" type="checkbox"/> By Electronic Signature		

**Submit**

After clicking **Submit**, the following confirmation message will display. The parent will click **Accept** or **Decline**.

**Accept Enrollment/Payment Certificate** ✕

You are about to accept the conditions of enrollment and payment responsibility. Once signed and submitted, you will be able to print your SR Enrollment Payment Certificate.

Would you like to accept the current enrollment for  ?

**Accept** **Decline**

Once **Accept** is clicked, the parent may print the certificate by clicking the **Print** button.



ELC of Pinellas  
Non-transferable Child Care Certification  
School Readiness Program  
Certificate Number: 09826433  
\* This certificate is not valid for care arranged after: 4/22/2023

PARENT INFORMATION		
Name: [REDACTED]	Date of Birth: [REDACTED]	Social Security Number: [REDACTED]
Home Address: [REDACTED]	City: [REDACTED] State: FL	Zip: [REDACTED]
Home Phone: [REDACTED]	Work Phone: [REDACTED]	Employer: [REDACTED]

The Enrollment Status on the Family Portal profile page is now **Enrolled**.

School Readiness Funding

The following table shows the School Readiness funding status for all of the children in your household.

Child Name	EV Number	Status	Enrollment Status	Provider Name	Payment Certificate
[REDACTED]	[REDACTED]	Eligible	<b>Enrolled</b>	[REDACTED]	View

Once the parent has signed the payment certificate, the answers to the screening and assessment questions on the terms and conditions are displayed for the child.

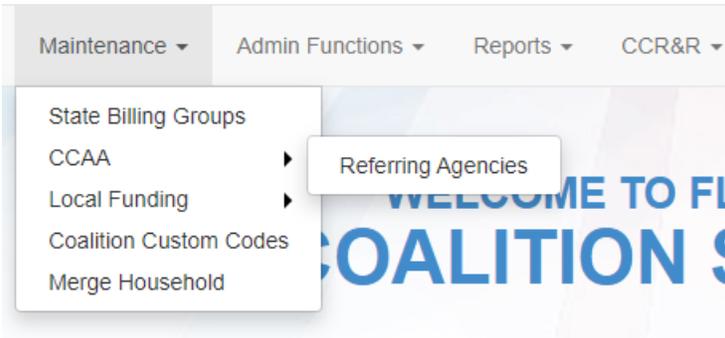
[REDACTED] (child, male, age 1) **Changed**

**Eligibility status:** Eligible  
**Enrollment status:** Enrolled  
**Date of birth:** [REDACTED]  
**Ethnicity:** Non-Hispanic  
**Races:** White  
**SSN:** [REDACTED]  
**Care days:** Monday-Friday  
**Care types:** Fulltime  
**Citizenship:** US Citizen or Qualified Alien  
**Age verification:** Verified  
**Medicaid eligibility:** Eligible  
**Current authorization period:** 04/23/2021 - 04/22/2022  
**Next authorization period:** 04/23/2022 - 04/22/2023  
**Terms and Conditions:** 03/24/2022  
**Allow Developmental Screening:** Yes  
**Allow Child Assessment:** Yes  
**Person ID:** [REDACTED]  
**Eligibility verification ID:** EV\_[REDACTED]

History  
Change Status  
**Eligibility**  
**Enrollments**  
Edit

## Teenage Parent Program (TAPP) Setup and Referral Entry

1. TAPP Providers must have a profile in EFS-Mod before they will be available for selection during child enrollment.
2. Navigate to **Maintenance > CCAA > Referring Agencies**.
  - a. Create New Referring Agency
  - b. Agency Category: Select TAPP – Teenage Parent Plan
  - c. Enter All Required Data
  - d. Select TAPP as the Type of Referral. Click **Save**.



Local Referring Agencies List 19 Total Records

Create New Referring Agency

Show : 10 entries

---

### Referring Agency - Edit Record

Agency Category *	TAPP - Teenage Parent Plan
Agency Name *	Teen Parent Program 2
Authorization Code * ⓘ	33-12321
Address Line 1 *	458 Drone Avenue
Address Line 2	
City *	Tallahassee
State *	FL
Zip Code *	32308
Agency Phone *	(850)678-1234
Agency Fax	

Agency Email \*

test.test@gmail.com

**Additional Contacts**

Primary Contact	<input type="checkbox"/>
Contact Person	<input type="text"/>
Primary Phone Number	<input type="text"/>
Secondary Phone Number	<input type="text"/>
Email	<input type="text"/>
Primary Contact	<input type="checkbox"/>
Contact Person	<input type="text"/>
Primary Phone Number	<input type="text"/>
Secondary Phone Number	<input type="text"/>
Email	<input type="text"/>

Type of Referral \*

- AT-RISK     DOMESTIC VIOLENCE     HOMELESS     RELATIVE CARE GIVER     TANF     TCC     TAPP     LOCAL

Is Active

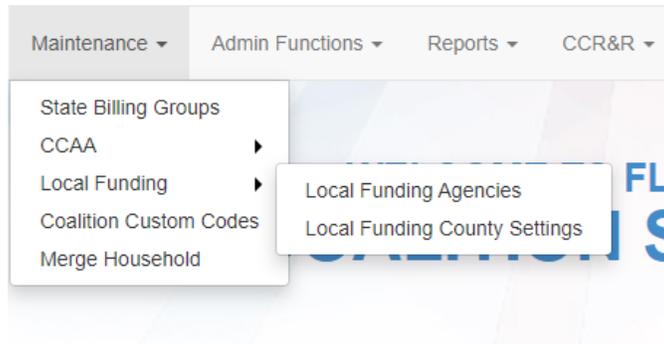


Save

Cancel

### 3. Local Funding > Local Funding Agencies

- a. Create new Local/Match Funding Agency
- b. Enter All Required Data
- c. Select Local Funder Type **E-TAPP** (Track TAPP Enrollments) for TAPP Enrollments that will only populate the Provider enrollment roster). Set up TAPP Local Funding Billing Group; or
- d. Select Local Funder Type **P-TAPP** (Track TAPP Enrollment and Payment) for TAPP Enrollments that will populate the Provider Attendance roster and be submitted for Reimbursements
- e. **View Local Funding Allocation > Create New Local Funding Allocation**
  - i. Set the Match Percent to 100%
  - ii. **Set Use Approved SR Rates for Provider to = NO**
  - iii. Backdate the Begin Date to the earliest enrollment that should be funded by the provider
  - iv. Set the End Date if applicable



The image shows the 'Local/Match Funding Agency - Edit Record' form. The title is 'Create New Local/Match Funding Agency'. The form has several fields: Name (Teenage Parent Plan), Address, Coalition (ELC of the Big Bend Region), Suite/Appt., Local Billing Code (TP351), City, Local Funding Type (dropdown menu open), State (FL), Zip Code, Telephone, Fax, and Email. The 'Local Funding Type' dropdown menu is open, showing options: '-Please select an item-', 'B38 Match', 'CCEP Match', 'E-TAPP', 'P-TAPP', and 'Primary Local'. A red arrow points to 'E-TAPP'. At the bottom of the form are 'Save' and 'Cancel' buttons.

Local/Match Funding Agency - Edit Record

Local/Match Funding Agency ID - 47

Name \* Teenage Parent Plan Address \* Test Road

Coalition \* ELC of the Big Bend Region Suite/Appt.

Local Billing Code \* 33-TP351 City \* Tallahassee

Local Funding Type \* E-TAPP State \* FL

Zip Code \* 32301

Telephone \* (850)555-5555

Fax

Email \* test.test@gmail.com

Save Cancel

Local Funding Allocation Maintenance 0 Total Records

Create New Local Funding Allocation

Funding Agency: Teenage Parent Plan 33-TP351

No data available to display

Local Funding Allocation - Edit Record

Create New Local Funding Allocation

\* MATCH PERCENT OR DOLLAR AMOUNT IS REQUIRED.

Local/Match Funding Agency Name Teenage Parent Plan

Local Funding Type E-TAPP

Local/Match Funding Agency ID \* 47 Match Percent (%) 100

Coalition \* ELC of the Big Bend Region Dollar Amount 00000.00

Local Billing Code \* 33-TP351 Begin Date \* 11/01/2018

End Date

Save Cancel

Local Funding Allocation Maintenance 1 Total Records

Create New Local Funding Allocation

Show: 10 entries

Funding Agency: Teenage Parent Plan 33-TP351

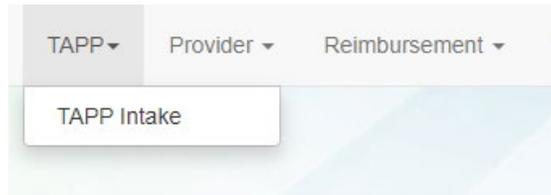
Edit	Local Funding Allocation ID	Local Billing Code	Match Percent (%)	Begin Date	End Date	Active
<input type="checkbox"/>	36	33-TP351	100	11/1/2018		✓

Edit Funding Allocation

4. TAPP Intake

- a. Select the TAPP Agency from the Agency Category. This dropdown only displays the TAPP Referral Agencies that have been entered.
- b. Enter All Required Data
- c. Enter the TAPP Enrollment Details
- d. Select E-TAPP to see only the local E-TAPP billing codes
- e. Select P-TAPP to see only the local P-TAPP billing codes
- f. Make the eligibility start and end dates the TAPP enrollment start and end dates
- g. Add the child(ren) data. Click **Save**.

**NOTE:** The TAPP intake process allows coalition users to identify the physical county of residence and families receiving RCMA services.



Teenage Parent Program (TAPP) – Intake Form

Referring Agency Details	
Agency Category	Teenage Parent Plan
Agency Name *	12 - Teen Parent Program 2
Information Supplied By (School District Personnel) *	Test School Provider
Contact Number * <small>Example: (850) 555-1234</small>	850-850-8500
Referral Date *	11/03/2018
Teenage Parent Information	
Primary Parent's First Name *	TAPPMother
Primary Parent's Middle Name	
Primary Parent's Last Name *	Testing
Primary Parent's Ethnicity *	<input type="radio"/> Hispanic <input checked="" type="radio"/> Non-Hispanic <input type="radio"/> Prefer not to answer
Primary Parent's Race(s) <i>Check those that apply.</i> *	<input type="checkbox"/> Asian <input type="checkbox"/> Hawaiian / Pacific <input type="checkbox"/> Black <input type="checkbox"/> US Indian / Alaskan <input checked="" type="checkbox"/> White <input type="checkbox"/> Prefer not to answer
Primary Parent's Gender *	<input type="radio"/> Male <input checked="" type="radio"/> Female
Primary Parent's Marital Status *	Single
Primary Parent's Date of Birth * <small>[MM/DD/YYYY]</small>	08/22/2002
Primary Parent's Address	
Address Line 1 *	Newton Ave
Address Line 2 (Apt, Suite, etc)	
City *	Tallahassee
County *	Leon
State	FLORIDA
Zip Code *	32301

Additional Information	
Primary Language *	English
Homeless	<input type="checkbox"/> Select if parent is currently homeless or located at a Domestic Violence Shelter
Military	<input type="checkbox"/> Is parent currently active duty (serving full-time) in the US Military? OR <input type="checkbox"/> Is parent a member of either a National Guard Unit or Military Reserve Unit?
TAPP Eligibility Details	
Funding Type *	<input checked="" type="radio"/> E-TAPP <input type="radio"/> P-TAPP
Local Billing Code *	33-TP351
Eligibility Code	ETPP
Eligibility Begin Date * [MM/DD/YYYY]	11/05/2018
Eligibility End Date (last day of eligibility) * [MM/DD/YYYY]	06/03/2019

Child Needing Care Details	
Child's First Name *	TAPPInfant
Child's Middle Name	
Child's Last Name *	Testing
Child's Ethnicity *	<input type="radio"/> Hispanic <input checked="" type="radio"/> Non-Hispanic <input type="radio"/> Prefer not to answer
Child's Race(s) Check those that apply. *	<input type="checkbox"/> Asian <input type="checkbox"/> Hawaiian / Pacific <input type="checkbox"/> Black <input type="checkbox"/> US Indian / Alaskan <input checked="" type="checkbox"/> White <input type="checkbox"/> Prefer not to answer
Child's Gender *	<input checked="" type="radio"/> Male <input type="radio"/> Female
Child's Date of Birth * [MM/DD/YYYY]	01/01/2018
Is Child Disabled?	<input type="checkbox"/>
Level of Care	< 12 Months
<input type="button" value="Remove Child"/>	


5. TAPP EV opens.
  - a. Verify all the data input into the TAPP Intake form is correct
  - b. Upload the TAPP Referral Document in the Additional Documents section
  - c. There is no TAPP Referral Section
  - d. Click **Eligibility**
    - i. Verify the eligibility information that was entered into the TAPP Intake form is correct
    - ii. Priority is not required
    - iii. Purpose for care is not required
    - iv. Zero (0.00) copay is allowed
  - e. Click **Enroll** - **The TAPP Provider must have a profile in EFS-Mod before they will be available for selection during child enrollment**
    - i. Search for TAPP Provider
    - ii. Enter Anticipated start date (the date as the eligibility start date)
      1. Verify that the eligibility information populates the UI
    - iii. Enter Copay in Effect
    - iv. Select school calendar if applicable
    - v. Select school holiday unit of care if applicable
    - vi. Select school day unit of care if applicable
    - vii. Select Enrollment Schedule days
    - viii. Enroll on behalf of the provider and click **Save**
    - ix. The enrollment is complete
    - x. The payment certificate is created without the parent signature
      1. Print the Payment Certificate and have the parent sign it
      2. Upload the signed payment certificate to the EV in the Additional Documents section of the Household Review screen

The screenshot displays the 'Children Needing Care' section of a software interface. On the left is a navigation menu with categories like 'Household at a Glance', 'Contact Information', 'Children Needing Care', 'Parents', 'Other Household Members', 'CCAA Referral Information', 'Employment', 'School/Training', 'Alimony and Child Support Income', 'Other Income', 'Deductions', 'Totals', and 'Documents'. The main area shows three child profiles, each with a 'History' button and a 'Change Status' dropdown menu. A red arrow points from the 'Change Status' dropdown of the first child to the 'Eligibility' button. Each profile includes the following information:

- TAPP Infant Testing (child, male, age 0):** Eligibility status: Eligible; Enrollment status: Not Enrolled; Date of birth: 01/01/2018; Ethnicity: Non-Hispanic; Races: White; Care days: (no care days selected); Care types: (no care types selected); Citizenship: Unknown; Age verification: Unknown; Medicaid eligibility: Unknown; Current Authorization Period: 11/05/2018 - 11/04/2019. A red error message states: 'Required information is missing or invalid.'
- TAPP Infant Three Testing (child, female, age 0):** Eligibility status: Eligible; Enrollment status: Not Enrolled; Date of birth: 01/01/2018; Ethnicity: Non-Hispanic; Races: White; Care days: (no care days selected); Care types: (no care types selected); Citizenship: Unknown; Age verification: Unknown; Medicaid eligibility: Unknown; Current Authorization Period: 11/05/2018 - 11/04/2019. A red error message states: 'Required information is missing or invalid.'
- TAPP Infant Two Testing (child, female, age 0):** Eligibility status: Eligible; Enrollment status: Not Enrolled; Date of birth: 01/02/2018; Ethnicity: Non-Hispanic; Races: White; Care days: (no care days selected); Care types: (no care types selected); Citizenship: Unknown; Age verification: Unknown; Medicaid eligibility: Unknown; Current Authorization Period: 11/05/2018 - 11/04/2019. A red error message states: 'Required information is missing or invalid.'

At the bottom left of the main area is an 'Add Child...' button.

- Household at a Glance
- Contact Information
- Children Needing Care**
- Parents
- Other Household Members
- CCAA Referral Information
- Employment
- School/Training
- Alimony and Child Support Income
- Other Income
- Deductions
- Totals
- Documents

**Parents**

**TAPPMother Testing** (child, female, age 16) History

**Date of birth:** 08/22/2002 Edit

**Ethnicity:** Non-Hispanic

**Races:** White

**Marital status:** Single

**Email:** Fake.TAPPMother.Testing228200220181111@oet.admin

**Primary phone:** (999) 999-9999

**Disabled:** No

**Disability documentation:** No documents available.

Required information is missing or invalid.

Add Parent...

**Other Household Members**

Your application contains no people listed as other household members.

Add Other Household Member...

**CCAA Referral Information**

No Referrals

**Do you have a form from another agency titled Child Care Application and Authorization?** No

**CCAA Referral Documentation**

There are no attached documents of this type.

Upload Document...

Leon County

Update Eligibility

**Eligibility Assignments**

Eligibility Code	Billing Group	Begin Date	End Date	Funding Agency ID (code, type, name)	Actions
<b>Current Authorization Period</b> (11/05/2018 - 11/04/2019) <span style="float: right;">Update</span>					
ETPP	ETAPP	11/05/2018	06/03/2019	47 (33-TP351, E-TAPP, Teenage Parent Plan)	<span style="border: 1px solid #ccc; padding: 2px 10px;">Update</span> <span style="border: 1px solid #ccc; padding: 2px 10px;">End Eligibility</span>

Add Eligibility Assignment...
Add Next Authorization Period...

**Current Eligibility Map**

Current Authorization Period  
11/05/2018 - 11/04/2019

Eligibility Assignment  
ETPP ETAPP (33-TP351)  
11/05/2018 - 06/03/2019

Save
Cancel

## Edit Eligibility Assignment

### Funding Details

#### Funder Type\*

SR  Local  E-TAPP  P-TAPP

#### Local Billing Code\*

33-TP351

#### Eligibility Code

ETPP

#### Match Funder

Teenage Parent Plan

#### Eligibility Begin Date\*

11/05/2018

#### Eligibility End Date\*

06/03/2019

#### Purpose-for-Care Review Date

### Care Information

#### Priority\*

01

#### Level of Care\*

< 12 Months

#### Purpose for Care\*

EDUCATION/TRAINING

Rilya Wilson Reporting Requirements

#### Copay in Effect\*

PART TIME DAILY RATE

### Co-Payment

[Recalculate](#)

#### Total Household Members

4

#### Full time Co-payment Amount

\$ 0.00

#### Part time Co-payment Amount

\$ 0.00

#### Full Time Co-payment Waiver or Reduction

Full Time Co-payment is Waived or Reduced

##### Reduction Amount\*

\$ 0.00

##### Co-payment Reduction or Waiver Reason\*

Additional Waiver or Reduction Details

#### Part Time Co-payment Waiver or Reduction

Part Time Co-payment is Waived or Reduced

##### Reduction Amount\*

\$ 0.00

##### Co-payment Reduction or Waiver Reason\*

Additional Waiver or Reduction Details

#### Resulting Full Time Co-payment Amount

\$ 0.00

#### Resulting Part Time Co-payment Amount

\$ 0.00



OK

Cancel

## Enrollments

### Enrollments

There are no enrollments for this child.

[Add Enrollment...](#)



[Close](#)

Date of birth: 01/01/2018

Date of birth: 01/01/2018

## Search for a Provider

Look for providers that match your desired search criteria.

Provider Name	<input type="text" value="Test"/>	<a href="#">Search</a>
Street Address	<input type="text"/>	
City	<input type="text"/>	
Zip Code	<input type="text"/>	
County	<input type="text" value="Leon"/>	

Select the desired provider from the search results below.

**Search Results**

- 15214TEST [Tallahassee]
- Provider Test [TALLAHASSEE]
- TEST ONE [TALLAHASSEE]
- Testing [TALLAHASSEE]**

**Details of Selected Childcare Provider**

<b>Name</b> Testing	<b>Provider ID</b> 8415	<b>Hours of Business</b> Su-Sa 6:00am-6:00pm ;
<b>Location</b> 501 BLAIRSTONE RD APT 301 TALLAHASSEE, Florida 32301 Leon	<b>Provider Type</b> Family Child Care Home	<b>Child Ages</b> 1 MO - 16 MO
<b>Contact Phone Number</b> (850) 201-1111	<b>Profile Status</b> Active	<b>Part Time Rates</b> Yes
<b>Contact Email Address</b> cmoneyb2+006@gmail.com	<b>Program Year</b> 2018 - 2019	<b>Full Time Rates</b> Yes
	<b>Gold Seal Type</b> Gold Seal for preschool to 5	



[OK](#)

[Cancel](#)

## Add Enrollment

### Select a Provider for TAPP Infant Testing\*

Other:

Testing

Browse...

#### Details of Selected Provider

Name Testing	Provider ID 8415	Hours of Business Su-Sa 6:00am-6:00pm ;
Location 501 BLAIRSTONE RD APT 301 TALLAHASSEE, Florida 32301 Leon	Provider Type Family Child Care Home	Child Ages 1 MO - 16 MO
Contact Phone Number (850) 201-1111	Profile Status Active	Part Time Rates Yes
Contact Email Address cmoneyb2+006@gmail.com	Program Year 2018 - 2019	Full Time Rates Yes
	Gold Seal Type Gold Seal for preschool to 5	

Anticipated Start Date\*

11/06/2018

#### Eligibility Information

Eligibility Begin Date 11/05/2018	Eligibility End Date 06/04/2019	Level of Care < 12 Months
Full time Co-payment \$0.00	Part time Co-payment \$0.00	Copay in Effect FT

Override Copay in Effect

FT

School Calendar

135 - Florida State Univers

School Holiday Unit of Care

FT

School Day Unit of Care

FT

Childcare Enrollment Schedule

Monday

Tuesday

Wednesday

Thursday

Friday

Saturday

Sunday

FT

FT

FT

FT

FT

Initial Enrollment Action\*

- Assign to provider for confirmation or rejection.  
 Enroll on behalf of provider.

Save

Cancel

**Enrollments**

Child Enrollment Status: Enrolled [View Payment Certificate](#)

**Provider Name:** Testing **Provider ID:** 8415 [View Profile](#)  
**Contact Phone:** (111) 222-3333 **Contact Email:** cmoneyb+006@gmail.com  
**Location:** 501 BLAIRSTONE RD **Parent Fee (Copay):** \$0.00  
 APT 301  
 TALLAHASSEE, 32301  
 Leon County  
**Enrollment Start Date:** 11/06/2018 **Enrollment End Date:** N/A  
**First Attendance Date:** N/A **Last Attendance Date:** N/A

**Parental Payment Certificate**

ELC of the Big Bend Region  
 Non-transferable Child Care Certification  
 School Readiness Program Certificate Number: 680

\* This certificate is not valid for care arranged after: 8/3/2019

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**PARENT INFORMATION**

<b>Name:</b> Tappmother Testing	<b>Date of Birth:</b> 8/22/2002	<b>Social Security Number:</b>
<b>Home Address:</b> Newton Ave	<b>City:</b> Tallahassee	<b>State:</b> FL <b>Zip:</b> 32301
<b>Home Phone:</b> (999) 999-9999	<b>Work Phone:</b>	<b>Employer:</b>

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**ENROLLED CHILD INFORMATION**

<b>Name:</b> Tappinfant Testing	<b>Date of Birth:</b> 1/1/2018	<b>Social Security Number:</b>
---------------------------------	--------------------------------	--------------------------------

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**PROVIDER INFORMATION**

<b>Provider:</b> Testing	<b>Phone:</b> (225) 478-2966	<b>Address:</b> 501 BLAIRSTONE RD APT 301 TALLAHASSEE, FL 32301
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**ENROLLMENT INFORMATION**

<b>Eligibility Start:</b> 11/5/2018	<b>Eligibility End**:</b> 6/3/2019
<b>Counselor:</b> N/A	<b>Case Worker:</b> N/A

\* No reimbursements made after this date

<b>Gold Seal Rate:</b> \$0.00	<b>Reimbursement Rate:</b> \$0.00	<b>Parent Full-time Co-Pay**:</b> \$0.00	<b>Parent Part-time Co-Pay**:</b> \$0.00
<b>Enrolled On:</b> 11/11/2018	<b>Enrollment Start:</b> 11/5/2018	<b>Enrollment End:</b> 6/3/2019	
<b>Unit of Care:</b> FT	<b>Billing Group:</b> ETAPP	<b>Eligibility:</b> ETPP	

\*\* Parent co-payment is what the parent is responsible for paying (copay)

Unit of Care / Day of Care:	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
	FT	FT	FT	FT	FT		

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**Privacy Act Statement:** Social security numbers are requested on this form under s. 119.071(5)(a)2., F.S., for use in the records and data systems of the Office of Early Learning (OEL) and Early Learning Coalitions. Social security numbers will be used for routine data requests, state and federal reporting requirements, identification, and to verify eligibility for the School Readiness Program including, but not limited to, family income. Submission of social security numbers on this form is voluntary and not a condition of enrollment in the School Readiness Program.

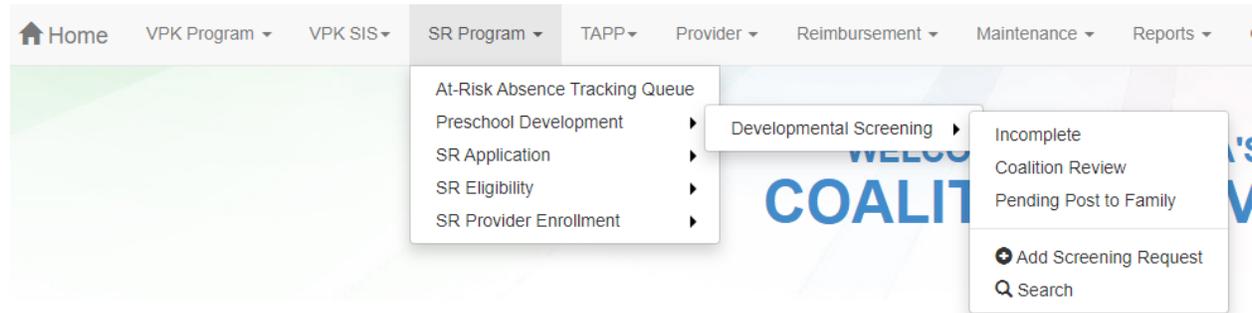
I certify that by use of this certificate that I am exercising my choice of caregiver for my child. Other placement options in licensed and subcontract facilities and homes have been explained to me. OEL, the early learning coalition, and its contracted provider, if applicable, are indemnified from and its contract provider are indemnified from all possible liability for payments to the caregiver that I select and from liability for the quality of care my child receives. I understand that I have access to my children at any time and that I may visit the provider's setting at any time during care hours.

<b>Signature of Parent:</b>	_____	<b>Date:</b>	_____
	<input type="checkbox"/> By Electronic Signature		
<b>Signature of Provider:</b>	Jevan Mac (E-Signed, On Behalf of Provider)	<b>Date:</b>	11/11/2018
	<input type="checkbox"/> By Electronic Signature		
<b>Signature of Early Learning Coalition Counselor:</b>	Jevan Mac (E-Signed)	<b>Date:</b>	11/11/2018
	<input checked="" type="checkbox"/> By Electronic Signature		



## Developmental Screening

Developmental Screening menu is available at **SR Program > Preschool Development > Developmental Screening**.



## Search

The search function allows coalition users to search by multiple criteria:

- Screening ID – the ID assigned after a screening is started.
- Child ID
- First Name – of child
- Last Name – of child
- Screener Type – Coalition, Family or Provider
- Screening Status – Approved, Incomplete, Coalition Reviewing
- Begin Date
- End Date

To see all children with screenings in a coalition, click the **Search** button without entering any search criteria.

A screenshot of a search form titled 'Search For A Developmental Screening'. At the top left is a search icon and the title. Below the title is a checkbox labeled 'Include Previously Served Children'. The form contains several input fields: 'Screening ID', 'Child ID', 'First Name', 'Last Name', 'Screener Type' (a dropdown menu with 'Any' selected), 'Screening Status' (a dropdown menu with 'Any' selected), 'Begin Date' (with a date picker icon), and 'End Date' (with a date picker icon). At the bottom of the form are two buttons: 'Reset' and 'Search'.

## Incomplete Queue

### SR Program > Preschool Development > Developmental Screening > Incomplete

The Incomplete queue displays the screenings for children in a coalition that are incomplete. The queue displays 10 records on a page. If more than 10 records display, then multiple pages will display below the grid. Each column can be sorted and filtered.

- Clicking on the **Child ID** link navigates to the screening history for the child.
- Clicking on the **Screening ID** link navigates to the child's screening results for that screening.
- Clicking on the **Screening** link in the Vendor Link column opens the questionnaire so the coalition can complete the screening.

Preschool Developmental Screening Work Queue

The page displays all outstanding screening request that need to be completed. Selecting Child ID takes you to the child's Screening History. Selecting Screening ID takes you to the child's screening information. Selecting the Vendor link takes you vendor's site to complete the questionnaires.

[Click Here For Filtering Tips](#)

Show 10 entries Clear All Filters Search:

Child ID	Child Name	DOB	Assigned Counselor	Provider ID	Provider Name	Screening ID	Request Date	Questionnaire	Vendor Link
<a href="#">Filter</a>	<a href="#">Filter</a>	<a href="#">Filter</a>	<a href="#">Filter</a>	<a href="#">Filter</a>					
3857190 <b>A</b>				1096	HONEY BEE'S EDUCATIONAL CENTER II	34017 <b>B</b>	5/10/2021	ASQ-3 & ASQ:SE-2	<a href="#">Screening</a> <b>C</b>
5175407				16528	Brian's Technology Daycare LLC	34077	5/10/2021	ASQ-3 & ASQ:SE-2	<a href="#">Screening</a>

Showing 1 to 2 of 2 entries Previous 1 Next

## Coalition Review Queue

The Coalition Review queue displays all outstanding responses that need to be processed.

- Clicking on the **Child ID** link navigates to the screening history for the child.
- Clicking on the **Screening ID** link navigates to the child's screening results for that screening.

Preschool Developmental Screening Coalition Review Queue

The page displays all outstanding screening responses that need to be processed. Selecting Child ID takes you to the child's Screening History. Selecting Screening ID takes you to the child's screening information.

[Click Here For Filtering Tips](#)

Show 10 entries Clear All Filters Search:

Child ID	Child Name	DOB	Assigned Counselor	Provider ID	Provider Name	Screening ID	Request Date	Screeener	Status	Completed Date	Questionnaire
<a href="#">Filter</a>	<a href="#">Filter</a>	<a href="#">Filter</a>	<a href="#">Filter</a>	<a href="#">Filter</a>	<a href="#">Filter</a>	<a href="#">Filter</a>					
5166748 <b>A</b>				20574	Aim High Academy, Umatilla Campus	37700 <b>B</b>	05/17/2021	Family	Coalition Reviewing		ASQ:3 & ASQ:SE2
2351659				717	WOODLANDS LUTHERAN CHURCH AND EARLY LEARNING CENTER	19334	05/01/2021	Provider	Coalition Reviewing		ASQ-3
4394364				4630	CARE 4 KIDS DAYCARE, INC	37585	05/17/2021	Family	Coalition Reviewing		ASQ-3
4531505				18420	Harley's Angels Child Care Center 2	37709	05/17/2021	Family	Coalition Reviewing		ASQ:3 & ASQ:SE2
5276009				19176	Stepping Stones Christian Academy	38029	05/17/2021	Family	Coalition Reviewing		ASQ:3 & ASQ:SE2

Showing 1 to 5 of 5 entries Previous 1 Next

## Screening Results

The screening results screen display the results for the child’s screening. There are buttons at the top of the page. The light blue buttons indicate functionality that is not yet available in EFS Mod. The dark blue buttons indicate coalition user actions.

- Add New DSR – add a new developmental screening request
- Change Status – change the status of the screening
- View Screening History – view the screening history of the child
- Cancel Screening – cancel the screening. This functionality is coming soon.
- Post to Family Portal – share the results of the screening on the Family Portal
- View Screening Notes – view any screening notes entered by the screener, provider or coalition
- Assign Counselor – This functionality is coming soon.
- Add Screening Notes – add a new screening note
- Status Change History – view the status changes for the screening
- Screener Change History – view the screener changes
- Change Screener – change the screener for an incomplete screening

The details on the screening display in the Screening Info box:

- Status
- Screener
- Provider
- Request Date
- Completed Date

The results of the screening(s) display with scores.

- Typical – the child’s scores are on or above the typical cutoff range
- Monitoring – the child’s scores are below the typical cutoff range but above the concern cutoff range
- Concern – the child’s scores are below or at the concern cutoff range

**Child Screening Result for Household**

Buttons: Add New DSR, Change Status, View Screening History, Cancel Screening, Post to Family Portal, View Screening Notes, Assign Counselor, Add Screening Notes, Status Change History, Screener Change History

**Screening Info**

Status	Coalition Reviewing	Request Date	5/17/2021
Screener	Family	Completed Date	5/17/2021
Provider	Aim High Academy, Umatilla Campus		

**ASQ-3 Screening Result (42 Months)**

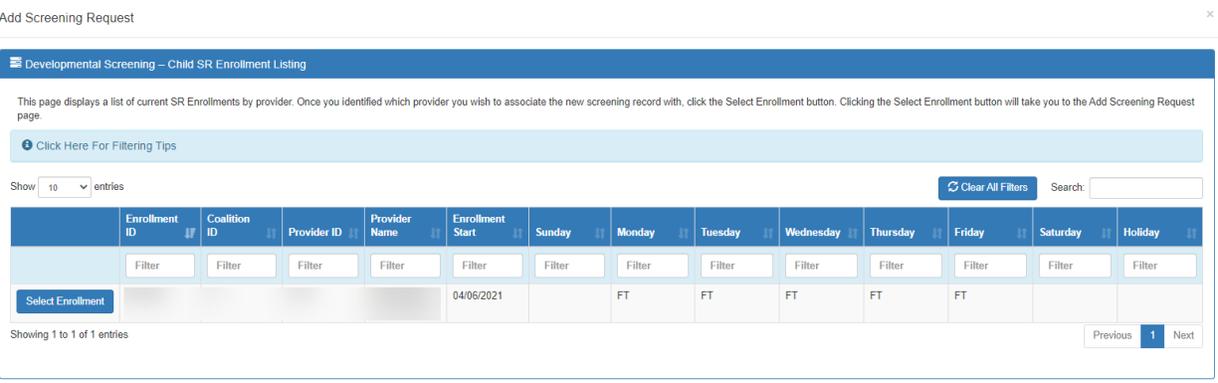
Domain	Cutoff 1	Cutoff 2	Score	Results
Communication	27.06	38.54	60.00	Typical
Gross Motor	36.27	45.15	60.00	Typical
Fine Motor	19.62	33.68	60.00	Typical
Problem Solving	28.11	39.82	60.00	Typical
Personal - Social	31.12	41.25	60.00	Typical

**ASQSE-2 Screening Result (36 Months)**

Domain	Cutoff 1	Cutoff 2	Score	Results
Social-Emotional	105.00	75.00	10.00	Typical

## Adding a Screening Request

From the Screening Results screen, clicking **Add New DSR** opens the Add Screening Request pop-up window. Clicking the **Select Enrollment** button navigates to the Add Development Screening Request page.

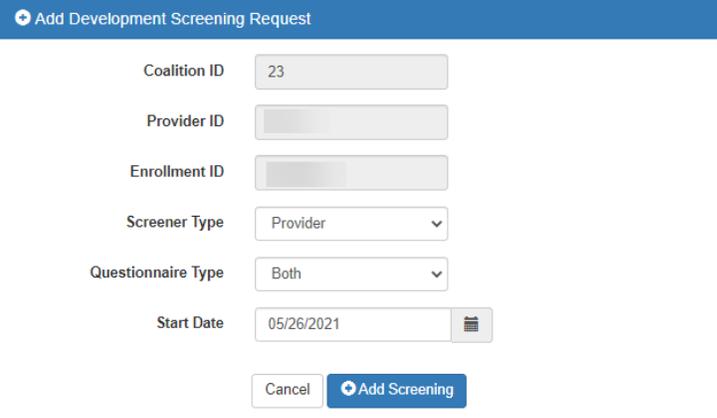


The screenshot shows a window titled "Add Screening Request" with a sub-header "Developmental Screening – Child SR Enrollment Listing". Below the header is a text box explaining that the page displays a list of current SR Enrollments by provider and that clicking the "Select Enrollment" button will take the user to the "Add Screening Request" page. There is a link for "Click Here For Filtering Tips".

Below the text is a "Show 10 entries" dropdown and a "Clear All Filters" button. A search bar is also present. The main content is a table with the following columns: Enrollment ID, Coalition ID, Provider ID, Provider Name, Enrollment Start, Sunday, Monday, Tuesday, Wednesday, Thursday, Friday, Saturday, and Holiday. Each column has a "Filter" button below it. The "Enrollment Start" column shows the date "04/06/2021". The "Monday" through "Friday" columns show "FT". There is a "Select Enrollment" button on the left side of the table. At the bottom of the table, it says "Showing 1 to 1 of 1 entries" and "Previous 1 Next".

At the bottom right of the window, there is a "Cancel" button.

Select the Screener Type, Questionnaire Type and Start Date. Then click **Add Screening**.

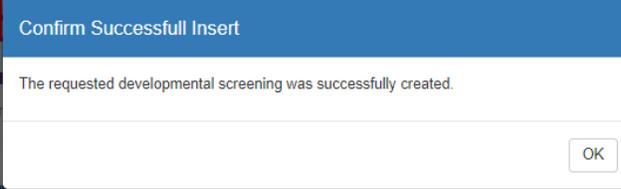


The screenshot shows a form titled "Add Development Screening Request". The form has the following fields:

- Coalition ID: 23
- Provider ID: (empty)
- Enrollment ID: (empty)
- Screener Type: Provider (dropdown menu)
- Questionnaire Type: Both (dropdown menu)
- Start Date: 05/26/2021 (calendar icon)

At the bottom of the form, there are two buttons: "Cancel" and "Add Screening".

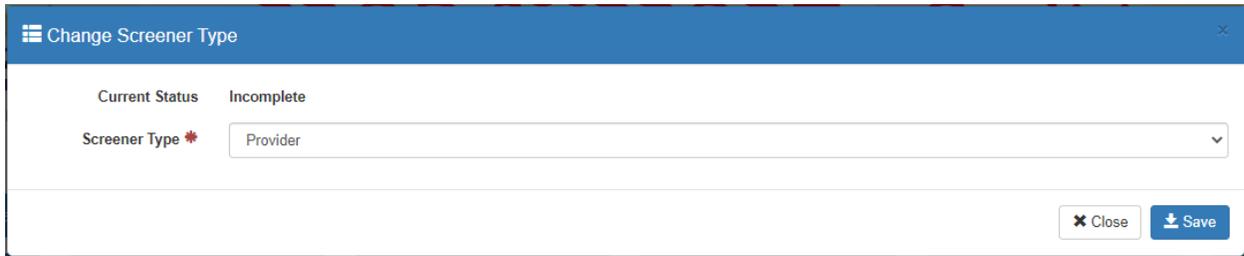
The Confirm Successful Insert pop-up window opens. The screening will now appear in the queue for the selected screener.



The screenshot shows a pop-up window titled "Confirm Successful Insert". The message inside the window says "The requested developmental screening was successfully created." At the bottom right of the window, there is an "OK" button.

## Change Screener

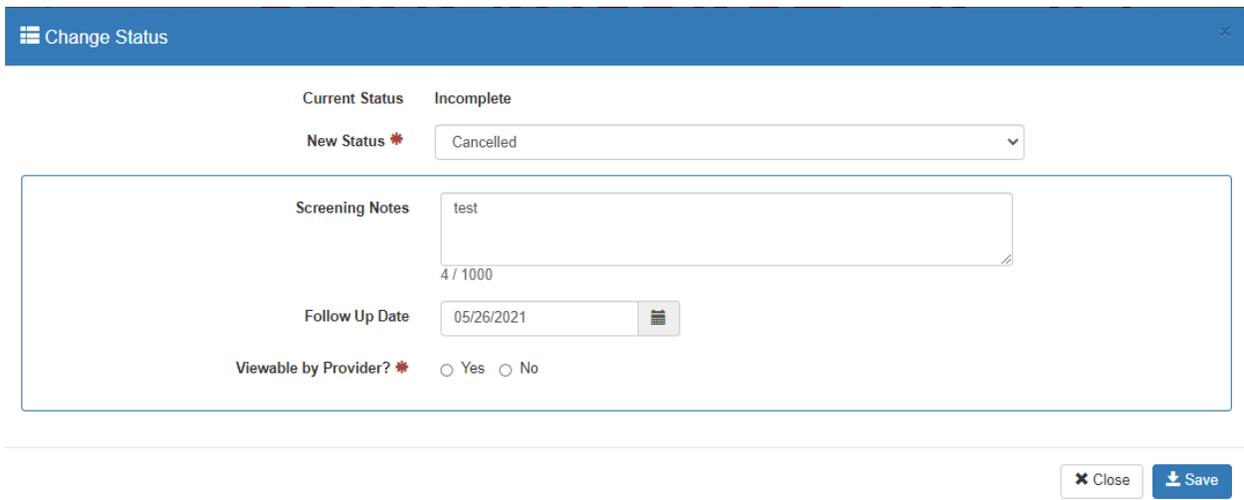
From the Screening Results, clicking the **Change Screener** button opens the Change Screener Type pop-up window. This button is only available for Incomplete screenings.



The 'Change Screener Type' pop-up window has a blue header with a hamburger menu icon, the title 'Change Screener Type', and a close button. The main content area shows 'Current Status' as 'Incomplete' and 'Screener Type' as a dropdown menu with 'Provider' selected. At the bottom right, there are 'Close' and 'Save' buttons.

## Change Status

From the Screening Results, clicking the **Change Status** button opens the Change Status pop-up window. This button is not available for Approved screenings.



The 'Change Status' pop-up window has a blue header with a hamburger menu icon, the title 'Change Status', and a close button. The main content area shows 'Current Status' as 'Incomplete' and 'New Status' as a dropdown menu with 'Cancelled' selected. Below this is a 'Screening Notes' text area containing 'test' with a character count of '4 / 1000'. Underneath is a 'Follow Up Date' field with '05/26/2021' and a calendar icon. At the bottom of the main area is a 'Viewable by Provider?' section with radio buttons for 'Yes' and 'No'. At the bottom right of the window, there are 'Close' and 'Save' buttons.

## Screening History

The screening history displays all the screening results for the child over time. The screening history can be shown by clicking the:

1. **View Screening History** button on the Screening Results page
2. Child ID link from the queue

On the Screening History page:

- A. Clicking on the **Screening ID** link navigates to the child's screening results for that screening.
- B. The screening history can be exported to Excel.

Screening ID	Screener	Status	Status Change Date	Provider	ASQ3 Interval Completed	Communication Results	Gross Motor Results	Fine Motor Results	Problem Solving Results	Personal - Social Results	ASQ-SE2 Interval Completed	Social - Emotional Results
34017	Coalition	Incomplete	5/17/2021	HONEY BEE'S EDUCATIONAL CENTER II	24 Months	Typical	Typical	Typical	Typical	Typical	N/A	N/A

## View Screening Notes

From the Screening Results, clicking the **View Screening Notes** button navigates to the Screening Case Note History page. The Screening Notes can be exported to Excel.

Child Info	Event	Note	Follow Up Date	Viewable By Provider	Created By	Created Date										
<table border="1"> <tr><td>Screening ID</td><td>7112</td></tr> <tr><td>ASQ3 Interval</td><td>18 Months</td></tr> <tr><td>ASQ SE2 Interval</td><td>18 Months</td></tr> <tr><td>Provider ID</td><td></td></tr> <tr><td>Provider Name</td><td></td></tr> </table>	Screening ID	7112	ASQ3 Interval	18 Months	ASQ SE2 Interval	18 Months	Provider ID		Provider Name		Coalition Approved	Developmental screening has been completed by parent. Screening results for effect as "Monitor". Screening results have been shared with the parent via Family Portal. A follow up email was shared with helpful tools that further support child's learning and growing.	-	Yes		4/12/2021 1:51:47 PM
Screening ID	7112															
ASQ3 Interval	18 Months															
ASQ SE2 Interval	18 Months															
Provider ID																
Provider Name																

## Add Screening Note

From the Screening Results, clicking the **Add Screening Note** button navigates to the Add Screening Case Note screen.

- Enter the case note for the screening.
- Optionally, a follow-up date can be selected using the calendar. Selecting a follow-up date is for reporting purposes only.
- Select whether the note will be viewable by the provider.

DSR ID	10705
Child ID	
Provider ID	
Provider Name	
ASQ3 Interval	16 Months
ASQ SE2 Interval	18 Months

0 / 1000

Follow Up Date:

Viewable by Provider?  Yes  No

Save Screening Note Cancel

## Status Change History

From the Screening Results, clicking the **Status Change History** button opens the Status Change History pop-up window. The most recent status displays at the top of the grid.

Changed From	Changed To	Changed Date	Changed By
Coalition Reviewing	Approved	2021-04-12 13:51:46	
Incomplete	Coalition Reviewing	2021-04-07 15:46:43	API
n/a	Incomplete	2021-04-06 12:27:40	

Showing 1 to 3 of 3 entries

Previous 1 Next

Close

## Screener Change History

From the Screening Results, clicking the **Screener Change History** button opens the Screener Change History pop-up window.

Changed From	Changed To	Changed Date	Changed By
n/a	Family	2021-04-06 12:27:40	

Showing 1 to 1 of 1 entries

Previous 1 Next

Close

## Bulk Billing Group Transfer

Coalitions can apply for and receive from the state a match allocation based on a dollar-for-dollar match. Once awarded, the match allocation can be applied at the participant level in the manner determined by the coalition to represent the most efficient expenditure of the coalition's awarded SR dollars. In order to access the awarded match dollars, coalitions should invoice DEL through the BG8 SRMAT eligibility code and should expect to receive the amount equal to the local match received to complete the balance of the monthly payment. Coalitions should not invoice DEL for any records that include CCEP for any period in the 2019-2020 fiscal year.

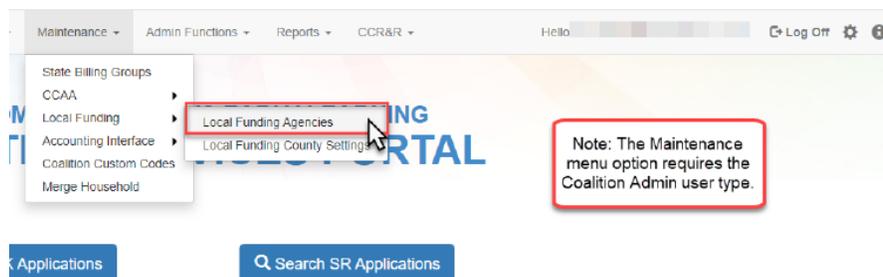
In an attempt to assist coalitions through the transition of the match process, DEL developed a bulk billing group transfer tool within EFS Mod that allows coalition to transfer records, on a monthly basis, to the appropriate category to best utilize the needed match for that payment period. This tool was provided to allow coalitions additional time to make eligibility and enrollment changes to child records, as needed, to accurately reflect the actual match application. **The tool only makes the changes for the current month and for payment purposes only. If eligibility and enrollment data is not made at the child level, the tool would need to be used again in the next month to accurately assess the match as determined by the coalition.** This process would continue until the eligibility and enrollment records were changed at the child level.

Beginning with the July 2019 service period, children with the CCEP match billing group must be updated with the Bulk Billing Group Transfer feature while in Closed Attendance to an appropriate billing group. Children eligible for the new SR Match program need to be updated with the Bulk Billing Group Transfer feature so that their billing group is BG8 and their eligibility code is SR MATCH, provided that the coalition has SR Match funds to use. This will apply a 50% default match assessment calculation that can be increased, decreased, or zeroed out with the Run Match Assessment feature, if needed, as determined by the coalition. This also associates the records to the new SR Match OCA Payment Code, SRMAT. Children may remain in the BG8 billing group with the ECON eligibility code. With the release of 4.1.6, the default match assessment calculation will be 0%. The calculation can be increased, as needed, using the Run Match Assessment feature. This associates the records to the current 97P00 OCA Payment Code. Separate match funding agencies and allocation plans for BG8 ECON and BG8 SRMAT must be created.

**NOTE:** This process is a temporary solution required each service period until new match funders are created and enrollment records are updated.

## SR Match Funder Allocation for BG8-SRMAT

To use the BG8 SRMAT eligibility code, a new BG8 match funder must be set up. Go to **Maintenance > Local Funding > Local Funding Agencies**.



Make sure that a SRMAT funder is created with an allocation.

Local/Match Funding Agency Maintenance 17 Total Records

Create New Local/Match Funding Agency

Show 10 entries Clear All Filters Search:

Edit Agency	View Allocations	Local/Match Funding Agency ID	Name	Local Billing Code	Local Funding Type	City	Phone
<input type="checkbox"/>	<input type="checkbox"/>	1555	CHSP - Leon	33-CHSPLEO	BG8 Match	Tallahassee	(850) 606-1948
<input type="checkbox"/>	<input type="checkbox"/>	209	Leon County -- 37IK8	33-37IK8	BG8 Match	Tallahassee	(850) 606-1900
<input type="checkbox"/>	<input checked="" type="checkbox"/>	1561	SR Match	33-23-SRMT	BG8 Match	Tallahassee	(123) 543-5345
<input type="checkbox"/>	<input type="checkbox"/>	1292				Tallahassee	(850) 606-1900
<input type="checkbox"/>	<input type="checkbox"/>	210				Tallahassee	(850) 414-0844
<input type="checkbox"/>	<input type="checkbox"/>	236				Tallahassee	(850) 414-0844
<input type="checkbox"/>	<input type="checkbox"/>	237				Tallahassee	(850) 414-0844
<input type="checkbox"/>	<input type="checkbox"/>	238				Tallahassee	(850) 414-0844
<input type="checkbox"/>	<input type="checkbox"/>	239	United Way of the Big Bend - Taylor	33-62IK6	BG8 Match	Tallahassee	(850) 414-0844
<input type="checkbox"/>	<input type="checkbox"/>	240	United Way of the Big Bend - Wakulla	33-65IK6	BG8 Match	Tallahassee	(850) 414-0844

Showing 1 to 10 of 17 entries

[Edit Funding Agency](#) [View Funding Allocation](#)

Previous **1** 2 Next

In This example, A BG8-SRMT funding agency exists.  
Check the View Allocations box and click the View Funding Allocation button to ensure the allocation is setup as well

Local Funding Allocation Maintenance 0 Total Records

Create New Local Funding Allocation

Funding Agency: SR Match 23-SRMT

No data available to display

In this example, the funding allocation does not exist and needs to be created.

If no BG8 SRMAT funder exists, click the **Create Local/Match Funding Agency** button and complete the required fields.

Local/Match Funding Agency - Edit Record

Create New Local/Match Funding Agency

Name \*  Address \*

Coalition \*  e/App.

Local Billing Code \*  \*

Local Funding Type \*  State \*

Zip Code \*

Telephone \*

Fax

Email \*

Create a Name and Local Billing Code that can easily be identified with SRMAT.  
The Local Billing Code must be 7 or fewer characters.

Locate the newly created funding agency. Check the **View Allocations** box and click the **View Funding Allocation** button.

Local/Match Funding Agency Maintenance 18 Total Records

Create New Local/Match Funding Agency

Show 10 entries

Clear All Filters Search:

Edit Agency	View Allocations	Local/Match Funding Agency ID	Name	Local Billing Code	Local Funding Type	City	Phone
<input type="checkbox"/>	<input type="checkbox"/>	1555	CHSP - Leon	33-CHSPLEO	BG8 Match	Tallahassee	(850) 606-1948
<input type="checkbox"/>	<input type="checkbox"/>	209			BG8 Match	Tallahassee	(850) 606-1900
<input type="checkbox"/>	<input type="checkbox"/>	1561			BG8 Match	tallahassee	(123) 543-5345
<input type="checkbox"/>	<input type="checkbox"/>	1292			BG8 Match	Tallahassee	(850) 606-1900
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	1562	SRMAT2	33-SRMAT2	BG8 Match	tallahassee	(123) 543-5345
<input type="checkbox"/>	<input type="checkbox"/>	210	United Way of the Big Bend - Gadsden	33-20IK8	BG8 Match	Tallahassee	(850) 414-0844
<input type="checkbox"/>	<input type="checkbox"/>	236	United Way of the Big Bend - Jefferson	33-33IK8	BG8 Match	Tallahassee	(850) 414-0844
<input type="checkbox"/>	<input type="checkbox"/>	237	United Way of the Big Bend - Liberty	33-39IK8	BG8 Match	Tallahassee	(850) 414-0844
<input type="checkbox"/>	<input type="checkbox"/>	238	United Way of the Big Bend - Madison	33-40IK8	BG8 Match	Tallahassee	(850) 414-0844
<input type="checkbox"/>	<input type="checkbox"/>	239	United Way of the Big Bend - Taylor	33-62IK8	BG8 Match	Tallahassee	(850) 414-0844

Showing 1 to 10 of 18 entries

Edit Funding Agency View Funding Allocation

Previous 1 2 Next

If no BG8 SRMAT allocation exists, click the **Create New Local Funding Allocation** button.

Local Funding Allocation Maintenance 0 Total Records

Create New Local Funding Allocation

Funding Agency: SRMAT2 23-SRMAT2

No data available to display

Complete the required fields.

Local Funding Allocation - Edit Record

Create New Local Funding Allocation

\* MATCH PERCENT OR DOLLAR AMOUNT IS REQUIRED.

Local/Match Funding Agency Name: SRMAT2

Local Funding Type: BG8

Local/Match Funding Agency ID: 1283

Coalition: ELC of Palm Beach

Local Billing Code: 23-SRMAT2

Match Percent (%): 6.00

Dollar Amount: 00000.00

Begin Date: 07/01/2019

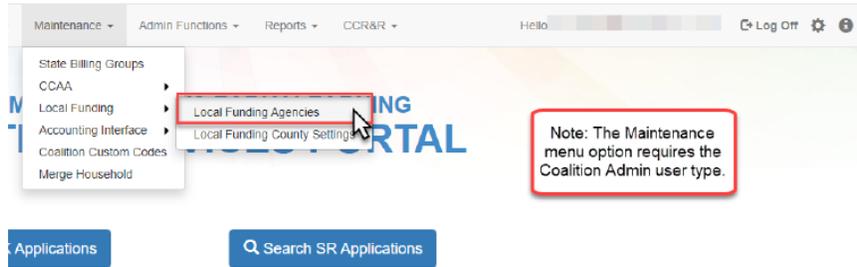
End Date:

Leave the Match Percent set to 6% (or change it to 0; this will not impact the match assessment amount).

Be sure to change the Begin Date to July 1, 2019 (or the service period begin date that will start to use SRMAT).

## SR Match Program Changes for 2019-2020

Go to **Maintenance > Local Funding > Local Funding Agencies > Edit Agency.**



For Local Funding, the same questions for CCEP will display for BG8. CCEP can only have a start date prior to July 1, 2019.

- Federally Eligible
- Match Funding Type
- Business Type

Local/Match Funding Agency - Edit Record

Create New Local/Match Funding Agency

Name *	<input type="text" value="19 20"/>	Address *	<input type="text"/>
Coalition *	<input type="text" value="ELC of the Big Bend Region"/>	Suite/Appt.	<input type="text"/>
Local Billing Code *	<input type="text" value="1920"/>	City *	<input type="text"/>
Local Funding Type *	<input type="text" value="BG8 Match"/>	State *	<input type="text" value="FL"/>
Use Approved SR Paid Holidays for Provider	<input type="radio"/> Yes <input type="radio"/> No	Zip Code *	<input type="text"/>
Federally Eligible	<input type="radio"/> Yes <input type="radio"/> No	Telephone *	<input type="text"/>
Match Funding Type *	<input type="radio"/> Employee Benefit <input type="radio"/> Community Benefit	Fax	<input type="text"/>
Business Type *	<input type="radio"/> Public <input type="radio"/> Private <input type="radio"/> Non-Profit	Email *	<input type="text"/>

## Funding Allocation

After creating a new Local/Match Funding Agency, click the View Allocations checkbox. Then click the **View Funding Allocation** button.

Local/Match Funding Agency Maintenance 20 Total Records

[Create New Local/Match Funding Agency](#)

Show  entries [Clear All Filters](#) Search:

Edit Agency	View Allocations	Local/Match Funding Agency ID	Name	Local Billing Code	Local Funding Type	City	Phone
		<input type="text" value="Filter"/>					
<input type="checkbox"/>	<input checked="" type="checkbox"/>	8	Andrea's Foundation	37-ALF1	BG8 Match	TALLAHASSEE	(185) 032-1528
<input type="checkbox"/>	<input type="checkbox"/>	9	Andrea's Foundation	37-ALF2	CCEP Match	TALLAHASSEE	(555) 555-5555
<input type="checkbox"/>	<input type="checkbox"/>	10	Andrea's Foundation	37-ALF3	Primary Local	TALLAHASSEE	(555) 555-5555
<input type="checkbox"/>	<input type="checkbox"/>	11	Andrea's Fun Foundation	37-ALF4	Primary Local	TALLAHASSEE	(555) 555-5555
<input type="checkbox"/>	<input type="checkbox"/>	1384	Casey Sunshine	37-KC-SUN	Primary Local	TALLAHASSEE	(850) 123-4567
<input type="checkbox"/>	<input type="checkbox"/>	1383	Casey's Match	37-1234	CCEP Match	TALLAHASSEE	(850) 123-4567
<input type="checkbox"/>	<input type="checkbox"/>	7	JDM Prod Testing Local Funding	37-JDM	Primary Local	Tallahassee	(850) 112-3252
<input type="checkbox"/>	<input type="checkbox"/>	370	Kim's BG8	37-KTBG8	BG8 Match	Tallahassee	(444) 444-4444
<input type="checkbox"/>	<input type="checkbox"/>	16	Kim's Test	37-12345	Primary Local	Tallahassee	(850) 123-4567
<input type="checkbox"/>	<input type="checkbox"/>	252	KREPSISLAND	37-JCCEP	CCEP Match	Tallahassee	(850) 588-5555

Showing 1 to 10 of 20 entries [Previous](#) [1](#) [2](#) [Next](#)

[Edit Funding Agency](#)
[View Funding Allocation](#)

## Create New Local Funding Allocation

Clicking the **Create New Local Funding Allocation** button opens the Local Funding Allocation – Edit Record screen.

Local Funding Allocation Maintenance 0 Total Records

**Create New Local Funding Allocation**

Funding Agency: 19 20 33-1920

No data available to display

[← Previous](#)

### Local Funding Allocation – Edit Record

For BG8 records, the Match Percent defaults to 50%. The Begin Date can only be on the first day of the month. If a date other than the first day of the month, clicking the **Save** button will change the date to the first day of the month. The End Date can only be the last day of the month. If a date other than the last day of the month, clicking the **Save** button will change the date to the last day of the month.

Local Funding Allocation - Edit Record

Create New Local Funding Allocation

\* MATCH PERCENT OR DOLLAR AMOUNT IS REQUIRED.

Local/Match Funding Agency Name	19 20		
Local Funding Type	BG8		
Local/Match Funding Agency ID *	70	Match Percent (%)	50.0
Coalition *	ELC of the Big Bend Region	Dollar Amount	00000.00
Local Billing Code *	33-1920	Begin Date *	12/01/2019
		End Date	

Save

Cancel

*Primary Local Funders*

For Primary Local agencies where Local Funding Type = Primary:

- Select **Yes to Use Approved SR Rates for Provider** if School Readiness reimbursement rates are to be used.
- Select **No to Use Approved SR Rates for Provider** if local rates need to be entered. When “No” is selected, the local rates table displays. Enter local full time and part time rates for each care level. Then, click **Save**.

Local Funding Allocation - Edit Record

Create New Local Funding Allocation

\* MATCH PERCENT OR DOLLAR AMOUNT IS REQUIRED

Local/Match Funding Agency Name

Local Funding Type: Primary

Local/Match Funding Agency ID: 565 Match Percent (%): 100

Coalition: ELC of Dollar Amount: 00000.00

Local Billing Code: 16-TP 02 Begin Date: 12/01/2022

End Date

Use Approved SR Rates for Provider:  Yes  No

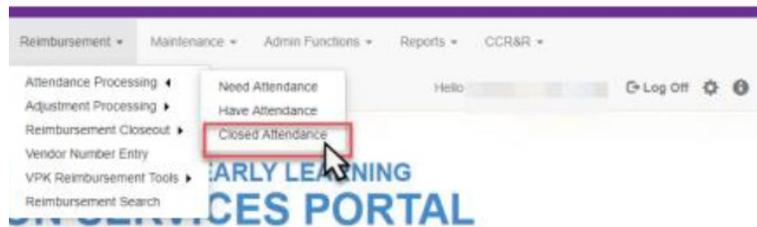
	Infant	Toddler	2 Year Old	Preschool 3	Preschool 4	Preschool 5	School Age
Local Full Time Daily Rate	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Local Part Time Daily Rate	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00

Save Cancel

**NOTE:** If the local rates from this page are being used, instead of approved SR rates, they are not subject to the reimbursement rules and differentials under the School Readiness program.

## Closed Attendance Check

Once the new funder and funding allocations are created, at the end of the payment period, go to **Reimbursement > Attendance Processing > Closed Attendance**.



Select the Funder Type (SR) from the funder type drop down menu and click **Submit**. Then, click on the Review link to open a provider's Closed Attendance records for a service period.

"Closed Attendance" Work Queue ← Return to Search

[Click Here For Filtering Tips](#)

County: All | Funder Type: SR | **Submit**

Show: 10 search results Clear All Filters Search:

Action	Provider ID	Provider Name	County	Service Period	Funder Type	VPK Class ID	Status
<a href="#">Review</a>	16	SUNCOAST CHRISTIAN ACADEMY, INC.	Palm Beach	October 2019	SR		Closed Attendance
<a href="#">Review</a>	20	PROCHILD EARLY LEARNING CENTER INC	Palm Beach	October 2019	SR		Closed Attendance
<a href="#">Review</a>	21	PLANET KIDS AT WELLINGTON	Palm Beach	October 2019	SR		Closed Attendance
<a href="#">Review</a>	23	Salem Child Learning Center	Palm Beach	October 2019	SR		Closed Attendance

Review the records. Are there are CCEP records? If so, STOP!

PLANET KIDS AT WELLINGTON - Nov - 2019

Reimbursement Record for PLANET KIDS AT WELLINGTON 103 Total Records

Funder Type: SR | Payment Period: Nov - 2019 | Service Period: 10/01/2019 to 10/31/2019  
 Status: Closed Attendance | Provider Type: Center | Provider ID: 21  
 Vendor Number: | Provider Name: PLANET KIDS AT WELLINGTON | Phone: (661) 434-9098  
 Site Address: 9135 LAKE WORTH RD LAKE WORTH, FL 33467 | County: Palm Beach

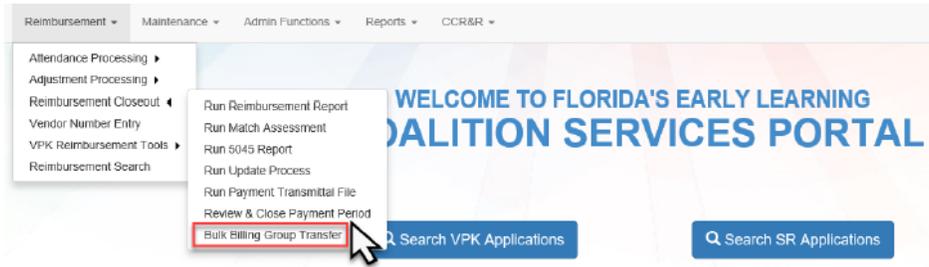
[Provider Rates](#) [Refresh Calculations](#) [Move All to View!](#)

Child Name	DOB	Billing Group	Eligibility Code	Care Level	Unit of Care	Days to be Paid	Total Payment Rate	Net Amount	Gold Seal Amount	PPF Amount	PPF CA Amount	QI Amount	CS Amount	Status	Action
1.	3/27/2019	CCEP	P1	INF	FT	23	\$38.92	\$27.83	\$0.00	\$0.00	\$0.00	Verified	Adjust Back to View		
2.	12/10/2018	CCEP	P1	INF	FT	23	\$38.92	\$27.83	\$0.00	\$0.00	\$0.00	Verified	Adjust Back to View		
3.	4/19/2019	BGB	ECON	INF	FT	4	\$21.16	\$4.04	\$0.00	\$0.00	\$0.00	Verified	Adjust Back to View		
INF TOTALS								\$302.00	\$60.50	\$0.00	\$0.00	\$0.00			
4.	3/17/2018	CCEP	P1	TOD	FT	4	\$32.87	\$21.64	\$4.24	\$0.00	\$0.00		Verify Adjust Back to View		

STOP

The CCEP records must be changed with the bulk billing group transfer process before verifying.

Go to **Reimbursement > Reimbursement Closeout > Bulk Billing Group Transfer**.



The **Bulk Billing Group Transfer Search** screen displays. Select the *Funder Type*, *Billing Group*, *Eligibility Code*, and *Service Period* that need to be updated and click the **Search** button.

**Note:** Each selection is a filter that must be selected (in order) before the search can be initiated.

- 1. The **Billing Group** dropdown menu displays all of the billing group codes that are associated with the selected funder type.
- 2. The **Eligibility Code** dropdown menu displays all of the eligibility codes that are associated with the selected funder type and billing group code.

The **Service Period** dropdown menu displays all service periods that are associated with the selected funder type, billing group, and eligibility code **AND** are in the **Closed Attendance** status.

The results display all records in Closed Attendance that have the funder type, billing group, and eligibility combination for the service period selected. Use the Search feature and column filters to narrow results. Scroll to the right to see more. The **Update** button is disabled until a record is selected.

Bulk Billing Group Transfer Search  
Service Period May 2019

Child Name	Child ID	Provider ID	Provider Name	Billing Group Code	Eligibility Code	Eligibility Start Date	Eligibility End Date	Assessed Fee	Unit of Care	Days Attended	Rate	Parent Fee	R
<input type="checkbox"/>	19449	19449	Growing Up Strong	BG8	ECON	07/03/2018	07/03/2019	1.87	FT	9	0	33.66	1
<input type="checkbox"/>	19449	19449	Growing Up Strong	BG8	ECON	12/09/2018	12/09/2019	0.63	FT	9	0	11.25	1
<input type="checkbox"/>	19449	19449	Growing Up Strong	BG8	ECON	12/23/2018	12/23/2019	0.63	FT	5	0	3.15	1
<input type="checkbox"/>	19449	19449	Growing Up Strong	BG8	ECON	02/23/2019	09/25/2019	0.63	FT	9	0	5.67	2
<input type="checkbox"/>	19449	19449	Growing Up Strong	BG8	ECON	03/06/2019	07/17/2019	0.63	FT	7	0	8.75	1
<input type="checkbox"/>	19449	19449	Growing Up Strong	BG8	ECON	03/12/2019	11/25/2019	0.63	FT	9	0	5.67	1
<input type="checkbox"/>	19449	19449	Growing Up Strong	BG8	ECON	03/23/2019	04/01/2019	0.63	FT	9	0	11.25	1

Showing 1 to 7 of 7 entries

Previous 1 Next

Select each row that needs to be updated by clicking the row. The row becomes highlighted blue and the total number of rows selected display at the bottom of the screen. A Select All feature is also available, to the left of the Child Name header. The **Update** button is now enabled. Click the **Update** button.

**Bulk Billing Group Transfer Search**  
Service Period May 2019

Search Results

Show 10 entries

Child Name	Child ID	Provider ID	Provider Name	Billing Group Code	Eligibility Code	Eligibility Start Date	Eligibility End Date	Assessed Fee	Unit of Care	Days Attended	Rate	Parent Fee
<input checked="" type="checkbox"/>		19449	Growing Up Strong	BG8	ECON	07/03/2018	07/03/2019	1.87	FT	9	0	33.66
<input type="checkbox"/>		19449	Growing Up Strong	BG8	ECON	12/09/2018	12/09/2019	0.63	FT	9	0	11.25
<input type="checkbox"/>		19449	Growing Up Strong	BG8	ECON	12/23/2018	12/23/2019	0.63	FT	5	0	3.15
<input type="checkbox"/>		19449	Growing Up Strong	BG8	ECON	02/23/2019	09/25/2019	0.63	FT	9	0	5.67
<input type="checkbox"/>		19449	Growing Up Strong	BG8	ECON	03/06/2019	07/17/2019	0.63	FT	7	0	8.75
<input type="checkbox"/>		19449	Growing Up Strong	BG8	ECON	03/12/2019	11/25/2019	0.63	FT	9	0	5.67
<input type="checkbox"/>		19449	Growing Up Strong	BG8	ECON	03/23/2019	04/01/2019	0.63	FT	9	0	11.25

Showing 1 to 7 of 7 entries 1 row selected

Update Cancel

The Update Billing Group Assignments pop-up displays. The Current Information area displays the current funder type, billing group, eligibility code and match funder name. Coalition users input the changes needed in the New Information area. Then, click the **Run** button.

**Update Billing Group Assignments**

Current Information

<b>Funder Type</b>	<b>Billing Group Code</b>	<b>Eligibility Code</b>	<b>Match Funder</b>
SR	CCEP	P1	P1

New Information

<b>Funder Type*</b>	<b>Billing Group Code*</b>	<b>Eligibility Code*</b>	<b>Match Funder*</b>
<input checked="" type="radio"/> SR <input type="radio"/> Local	BG8	ECON - Economically Disadvantage SRMT - SR Match Program	P1

Choose BG8-Econ or BG8-SRMT; separate match funders must be set up.

Run Cancel

The Results window displays a preview of the updated reimbursement records. Notice the changed billing group, eligibility code. If correct, click the **Save** button. Otherwise, click the **Cancel** button to abandon the changes.

Results

Child Name	Child ID	Provider ID	Provider Name	Billing Group Code	Eligibility Code	Eligibility Start Date	Eligibility End Date	Assessed Fee	Unit of Care	Days Attended	Rate
Filter	Filter	Filter	Filter	Filter	Filter	Filter	Filter	Filter	Filter	Filter	Filter
		21	PLANET KIDS AT WELLINGTON	BG8	SRMT - SR Match Program	05/22/2019	03/30/2020	0.00	FT	23	0
		21	PLANET KIDS AT WELLINGTON	BG8	SRMT - SR Match Program	10/26/2018	10/28/2019	2.45	FT	2	0
		21	PLANET KIDS AT WELLINGTON	BG8	SRMT - SR Match Program	10/26/2018	10/28/2019	2.45	PT	17	0
		21	PLANET KIDS AT WELLINGTON	BG8	SRMT - SR Match Program	10/28/20			PT	17	0
		21	PLANET KIDS AT WELLINGTON	BG8	SRMT - SR Match Program	10/28/20			FT	2	0
		21	PLANET KIDS AT WELLINGTON	BG8	SRMT - SR Match Program	09/13/2019	03/21/2020	2.45	FT	2	0
		21	PLANET KIDS AT WELLINGTON	BG8	SRMT - SR Match Program	09/13/2019	03/21/2020	2.45	PT	21	0
		21	PLANET KIDS AT WELLINGTON	BG8	SRMT - SR Match Program	01/22/2019	01/22/2020	2.76	FT	23	0
		21	PLANET KIDS AT WELLINGTON	BG8	SRMT - SR Match Program	10/26/2019	10/28/2020	2.20	PT	1	0
		21	PLANET KIDS AT WELLINGTON	BG8	SRMT - SR Match Program	10/26/2019	10/28/2020	2.20	PT	2	0
		21	PLANET KIDS AT WELLINGTON	BG8	SRMT - SR Match Program	10/26/2019	10/28/2020	2.20	PT	4	0

Confirm the changes made. Click the Save button to continue.

Save Cancel

Next, a confirmation message displays. Click the **Yes** button to commit the changes. Otherwise, click the **Cancel** button to abandon the changes.

Confirm Submit Reimbursement Updates

This will save all changes and make the reimbursement updates final.  
Are you sure you want to continue?

Yes Cancel

Then, a success message displays with the total number of records that were updated. Click the **OK** button.

Bulk Billing Group

31 Reimbursements were updated successfully.

OK

When the message is closed, the screen returns to the Bulk Billing Group Transfer search page. The changes can now be verified in Closed Attendance.

Review the records. Now that there are no CCEP records, continue to verify records as usual. Repeat for all service period rosters.

Reimbursement Record for PLANET KIDS AT WELLINGTON 103 Total Records

Funder Type: SR      Payment Period: Nov - 2019      Service Period: 10/01/2019 to 10/31/2019  
 Status: Closed Attendance      Provider Type: Center      Provider ID: 21  
 Vendor Number:      Provider Name: PLANET KIDS AT WELLINGTON      Phone: (1) 434-9098  
 Site Address: 9135 LAKE WORTH RD LAKE WORTH, FL 33467      County: Palm Beach

[Refresh Calculations](#)      [Move All to 'Have'](#)

	Child Name	DOB	Billing Group	Eligibility Code	Care Level	Unit of Care	Days to be Paid	Total Payment Rate	Daily Parent CoPay Rate	Gross Payment Amount	Less Parent CoPay Amount	Net Payment Amount	CA Amount	PFF CA Amount	QI Amount	GS Amount	Status	Action
1.	[Redacted]	3/27/2019	BGB	SRMT	INF	FT	23	\$37.45	\$4.91	\$861.35	\$112.93	\$748.42	\$27.83	\$0.00	\$0.00	\$0.00	✓ Verified	Adjust Back to 'Have'
2.	[Redacted]	12/10/2016	BGB	SRMT	INF	FT				\$861.35	\$126.96	\$734.39	\$27.83	\$0.00	\$0.00	\$0.00	✓ Verified	Adjust Back to 'Have'
3.	[Redacted]	4/19/2019	BGB	ECON	INF	FT				\$27.72	\$24.16	\$4.84	\$0.00	\$0.00	\$0.00	\$0.00	✓ Verified	Adjust Back to 'Have'
										\$1,872.00		\$1,610.63	\$302.00	\$60.60	\$0.00	\$0.00		
4.	[Redacted]	3/17/2018	BGB	SRMT	TOD	FT	4	\$32.87	\$2.45	\$131.48	\$9.84	\$121.64	\$21.20	\$4.24	\$0.00	\$0.00		Verify Adjust Back to 'Have'

The CCEP records have been changed to BGB - SRMT.

## Create a Review Period

A SR Application Manager can set up a review period for a child by setting the household status to **Pending Update**. Check the **Review Period** checkbox and select the child.

**NOTE:** Creating a Review Period has requirements:

- There must be a least one day between the review period start and end dates.
- The start date must fall within the current authorization period and must be within the existing eligibility assignment.
- If the review period extends past the current authorization period, the next authorization period is created.
- If the current eligibility assignment corresponds to a TANF billing group, a new eligibility assignment is created.

### Change Household Eligibility Status

Current Status	Active
New Status <sup>■</sup>	Pending Update ▼
Review Period	<input checked="" type="checkbox"/>
Child Selection <sup>■</sup>	<input type="checkbox"/> Not Test Tester JR <input type="checkbox"/> Not Test Tester III <input type="checkbox"/> Not Test Tester IV <input checked="" type="checkbox"/> Not Test Tester
Review Period Reason <sup>■</sup>	▼
Review Period Start Date <sup>■</sup>	MM/DD/YYYY
Review Period End Date <sup>■</sup>	MM/DD/YYYY
Comments <sup>■</sup>	<div style="border: 1px solid #ccc; height: 60px;"></div>

Select the **Review Period Reason**.

Change Household Eligibility Status

Current Status: Active

New Status: Pending Update

Review Period:

Child Selection:  Not Test Tester JR,  Not Test Tester III,  Not Test Tester IV,  Not Test Tester

Review Period Reason: End of school year transfers due to parents placing children in summer camp, Family moved, Parents do not like the provider, Provider closed

Review Period Start Date:

Review Period End Date: MM/DD/YYYY

Comments:

Save Cancel

Select the **Review Period Start Date** and **Review Period End Date**. Enter Comments and click **Save**.

Change Household Eligibility Status

Current Status: Active

New Status: Pending Update

Review Period:

Child Selection:  Not Test Tester JR,  Not Test Tester III,  Not Test Tester IV,  Not Test Tester

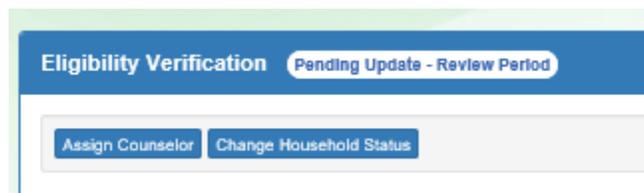
Review Period Reason: Family moved

Review Period Start Date: 07/09/2018

Review Period End Date: 07/27/2018

Comments: Please complete the update to the Eligibility Verification. |

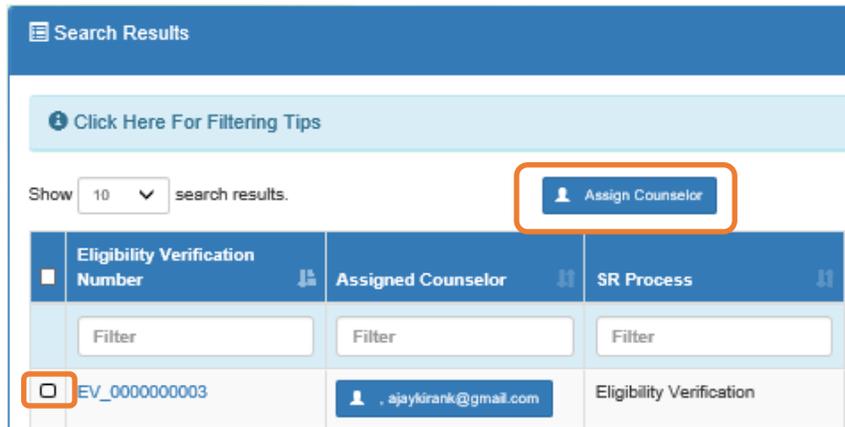
Save Cancel



The family will then update and submit the Eligibility Verification as shown above.

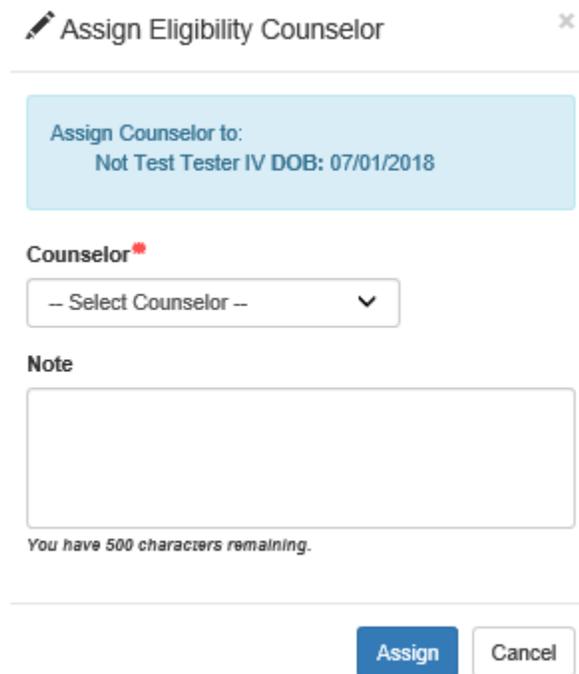
## Assign a Counselor

A counselor is not required but may be assigned to an EV. Select an Eligibility Verification Number and click **Assign Counselor**.



The screenshot shows a 'Search Results' interface. At the top, there is a blue header with a search icon and the text 'Search Results'. Below this is a light blue bar with a link that says 'Click Here For Filtering Tips'. Underneath, there is a 'Show' dropdown menu set to '10' and the text 'search results.'. To the right of this is a blue button with a person icon and the text 'Assign Counselor', which is highlighted with an orange border. Below these elements is a table with three columns: 'Eligibility Verification Number', 'Assigned Counselor', and 'SR Process'. Each column has a 'Filter' input field below it. The first row of the table has a checkbox selected, followed by the text 'EV\_000000003', a person icon and the email address 'ajaykirank@gmail.com', and the text 'Eligibility Verification'. The checkbox and the first cell of the first row are also highlighted with orange borders.

The following screen will display.



The screenshot shows a dialog box titled 'Assign Eligibility Counselor' with a close button (X) in the top right corner. Inside the dialog, there is a light blue box with the text 'Assign Counselor to:' followed by 'Not Test Tester IV DOB: 07/01/2018'. Below this is a label 'Counselor' with a red asterisk, followed by a dropdown menu with the text '-- Select Counselor --' and a downward arrow. Underneath is a label 'Note' followed by a large empty text area. Below the text area is the text 'You have 500 characters remaining.'. At the bottom of the dialog are two buttons: 'Assign' (blue) and 'Cancel' (white).

Select a counselor from the **Counselor** dropdown. The list of counselors is generated from coalition users who are given the SR Application Manager role.

✎ Assign Eligibility Counselor ✕

Assign Counselor to:  
Not Test Tester IV DOB: 07/01/2018

**Counselor** \*

Select Counselor --

- Herbie Lovebug
- Pio Brown
- Jevan McGhee
- Andrea Latham
- Nilesh Amin
- katrina campbell
- Nilesh Amin
- Nancy Thomas
- Paige Ehrlich
- Kimberly Troke
- nilesh amin
- Jevan McGhee
- Todd Behnke
- ELC User
- Andrea Latham
- ELC User2
- Jevan McGhee
- ajaykirank@gmail.com
- Martin Stevens
- k c
- NTest ATest

Assign Cancel

Click **Assign** to assign the counselor.

✎ Assign Eligibility Counselor ✕

Assign Counselor to:  
Not Test Tester IV DOB: 07/01/2018

**Counselor** \*

Herbie Lovebug ▼

**Note**

*You have 500 characters remaining.*

Assign Cancel

The counselor is assigned.

**Eligibility Verification** Active

Counselor : Herbie Lovebug Change Household Status

## Change an Assigned Counselor

From the EV Search page, select the current Assigned Counselor from the dropdown.

Search For A School Readiness Eligibility Verification

Eligibility Verification Number	<input type="text"/>	Priority	Select One	
Household Process Code	<input type="text"/>	Funding Type	<input type="radio"/> SR <input type="radio"/> Local <input type="button" value="↻"/>	
Household Status Code	<input type="text"/>	CCAA	<input type="radio"/> Yes <input type="radio"/> No <input type="button" value="↻"/>	
Child Status Code	<input type="text"/>	Assigned Counselor	Select One	
Include Past Due?	<input type="radio"/> Yes <input type="radio"/> No <input type="button" value="↻"/>		Assigned Date	MM/DD/YYYY to MM/DD/YYYY
Parent Name	First Name <input type="text"/>	Last Name <input type="text"/>	County	<input type="text"/>
Child Name	First Name <input type="text"/>	Last Name <input type="text"/>	Last Updated Date	MM/DD/YYYY to MM/DD/YYYY
Child Age	<input type="text"/>	to <input type="text"/>	Coalition Transfer	<input type="radio"/> Requested <input type="radio"/> In <input type="radio"/> Out <input type="button" value="↻"/>
Child Date of Birth	MM/DD/YYYY	to MM/DD/YYYY	Family Requested for Provider Transfer	<input type="radio"/> Yes <input type="radio"/> No <input type="button" value="↻"/>

From the Search Results list, put a check in each checkbox for 50 of the results. Don't use the select all feature (in red). Then, click the **Assign Counselor** button.

Show  search results.

<input type="checkbox"/>	Eligibility Verification Number	Child Name	Assigned Counselor
<input type="checkbox"/>	EV_0000		<input type="button" value="Jim Ledbetter"/>
<input type="checkbox"/>	EV_00003		<input type="button" value="Jim Ledbetter"/>

Showing 1 to 2 of 2 search results.

Select the new Counselor from the dropdown and click **Assign**.

The screenshot shows a web application interface for the 'OFFICE OF Early Learning' with the tagline 'LEARN EARLY. LEARN FOR LIFE.' and 'PROD'. The main content area displays search results for eligibility verifications. A modal window titled 'Assign Eligibility Counselor' is open, allowing a user to assign a counselor to a selected row. The modal includes a dropdown menu for selecting a counselor, a text area for a note, and 'Assign' and 'Cancel' buttons.

Home VPK Program SR Program TAPP Provider Reimbursement Maintenance

Search Results

Click Here For Filtering Tips

Show 10 search results. Assign Counselor

Eligibility Verification Number	Child Name	Assigned Counselor	Date of Birth
<input checked="" type="checkbox"/> EV_00001		Jim Ledbetter	
<input checked="" type="checkbox"/> EV_00002		Jim Ledbetter	

Showing 1 to 2 of 2 search results. 2 rows selected

Assign Eligibility Counselor

Assign Counselor to:

**Counselor\***

-- Select Counselor --

Note

You have 500 characters remaining.

Assign Cancel

## Remove an Assigned Counselor

If a new Assigned Counselor is not known, or has not been determined, all cases from the current Assigned Counselor can be marked unassigned.

From the EV Search, select the current Assigned Counselor from the dropdown.

Search For A School Readiness Eligibility Verification

Eligibility Verification Number:

Household Process Code:

Household Status Code:

Child Status Code:

Include Past Due?  Yes  No

Parent Name: First Name  Last Name   
(starts with) (starts with)

Child Name: First Name  Last Name   
(starts with) (starts with)

Child Age:  to

Child Date of Birth:  to

Priority:

Funding Type:  SR  Local

CCAA:  Yes  No

Assigned Counselor:

Assigned Date:  to

County:

Zip Code:

Last Updated Date:  to

Coalition Transfer:  Requested  In  Out

Family Requested for Provider Transfer:  Yes  No

From the Search Results list, put a check in each checkbox for 50 of the results. Don't use the select all feature. Then, click **Assign Counselor**.

Search Results [Return to Search](#)

[Click Here For Filtering Tips](#)

Show  search results.   Search:

Eligibility Verification Number	Child Name	Assigned Counselor	Date of Birth	Age	Parent Name	SR Process	SR Status
<input checked="" type="checkbox"/>	Filter	Filter	Filter	Filter	Filter	Filter	Filter
<input checked="" type="checkbox"/> EV_00002	I	<input type="checkbox"/> R	1	6	Nc	Update	Rejected
<input checked="" type="checkbox"/> EV_00002	I	<input type="checkbox"/> R	0	5	Wl		Active
<input checked="" type="checkbox"/> EV_00002	I	<input type="checkbox"/> R	1	6	Nu		Active
<input checked="" type="checkbox"/> EV_00002	I	<input type="checkbox"/> R	1	3	Ni		Active
<input checked="" type="checkbox"/> EV_00002	I	<input type="checkbox"/> R	0	2	La		Active
<input checked="" type="checkbox"/> EV_00002	I	<input type="checkbox"/> R	0	6	La		Active
<input checked="" type="checkbox"/> EV_00002	S	<input type="checkbox"/> R	1	3	St		Active
<input checked="" type="checkbox"/> EV_00000	/	<input type="checkbox"/> R	0	6	Nc		Active
<input checked="" type="checkbox"/> EV_00001	I	<input type="checkbox"/> R	0	5	Ar		Active
<input checked="" type="checkbox"/> EV_00001	I	<input type="checkbox"/> R	1	4	Jo		Active

Select "Assign Counselor" from the dropdown and click **Assign**.

The screenshot displays a software interface with a table of search results and a modal window titled "Assign Eligibility Counselor".

**Search Results Table:**

Eligibility Verification Number	Child Name	Assign	Parent Name	SR Process	SR Status
EV_0000	C	Assign			Rejected
EV_0000	E	Assign			Active
EV_0000	D	Assign			Active
EV_0000	M	Assign			Active
EV_0000	K	Assign			Active
EV_0000	M	Assign			Active
EV_0000	S	Assign			Active
EV_0000	A	Assign			Active
EV_0000	K	Assign			Active
EV_0000	F	Assign			Active

**Assign Eligibility Counselor Modal:**

Assign Counselor to:

Counselor\*

- Select Counselor --
- Assign Counselor
- R
- K
- S
- C
- U
- V
- M
- E
- L
- A
- C
- R
- L
- X

Buttons: Assign, Cancel

The previously assigned counselor is removed from the EVs. When those EVs are searched for, Assign Counselor displays and a case note is added to the household case notes for each eligibility verification that was updated.

Search Results ← Return to Search

Click Here For Filtering Tips

Show 10 search results. [Assign Counselor](#) [Clear All Filters](#) Search:

Eligibility Verification Number	Child Name	Assigned Counselor	Date of Birth	Age	Parent Name	SR Process	SR Status
EV_00002		<a href="#">Assign Counselor</a>	11/13	6	Nc	Update	Rejected

Showing 1 to 1 of 1 search results. Previous 1 Next

OFFICE OF

### Household Case Notes

Show 10 entries Search:

Date	Code	Custom Code	Event	Description	Notes	User
5/14/2021 10:47:27 AM	UNASG N		Counselor was unassigned from household by ELC	Counselor [g] was unassigned from household by coalition ELC of Northwest Florida.		

# Coalition Transfer

To transfer an EV from Coalition A to Coalition B, Coalition A will look up the record and click the EV number of the desired record.

Search For A School Readiness Eligibility Verification

Eligibility Verification Number: 1096992

Household Process Code: [Dropdown]

Household Status Code: [Dropdown]

Child Status Code: [Dropdown]

Include Past Due?  Yes  No

Parent Name: First Name [Text], Last Name [Text]

Child Name: First Name [Text], Last Name [Text]

Child Age: [Text] to [Text]

Child Date of Birth: MM/DD/YYYY to MM/DD/YYYY

Priority: Select One [Dropdown]

Funding Type:  SR  Local

CCAA:  Yes  No

Assigned Counselor: Select One [Dropdown]

Assigned Date: MM/DD/YYYY to MM/DD/YYYY

County: Broward [Dropdown], Zip Code: [Text]

Last Updated Date: MM/DD/YYYY to MM/DD/YYYY

Coalition Transfer:  Requested  In  Out

Family Requested for Provider Transfer:  Yes  No

Parent Phone Number: Enter 10 digits phone number [Text]

[Search] [Reset]

1 Total Records

Click Here For Filtering Tips

Show 10 search results. [Assign Counselor] [Clear All Filters] Search: [Text] [Export to Excel]

Eligibility Verification Number	Child Last Name	Child First Name	Assigned Counselor	Date of Birth	Age	Parent Last Name	Parent First Name	SR Process	SR Status
EV_0001096992	Child 3	DEL Test	[Assign Counselor]	03/01/2019	5	Test Parent	DEL	Update	Incomplete

Showing 1 to 1 of 1 search results. [Previous] 1 [Next]

Coalition A will change the Household Status to **Pending Update** and request the family to update their address.

Eligibility Verification Active EV\_0001096992

[Assign Counselor] [Change Household Status] [Case Notes] [Add Note]

Household at a Glance

**Household at a Glance...** (HH\_0001948385)

<p><b>Children Needing Care</b></p> <ul style="list-style-type: none"> <li>DEL Test Child 1 (child, female, age 5)</li> <li>DEL Test Child 2 (child, male, age 5)</li> <li>DEL Test Child 3 (child, male, age 5)</li> <li>DEL Test Child 4 (child, female, age 5)</li> </ul> <p>Total Household Size: 6</p>	<p><b>Parents</b></p> <ul style="list-style-type: none"> <li>DEL Test Parent (adult, female)</li> </ul>	<p><b>Other Household Members</b></p> <ul style="list-style-type: none"> <li>DEL Test Other Member (adult, female)</li> </ul>	<p><b>Total Household Income Calculations</b></p> <ul style="list-style-type: none"> <li>Employment income: <b>\$15,600.00</b></li> <li>Alimony and child support income: <b>\$0.00</b></li> <li>Other income: <b>\$0.00</b></li> <li>Alimony and child support deductions: <b>\$0.00</b></li> <li>Total annual gross income: <b>\$15,600.00</b></li> </ul>
---	---	---	---

Other Household Members

## Change Household Eligibility Status

**Current Status** Active

**New Status\*** Pending Update ▼

**Review Period**

**Comments\***

Please update your address.

Save
Cancel

The Household Status is now **Pending Update**.

Eligibility Verification (Pending Update - Update)
EV\_0001096996

Assign Counselor
Change Household Status

Case Notes
Add Note

**Household at a Glance** HH\_0001948385

<b>Children Needing Care</b> DEL Test Child 1 (child, female, age 5) DEL Test Child 2 (child, male, age 5) DEL Test Child 3 (child, male, age 5) DEL Test Child 4 (child, female, age 5) Total Household Size: 6	<b>Parents</b> DEL Test Parent (adult, female)	<b>Other Household Members</b> DEL Test Other Member (adult, female)	<b>Total Household Income Calculations</b> Employment income: <b>\$15,600.00</b> Alimony and child support income: <b>\$0.00</b> Other income: <b>\$0.00</b> Alimony and child support deductions: <b>\$0.00</b> Total annual gross income: <b>\$15,600.00</b>
---	---	---	---

The family will see a blue **Update Eligibility** button on their dashboard.

**School Readiness Funding** Download Consumer Education Statement

The following table shows the School Readiness funding status for all of the children in your household.

Child Name	Screenings and Assessments	EV Number	Status	Enrollment Status	Provider Name	Payment Certificate
DEL Test Child 1	<span style="background-color: #28a745; color: white; padding: 2px 5px;">Screening History</span>	EV_0001096993	Eligible	-	-	-
DEL Test Child 2	<span style="background-color: #28a745; color: white; padding: 2px 5px;">Screening History</span>	EV_0001096994	Eligible	-	-	-
DEL Test Child 3	<span style="background-color: #28a745; color: white; padding: 2px 5px;">Screening History</span>	EV_0001096992	Pending Eligibility	-	-	-
DEL Test Child 4	<span style="background-color: #28a745; color: white; padding: 2px 5px;">Screening History</span>	EV_0001096996	Pending Eligibility	-	-	-

TO VIEW HISTORICAL PAYMENT CERTIFICATES AND/OR TERMS & CONDITIONS CLICK HERE

Update Eligibility

Eligibility button to update your family's eligibility.

The family will update the address in the Eligibility Wizard from the old address...

**1. Household**  
2. Employment  
3. School/Training  
4. Other Income  
5. Alimony and Child Support  
6. Child Provider Information  
7. Documents  
8. Review and Submit!

### Household Address

Our records indicate the following primary address for your household.

Select if you are currently homeless or located at a Domestic Violence Shelter

Address Line 1\*  
3151 N University Dr

Address Line 2 (Apt, Suite, etc)

City\*  
Coral Springs

County\*  
Broward

Are you a RCMA family?

State\*  
Florida

Zip Code\*  
33065

Proof of Residency\*  
Attach the documentation necessary to establish the household's proof of residency.

Proof of Residency\*

test doc.docx View

Is this information accurate and complete?

**Yes** It is accurate and complete.  **No** I need to update the information.

← Previous Step Next Step →

...to the new address and click **Save**.

**1. Household**  
2. Employment  
3. School/Training  
4. Other Income  
5. Alimony and Child Support  
6. Child Provider Information  
7. Documents  
8. Review and Submit!

### Household Address

Please update your primary address, and then click Save to save your changes. Or click Cancel to discard your changes.

Select if you are currently homeless or located at a Domestic Violence Shelter

Address Line 1\*  
3401 N Miami Ave

Address Line 2 (Apt, Suite, etc)  
Suite 100

City\*  
Miami

County\*  
Miami-Dade

Are you a RCMA family?

State\*  
Florida

Zip Code\*  
33065

Proof of Residency\*  
Attach the documentation necessary to establish the household's proof of residency.

Proof of Residency\*

test doc.docx View Delete

Save Cancel

Once the family clicks **Save**, the following will display. The family will click **Yes** to continue.

### Coalition Transfer Warning

The county change will result in a transfer to a new coalition. Are you sure you want to change your address?

**Household Address**  
Our records indicate the following primary address for your household.

Select if you are currently homeless or located at a Domestic Violence Shelter

Address Line 1 \*  
3401 N Miami Ave

Address Line 2 (Apt, Suite, etc)  
Suite 100

City \*  
Miami

County \*  
Miami-Dade

Are you a RCMA family?

State \*  
Florida

Zip Code \*  
33065

Proof of Residency \*  
Attach the documentation necessary to establish the household's proof of residency.

Proof of Residency \*  [View](#)

Is this information accurate and complete?

**Yes** It is accurate and complete.  **No** I need to update the information.

[Previous Step](#) [Next Step](#)

Coalition A will now see a “Transfer Household For Services” banner at the top of the EV.

**Eligibility Verification** Submitted - Update

Assign Counselor Change Household Status

**Transfer Household For Services**

**Household at a Glance**

Contact Information

Children Needing Care

Parents

Other Household Members

**Household at a Glance...**

**Children Needing Care**

- Jim 1 Test (child, male, age 5)
- Jim 2 Test (child, male, age 5)
- Jim 3 Test (child, male, age 5)
- Jim 4 Test (child, male, age 5)

**Parents**

- Jim Test (adult, male)

**Other Household Members**

Total Household Size : 5

Coalition A will note that the **Transfer Household** button is grayed out.

Contact Information

<b>Primary Address</b> <a href="#">Change</a> 4424 NW 13th Street Gainesville, Florida 32609 Alachua County	<b>Primary Parent</b> Email: ledbetter.kiwanis+4@gmail.com Primary phone: (555) 555-5555	<b>Family Portal Account</b> ledbetter.kiwanis+4@gmail.com	<a href="#">History</a> <b>Transfer Household</b>
--	--	---	--

When Coalition A hovers over the **Transfer Household** button, a message will appear, reminding Coalition A that enrollments must be terminated to initiate the transfer.

Contact Information

<b>Primary Address</b> <a href="#">Change</a> 4424 NW 13th Street Gainesville, Florida 32609 Alachua County	<b>Primary Parent</b> Email: ledbetter.kiwanis+4@gmail.com Primary phone: (555) 555-5555	<b>Family Portal Account</b> ledbetter.kiwanis+4@gmail.com	<b>You must end all enrollments in the household to complete services transfer</b> <b>Transfer Household</b>
--	--	---	---

To end an enrollment, go to the Children Needing Care section and click the **End Enrollments** button for each child.

## Children Needing Care

<b>Jim 2 Test</b> (child, male, age 5) <b>Eligibility status:</b> Eligible <b>Enrollment status:</b> Enrolled <b>Date of birth:</b> 02/01/2014 <b>Ethnicity:</b> Prefer not to answer <b>Races:</b> Prefer not to answer <b>Care days:</b> Monday-Friday <b>Care types:</b> Fulltime <b>Citizenship:</b> Unknown <b>Age verification:</b> Unknown <b>Medicaid eligibility:</b> Unknown <b>Current authorization period:</b> 02/27/2019 - 02/26/2020 <b>Person ID:</b> 4927 <b>Eligibility verification ID:</b> EV_0000003129	<a href="#">History</a> <b>End Enrollments</b>
---	---

Then, click the **End Enrollment** button.

Enrollments

Enrollments for Jim 2 Test

Child Enrollment Status: Enrolled [View Payment Certificate](#)

<b>Provider Name:</b> Jim's House of Smarties	<b>Provider ID:</b> 8435 <a href="#">View Profile</a>
<b>Contact Phone:</b> (555) 555-5555	<b>Contact Email:</b> test@test.com
<b>Location:</b> 250 MARRIOTT DR TALLAHASSEE, 32301 Leon County	<b>Parent Fee (Copay):</b> \$1.25
<b>Enrollment Start Date:</b> 02/27/2019	<b>Enrollment End Date:</b> N/A
<b>First Attendance Date:</b> N/A	<b>Last Attendance Date:</b> N/A

[End Enrollment](#) [History](#)

[Close](#)

Enter the End Enrollment Reason as 49-Moved out of Service Area and set the Last Day of Service. Click **Save**.

**End Enrollment**

**End Enrollment Reason\*** 49-Moved out of Service Area ▼

**Last Day of Service\*** 02/27/2019 x

**Is there a past due parent fee?\***  Yes  No

**Past Due Parent Fee Amount** \$

**Is there a payment plan in place?**  Yes  No

**Please attach payment plan document.**  Browse...

**Save** **Cancel**

Then, click **Yes**.

**Confirm Confirm End Enrollment** x

Ending the enrollment on this day means that reimbursements will not be provided for services after this date.  
End this enrollment with the specified dates?

**Yes** **Cancel**

The Enrollment Status is now **Enrollment Ended (Terminated)**.

**Enrollments**

Enrollments for Jim 2 Test

Child Enrollment Status: Enrollment Ended (Terminated) [Acknowledge](#) [View Payment Certificate](#)

<b>Provider Name:</b> Jim's House of Smarties	<b>Provider ID:</b> 8435 <a href="#">View Profile</a>
<b>Contact Phone:</b> (555) 555-5555	<b>Contact Email:</b> test@test.com
<b>Location:</b> 250 MARRIOTT DR TALLAHASSEE, 32301 Leon County	<b>Parent Fee (Copay):</b> \$1.25
<b>Enrollment Start Date:</b> 02/27/2019	<b>Enrollment End Date:</b> 02/27/2019
<b>First Attendance Date:</b> N/A	<b>Last Attendance Date:</b> N/A

[History](#)

[Close](#)

To initiate the transfer process, Coalition A will click the **Transfer Household** button and click **Yes** when the confirmation message displays.

**Contact Information**

<b>Primary Address</b> <a href="#">Changed</a> 4424 NW 13th Street Gainesville, Florida 32609 Alachua County	<b>Primary Parent</b> <b>Email:</b> ledbetter.kiwanis+4@gmail.com <b>Primary phone:</b> (555) 555-5555	<b>Family Portal Account</b> ledbetter.kiwanis+4@gmail.com	<a href="#">History</a> <a href="#">Transfer Household</a>
---	--	---	---

**Confirm Transfer of Household Services**

Do you want to continue with the transfer of this household to **ELC of Alachua** for processing?

Coalition A will now see a "Household Transferred Services" banner at the top of the EV and the **Change Household Status** and **Assign Counselor** buttons are grayed out.

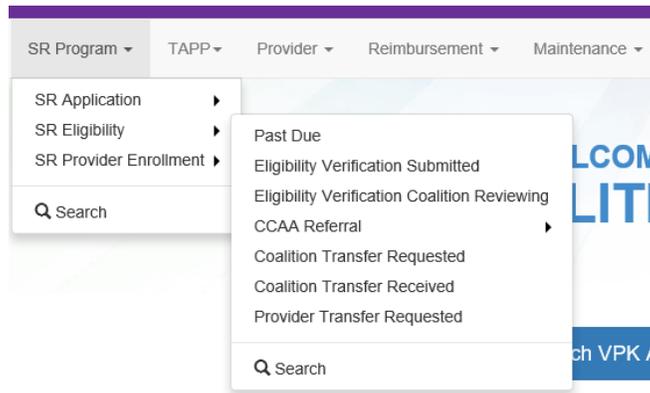
**Eligibility Verification** [Submitted - Update](#)

[Assign Counselor](#) [Change Household Status](#) **Household Transferred Services**

**Household at a Glance**

<b>Contact Information</b>	<b>Household at a Glance...</b>	<b>Parents</b>	<b>Other Household Members</b>
<b>Children Needing Care</b>	<b>Children Needing Care</b>	<b>Jim Test</b> (adult, male)	
<b>Parents</b>	<b>Jim 1 Test</b> (child, male, age 5)		
<b>Other Household Members</b>	<b>Jim 2 Test</b> (child, male, age 5)		
	<b>Jim 3 Test</b> (child, male, age 5)		
	<b>Jim 4 Test</b> (child, male, age 5)		
	<b>Total Household Size : 5</b>		

Coalition B will click the **Coalition Transfer Received** link.



Coalition B will search for the desired EV record that was transferred from Coalition A.

Search Results

Click Here For Filtering Tips

Show 10 search results. Assign Counselor

Eligibility Verification Number	Child Name	Assigned Counselor	Date of Birth	Age	Parent Name	SR Process	SR Status	Child Status
EV_0000003141	Jim 1 Test	Assign Counselor	02/01/2014	5	Jim Test	Update	Submitted	Eligible
EV_0000003142	Jim 2 Test	Assign Counselor	02/01/2014	5	Jim Test	Update	Submitted	Eligible
EV_0000003143	Jim 3 Test	Assign Counselor	02/01/2014	5	Jim Test	Update	Submitted	Eligible
EV_0000003144	Jim 4 Test	Assign Counselor	02/01/2014	5	Jim Test	Update	Submitted	Eligible

Coalition B will now see a “Household Transferred Services” banner at the top of the EV. Click the **Change Household Status** button.

Eligibility Verification Submitted - Update

Assign Counselor **Change Household Status**

Household Transferred For Services

Household at a Glance

Contact Information

Children Needing Care

Parents

Other Household Members

**Household at a Glance...**

**Children Needing Care**

- Jim 1 Test (child, male, age 5)
- Jim 2 Test (child, male, age 5)
- Jim 3 Test (child, male, age 5)
- Jim 4 Test (child, male, age 5)

**Parents**

- Jim Test (adult, male)

**Other Household Members**

Total Household Size : 5

Change the status to **Active** and click **Save**.

**Change Household Eligibility Status**

Current Status: Submitted

New Status: Active

Save Cancel

Then, click the **Eligibility** button.

### Children Needing Care

**Jim 2 Test** (child, male, age 5)

**Eligibility status:** Eligible

**Enrollment status:** Enrollment Ended (Terminated)

**Date of birth:** 02/01/2014

**Ethnicity:** Prefer not to answer

**Races:** Prefer not to answer

**Care days:** Monday-Friday

**Care types:** Fulltime

**Citizenship:** Unknown

**Age verification:** Unknown

**Medicaid eligibility:** Unknown

**Current authorization period:** 02/27/2019 - 02/26/2020

**Person ID:** 4927

**Eligibility verification ID:** EV\_0000003142

History

Change Status

**Eligibility**

Enrollments

Edit

Click the **Add Eligibility Assignment...** button.

**Update Eligibility**

Eligibility Assignments for Jim 2 Test

Eligibility Code	Billing Group	Begin Date	End Date	Funding Agency ID (code, type, name)	Actions
<b>Current Authorization Period</b> (02/27/2019 - 02/26/2020) Update					
<b>Ended Assignments</b>					
ECON	BG8	02/27/2019	02/27/2019	(Unknown funding agency ID: 5)	

Add Eligibility Assignment... Add Next Authorization Period...

**Current Eligibility Map**

Current Authorization Period  
02/27/2019 - 02/26/2020

Save Cancel

Coalition B will create a new Eligibility Assignment. Ensure that the Eligibility Begin Date and Eligibility End Date is within the Authorization Period. Note that the Match Funder is from Coalition B, not Coalition A. Click **OK**.

### Edit Eligibility Assignment

#### Funding Details

**Funder Type\***  
 SR  Local  E-TAPP  P-TAPP

**Billing Group\***  **Eligibility Code\***  **Match Funder\***

**Eligibility Begin Date\***  **Eligibility End Date\***  **Purpose-for-Care Review Date**

---

#### Care Information

**Priority\***  **Level of Care\***  **Purpose for Care\***

Rilya Wilson Reporting Requirements **Copay in Effect\***

---

#### Co-Payment

**Total Household Members**  **Full time Co-payment Amount**  **Part time Co-payment Amount**

**Full Time Co-payment Waiver or Reduction**

Full Time Co-payment is Waived or Reduced

**Reduction Amount\***  **Co-payment Reduction or Waiver Reason\***

**Additional Waiver or Reduction Details**

The Eligibility Assignment is now created within the Authorization Period. Click **Save**.

Update Eligibility

Eligibility Assignments for Jim 2 Test

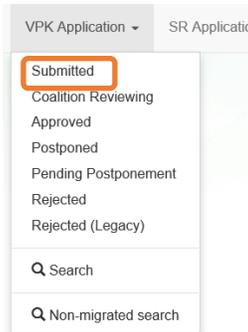
Eligibility Code	Billing Group	Begin Date	End Date	Funding Agency ID (code, type, name)	Actions
<b>Current Authorization Period</b> (02/27/2019 - 02/26/2020) <input type="button" value="Update"/>					
ECON	BG8	02/27/2019	02/26/2020	61 (01-1, BG8, Alachua Match Funds)	<input type="button" value="Cancel"/> <input type="button" value="Update"/>
<b>Ended Assignments</b>					
ECON	BG8	02/27/2019	02/27/2019	(Unknown funding agency ID: 5)	

**Current Eligibility Map**

The map displays two nested horizontal bars. The outer bar is light green and represents the 'Current Authorization Period' from 02/27/2019 to 02/26/2020. The inner bar is light blue and represents the 'Eligibility Assignment' for 'ECON BG8 (01-1)' from 02/27/2019 to 02/26/2020. The inner bar is positioned slightly below the start of the outer bar and ends at the same time.

## Processing a Submitted VPK Application

The first step to process a **Submitted** VPK Application is to click on the **Submitted** work queue. To begin reviewing an application, the coalition user must click the **Child Name** link of the record the user is assigned to review.



Submitted and Reenrollment Submitted VPK Applications									Program Year
COE Number	Child First Name	Child Last Name	Child DOB	Parent First Name	Parent Last Name	County	Program Year	VPK Status	
VPKRE11-4-2020	[Redacted]	[Redacted]	5/30/2016	[Redacted]	[Redacted]	Seminole	2020 - 2021	Reenrollment Submitted	9/25/2020
VPKRE11-1-2020	[Redacted]	[Redacted]	5/14/2016	[Redacted]	[Redacted]	Hillsborough	2020 - 2021	Reenrollment Submitted	9/25/2020
VPK13-4-2020	[Redacted]	[Redacted]	8/11/2015	[Redacted]	[Redacted]	Miami-Dade	2020 - 2021	Submitted	9/23/2020

Please note that the Program Year for the search automatically selects the current program year. To see all program years, click the dropdown menu arrow.

The following page will display:

VPK Application for [Redacted] Household ID: 000027251

Certificate Number: VPK1-1-2020 Current Application Status: Submitted Program Year: 2020 - 2021

### CHILD AND PROGRAM INFORMATION

First Name \* Middle Name Suffix

Ethnicity \* Race(s) \* Gender \*  Male  Female

DOB (mm/dd/yyyy) \* SSN \*\* Desired VPK Session \*  Not Answered

Primary Language \* County for Services \*  Asian  Hawaiian/Pacific  Black  Us Indian/Alaskan  White  Not Answered

Preferred Program Setting \* Child admitted to kindergarten?  No  Yes

Has this child previously participated in a VPK program?  No  Yes

Child Proof-of-Age Documentation  image.jpg

### PARENT OR GUARDIAN INFORMATION

First Name \* Middle Name Suffix

Ethnicity \* Race(s) \* Gender \*  Male  Female

Relationship to Child \*  Parent/Step Parent  Not Answered

Primary Contact Number \* Secondary Contact Number

Preferred Method of Contact \*  Email  Family is not displaced.

### SECONDARY PARENT OR GUARDIAN

First Name Middle Name Last Name Suffix

Relationship to Child \*  --please select a value--

IEP Documentation  
 ✖ No Current IEP  
 Add Document...

Residential Address

Is this a RCMA family? ⓘ:

Address Line One \*

Address Line Two  City \* north port

Enter Address

County \* Sarasota Zip Code \* 34288 State FLORIDA

Proof-of-Residence Documentation  
 ✖ No Current Proof of Residence  
 Add Document...

Parent/Step Parent

Parent 2 Address Information  
 Same address as child address  Different address as child address  Other

CASE NOTES

Status Records Custom Code Type Select Custom Code Select a Custo Add Case Note

Last updated by at 9/24/2020 4:36:42 PM

Other records associated with userid

VPK01 form

Set Coalition Reviewing Save Changes Approve Reject

## Verify Attached Documents

The coalition user can review the attached documents by clicking the **View** button. Each document must be verified prior to approval of the application. To verify the document, click the **Action...** dropdown menu and select Verify Document or Delete Document.

Child Proof-of-Age Documentation

Koala.jpg **View** Action...

Add Document...

IEP Documentation

✖ No Current IEP

Add Document...

When the document is verified by the coalition user and the user clicks **Save Changes**, a green check mark will appear in the checkbox.

Child Proof-of-Age Documentation

Koala.jpg **View** Action...

Add Document...

IEP Documentation

✖ No Current IEP

Add Document...

## VPK Application Review Process

Depending on the application review process, the VPK application can be set to **Coalition Reviewing**, **Approved** or **Rejected**.

### Coalition Reviewing

If the coalition user needs more time to review the application before making a decision to approve or reject, the application's status can be set to **Coalition Reviewing** by clicking the **Set Coalition Reviewing** button. See the **Managing VPK Applications for a Family Portal User** section for the auto-generated email that is delivered to the parent when the application is set to coalition reviewing.

**NOTE:** With Release 4.5, coalition users can select families receiving RCMA services with a "Is this a RCMA family" checkbox under Residential address.

The screenshot displays the VPK application review interface. On the left, there are sections for 'IEP Documentation' (with a red 'No Current IEP' message and an 'Add Document' button), 'Residential Address' (with a checkbox for 'Is this a RCMA family?', address fields, and a dropdown for 'County \*' set to 'Sarasota'), and 'Proof-of-Residence Documentation' (with a red 'No Current Proof of Residence' message and an 'Add Document' button). On the right, there is a 'Parent/Step Parent' dropdown, 'Parent 2 Address Information' with radio buttons for 'Same address as child address', 'Different address as child address', and 'Other', and a 'CASE NOTES' section with a text area, 'Status Records' button, 'Custom Code Type' dropdown, 'Custom Code' dropdown, and 'Add Case Note' button. Below these is a 'Last updated by' field and a 'VPK01 form' button. At the bottom, a row of buttons includes 'Set Coalition Reviewing' (highlighted with an orange border), 'Save Changes', 'Approve', and 'Reject'.

Once an eligibility decision is made, the coalition user will then either click the **Approve** or **Reject** button.

### Approved Applications

If supporting eligibility documents meet VPK program requirements and are verified, the coalition user will click the **Approve** button. This will trigger the system to generate a Certificate of Eligibility (COE/DEL-VPK 02) for the parent to access in their Family Portal account. See the **Managing VPK Applications for a Family Portal User** section for the auto-generated email that is delivered to the parent when the application is approved.

This screenshot is identical to the one above, showing the VPK application review interface. The only difference is that the 'Approve' button at the bottom is now highlighted with an orange border, indicating the user's action.

## Rejected Applications

If supporting eligibility documents do not meet VPK program requirements, the coalition user will click the **Reject** button to reject the application.

The screenshot shows a web interface for reviewing VPK applications. On the left, there are three main sections: 'IEP Documentation' with a red error message 'No Current IEP' and an 'Add Document...' button; 'Residential Address' with a form for address details including 'Address Line One', 'Address Line Two', 'City', 'County', 'Zip Code', and 'State'; and 'Proof-of-Residence Documentation' with a red error message 'No Current Proof of Residence' and an 'Add Document...' button. On the right, there is a 'Parent/Step Parent' dropdown, 'Parent 2 Address Information' radio buttons, a 'CASE NOTES' section with a text area and 'Status Records', 'Custom Code Type', 'Custom Code', and 'Add Case Note' buttons, and a section for 'Other records associated with userid'. At the bottom right, there is a 'VPK01 form' button and a row of action buttons: 'Set Coalition Reviewing', 'Save Changes', 'Approve', and 'Reject' (which is highlighted with an orange border).

Then, the coalition user must select the checkbox for the appropriate rejection reason(s), enter a comment and click the **Send Response** button. The comment will appear in the auto-generated email from **DONOTREPLY@oel.myflorida.com** to the parent. See the **Managing VPK Applications for a Family Portal User** section for the auto-generated email that is delivered to the parent when the application is rejected.

### Reject VPK Application

Select the issues identified with the application for Fake Child. An email will be sent to [megan.folts@oel.myflorida.com](mailto:megan.folts@oel.myflorida.com).

- Issue with proof of residence
- Issue with age verification
- Issue with IEP

Comments:

**Send Response**

Once the coalition user has rejected the application, the user can only add or review Case Notes, but no other actions can be performed because the application is in editable status for the parent.



## VPK Application Transfer Process – Change in County of Service

If a child has not used any VPK hours, applications can be transferred by a VPK Application Manager or DEL admin, from one county to another when the application is in **Submitted**, **Approved** or **Enrolled** status. If an application is in **Rejected** status, the parent can be instructed to update the county of service on the application and resubmit. The application will be delivered to the appropriate coalition, based on the county of service selected.

### Submitted Applications

To transfer a **Submitted** VPK application, select the new county from the **County for Services** dropdown menu.

#### CHILD AND PROGRAM INFORMATION

<b>First Name *</b> Child First	<b>Middle Name</b> Enter Middle Name	<b>Last Name *</b> Child Last	<b>Suffix</b> ▼
<b>Ethnicity *</b> <input type="radio"/> Hispanic <input type="radio"/> Non-Hispanic <input checked="" type="radio"/> Not answered		<b>Gender *</b> <input type="radio"/> Male <input checked="" type="radio"/> Female	
<b>Race(s) *</b> <input type="checkbox"/> Asian <input type="checkbox"/> Hawaiian/Pacific <input type="checkbox"/> Black <input type="checkbox"/> Us Indian/Alaskan <input type="checkbox"/> White <input checked="" type="checkbox"/> Not Answered			
<b>DOB (mm/dd/yyyy)*</b> 12/25/2011	<b>SSN **</b> Enter SSN	<b>Desired VPK Session *</b> School year (540 hours) ▼	<b>County for Services *</b> Leon ▼
<b>Primary Language</b> English ▼			
<b>Preferred Program Setting</b> Public school ▼		<b>Child admitted to kindergarten?* No</b>	

Has this child previously participated in a VPK program?\*  No  Yes

#### CHILD AND PROGRAM INFORMATION

<b>First Name *</b> Child First	<b>Middle Name</b> Enter Middle Name	<b>Last Name *</b> Child Last	<b>Suffix</b> ▼
<b>Ethnicity *</b> <input type="radio"/> Hispanic <input type="radio"/> Non-Hispanic <input checked="" type="radio"/> Not answered		<b>Gender *</b> <input type="radio"/> Male <input checked="" type="radio"/> Female	
<b>Race(s) *</b> <input type="checkbox"/> Asian <input type="checkbox"/> Hawaiian/Pacific <input type="checkbox"/> Black <input type="checkbox"/> Us Indian/Alaskan <input type="checkbox"/> White <input checked="" type="checkbox"/> Not Answered			
<b>DOB (mm/dd/yyyy)*</b> 12/25/2011	<b>SSN **</b> Enter SSN	<b>Desired VPK Session *</b> School year (540 hours) ▼	<b>County for Services *</b> Alachua ▼
<b>Primary Language</b> English ▼			
<b>Preferred Program Setting</b> Public school ▼		<b>Child admitted to kindergarten?* No</b>	

Has this child previously participated in a VPK program?\*  No  Yes

Enter a Case Note, documenting the application transfer from County A to County B and click the **Add Case Note** button.

**CASE NOTES**

Submitted application was transferred from Leon County to Alachua County.

Status Records Add Case Note

Last updated by [ledbetter.kiwanis@gmail.com](mailto:ledbetter.kiwanis@gmail.com) at 6/22/2016 12:03:30 PM

Click the **Save Changes** button.

**CASE NOTES**

Submitted application was transferred from Leon County to Alachua County.

Status Records Add Case Note

Last updated by [jim.ledbetter@oel.myflorida.com](mailto:jim.ledbetter@oel.myflorida.com) at 6/24/2016 5:48:25 PM

**Other records associated with userid**

[VPK01 form](#) [VPK02 form](#)

**Save Changes** [Reject](#) [Inactivate](#)

## Approved and Enrolled VPK Applications

To transfer an **Approved** or **Enrolled** VPK application, the original coalition must first confirm that the child has not participated in any VPK program hours.

If the child has **not** attended VPK program hours, the coalition user can open the VPK record in the Coalition Services Portal and click the **Re-Open Application** button.

### CHILD INFORMATION

**Child First Child Last**

Ethnicity : **Not answered**                      Gender : **Female**                      Race : **Prefer not to answer**  
DOB : **12/25/2011**    SSN :  
Primary Language : **English**    County for Services : **Leon**  
Preferred Program Setting : **Public school**  
Desired VPK Session : **School year (540 hours)**  
Child admitted to Kindergarten? : **No**

**Current Age Verification** | Verified by jim.ledbetter@oel.myflorida.com on 06/24/2016

**No Current IEP**

Then, select the new county from the **County for Services** dropdown menu. Once the county of service is changed, the receiving coalition can process the application.

### CHILD AND PROGRAM INFORMATION

<b>First Name *</b> <input type="text" value="Child First"/>	<b>Middle Name</b> <input type="text" value="Enter Middle Name"/>	<b>Last Name *</b> <input type="text" value="Child Last"/>	<b>Suffix</b> <input type="text" value=""/>
<b>Ethnicity *</b> <input type="radio"/> Hispanic <input type="radio"/> Non-Hispanic <input checked="" type="radio"/> Not answered		<b>Gender *</b> <input type="radio"/> Male <input checked="" type="radio"/> Female	
<b>Race(s) *</b> <input type="checkbox"/> Asian <input type="checkbox"/> Hawaiian/Pacific <input type="checkbox"/> Black <input type="checkbox"/> Us Indian/Alaskan <input type="checkbox"/> White <input checked="" type="checkbox"/> Not Answered			
<b>DOB (mm/dd/yyyy) *</b> <input type="text" value="12/25/2011"/>	<b>SSN **</b> <input type="text" value="Enter SSN"/>	<b>Desired VPK Session *</b> <input type="text" value="School year (540 hours)"/>	<b>County for Services *</b> <input type="text" value="Leon"/>
<b>Primary Language</b> <input type="text" value="English"/>			
<b>Preferred Program Setting</b> <input type="text" value="Public school"/>			

Child admitted to kindergarten?\*  No    Yes

Has this child previously participated in a VPK program?\*  No    Yes

 CHILD AND PROGRAM INFORMATION

<b>First Name *</b> <input type="text" value="Child First"/>	<b>Middle Name</b> <input type="text" value="Enter Middle Name"/>	<b>Last Name *</b> <input type="text" value="Child Last"/>	<b>Suffix</b> <input type="text" value=""/>
<b>Ethnicity *</b> <input type="radio"/> Hispanic <input type="radio"/> Non-Hispanic <input checked="" type="radio"/> Not answered		<b>Gender *</b> <input type="radio"/> Male <input checked="" type="radio"/> Female	
<b>Race(s) *</b> <input type="checkbox"/> Asian <input type="checkbox"/> Hawaiian/Pacific <input type="checkbox"/> Black <input type="checkbox"/> Us Indian/Alaskan <input type="checkbox"/> White <input checked="" type="checkbox"/> Not Answered			
<b>DOB (mm/dd/yyyy)*</b> <input type="text" value="12/25/2011"/>	<b>SSN **</b> <input type="text" value="Enter SSN"/>	<b>Desired VPK Session *</b> <input type="text" value="School year (540 hours)"/>	
<b>Primary Language</b> <input type="text" value="English"/>		<b>County for Services *</b> <input type="text" value="Alachua"/>	
<b>Preferred Program Setting</b> <input type="text" value="Public school"/>		<b>Child admitted to kindergarten?*</b> No	
<b>Has this child previously participated in a VPK program?*</b> <input checked="" type="radio"/> No <input type="radio"/> Yes			

Enter a Case Note, documenting the application transfer from County A to County B, click the **Add Case Note** button and click the **Save Changes** button. NOTE: Once the county is changed, the original coalition will no longer have access to the application in the Coalition Services Portal.

 CASE NOTES

Submitted application was transferred from Leon County to Alachua County.

Last updated by jim.ledbetter@oel.myflorida.com at 6/24/2016 5:48:25 PM

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 Other records associated with userid

## VPK Reenrollment Applications

If the child **has** participated in VPK program hours, the Family Portal user needs to complete a reenrollment application.

To begin processing a VPK reenrollment application, select **Submitted** or **Reenrollment Submitted** from the VPK Application dropdown menu.

The following screen will display for the selected reenrollment application. Each screen can be expanded by clicking on the row. In this example, the child is reenrolling to another coalition.

**VPK Reenrollment Application For Jim Ledbetter JR**

Confirmation Number (COE): VPKRE449-2017      Current Application Status: Reenrollment Submitted      Program Year: 2017-2018

Reenrollment Application

Application Info		Coalition Review	
Last County of Enrollment	Leon	Child's total VPK instructional hours used	<input type="text"/>
Last VPK Provider Name	Jim's House of Notes	Total hours remaining	<input type="text"/>
Is the child still attending the VPK provider?	No (answered on 03/22/2017)	Has the child substantially completed the VPK program?	<input type="text"/>
County of Reenrollment	Alachua	Last VPK Provider Name	Jim's House of Notes
Has the child ever reenrolled in VPK?	No	Is the child currently attending a VPK provider?	<input type="radio"/> Yes <input type="radio"/> No
Selected VPK reenrollment program type	School-year (540 hours) to School-year (540 hours)	Class ID of previous provider(s)	<input type="text"/>
Reenrollment into a subsequent program year	No	Child's last day attended with previous provider	MM/DD/YYYY
Reason for reenrollment	Primary reenrollment due to good cause - H. The provider's designation as a provider on probation under section 1002.67, Florida Statutes	Documentation requirement satisfied?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
Documentation Provided	N/A	<input type="button" value="Save"/> <input type="button" value="Initiate Transfer"/> <input type="button" value="Reject"/> <input type="button" value="Set Coalition Reviewing"/>	

[Reenrollment Application \(VPK05 Pdf\)](#)

Original VPK Application

Child Info

Parent or Guardian Info

Case Notes

Other Records Associated with this User

**VPK Reenrollment Application For Jim Ledbetter JR**

Confirmation Number (COE): VPKRE449-2017      Current Application Status: Reenrollment Submitted      Program Year: 2017-2018

Reenrollment Application

Original VPK Application

Original VPK Application (VPK01 Pdf)    Original Certificate of Eligibility (VPK02 Pdf)

Child Info

Parent or Guardian Info

Case Notes

Other Records Associated with this User



**VPK Reenrollment Application For Jim Ledbetter JR**

Confirmation Number (COE): VPKRE449-2017      Current Application Status: Reenrollment Submitted      Program Year: 2017-2018

- Reenrollment Application >
- Original VPK Application >
- Child Info >
- Parent or Guardian Info >
- Case Notes >
- Other Records Associated with this User v

Application Type	Confirmation Number	Link
VPK	VPK449-2017	<a href="#">View</a>

The Coalition Review screen allows a coalition user to input the number of VPK instructional hours paid. The system will calculate the number of hours remaining. Only applications with 70% or fewer hours paid are eligible for reenrollment. See examples below.

**Coalition Review**

Child's total VPK instructional hours used * ⓘ	<input type="text" value="100"/>
Total hours remaining	440.00 Hours (Percent complete: 18.51%)
Has the child substantially completed the VPK program?	No ✓ Eligible for Reenrollment
Last VPK Provider Name *	<input type="text" value="Jim's House of Noles"/>
Is the child currently attending a VPK provider? *	<input type="radio"/> Yes <input type="radio"/> No
Class ID of previous provider(s) *	<input type="text"/>
Child's last day attended with previous provider *	<input type="text" value="MM/DD/YYYY"/>
Documentation requirement satisfied? *	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A

Coalition Review

Child's total VPK instructional hours used * ⓘ	400
Total hours remaining	140.00 Hours (Percent complete: 74.07%)
Has the child substantially completed the VPK program?	Yes ❌ Not Eligible for Reenrollment
Last VPK Provider Name *	Jim's House of Noles
Is the child currently attending a VPK provider? *	<input type="radio"/> Yes <input type="radio"/> No Please select Yes or No
Class ID of previous provider(s) *	 Class ID is required
Child's last day attended with previous provider *	MM/DD/YYYY Child's last day attended with previous provider is required
Documentation requirement satisfied? *	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A

Coalition Review

Child's total VPK instructional hours used * ⓘ	100
Total hours remaining	440.00 Hours (Percent complete: 18.51%)
Has the child substantially completed the VPK program?	No ✅ Eligible for Reenrollment
Last VPK Provider Name *	Jim's House of Noles
Is the child currently attending a VPK provider? *	<input checked="" type="radio"/> Yes <input type="radio"/> No
Class ID of previous provider(s) *	Apple
Child's last day attended with previous provider *	03/07/2017
Documentation requirement satisfied? *	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A

If the child is eligible for reenrollment, the coalition user must check the required fields and click the **Initiate Transfer** button to send the application to the receiving coalition.

The receiving coalition will determine if the documentation requirement has been met. If the reenrollment application is approved by the receiving coalition, the coalition user will click the **Approve** button.

VPK Reenrollment Application For Jim Ledbetter JR

Confirmation Number (COE): VPKRE449-2017      Current Application Status: Reenrollment Transfer Submitted      Program Year: 2017-2018

Reenrollment Application

Application Info		Coalition Review	
Last County of Enrollment	Leon	Child's total VPK instructional hours used	100
Last VPK Provider Name	Jim's House of Noles	Total hours remaining	440.00 Hours (Percent complete: 18.51%)
Is the child still attending the VPK provider?	No (answered on 03/22/2017)	Has the child substantially completed the VPK program?	No <input checked="" type="checkbox"/> Eligible for Reenrollment
County of Reenrollment	Alachua	Last VPK Provider Name	Jim's House of Noles
Has the child ever reenrolled in VPK?	No	Is the child currently attending a VPK provider?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (answered on 03/22/2017)
Selected VPK reenrollment program type	School-year (540 hours) to School-year (540 hours)	Class ID of previous provider(s)	Apple
Reenrollment into a subsequent program year	No	Child's last day attended with previous provider	03/07/2017
Reason for reenrollment	Primary reenrollment due to good cause - H. The provider's designation as a provider on probation under section 1002.67, Florida Statutes	Documentation requirement satisfied?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Documentation Provided	N/A	<input type="button" value="Save"/> <input checked="" type="button" value="Approve"/> <input type="button" value="Reject"/> <input type="button" value="Set Coalition Reviewing"/>	

[Original VPK Application](#) | 
 [Child Info](#) | 
 [Parent or Guardian Info](#) | 
 [Case Notes](#) | 
 [Other Records Associated with this User](#)

After the reenrollment application is approved, the child can be enrolled by clicking the **Enrolled** button.

VPK Reenrollment Application For Jim Ledbetter JR

Confirmation Number (COE): VPKRE449-2017      Current Application Status: Reenrollment Approved      Program Year: 2017-2018

Reenrollment Application

Application Info		Coalition Review	
Last County of Enrollment	Leon	Child's total VPK instructional hours used	100
Last VPK Provider Name	Jim's House of Noles	Total hours remaining	440.00 Hours (Percent complete: 18.51%)
Is the child still attending the VPK provider?	No (answered on 03/22/2017)	Has the child substantially completed the VPK program?	No <input checked="" type="checkbox"/> Eligible for Reenrollment
County of Reenrollment	Alachua	Last VPK Provider Name	Jim's House of Noles
Has the child ever reenrolled in VPK?	No	Is the child currently attending a VPK provider?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Selected VPK reenrollment program type	School-year (540 hours) to School-year (540 hours)	Class ID of previous provider(s)	Apple
Reenrollment into a subsequent program year	No	Child's last day attended with previous provider	03/07/2017
Reason for reenrollment	Primary reenrollment due to good cause - H. The provider's designation as a provider on probation under section 1002.67, Florida Statutes	Documentation requirement satisfied?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Documentation Provided	N/A	<input type="button" value="Attach Signed COE"/> <input checked="" type="button" value="Enrolled"/> <input type="button" value="Re-open"/> <input type="button" value="Inactivate"/>	

[Original VPK Application](#) | 
 [Child Info](#) | 
 [Parent or Guardian Info](#) | 
 [Case Notes](#) | 
 [Other Records Associated with this User](#)

If the reenrollment application is rejected, the coalition user will click the **Reject** button.

VPK Reenrollment Application For Jim Ledbetter JR

Confirmation Number (COE): VPKRE449-2017      Current Application Status: Reenrollment Transfer Submitted      Program Year: 2017-2018

Reenrollment Application

Application Info		Coalition Review	
Last County of Enrollment	Leon	Child's total VPK instructional hours used	100
Last VPK Provider Name	Jim's House of Noles	Total hours remaining	440.00 Hours (Percent complete: 18.51%)
Is the child still attending the VPK provider?	No (answered on 03/22/2017)	Has the child substantially completed the VPK program?	No <input checked="" type="checkbox"/> Eligible for Reenrollment
County of Reenrollment	Alachua	Last VPK Provider Name	Jim's House of Noles
Has the child ever reenrolled in VPK?	No	Is the child currently attending a VPK provider?	<input checked="" type="radio"/> Yes <input type="radio"/> No (answered on 03/22/2017)
Selected VPK reenrollment program type	School-year (540 hours) to School-year (540 hours)	Class ID of previous provider(s)	Apple
Reenrollment into a subsequent program year	No	Child's last day attended with previous provider	03/07/2017
Reason for reenrollment	Primary reenrollment due to good cause - H. The provider's designation as a provider on probation under section 1002.67, Florida Statutes	Documentation requirement satisfied?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
Documentation Provided	N/A		

[Original VPK Application](#) [Child Info](#) [Parent or Guardian Info](#) [Case Notes](#) [Other Records Associated with this User](#)

After clicking the **Reject** button, the coalition user will select the rejection reason and fill in the comments section.

Reject VPK Reenrollment Application For Jim Ledbetter JR

Confirmation Number (COE): VPKRE449-2017      Current Application Status: InActive      Program Year: 2017-2018

Select the issue(s) identified with the application for Jim Ledbetter JR. An email will be sent to ledbetter.kiwanis-4@gmail.com.

- Documentation does not match the reason for reenrollment request
- Additional documentation is needed
- Incorrect selection(s)
- Other

Please select at least one reason

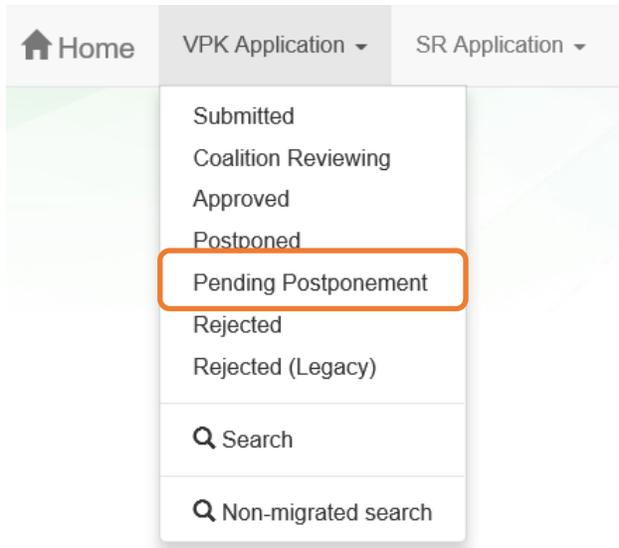
Comments: 500 Characters Remaining

## VPK Program Year Postponement Process

If a child's date of birth is between Feb. 2 and Sept. 1, parents have the option to select the current VPK program year or postpone enrollment until a future VPK program year.

### Processing Postponements

**Pending Postponement** applications are existing **Approved** applications where the parent has requested to postpone VPK for a different VPK program year than the original application. The coalition user must take action on the parent's request. Coalition users can click **Pending Postponement** from the work queues dropdown menu to do a quick search.



Child Name	Confirmation ID/COE Number	Parent Name	Original Submission Date ↓	Application Status
<a href="#">Stevens, Suzie Q</a>	VPK272-2016	Stevens, Martin A	6/29/2016	Pending Postponement
<a href="#">Hooley, Yada Yada</a>	VPK250-2016	Stevens, Martin A	6/24/2016	Pending Postponement
<a href="#">Stevens, Kiddo</a>	VPK238-2016	Stevens, Martin A	6/23/2016	Pending Postponement
<a href="#">Lincoln, Andrew</a>	VPK232-2016	Stevens, Martin A	6/23/2016	Pending Postponement

Coalition users must click the **Approve Postponement** or **Reject Postponement** button after determining the child has not used VPK hours in the coalition service area.

The screenshot shows a web interface for managing residential address and VPK records. On the left, there is a 'Residential Address' section with fields for 'Address Line One \*' (containing '123 Main St'), 'Address Line Two' (with a placeholder 'Enter Address'), 'City \*' (containing 'Tallahassee'), 'County \*' (containing 'Leon'), 'Zip Code \*' (containing '31231'), and 'State' (containing 'FLORIDA'). Below this is a 'Proof-of-Residence Documentation' section with a checked checkbox for 'PoR.txt', a 'View' button, an 'Action...' dropdown, and an 'Add Document' button. On the right, there is a 'Status Records' section with an 'Add Case Note' button and a timestamp 'Last updated by oel.fp.qa+UAT01@gmail.com at 6/22/2016 1:17:58 AM'. Below that is a section for 'Other records associated with user id' containing a table of VPK records for years 2016 and 2015. At the bottom, there are three buttons: 'Save Changes', 'Approve Postponement', and 'Reject Postponement'. The 'Approve Postponement' and 'Reject Postponement' buttons are highlighted with an orange box.

If the coalition user approves the postponement, the application status will change to **Postponed** on the Family Profile, and the parent will receive an email from **DONOTREPLY@oel.myflorida.com**.

#### Email Message:

Hello sasd asd.

Your request to postpone VPK for Test5 Test has been approved.

The 2017 - 2018 program year *Certificate of Eligibility* for your child will be available on January 1, 2017. Beginning on this date you will be able to log on to your account at <https://familyservicesuat.floridaearlylearning.com> to print or download the *Certificate of Eligibility* for your child.

If your child has already attended or completed VPK, please contact the early learning coalition at the number below, as it impacts your child's eligibility. Please keep in mind your child cannot attend VPK once he or she has been admitted to kindergarten.

If you need assistance, please contact your early learning coalition at the link below.

Thank you,  
ELC of Northwest Florida  
(850) 747-5400  
<http://www.elcnwf.org/>

**Please do not reply to this message. Replies to this message are routed to an unmonitored mailbox. If you have questions, please contact your [early learning coalition](#).**

If the coalition user rejects the postponement, the user must select the checkbox for the appropriate rejection reason(s), enter a comment and click the **Send Response** button. The comment will appear in the auto-generated email from **DONOTREPLY@oel.myflorida.com** to the parent.

## Reject VPK Application

Select the issue identified with the postponement for Ruby Rose. An email will be sent to marybaker@elcpolk.org.

- Child attended VPK (more than 70 percent)
- Reenrollment needed, child attended VPK (less than 70 percent)
- Parent indicated child has been admitted to kindergarten
- Request for VPK SIS, parent did not provide current IEP

Comments:

Send Response

The application status will be set to **Approved**, and the parent will receive an email from **DONOTREPLY@oel.myflorida.com**.

### Email Message:

Hello sasd asd.

Your request to postpone VPK to the 2017 - 2018 program year for sdf sdf was not approved for the following reason:

Child attended VPK (more than 70 percent)

<https://familyservicesuat.floridaearlylearning.com>

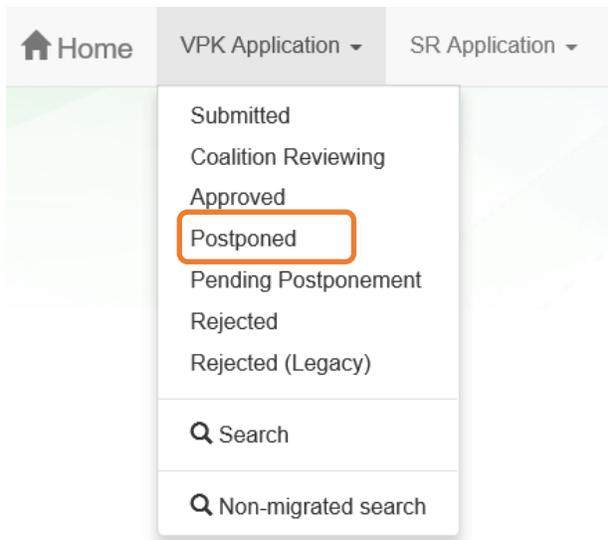
If you need assistance, please contact your early learning coalition at the link below.

Thank you,  
ELC of Brevard  
(321) 637-1800  
<http://www.elcbrevard.org/>

**Please do not reply to this message. Replies to this message are routed to an unmonitored mailbox. If you have questions, please contact your [early learning coalition](#).**

### Postponed Applications

**Postponed** applications are postponement requests the coalition user approved before the requested VPK program year application became available. Certificates of Eligibility for **Postponed** applications will become available for the parent after Jan. 1 of the selected VPK program year. The coalition user does not need to take action, but the application is viewable. Coalition users can click **Postponed** from the work queues dropdown menu to do a quick search.



**Postponed** applications can be inactivated following the same process as a standard VPK application.



# Guardianship Transfer

## Rules Overview

1. The Guardianship Transfer process is designed to only transfer children that have a School Readiness (SR) Eligibility Assignment and/or VPK Enrollment.
  - a. The child must exist in EFS-Mod
  - b. The transfer process will not transfer a child that is on the SR Waiting List
  - c. The transfer process will not transfer a child that has an Approved VPK application
  - d. The records for an SR Waiting List and/or VPK Approved child must be made inactive in the old guardian's household and the new guardian is required to submit an application to enroll the child in the SR and/or VPK program
  - e. The ELC user is responsible for inactivating all child records in the associated applications for children that are to be transferred out of a household. The EFS-Mod system will not automatically terminate or inactivate a child record in an application in association with a guardianship transfer process.
2. If the new guardian does not exist in EFS-Mod, the ELC user is able to create the new guardian household within the Guardianship Transfer module by entering the required data elements to create a primary parent of a household. Once the new household is created, the new guardian can be searched for and selected for a transfer.
3. For SR, only the child's active eligibility authorization period and active eligibility assignment will be transferred to the new guardian's household. No SR child/provider enrollments will be transferred. The SR provider enrollment must be ended before the transfer will process.
  - a. When ending a child's enrollment in the guardianship transfer module, the ELC user must enter a past date. An enrollment cannot be ended on the same day a guardianship transfer is processed because it appears as though the old guardian is responsible for paying for an enrollment on a day that the child is no longer in their household.
4. For VPK, the child's provider enrollment will not be terminated. There will not be a break in service in order to avoid losing count of the child's accrued VPK hours. The child will remain enrolled with the VPK provider until the new guardian or ELC initiates a re-enrollment.
  - a. Only children with an enrollment status of **Enrolled** and **Enrollment Ended** will appear in the From Household transfer list
  - b. If the child is going through a classroom transfer (the VPK enrollment status is **Change Requested**) at the time that a guardianship transfer becomes necessary, the classroom transfer must be completed before the guardianship transfer can be completed
  - c. If the VPK enrollment status is **Enrollment Submitted**, the coalition must complete enrollment request before a guardianship transfer can be completed
  - d. If the VPK enrollment status is **Enrollment Rejected**, a guardianship transfer cannot be completed. The coalition must re-open the VPK application to inactivate it; the new family must create a new VPK application for the child
  - e. If the VPK enrollment status is **Enrollment Canceled**, a guardianship transfer cannot be completed. The coalition must re-open the VPK application to inactivate it; the new family must create a new VPK application for the child
  - f. If the VPK enrollment status is **Coalition Reviewing** at the time that a guardianship transfer becomes necessary, the coalition must complete the enrollment request before the guardianship transfer can be completed
5. In the Guardianship Transfer process, only one child can be transferred from a household at a time.
  - a. If a child is enrolled in both the SR program and the VPK program, that child will display as two separate children in the transfer list. That child's records will have to be transferred individually.
    - i. This may not be the case in situations where the coalition has merged the child's VPK and SR records into one person record for the child. In that case, the child will only be listed once in the transfer list.
  - b. Siblings that are being transferred to a new guardian will have to be transferred individually

6. When the guardianship transfer process is completed:
  - a. For VPK the old guardian will only see **Enrollment Ended** for the transferred child’s enrollment in the household. The old guardian will not have a view of the child’s new enrollments or documents in the new guardian’s household.
  - b. For SR the old guardian will not see the history of the child in their household
  - c. The new guardian will not see the history of the child’s enrollment in the old guardian’s household
  - d. The new guardian will not have access to view any of the documents from the old guardian’s household. The new guardian or the ELC must upload all required documentation for the child.
7. The Guardianship Transfer process allows a child to be transferred across coalitions. The county of the household to which the child is being transferred is used to identify the coalition that will receive the transferred SR eligibility/VPK enrollment.
8. Things To Come (Not Yet Developed):
  - a. Guardianship Transfer Work Queue

**NOTE:** With Release 4.5, the guardianship transfer process allows coalition users to identify the physical county of residence and families receiving RCMA services.

## Search for New Guardian and Transfer Child

After accessing the household dashboard, click the **Guardianship Transfer** button.

The screenshot shows a web interface for a household dashboard. At the top right, there is a header with the ID 'HH\_000982221'. Below the header, there are three buttons: 'Guardianship Transfer' (highlighted with a red box), 'Case Notes', and 'Add Note'. The main content area is titled 'Household at a Glance...' and is divided into three sections:

- Family Information:**
  - Children:** NotCCAChild TestFamily (child, female, age 8), ThirdTestChild Waitlist TestFamily (child, female, age 8)
  - Parents:** Andrew Hennesse (adult, male)
  - Other Household Members:** (empty)
- Contact Information:**
  - Primary Address:** TestRoad, Tallahassee, Florida 32301, KREPS ISLAND County
  - Primary Parent:** Email: Cmoneyb2+798@gmail.com, Primary phone: (999) 999-9999
  - Family Portal Account:** Cmoneyb2+798@gmail.com
- SR Information:**
  - School Readiness Applications:** [Show All](#)
  - SR\_0000431699, Active - Pending Update

Verify that the child that is to be transferred is listed in the From Household window. For SR – Children have an eligibility authorization period. For VPK – Children are enrolled or their enrollment has been ended.

Click **Search Guardian**.

### Guardianship Transfer

**Details of New Selected Parent / Guardian \***

Parent ID	Parent Name	Parent DOB	County	City	ZipCode
-----------	-------------	------------	--------	------	---------

**Parent / Guardian relationship to child \***

**Transfer Reason \***

**Transferred As Of \***

**From Household:**

**To Household:**

>> <<

Enter the New Guardian Search Data: First Name, Last Name and DOB – click **Search**. Verify the Household ID and Household Status to confirm the correct guardian is selected. If correct, click the **OK** button.

### Search Guardian

Look for Guardians that match your desired search criteria.

**First Name \*** 
**Last Name** 
**Date Of Birth**

Select the desired guardian from the search results below.

**Search Results**

Choose Guardian/Parent

**SmokeTapp Testing, Household ID:1090256, Status : Active**

**Details of Selected Guardian Parent**

Parent ID	Parent Name	Parent DOB	County	City	ZipCode
3347371	SmokeTapp Testing	3/21/2001	KREPS ISLAND	Tallahassee	32301

Verify the New Guardian is displayed in the New Selected Parent/Guardian section. Select the child to transfer.

### Guardianship Transfer

**Details of New Selected Parent / Guardian \***

Parent ID	Parent Name	Parent DOB	County	City	ZipCode
3347371	SmokeTapp Testing	3/21/2001	KREPS ISLAND	Tallahassee	32301

**Parent / Guardian relationship to child \***

**Transfer Reason \***

**Transferred As Of \***

From Household: 982221

To Guardianship: 1090256

Click the move >> button to place the child into the To Household section. Complete the **Transfer Reason** and **Transferred As Of** date fields.

## Guardianship Transfer

**Details of New Selected Parent / Guardian \***

Parent ID	Parent Name	Parent DOB	County	City	ZipCode
3347371	SmokeTapp Testing	3/21/2001	KREPS ISLAND	Tallahassee	32301

**Parent / Guardian relationship to child \***

**Transfer Reason \***

**Transferred As Of \***

From Household: 982221

To Guardianship: 1090256

If the child's SR enrollments have not been ended prior to the start of the guardianship transfer, the End Enrollment screen will be displayed to allow the user to end the enrollment. Click the **End Enrollment** button.

## End Enrollment

### Enrollments

End Enrollment for Child 3009172 at this Provider Kim's Test Daycare - Child Enrollment Status : Enrolled

<b>Provider Name:</b> Kim's Test Daycare	<b>Provider ID:</b> 19448 <a href="#">View Profile</a>
<b>Contact Phone:</b> (850) 555-5555	<b>Contact Email:</b> trokekim+prov1dir@gmail.com
<b>Location:</b> 2305 HOME CT TALLAHASSEE, 32303 KREPS ISLAND County	<b>Parent Fee (Copay):</b> 3.74
<b>Enrollment Start Date:</b> 12/9/2018	<b>Enrollment End Date:</b> N/A
<b>First Attendance Date:</b> N/A	<b>Last Attendance Date:</b> N/A

Fill in the required fields and click **Save**. Once the enrollment is ended, a popup window will display stating: Enrollment Ended for this Child Successfully.

**End Enrollment**

End Enrollment Reason\* 53-Guardianship Change

Last Day of Service\* 04/01/2019

Is there a past due parent fee?\*  Yes  No

Past due parent fee amount \$

Is there a payment plan in place?  Yes  No

Please attach payment plan document. Browse...

Save Close

End Enrollment for Child 3009172 at this Provider

Provider Name: Growing Up Strong  
 Contact Phone: (555) 555-5555  
 Location: 205 MARRIOTT DR  
 TALLAHASSEE, 32301  
 KREPS ISLAND County  
 Enrollment Start Date: 12/9/2018  
 First Attendance Date: N/A

Enrollment End Date: N/A  
 Last Attendance Date: N/A

OK

Cancel End Enrollment

Close

Click the child name in the To Household window and click the **Complete Transfer** button. Once the transfer is completed, a popup window will display stating: Child has transferred to new household successfully.

## Guardianship Transfer

Search Guardian

Add Guardian

### Details of New Selected Parent / Guardian\*

Parent ID	Parent Name	Parent DOB	County	City	ZipCode
3347371	SmokeTapp Testing	3/21/2001	KREPS ISLAND	Tallahassee	32301

Parent / Guardian relationship to child\*

Guardian

Transfer Reason\*

53-Guardianship Change

Transferred As Of\*

04/0

From Household: 982221

ThirdTestChild TestFamily, DOB: 06/26/20

01/2011, Person II

Message from webpage

 Child has transferred to new household successfully.

OK

Complete Transfer

Close

When the household dashboard refreshes, the child will be removed from the household.

HH\_000982221

Guardianship Transfer Case Notes Add Note

### Household at a Glance...

#### Family Information

##### Children

ThirdTestChild Waitlist TestFamily (child, female, age 8)

##### Parents

Andrew Hennesse (adult, male)

##### Other Household Members

#### Contact Information

##### Primary Address

TestRoad  
Tallahassee, Florida 32301  
KREPS ISLAND County

##### Primary Parent

Email: Cmoneyb2+798@gmail.com  
Primary phone: (999) 999-9999

##### Family Portal Account

Cmoneyb2+798@gmail.com

#### SR Information

##### School Readiness Applications [Show All](#)

SR\_0000431699, Active - Pending Update

Click **Case Notes** to view the new household case note.

Household Case Notes							
Date	Code	Custom Code	Event	Description	Notes	User	
4/24/2019 6:03:16 PM	TRANSFER		Guardianship Transfer: Children Transferred between Households	Transferred Person 3009172 from Old Household 982221 to New Household 1090256 Transferred As of Date 4/1/2019		jim.ledbetter@oel.myflorida.com	
4/24/2019 6:03:16 PM	TRANSFER		Due to Guardianship Transfer: Children removed from HouseHold	Household Status changed to Coalition Revieweing		jim.ledbetter@oel.myflorida.com	

Search for the child that was removed from the household.

Search For A School Readiness Eligibility Verification

Eligibility Verification Number	<input type="text"/>	Priority	<input type="text" value="Select One"/>
Household Process Code	<input type="text"/>	Funding Type	<input type="radio"/> SR <input type="radio"/> Local <input type="button" value="↺"/>
Household Status Code	<input type="text"/>	CCAA	<input type="radio"/> Yes <input type="radio"/> No <input type="button" value="↺"/>
Child Status Code	<input type="text"/>	Assigned Counselor	<input type="text" value="Select One"/>
Include Past Due?	<input type="radio"/> Yes <input type="radio"/> No <input type="button" value="↺"/>	Assigned Date	<input type="text" value="MM/DD/YYYY"/> to <input type="text" value="MM/DD/YYYY"/>
Parent Name	First Name: <input type="text" value="Enter Parent First Name"/> Last Name: <input type="text" value="Enter Parent Last Name"/>	County	<input type="text" value="Select One"/>
Child Name	First Name: <input type="text" value="NotCCAAChild"/> Last Name: <input type="text" value="TestFamily"/>	Zip Code	<input type="text"/>
Child Age	<input type="text"/> to <input type="text"/>	Last Updated Date	<input type="text" value="MM/DD/YYYY"/> to <input type="text" value="MM/DD/YYYY"/>
Child Date of Birth	<input type="text" value="MM/DD/YYYY"/> to <input type="text" value="MM/DD/YYYY"/>	Coalition Transfer	<input type="radio"/> Requested <input type="radio"/> In <input type="radio"/> Out <input type="button" value="↺"/>
		Family Requested for Provider Transfer	<input type="radio"/> Yes <input type="radio"/> No <input type="button" value="↺"/>

The child shows up in the search results in the new guardian household. Click the EV number.

Search Results

[Click Here For Filtering Tips](#)

Show 10 search results.   Search:

Eligibility Verification Number	Child Name	Assigned Counselor	Date of Birth	Age	Parent Name	SR Process	SR Status	Days in SR Status	SR Status Change Date	Child Status	Billing Group	Eligibility Code	Priority	Assign
<input type="text" value="EV_0000313362"/>	NotCCAAChild TestFamily	Unassigned	02/01/2011	8	SmokeTapp Testing	Update	Coalition Reviewing	0	04/24/2019	Eligible	BG8	ECON	1	N/A

The child is now in the new household with their authorization period from the old household. Click **Case Notes** in the new household to verify the child was moved successfully.

**Household at a Glance...** HH\_0001090235

<p><b>Children Needing Care</b></p> <p>BabTapper SmokeTesting (child, male, age 1)          Jude Davis (child, female, age 1)          NotCCAAChild TestFamily (child, female, age 8)</p> <p>Total Household Size: 4</p>	<p><b>Parents</b></p> <p>SmokeTapp Testing (adult, male)</p>	<p><b>Other Household Members</b></p>	<p><b>Total Household Income Calculations</b></p> <p>Employment income: \$0          Alimony and child support income: \$0          Other income: \$0          Alimony and child support deductions: \$0          Total annual gross income: \$0</p>
--	--	---------------------------------------	--

**Contact Information**

<p><b>Primary Address</b></p> <p>the road          Tallahassee, Florida 32301          KREPS ISLAND County</p>	<p><b>Primary Parent</b></p> <p>Email: Not On File          Primary phone: (999) 999-9999</p>	<p><b>Family Portal Account</b></p> <p>Account Not Found</p>	<p>History</p> <p>Update Account</p> <p>Edit</p>
--	---	--	--

**Children Needing Care**

<p><b>Jude Davis (child, female, age 1)</b> <span style="float: right;">History</span></p> <p><b>Eligibility status:</b> Eligible <span style="float: right;">Change Status</span></p> <p><b>Enrollment status:</b> Not Enrolled</p> <p><b>Date of birth:</b> 03/01/2018</p> <p><b>Ethnicity:</b> Hispanic</p> <p><b>Races:</b> Black, White</p> <p><b>Care days:</b> Monday, Thursday, Saturday</p> <p><b>Care types:</b> Parttime, Before School</p> <p><b>Citizenship:</b> US Citizen or Qualified Alien</p> <p><b>Age verification:</b> Verified</p> <p><b>Medicaid eligibility:</b> Not eligible</p> <p><b>Current authorization period:</b> 06/21/2018 - 06/19/2019</p> <p><b>Allow Developmental Screening:</b> Yes</p> <p><b>Person ID:</b> 3009169</p> <p><b>Eligibility verification ID:</b> EV_0000259682</p> <p>Required information is missing or invalid.</p> <p style="text-align: right;">Eligibility</p> <p style="text-align: right;">Edit</p>	<p><b>BabTapper SmokeTesting (child, male, age 1)</b> <span style="float: right;">History</span></p> <p><b>Eligibility status:</b> Eligible <span style="float: right;">Change Status</span></p> <p><b>Enrollment status:</b> Enrolled</p> <p><b>Date of birth:</b> 01/09/2018</p> <p><b>Ethnicity:</b> Hispanic</p> <p><b>Races:</b> Asian</p> <p><b>Care days:</b> Thursday and Friday</p> <p><b>Care types:</b> (no care types selected)</p> <p><b>Citizenship:</b> Unknown</p> <p><b>Age verification:</b> Unknown</p> <p><b>Medicaid eligibility:</b> Unknown</p> <p><b>Current authorization period:</b> 12/09/2018 - 12/08/2019</p> <p><b>Allow Developmental Screening:</b> No</p> <p><b>Person ID:</b> 3347372</p> <p><b>Eligibility verification ID:</b> EV_0000259677</p> <p>Required information is missing or invalid.</p> <p style="text-align: right;">Eligibility</p> <p style="text-align: right;">Enrollments</p> <p style="text-align: right;">Edit</p>
<p><b>NotCCAAChild TestFamily (child, female, age 8)</b> <span style="float: right;">History</span></p> <p><b>Eligibility status:</b> Eligible <span style="float: right;">Change Status</span></p> <p><b>Enrollment status:</b> Not Enrolled</p> <p><b>Date of birth:</b> 02/01/2011</p> <p><b>Ethnicity:</b> Non-Hispanic</p> <p><b>Races:</b> Hawaiian / Pacific, Black</p> <p><b>Care days:</b> Monday and Tuesday</p> <p><b>Care types:</b> Parttime</p> <p><b>Citizenship:</b> Unknown</p> <p><b>Age verification:</b> Unknown</p> <p><b>Medicaid eligibility:</b> Unknown</p> <p><b>Current authorization period:</b> 06/30/2018 - 06/29/2019</p> <p><b>Allow Developmental Screening:</b> Yes</p> <p><b>Person ID:</b> 3009172</p> <p><b>Eligibility verification ID:</b> EV_0000313362</p> <p>Required information is missing or invalid.</p> <p style="text-align: right;">Eligibility</p> <p style="text-align: right;">Edit</p>	

**Household Case Notes**

Show 10 entries Search:

Date	Code	Custom Code	Event	Description	Notes	User
4/24/2019 6:03:16 PM	TRANSFER		Guardianship Transfer: Children Added to new HouseHold	Child (TestFamily, NotCCAAChild) added to New Household 1090256 Transferred As of Date 4/1/2019		jim.ledbetter@oel.myflorida.com
4/24/2019 6:03:16 PM	TRANSFER		Due to Guardianship Transfer: Children added to HouseHold	Household Status changed to Coalition Revieweing		jim.ledbetter@oel.myflorida.com

Click the **Eligibility** button to verify the child's eligibility is still intact.

**Household at a Glance...** (HH\_0001090256)

<p><b>Children Needing Care</b></p> <p>BabTapper SmokeTesting (child, male, age 1)          Jude Davis (child, female, age 1)          NotCCAAChild TestFamily (child, female, age 8)</p> <p>Total Household Size: 4 </p>	<p><b>Parents</b></p> <p>SmokeTapp Testing (adult, male)</p>	<p><b>Other Household Members</b></p>
---	--	---------------------------------------

**Total Household Income Calculations**

Employment income: \$0  
 Alimony and child support income: \$0  
 Other income: \$0  
 Alimony and child support deductions: \$0  
 Total annual gross income: \$0

**Contact Information**

<p><b>Primary Address</b></p> <p>the road          Tallahassee, Florida 32301          KREPS ISLAND County</p>	<p><b>Primary Parent</b></p> <p>Email: Not On File          Primary phone: (999) 999-9999</p>	<p><b>Family Portal Account</b></p> <p>Account Not Found</p>
--	---	--

**Children Needing Care**

<p><b>Jude Davis (child, female, age 1)</b> <span style="color: blue; text-decoration: underline;">Change</span></p> <p>Eligibility status: Eligible          Enrollment status: Not Enrolled          Date of birth: 03/01/2018          Ethnicity: Hispanic          Races: Black, White          Care days: Monday, Thursday, Saturday          Care types: Parttime, Before School          Citizenship: US Citizen or Qualified Alien          Age verification: Verified          Medicaid eligibility: Not eligible          Current authorization period: 06/21/2018 - 06/19/2019          Allow Developmental Screening: Yes          Person ID: 3009169          Eligibility verification ID: EV_0000259682</p> <p style="border: 1px solid red; padding: 2px;">Required information is missing or invalid.</p> <p style="text-align: right;"> <input type="button" value="History"/>  <input type="button" value="Change Status"/>  <input type="button" value="Eligibility"/> <input type="button" value="Edit"/> </p>	<p><b>BabTapper SmokeTesting (child, male, age 1)</b></p> <p>Eligibility status: Eligible          Enrollment status: Enrolled          Date of birth: 01/09/2018          Ethnicity: Hispanic          Races: Asian          Care days: Thursday and Friday          Care types: (no care types selected)          Citizenship: Unknown          Age verification: Unknown          Medicaid eligibility: Unknown          Current authorization period: 12/09/2018 - 12/08/2019          Allow Developmental Screening: No          Person ID: 3347372          Eligibility verification ID: EV_0000259677</p> <p style="border: 1px solid red; padding: 2px;">Required information is missing or invalid.</p> <p style="text-align: right;"> <input type="button" value="History"/>  <input type="button" value="Change Status"/>  <input type="button" value="Eligibility"/> <input type="button" value="Enrollments"/> <input type="button" value="Edit"/> </p>
<p><b>NotCCAAChild TestFamily (child, female, age 8)</b> <span style="color: blue; text-decoration: underline;">No Modification</span></p> <p>Eligibility status: Eligible          Enrollment status: Not Enrolled          Date of birth: 02/01/2011          Ethnicity: Non-Hispanic          Races: Hawaiian / Pacific, Black          Care days: Monday and Tuesday          Care types: Parttime          Citizenship: Unknown          Age verification: Unknown          Medicaid eligibility: Unknown          Current authorization period: 06/30/2018 - 06/29/2019          Allow Developmental Screening: Yes          Person ID: 3009172          Eligibility verification ID: EV_0000313362</p> <p style="border: 1px solid red; padding: 2px;">Required information is missing or invalid.</p> <p style="text-align: right;"> <input type="button" value="History"/>  <input type="button" value="Change Status"/>  <input style="border: 2px solid orange;" type="button" value="Eligibility"/> <input type="button" value="Edit"/> </p>	

**Eligibility**

Eligibility Assignments for NotCCAAChild TestFamily

Eligibility Code	Billing Group	Begin Date	End Date	Funding Agency ID (code, type, name)	Actions
<i>Current Authorization Period (06/30/2018 - 06/29/2019)</i>					
ECON	BG8	06/30/2018	06/29/2019	Any	<input type="button" value="View"/>

**Current Eligibility Map**

**Current Authorization Period**  
 06/30/2018 - 06/29/2019

**Eligibility Assignment**  
 ECON BG8  
 06/30/2018 - 06/29/2019

## Add New Guardian

Click **Add Guardian**.

**Guardianship Transfer**

Search Guardian **Add Guardian**

**Details of New Selected Parent / Guardian \***

Parent ID	Parent Name	Parent DOB	County	City	ZipCode
-----------	-------------	------------	--------	------	---------

Parent / Guardian relationship to child\*

Transfer Reason\*

From Household:  
ThirdTestChild TestFamily, DOB: 06/26/2010, Person ID  
NotCCAACHild TestFamily, DOB: 02/01/2011, Person ID

To Household:

Complete Transfer Close

The Add Guardian screen displays. Fill in the required fields and click **Save**.

**Add Guardian**

First Name\*

Middle Name

Last Name\*

Date of Birth\*

Email Address\*

SSN

Ethnicity\*  Hispanic  Non-Hispanic  Prefer not to answer

Races (select all that apply)\*  Asian  Hawaiian / Pacific  Black  US Indian / Alaskan  White  Prefer not to answer

Gender\*  Male  Female

Marital Status

Address Line1\*

AddressLine2

City\*

County\*

State\*

Zip Code\*

Contact Number\*

Save Close

After clicking **Save**, a confirmation message displays: Added New Parent/Guardian Successfully. Click **OK**.

The screenshot shows a web browser window with a tab titled "Coalition Admin Logi". The main content area is a form titled "Add Guardian". A modal dialog box is open, displaying the message "coalitionservices.floridaearlylearning.com says Added New Parent/Guardian Successfully." with an "OK" button highlighted by a red rectangle. The form fields are as follows:

First Name*	NewTest
Middle Name	J
Last Name*	ParentGTX
Date of Birth*	11/15/1982
Email Address*	PGTXTestEmail@gmail.com
SSN	
Ethnicity*	<input type="radio"/> Hispanic <input checked="" type="radio"/> Non-Hispanic <input type="radio"/> Prefer not to answer
Races (select all that apply)*	<input type="checkbox"/> Asian <input checked="" type="checkbox"/> Hawaiian / Pacific <input type="checkbox"/> Black <input type="checkbox"/> US Indian / Alaskan <input type="checkbox"/> White <input type="checkbox"/> Prefer not to answer
Gender*	<input type="radio"/> Male <input checked="" type="radio"/> Female
Marital Status	Select ▼
Address Line1*	123 Avenue
AddressLine2	
City*	Tallahassee
County*	MATHISTOWN ▼
State*	Florida ▼
Zip Code*	32301
Contact Number*	8502011111

At the bottom right of the form, there are "Save" and "Close" buttons.

Search for the newly-added guardian and they appear in the search results.

### Search Guardian

Look for Guardians that match your desired search criteria.

**First Name\***

**Last Name**

**Date Of Birth**

Select the desired guardian from the search results below.

#### Search Results

- Choose Guardian/Parent --
- NewTest ParentGTX, Household ID:1090260, Status : null**

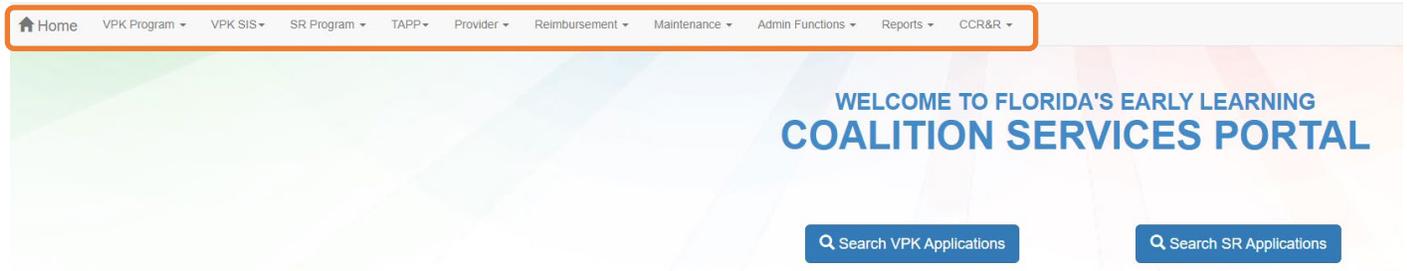
#### Details of Selected Guardian Parent

Parent ID	Parent Name	Parent DOB	County	City	ZipCode
3347387	NewTest ParentGTX	11/15/1982	MATHISTOWN	Tallahassee	32301

# PROVIDER PROCESSES

## Coalition Services Portal Main Page Navigation

The Navigation Bar is near the top of the page.



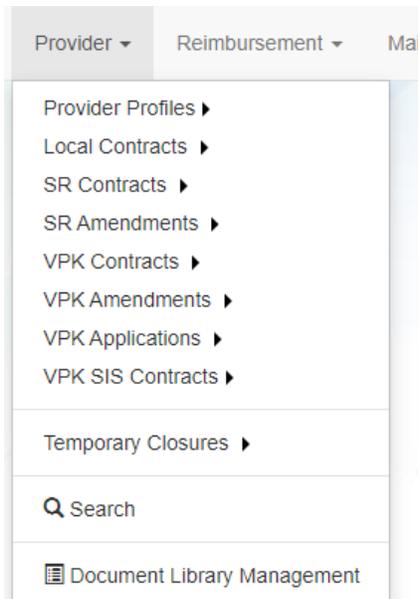
### Home Button

The **Home** button will take the coalition user to the Coalition Services Portal main page.



### Provider Menu

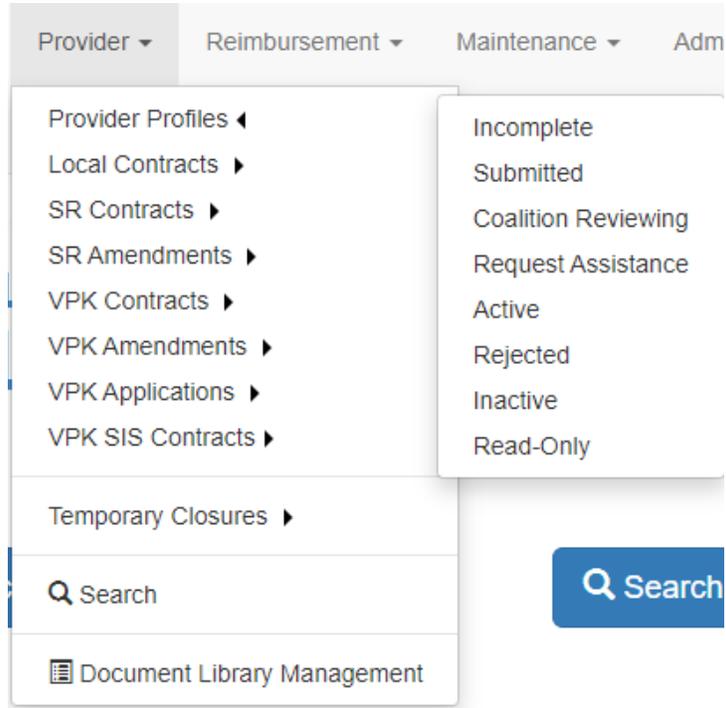
Clicking the **Provider** menu will activate the dropdown menu.



## Provider Profiles

Clicking **Provider Profiles** will display all possible provider profile statuses.

Click on a status to see all provider profiles with that status.



## Contracts & Amendments

The Contracts and Amendments functions allows a CP SR/VPK Contract Manager to view a list of provider contracts and provider contract amendments in the local early learning coalition service area.

## Temporary Closures

The Temporary Closures menu allows a CP Admin to view a list of Incomplete, Submitted, and Processed temporary closures from providers.

## Provider Search

The Search function allows a coalition user to quickly search for provider profiles.

**NOTE:** To ensure accurate searches, click the dropdown menu when changing search terms (business name, provider ID, etc.) or starting a new search. Do not use the **Back** button on the internet browser.

Q Provider Search

Provider Type  VPK  SR  Local  CCR&R only  All

Coalitions  Just my coalition  All coalitions

Program Year

Principal ID

Principal Name

Profile Status

Doing Business As

Director's Name

Provider ID

Tax ID (FEIN or SSN)

Street Address

City

Registered County

License or Registration or Exempt or MSID

Coalition users can also search for providers outside of their coalition service area (select **All coalitions** radio button) and will have read-only access to that provider profile. A provider may want to contract with multiple coalitions, so before the contract is certified, a coalition can have read-only access to that potential provider's profile.

After the coalition user clicks the **Search** button, the following will display. To view the Administrative Review screen of the provider profile, the user will click the **Profile ID** link of the desired record.

Provider Search Results 78 Total Records

Show 10 entries ▾

First « 1 2 3 4 5 6 7 » Last

Provider ID	Profile ID	Registration Number	Program Year	Profile Status	Submitted Date	Doing Business As	Director Name	Tax ID	Principal Id	Principal Name	Street Address	Address Line2	City
21581	154407	exempt	2020 - 2021	Read-Only	03/30/2021	Debbie's Little Campers #2	Debbie Brown	88886432	16321	Debbie's Little Campers	130 MAIN ST		Tallahassee
21582	130397	OEL580151222	2020 - 2021	Read-Only		de Lugo's Test Daycare Center, LLC		OEL580151222	16322	de Lugo's Test Daycare Center, LLC	1222 Pine Hill RD.		Tallahassee
21621	158477	12234	2020 - 2021	Read-Only	04/29/2021	Shweta Fun house	Shweta Test	233	16346	Shweta Fun house	443 Glenmore Drive		Tallahassee
21621	180254	12234	2021 - 2022	Active	02/02/2022	Shweta Fun house	Shweta Test	233	16346	Shweta Fun house	443 Glenmore Drive		Tallahassee
22745	137782	56209	2020 - 2021	Read-Only	11/24/2020	Ventura Day School	Polly Avalos	654320	15662	Ventura Prod Provider Test 2	1 Shumark Oak Dr		Tallahassee
22745	158272	56209	2021 - 2022	Active	04/28/2021	Ventura Day School	Polly Avalos	654320	15662	Ventura Prod Provider Test 2	1 Shumark Oak Dr		Tallahassee
22745	177252	56209	2022 - 2023	Active	01/20/2022	Ventura Day School	Polly Avalos	654320	15662	Ventura Prod Provider Test 2	1 Shumark Oak Dr		Tallahassee
22947	143009	EXEMPT	2020 - 2021	Read-Only	01/28/2021	Emma's Stars	Jill Test	54654654654	16538	Emma's Stars	Capital Circle		tallahassee
22947	169082	EXEMPT	2021 - 2022	Active	08/30/2021	Emma's Stars	Jill Test	54654654654	16538	Emma's Stars	Capital Circle		tallahassee
22947	177255	EXEMPT	2022 - 2023	Incomplete		Emma's Stars	Jill Test	54654654654	16538	Emma's Stars	Capital Circle		tallahassee

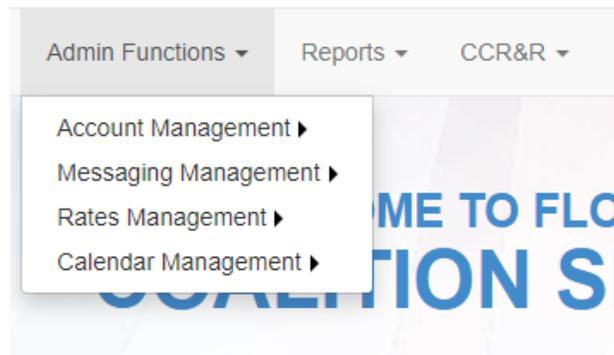
### Provider User Roles:

- [PP Admin](#):
- [PP User Manager](#): User managers can create, inactivate, and manage permissions.
- [PP Reimbursement Manager](#): Reimbursement Managers can manage reimbursement details and rates.
- [PP Document Manager](#): Document Managers can attach profile documents and manage the document library.
- [PP Attendance Manager](#): Attendance Managers can modify, review, and submit VPK and SR attendance rosters.
- [PP VPK Fast Manager](#): VPK Fast Managers provide access to external services available to users. This may include integration with third-party applications, external databases, or APIs, allowing users to interact with external data sources or services seamlessly.
- [PP Enrollment Manager](#): Enrollment Managers can manage VPK and SR Enrollments.
- [PP Report Viewer](#): Report Viewers can view provider-related reports.

### Document Library Management

The Document Library Management function allows a coalition user to review documents uploaded to the provider profile.

### Admin Functions Menu



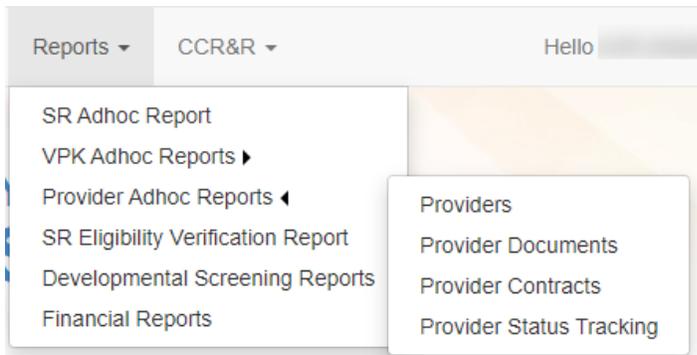
Admins will be able to do the following functions for providers:

- Account Management – Manage accounts for providers within the coalition service area.
- Messaging management – Send messages to individual providers, providers based on services (SR, VPK, CCR&R) or all providers in the coalition service area.
- Rates management – Manage SR and VPK rates.
- Calendar Management – Set reimbursable closure days and school calendars for providers within the coalition service area.

**NOTE:** Only CP Admin or DEL admin users will be able to view and access the Admin Functions menu.

## Reports Menu

Clicking the Reports menu will display the list of available reports.



Adhoc Report For Provider

**Provider Type**  VPK  SR  Local  CCR&R only  All

**Coalitions**  Just my coalition  All coalitions

**Program Year**

**Principal ID**

**Principal Name**

**Profile Status**

**Doing Business As**

**Director's Name**

**Provider ID**

**Tax ID (FEIN or SSN)**

**Street Address**

**City**

**Registered County**

**License or Registration or Exempt or MSID**

**ADHOC Report For Provider Documents**

Provider Name  Folder Name   
 File Name  File Description   
 Uploaded On  MM/DD/YYYY to  MM/DD/YYYY Expires In  90 Days  60 Days  30 Days  Expired  
 Valid On  MM/DD/YYYY to  MM/DD/YYYY Expires On  MM/DD/YYYY to  MM/DD/YYYY  
 Verified Documents  Only Archived Documents  Included  
 Verified By  Verified On  MM/DD/YYYY to  MM/DD/YYYY

**ADHOC Report For Provider Contracts**

**Coalitions**  Just my coalition  All coalitions  
**Contract Type**  VPK  VPK/SIS  SR  Local  All  
**Contract Status**    
**Doing Business As**   
(starts with)  
**Provider ID**   
**Contract Start Date**  MM/DD/YYYY to  MM/DD/YYYY  
**Contract End Date**  MM/DD/YYYY to  MM/DD/YYYY  
**Contract Expires In**  90 Days  60 Days  30 Days  Expired  
**Contract Termination Date**  MM/DD/YYYY to  MM/DD/YYYY

The Provider Status Tracking Adhoc Report generates a report that displays profile, contract, and principal information for providers in a coalition service area.

ProviderPrincipalID	ProviderID	ProviderProfileID	PrincipalBusinessName	DoingBusinessAs	ProviderTypeDescription	ProviderTypeOnContract	ProviderStatus	ProfileStatus	LegalStatus	ProviderProfileID
37	695	962	Mitchell Large Family Child Care Home	MITCHELL LARGE FAMILY CHILD CARE HOME	Large Family Child Care Home		Migrated-Unclaimed	Imported	Licensed	962
39	790	1098	Little Pioneers Preschool	LITTLE PIONEERS PRESCHOOL	Center		Migrated-Unclaimed	Imported	Licensed	1098
68	1192	1621	The Child's Garden	THE CHILD'S GARDEN	Center		Migrated-Unclaimed	Imported	Licensed	1621
141	2677	3676	Attentive Childcare and Pre-K LLC	ATTENTIVE CHILDCARE & PRE-K LLC (SUE)	Large Family Child Care Home		Migrated-Unclaimed	Imported	Licensed	3676
346	1182	1610	Townsend-Danzly Family Day Care Home	TOWNSEND-DANZLY FAMILY DAY CARE HOME	Family Child Care Home		Migrated-Unclaimed	Imported	Licensed	1610

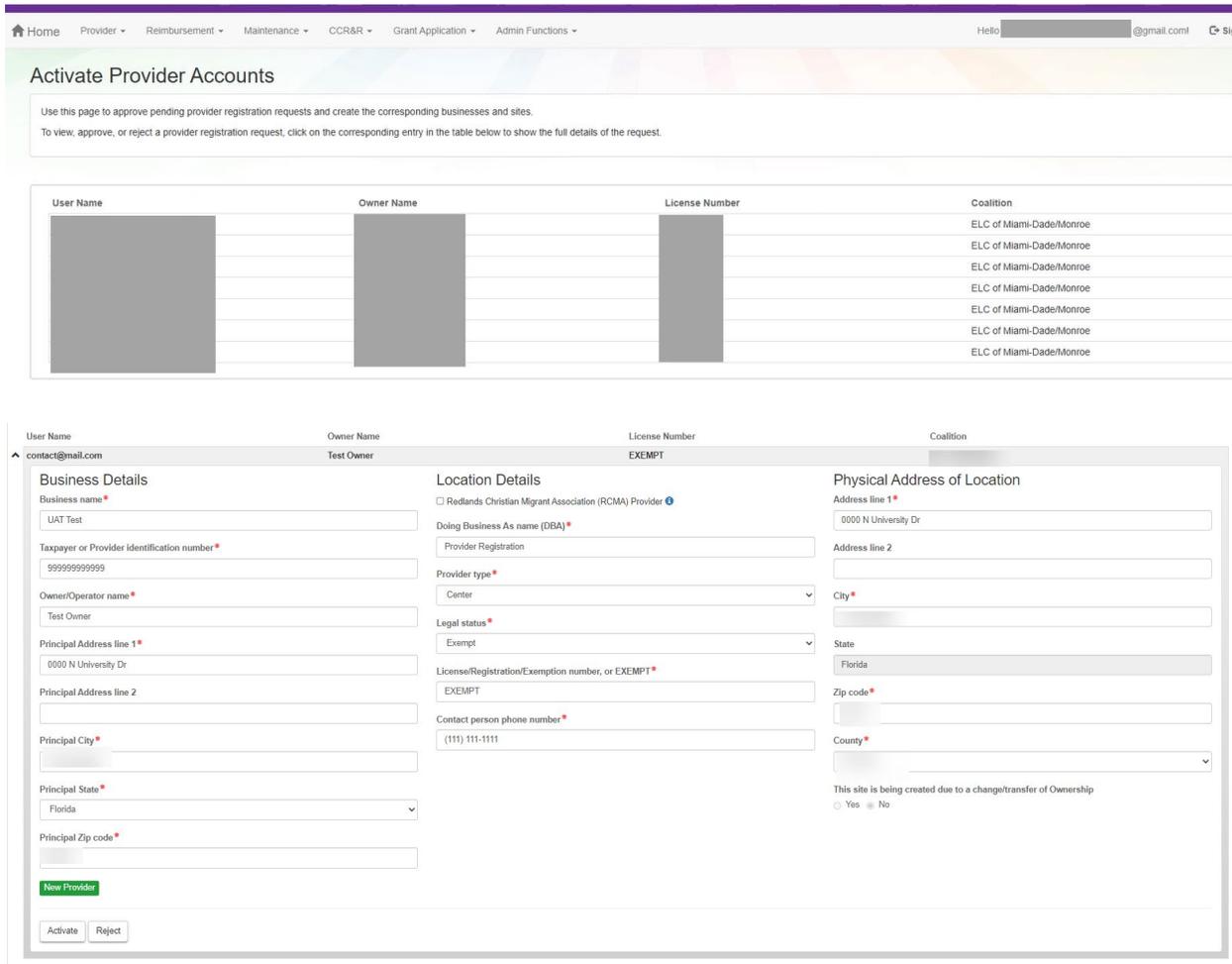
## Activating a Provider Account

Once a Provider submits the registration request, a CP Admin will access the registration from the Admin Functions tab.



Use this page to review and approve Provider Registration Account requests and begin Single Sign-On (SSO) set-up.

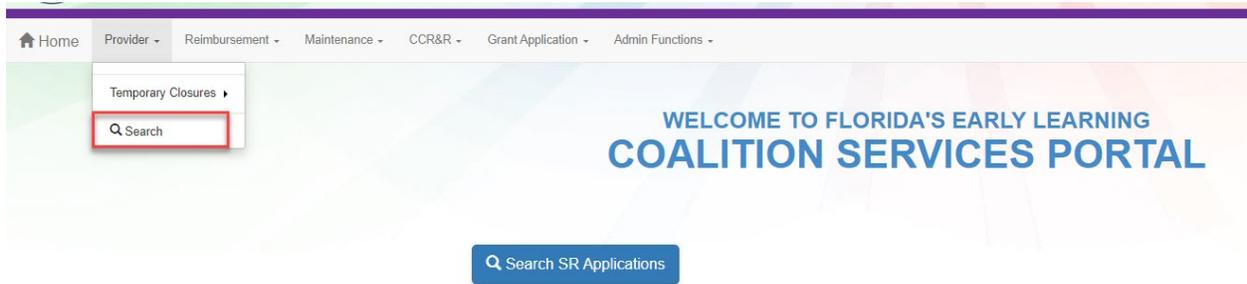
To view, approve, or reject a Provider Registration requests, click on the corresponding entry in the table below to show the full details of the request.



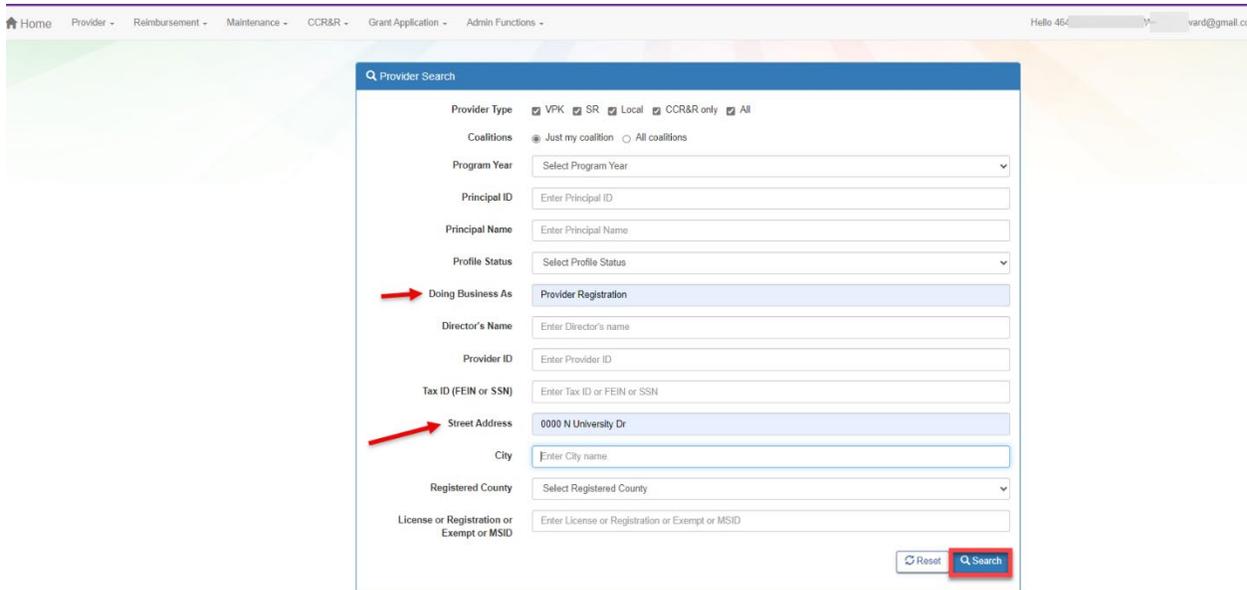
**\*Before approving the registration request, be sure to make note of the site address and/or the Doing Business As (DBA) Name. You will need this information to search for the site once the request has been approved.**

After approving a Provider Registration, you will need to get additional information for SSO set up.

Navigate to **Provider > Search**.



Enter the address or DBA name. Click **Search**.

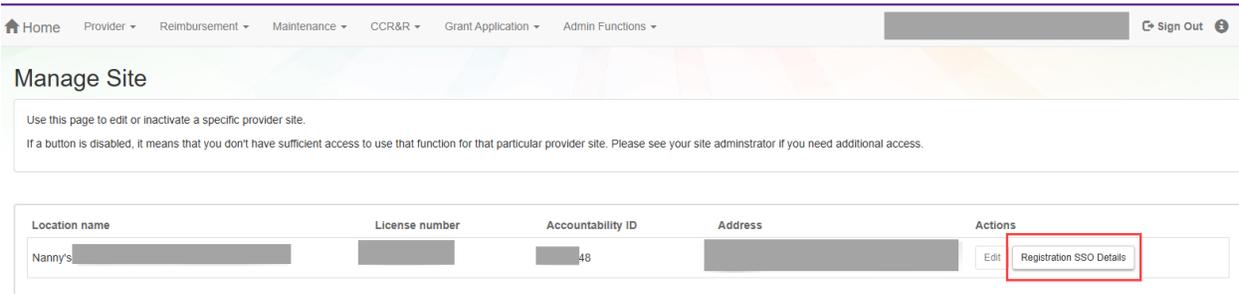


The following Provider Search results page will display. Click the Provider ID for the appropriate provider site.

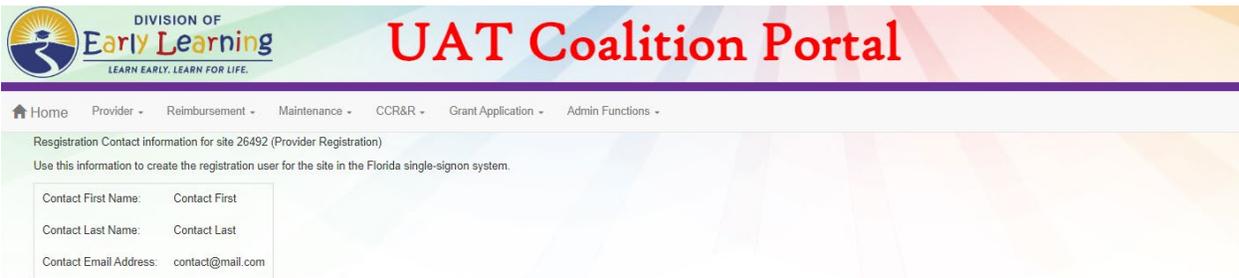


The Manage Site page will display. Click the **Registration SSO Details** button.

**Note: The address information needed for SSO set up is on the Manage Site page. All other information needed for SSO can be found on the Registration SSO Details page.**



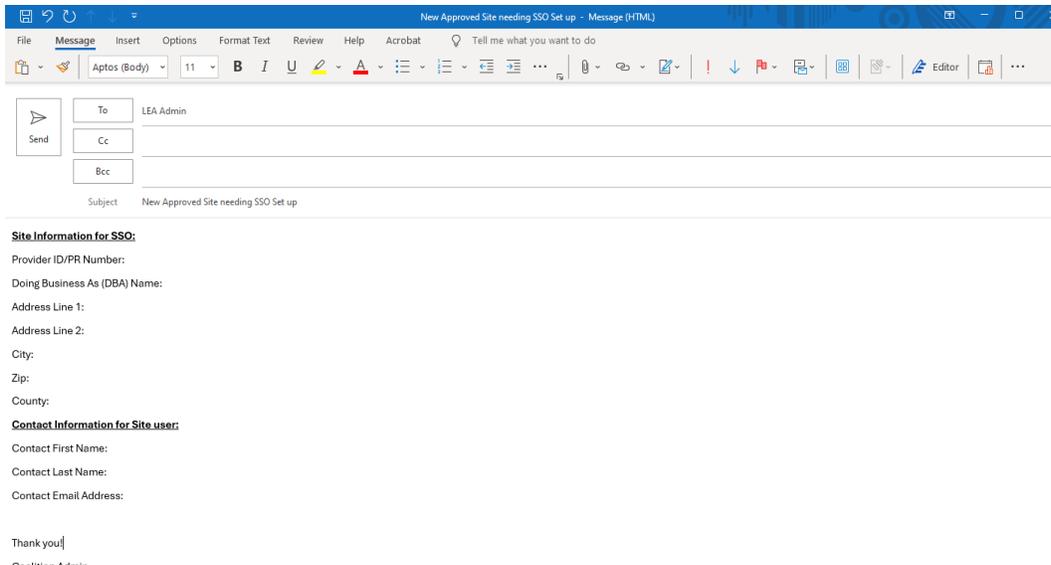
The Registration SSO Details page will display. The Provider ID is listed at the top of the page, followed by the DBA Name listed in parenthesis. For example, in the image below the Provider ID for this site is 26492, and the DBA Name is Provider Registration.



Following the site details, the contact information needed for SSO is listed in the grid.

Details about both the contact and site are needed by your LEA Admin to complete the set up in SSO. Using the Registration SSO Details page, note the provider ID, DBA name, contact first name, contact last name, and contact email address.

After noting the site address and the relevant information provided by the Registration SSO Details page, contact your LEA admin to provide them with this information. An example email for communicating this information to your LEA Admin is shown below.

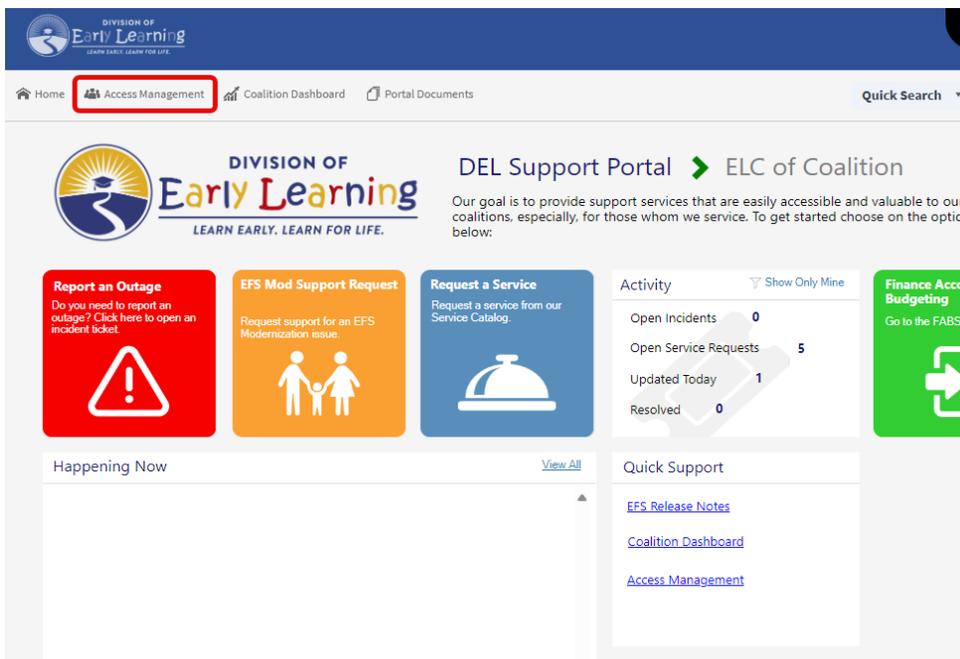


Once the SSO Details are sent to your LEA Admin, they can begin the set-up process in SSO.

The LEA admin must submit a Cherwell ticket to have the site created in SSO. The ticket must include the following:

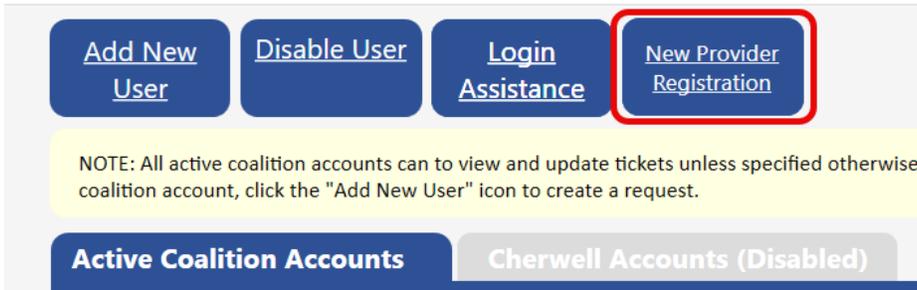
1. Provider ID/PR Number
2. Doing Business As (DBA) Name
3. Coalition and complete address of the site needing set up

From the Cherwell dashboard, click the **Access Management**> **New Provider Registration**



Click [New Provider Registration](#).

## Access Management - ELC of Coalition



The screenshot shows a navigation bar with four buttons: "Add New User", "Disable User", "Login Assistance", and "New Provider Registration". The "New Provider Registration" button is highlighted with a red border. Below the buttons is a yellow note box containing text. At the bottom, there are two tabs: "Active Coalition Accounts" (selected) and "Cherwell Accounts (Disabled)".

[Add New User](#) [Disable User](#) [Login Assistance](#) [New Provider Registration](#)

NOTE: All active coalition accounts can to view and update tickets unless specified otherwise. coalition account, click the "Add New User" icon to create a request.

**Active Coalition Accounts** Cherwell Accounts (Disabled)

Complete the required fields and submit the form. Please allow up to 5 business days for your request to be processed.

Once the Cherwell ticket is resolved, the LEA Admin can set up the user and associate them with the new site in SSO. The following information is needed for setting up the site user:

1. First name
2. Last name
3. Email address

LEA Admins should refer to the FDOE SSO Admin Portal Guide for additional details on provisioning SSO user accounts for [secondary locations](#).

**Note:** Before creating a user, first ensure they do not already exist in SSO. If they do already exist, verify the role(s) and locations.

## Activating a Provider Account with an Ownership Transfer

If the provider has indicated that their provider registration is due to a change/transfer in ownership, additional details pertaining to their transfer will be included in their registration.

User Name	Owner Name	Licence Number	Coalition
cars123@gmail.com	Test SB	EXEMPT	ELC of Broward

Business Details	Location Details	Physical Address of Location
<p>Business name *</p> <input type="text" value="New Owner Daycare"/>	<p><input type="checkbox"/> Redlands Christian Migrant Association (RCMA) Provider</p> <p>Doing Business As name (DBA) *</p> <input type="text" value="New Owner Example"/>	<p>Address line 1 *</p> <input type="text" value="2920 N UNIVERSITY DR"/>
<p>Taxpayer or Provider identification number *</p> <input type="text" value="00000000"/>	<p>Provider type *</p> <input type="text" value="Private School"/>	<p>Address line 2</p> <input type="text"/>
<p>Owner/Operator name *</p> <input type="text" value="Test SB"/>	<p>Legal status *</p> <input type="text" value="Exempt"/>	<p>City *</p> <input type="text" value="CORAL SPRINGS"/>
<p>Principal Address line 1 *</p> <input type="text" value="1313 SAN LUIS RD"/>	<p>Licence/Registration/Exemption number, or EXEMPT *</p> <input type="text" value="EXEMPT"/>	<p>State</p> <input type="text" value="Florida"/>
<p>Principal Address line 2</p> <input type="text"/>	<p>Contact person phone number *</p> <input type="text" value="(111) 111-1111"/>	<p>Zip code *</p> <input type="text" value="33065"/>
<p>Principal City *</p> <input type="text" value="TALLAHASSEE"/>		<p>County *</p> <input type="text" value="Broward"/>
<p>Principal State *</p> <input type="text" value="Florida"/>		
<p>Principal Zip code *</p> <input type="text" value="32304"/>		

This site is being created due to a change/transfer of Ownership

Old / Previous Site Address prior to Ownership Transfer

Please answer the following questions regarding your transfer/change of ownership:

Do you have any family relationship to the owner of the previous site?

Yes  No

Did you have a preexisting ownership interest in the business prior to the transfer/change of ownership?

Yes  No

Uploaded Documentation:

The above responses indicate the need for the Accountability ID from

(Provider ID: 1, Accountability ID: ) to carry over

Carry Over  Provide New ID

Additional fields include:

- Provider site having the change in ownership (as indicated by the Provider during their registration)
- Two ownership questions and the Provider's responses
- Supplemental documentation uploaded by the provider
- An additional action field for the Coalition user (in the blue section)

To view supplemental documentation uploaded by the provider, click on the document's name.

License/Registration/Exemption number, or EXEMPT\*

EXEMPT

Contact person phone number\*

(111) 111-1111

Florida

Zip code\*

33065

County\*

Broward

This site is being created due to a change/transfer of Ownership

Old / Previous Site Address prior to Ownership Transfer

Please answer the following questions regarding your transfer/change of ownership:

Do you have any family relationship to the owner of the previous site?

Yes  No

Did you have a preexisting ownership interest in the business prior to the transfer/change of ownership?

Yes  No

Uploaded Documentation: test doc 1.docx

The above responses indicate the need for the Accountability ID from (Provider ID: , Accountability ID: ) to carry over  
 Carry Over  Provide New ID

The blue section will indicate the appropriate action for the Accountability ID based on the Provider's responses to the ownership questions.

A Provider answering **Yes** to one or both ownership questions indicate the need for the accountability ID to carry over. A provider answering **No** to both questions indicates the need for a new Accountability ID to be given to the Provider.

Supporting documents can assist in verifying the Provider's responses to the two ownership questions. Documents recommended to the Provider include a Bill of Sale, Interest in Ownership documents, and consideration for sale documents. Additional document types may be up to the Coalition's discretion. See *Rule 6M- 8.301 F.A.C.* for additional information.

License/Registration/Exemption number, or EXEMPT\*

EXEMPT

Contact person phone number\*

(111) 111-1111

Florida

Zip code\*

33065

County\*

Broward

This site is being created due to a change/transfer of Ownership

Old / Previous Site Address prior to Ownership Transfer

Please answer the following questions regarding your transfer/change of ownership:

Do you have any family relationship to the owner of the previous site?

Yes  No

Did you have a preexisting ownership interest in the business prior to the transfer/change of ownership?

Yes  No

Uploaded Documentation: test doc 1.docx

The above responses indicate the need for the Accountability ID from (Provider ID: , Accountability ID: ) to carry over

Carry Over  Provide New ID

After reviewing the appropriate action for the Accountability ID and reviewing supporting documentation, the Coalition user should select **Carry Over** to carry over the Accountability ID from the previous provider site or **Provide New ID** to assign a new Accountability ID to the Provider.

**NOTE:** If documentation does not match the Provider's responses, the provided documentation may aid in the decision.

When **Provide New ID** is selected, the following message will display.

The screenshot shows a web form for provider registration. A modal dialog box titled "Confirm New Accountability ID" is centered on the screen. The dialog contains the following text: "You have indicated the need for a new Accountability ID to be designated to this Provider. Please select 'Yes' to confirm this action, or select 'Cancel' to carry over the old ID." Below the text are two buttons: "Yes" (highlighted in blue) and "Cancel".

The background form is partially visible and includes the following fields and sections:

- Principal Address line 2: [Empty text box]
- Principal City: TALLAHASSEE
- Principal State: Florida
- Principal Zip code: 32304
- Buttons: "New Provider" (green), "Activate", "Reject"
- Zip code: 33065
- County: Broward
- Checkbox: "This site is being created due to a change/transfer of Ownership" (checked)
- Section: "Old / Previous Site Address prior to Ownership Transfer" with address: 10623 W ATLANTIC BLVD, CORAL SPRINGS, FL 33071
- Section: "Please answer the following questions regarding your transfer/change of ownership:"
- Question 1: "Do you have any family relationship to the owner of the previous site?" with radio buttons for Yes (checked) and No.
- Question 2: "Did you have a preexisting ownership interest in the business prior to the transfer/change of ownership?" with radio buttons for Yes (checked) and No.
- Section: "Uploaded Documentation:" with a button labeled "test doc 1.docx"
- Summary box: "The above responses indicate the need for the Accountability ID from ABC LEARNING CENTER OF CORAL SPRINGS (Provider ID: 19864, Accountability ID: A083698) to carry over" with radio buttons for "Carry Over" and "Provide New ID" (checked).

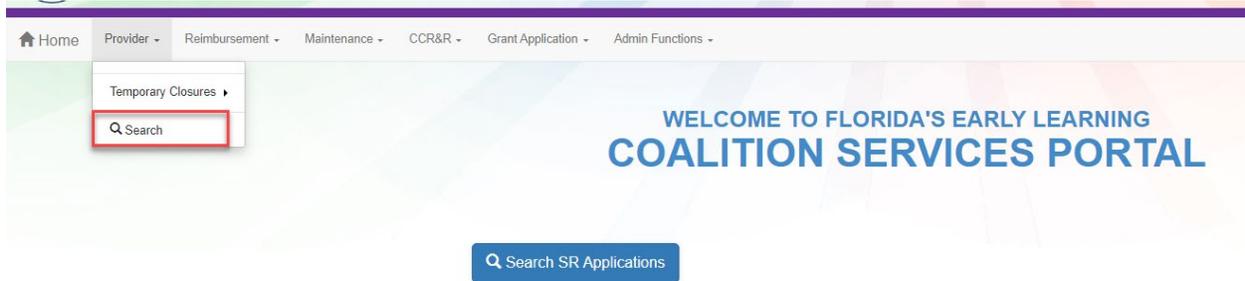
To confirm the action of providing a new Accountability ID to the Provider, click **Yes**. To instead carry over the previous Accountability ID, click **Cancel**.

## Activating a Secondary Location

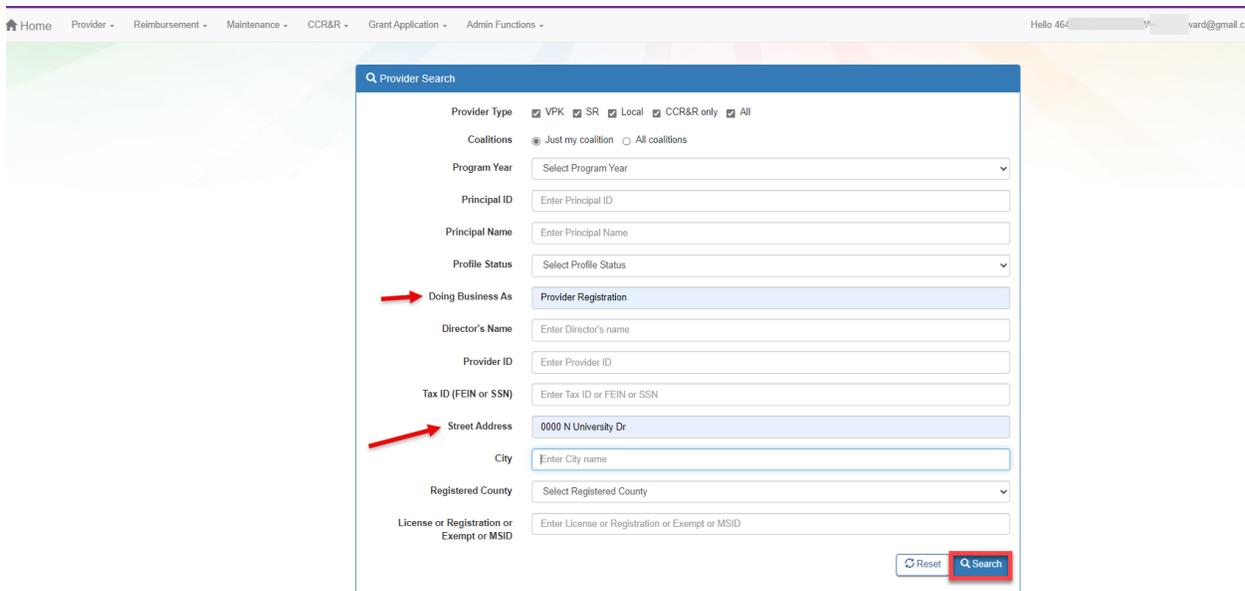
When a provider creates a secondary location using the “Add Site” process in the Provider Portal, the site must be created in Single Sign-On (SSO) for it to be accessible to the provider user(s).

To begin the process of SSO set up, you must first locate the newly created site.

Navigate to **Provider > Search**



Enter the address or DBA name. Click **Search**.



The following Provider Search results page will display. Locate the row for the appropriate provider site.

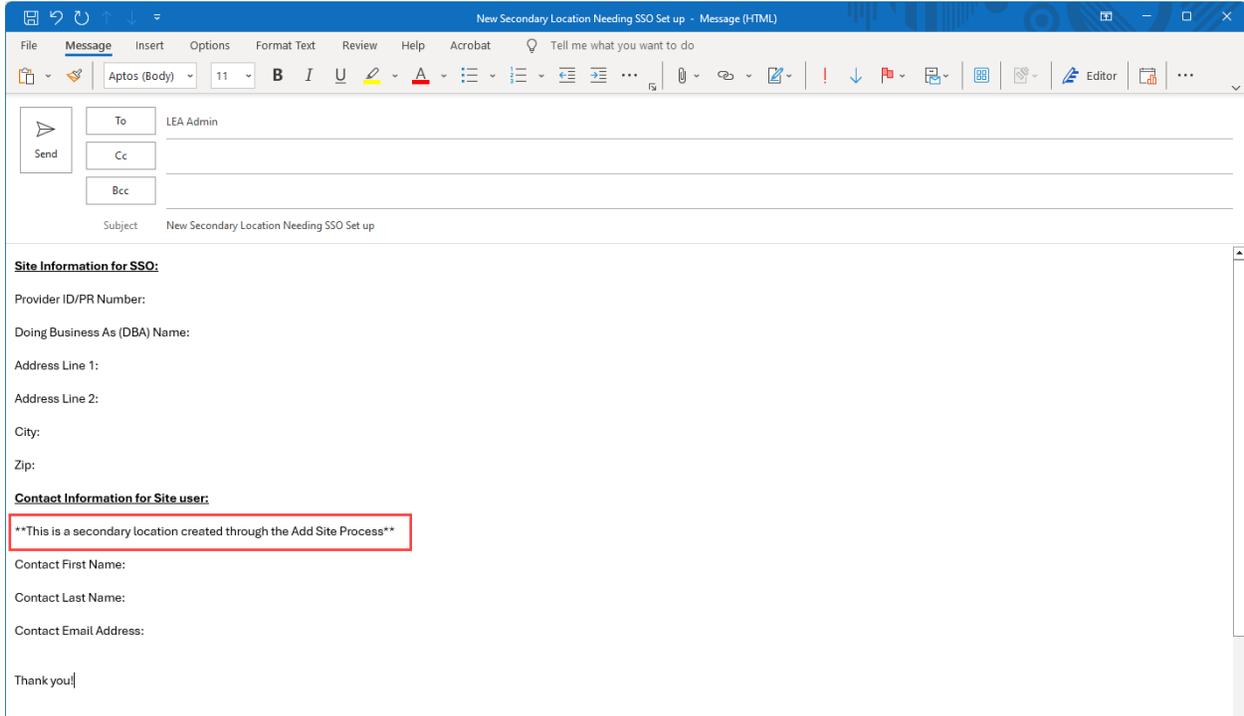


Since this site was added through the Add Site process and not the registration process, contact fields for the user are not captured. You will need to contact the provider to determine the appropriate first name, last name, and email for the user(s) requiring access to this site.

Details about both the contact and site are needed for your LEA Admin to complete the set up in SSO.

Once you gather the contact details from the provider and make note of the Provider ID, DBA name, and site Address- contact your LEA admin to provide them with this information. Be sure to indicate that this site is a secondary location. An example email for communicating this information to your LEA Admin is shown below.

**Note:** Process for relaying information to your LEA Admin may differ depending on your coalition's preference and may not be through email.



Once the SSO Details are sent to your LEA Admin, they can begin the set-up process in SSO.

The LEA admin must submit a Cherwell ticket to have the site created in SSO. The ticket must include the following:

1. Provider ID/PR Number
2. Doing Business As (DBA) Name
3. Coalition and complete address of the site needing set up

From the Cherwell dashboard, click the [Access Management](#)> [New Provider Registration](#)

The screenshot shows the 'DEL Support Portal' for the 'ELC of Coalition'. The navigation bar includes 'Home', 'Access Management' (highlighted with a red box), 'Coalition Dashboard', and 'Portal Documents'. The main content area features the 'DIVISION OF Early Learning' logo and the tagline 'LEARN EARLY. LEARN FOR LIFE.'. Below the logo are four action tiles: 'Report an Outage' (red), 'EFS Mod Support Request' (orange), 'Request a Service' (blue), and 'Activity' (grey). The 'Activity' tile shows a summary of incidents: Open Incidents (0), Open Service Requests (5), Updated Today (1), and Resolved (0). To the right, there is a 'Finance Account Budgeting' tile. Below the action tiles is a 'Happening Now' section with a 'View All' link. A 'Quick Support' section contains links for 'EFS Release Notes', 'Coalition Dashboard', and 'Access Management'.

Click [New Provider Registration](#).

## Access Management - ELC of Coalition

The screenshot shows the 'Access Management - ELC of Coalition' interface. At the top, there are four buttons: 'Add New User', 'Disable User', 'Login Assistance', and 'New Provider Registration' (highlighted with a red box). Below these buttons is a yellow note: 'NOTE: All active coalition accounts can to view and update tickets unless specified otherwise. coalition account, click the "Add New User" icon to create a request.' At the bottom, there are two sections: 'Active Coalition Accounts' and 'Cherwell Accounts (Disabled)'.

Complete the required fields and submit the form. Please allow up to 5 business days for your request to be processed.

Once the Cherwell ticket is resolved, the LEA Admin can set up the user and associate them with the new site in SSO. The following information is needed for setting up the site user:

1. First name
2. Last name
3. Email address

LEA Admins should refer to the FDOE SSO Admin Portal Guide for additional details on provisioning SSO user accounts for secondary locations.

**Note:** Before creating a user, first ensure they do not already exist in SSO. If they do already exist, verify the role(s) and locations.

## Provider Profile Status Definitions

### Incomplete

The profile is not complete. The provider has to complete the required fields, certify, sign and submit the profile. Coalitions cannot change the status of an **Incomplete** profile; however, coalition users have read-only access to assist the provider in completing the profile.

### Request Assistance

The provider needs help to finish or edit the profile.

### Submitted

The profile has been completed and submitted by the provider for coalition review. The profile is not editable by the provider while in **Submitted** status.

### Coalition Reviewing

To review a **Submitted** profile, click the Change Profile Status button at the top of the Administrative Review page.

### Active

The coalition has reviewed the profile and supporting document(s) and determined that the provider is eligible to receive funding.

### Inactive

The profile is no longer active, due to a specific reason selected by the coalition user. **Inactive** profiles cannot be edited.

### Rejected

The profile is missing information that is necessary to make a decision regarding eligibility to receive funding. **Rejected** status is used to return the profile to the provider for edits.

### Read-Only

The profile is no longer active, due to the program year expiring. Profiles for past program years cannot be edited.

## Coalition User Task Bar

At the top of the Administrative Review page is a list of buttons used to maintain and process a Provider Profile.

### Administrative Review

Provider Notes

Contact Attempts

Inspections

Administration

Contracts

SR Paid Holidays

SR Reimbursement Rates

Child Assessment

Provider Notes

Click to view or add a case note.

Contact Attempts

Click to log a provider contact attempt.

Inspections

Click to view or upload inspections.

Administration

Click to update provider information.

Contracts

Click to manage contracts.

SR Paid Holidays

Click to manage contracted SR provider paid holidays.

SR Reimbursement Rates

Click to manage contracted SR provider reimbursement rates.

Child Assessment

Click to input child assessment data (not yet available) and reimburse child assessment differentials.

Assist Provider

Change Profile Status

Assist Provider

Click to assist a provider with profile changes.

Change Profile Status

Click to change the status of a provider profile.

## Adding a Provider Note

The coalition user must click the **Provider Notes** button to add a Provider Note.

Then, click the **+Add Provider Note** button.

Date	Reason	Note	Created By
10/10/2016 2:06:34 PM	UPRFL	Profile submitted by oeldemonstration+3@gmail.com	oeldemonstration+3@gmail.com

The coalition user will then select a Provider Note Code, Custom Code Type, and Custom Code (if applicable) and complete the note field. Click the **Save Note** button to add the note.

Provider Note Code  
Select reason code...

Custom Code Type: Select  
Custom Code: Select a Custom Code Type

Provider Profile Note

Cancel Save Note

Click the **Return to review** button to go back to the Administrative Review page.

Date	Reason	Note	Created By
10/10/2016 2:06:34 PM	UPRFL	Profile submitted by oeldemonstration+3@gmail.com	oeldemonstration+3@gmail.com

## Adding a Contact Attempt

The coalition user must click the **Contact Attempts** button to add a Provider Notification.

Then, click the **+Add Provider Notification** button.

Date	Created By	Subject	Method(s)	Outcome	Note
No data available in table					

The coalition user will complete the Date and Subject fields, select which Method(s) of Contact were used, and complete the Note and Outcome fields. Click the **Save** button to add the notification.

**NOTE:** A contact attempt does not create a provider note.

Add Jim's House of Learning 2 Notification ✕

**Date**

**Subject**

**Method(s) of Contact**

Phone 📞     Letter ✉️     Email 📧

**Note**

**Outcome**

Click the **Return to review** button to go back to the Administrative Review page.

Provider Notifications For Jim's House Of Learning 2 Return to review

Show 10 entries + Add Provider Notification

Date	Created By	Subject	Method(s)	Outcome	Note
No data available in table					
Date	Created By	Subject	Method(s)	Outcome	Note

First Previous Next Last

## Adding an Inspection

The coalition user must click the **Inspections** button to add a Provider Inspection.

Then, click the **+Add Provider Inspection** button.

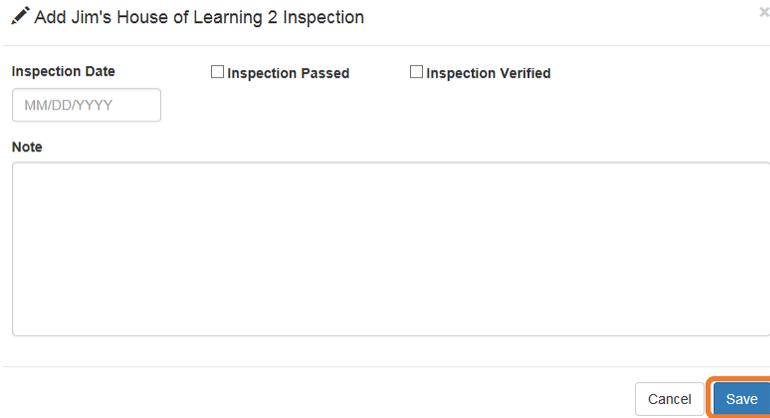
Health And Welfare Inspections For Jim's House Of Learning 2 Return to review

Show 10 entries + Add Provider Inspection

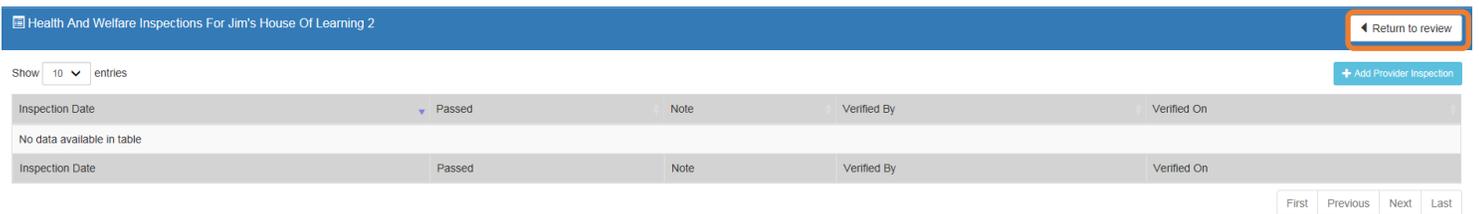
Inspection Date	Passed	Note	Verified By	Verified On
No data available in table				
Inspection Date	Passed	Note	Verified By	Verified On

First Previous Next Last

The coalition user will complete the Date field, select the inspection result, and complete the Note field. Click the **Save** button to add the inspection.



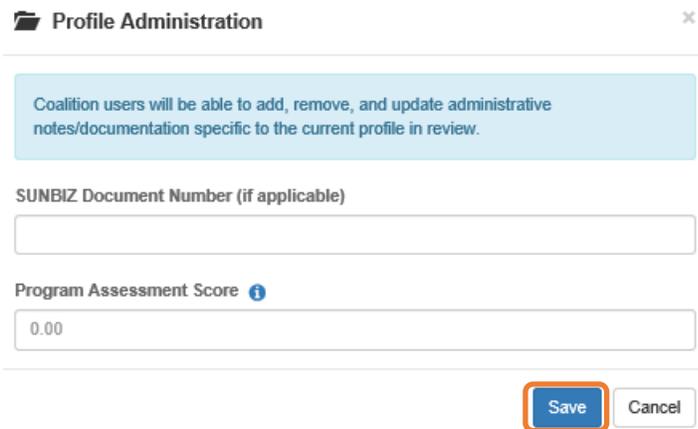
Click the **Return to review** button to go back to the Administrative Review page.



Inspection Date	Passed	Note	Verified By	Verified On
No data available in table				
Inspection Date	Passed	Note	Verified By	Verified On

## Adding Administrative Information

The coalition user must click the **Administration** button to update administrative information.



The coalition user will complete the SUNBIZ Document Number and Program Assessment Score. Click the **Save** button to add the number.

## Adding SR Paid Holidays

Once an SR contract is certified, the provider's paid holidays must be set up. On the Administrative Review menu, click the **SR Paid Holidays** button. The provider's SR Paid Holidays for the profile year displays.

The page may pre-populate with days if they are available from the online SR contract or Coalition SR Holiday Schedule (established on the **Admin > Calendar Management > SR Holiday Schedule** page). While this information may be pre-populated for convenience, the remaining steps should be followed to ensure the correct paid holidays are recorded.

To add a new paid holiday, click the **+ Add Paid Holiday** button.

The screenshot shows the 'SR Paid Holidays For Growing Up Strong' interface. At the top, it displays 'Program Year: 2018', 'CountyName: KREPS ISLAND', and 'Maximum number of dates: Twelve'. A '+ Add Paid Holiday' button is highlighted with an orange box. Below this is a table with columns for '#', 'Date', 'Name', 'Update', and 'Remove'. The table contains seven rows of holidays, with 'Update' and 'Remove' buttons for each row.

#	Date	Name	Update	Remove
1	7/4/2018	4TH OF JULY		
2	9/3/2018	LABOR DAY		
3	11/22/2018	THANKSGIVING DAY		
4	11/23/2018	DAY AFTER THANKSGIVING		
5	12/25/2018	CHRISTMAS	Update	Remove
6	1/1/2019	NEW YEARS DAY	Update	Remove
7	1/14/2019	MLK	Update	Remove

Enter the Holiday Date and Holiday Name. Then, click the **Save** button.

The screenshot shows the 'SR Paid Holidays' form. It has two input fields: 'Holiday Date' with the value '01/21/2019' and 'Holiday Name' with the value 'Martin Luther King Jr. Day'. Both fields are highlighted with an orange box. Below the fields are 'Save' and 'Cancel' buttons, with the 'Save' button also highlighted with an orange box.

To update a paid holiday, click the **Update** button. The saved holidays may be edited. Days that have occurred in the past cannot be updated or removed. When complete, click **Save**.

The screenshot shows the 'SR Paid Holidays For Growing Up Strong' interface, similar to the first screenshot. The '+ Add Paid Holiday' button is no longer highlighted. Instead, the 'Update' button for the Christmas holiday (row 5) is highlighted with an orange box.

#	Date	Name	Update	Remove
1	7/4/2018	4TH OF JULY		
2	9/3/2018	LABOR DAY		
3	11/22/2018	THANKSGIVING DAY		
4	11/23/2018	DAY AFTER THANKSGIVING		
5	12/25/2018	CHRISTMAS	Update	Remove
6	1/1/2019	NEW YEARS DAY	Update	Remove
7	1/14/2019	MLK	Update	Remove

To remove a paid holiday, click the **Remove** button. Days that have occurred in the past cannot be updated or removed.

SR Paid Holidays For Growing Up Strong Return to review

Program Year: 2018 CountyName: KREPS ISLAND Maximum number of dates: Twelve

[+ Add Paid Holiday](#)

#	Date	Name	Update	Remove
1	7/4/2018	4TH OF JULY		
2	9/3/2018	LABOR DAY		
3	9/19/2018	Fall Holiday		
4	11/22/2018	THANKSGIVING DAY		
5	11/23/2018	DAY AFTER THANKSGIVING		
6	12/25/2018	CHRISTMAS	<a href="#">Update</a>	<a href="#">Remove</a>
7	1/1/2019	NEW YEARS DAY	<a href="#">Update</a>	<a href="#">Remove</a>
8	1/21/2019	Martin Luther King Jr. Day	<a href="#">Update</a>	<a href="#">Remove</a>
9	5/27/2019	Memorial Day	<a href="#">Update</a>	<a href="#">Remove</a>

### Adding SR Reimbursement Rates

Once an SR contract is certified, the provider's reimbursement rates must be set up. On the Administrative Review menu, click the **SR Reimbursement Rates** button. The provider's SR Reimbursement Rate plan(s) display.

To establish a new rate plan, click on the **Add Reimbursement Rates** button.

SR Reimbursement Rates For Rand's House Return to review

[+ Add Reimbursement Rates](#)

No data available to display

The rate plan settings page displays. Enter the **Reimbursement Start Date** and **Reimbursement End Date**. Click **Save**.

**NOTE:** If multiple rate plans are needed to address a rate change, continue to set up the first rate plan for the original start and end dates. Then, additional rate plans can be created as shown in *Amending SR Reimbursement Rates (by adding another rate plan)*.

Add Provider Reimbursement Rate

Coalition: ELC of TALLAHASSEE

Provider: randi's house

County: KREPS ISLAND

Reimbursement Provider Type: Center

Reimbursement Start Date: 09/01/2018

Reimbursement End Date: 06/30/2019

< Cancel Save >

The provider's reimbursement rate plan page appears. Rate plans cannot overlap. If a rate plan is entered that overlaps, then a validation message displays. Clicking the **Yes** button will change the rate plan to prevent overlapping dates. Clicking the **No** button will discard the rate plan change.

Warning: Reimbursement Rate Plan

This request impacts existing rate plan(s). The existing start/end dates must be changed to avoid overlapping days.  
07/01/2019 to 07/01/2020

Do you wish to continue?

Yes No

Click **Reimbursement Rates**.

SR Reimbursement Rates For Randi's House Return to review

+ Add Reimbursement Rates

Coalition	County	Reimbursement Start Date	Reimbursement End Date		
ELC of TALLAHASSEE	KREPS ISLAND	9/1/2018	6/30/2019	Settings	Reimbursement Rates

The provider's rates for the rate plan appears.

## 2022-2023 Reimbursement Rate Plans

Effective July 1, 2022, the Approved Provider Reimbursement Rate without Gold Seal (column C) shall equal the Coalition Reimbursement Rates in column B, except when the Provider's Private Pay Rate (column A) is zero. When column A is zero, column C will be zero. Also, effective July 1, 2022, there is no provider private pay rates upper limit (column F).

A note displays at the top of the Rate Plan: \*Special needs rate will be negotiated up to twenty (20) percent above the maximum approved base reimbursement rate established for infant care by the coalition pursuant to Rule 6M-4.500, F.A.C. The negotiated rate will be based on the level of care needed for an individual child.

SR Reimbursement Rates - 16 - -

Unit of Care: Full-Time Daily Rates Rates in effect on: 7/1/2022

\* Special needs rate will be negotiated up to twenty (20) percent above the maximum approved base reimbursement rate established for infant care by the coalition pursuant to Rule 6M-4.500, F.A.C. The negotiated rate will be based on the level of care needed for an individual child.

Edit Provider Rates Edit Differential Rates

Care Code	Description	A Provider's Private Pay Rates	B Coalition Reimbursement Rates	C Approved Provider Reimbursement Rate without Gold Seal	D Gold Seal Differential (Column B x percentage)	E Approved Provider Reimbursement Rate with Gold Seal (Column C + D)	F Provider's Private Pay Rates Upper Limit (Column A + 20%)	G QPI Differential Rate (Column C x tier percentage)	H Local QI Level Differential Rate (Column C x tier percentage)	I Total Payment Rate (Column E + G + H)	J Contracted Slots Differential Rate (per child flagged for contracted slots)	K Child Assessment Differential Rate (Column C x tier percentage)
INF	<12 Months	\$0.00	\$50.00	\$50.00	\$0.00	\$0.00	-	\$5.00	\$0.00	\$5.00	\$4.00	\$2.50
TOD	12 <24 Months	\$0.00	\$40.24	\$40.24	\$0.00	\$0.00	-	\$4.02	\$0.00	\$4.02	\$4.00	\$2.01
2YR	24 <36 Months	\$45.00	\$37.45	\$37.45	\$7.49	\$44.94	-	\$3.75	\$0.00	\$48.69	\$4.00	\$1.87
PR3	36 <48 Months	\$40.00	\$30.00	\$30.00	\$6.00	\$36.00	-	\$3.00	\$0.00	\$39.00	\$4.00	\$1.50
PR4	48 <60 Months	\$40.00	\$28.55	\$28.55	\$5.71	\$34.26	-	\$2.86	\$0.00	\$37.12	\$4.00	\$1.43
PR5	60 <72 Months	\$40.00	\$27.00	\$27.00	\$5.40	\$32.40	-	\$2.70	\$0.00	\$35.10	\$4.00	\$1.35
SCH	In School	\$39.00	\$19.86	\$19.86	\$3.97	\$23.83	-	\$1.99	\$0.00	\$25.82	\$0.00	-

- Column A = displays amounts from the provider's contract for private tier pay rates (captured at the time of contract initiation from the provider's profile).
- Column B = displays amounts from the Coalition's SR Plan Rates (established on the **Admin Functions > Rates Management > SR Plan Rates** page).
- Column C = displays the approved provider reimbursement rate without Gold Seal (same as column B except when column A is zero. If column A is zero, column C shall be zero).
- Column D = displays the Gold Seal differential (column C x the percentage established on the **Admin Functions > Rates Management > SR Plan Rates** page).
- Column E = displays the approved provider reimbursement rate with Gold Seal (column C + D). Gold Seal participation is established on the Edit Differentials tab and should match the contract or latest amendment.
- Column F = this column is not applicable, as there is no longer a provider private pay rates upper limit.
- Column G = displays the QPI differential rate (column C x tier percentage). QPI participation is established on the Edit Differentials tab and should match the contract or latest amendment.
- Column H = displays the Local QI differential rate (column C x tier percentage). QI participation is established on the Edit Differentials tab and should match the contract.

- Column I = displays the total payment to provider (column E + G + H).
- Column J = displays the total contracted slot differential rate available to selected children. Contracted Slots participation is established on the Edit Differentials tab and should match the contract or latest amendment.
- Column K = child assessment differential rate (column C x tier percentage). Child assessment participation is established on the Edit Differentials tab and should match the contract or latest amendment.

While some information may be pre-populated for convenience, the remaining steps should be followed to ensure the correct provider reimbursement rates are recorded.

*Edit Provider Rate*

Click the **Edit Provider Rates** button. The private pay rates page displays. Review and/or enter the provider's private pay rates (column A) for the established rate plan date range and click **Save**.

SR Reimbursement Rates - 16 --

Unit of Care: Full-Time Daily Rates Rates in effect on: 7/1/2022

\* Special needs rate will be negotiated up to twenty (20) percent above the maximum approved base reimbursement rate established for infant care by the coalition pursuant to Rule 6M-4.500, F.A.C. The negotiated rate will be based on the level of care needed for an individual child.

[Edit Provider Rates](#) [Edit Differential Rates](#)

Care Code	Description	A Provider's Private Pay Rates	B Coalition Reimbursement Rates	C Approved Provider Reimbursement Rate without Gold Seal	D Gold Seal Differential (Column B x percentage)	E Approved Provider Reimbursement Rate with Gold Seal (Column C + D)	F Provider's Private Pay Rates Upper Limit (Column A + 20%)	G QPI Differential Rate (Column C x tier percentage)	H Local QI Level Differential Rate (Column C x tier percentage)	I Total Payment Rate (Column E + G + H)	J Contracted Slots Differential Rate (per child flagged for contracted slots)	K Child Assessment Differential Rate (Column C x tier percentage)
-----------	-------------	-----------------------------------	------------------------------------	---	---	---	--	---	--	--	--	--

**NOTE:** Rates may be edited on or before the rate plan start date, after which they cannot be edited unless payment has not been issued yet. At that point, a new rate plan must be created.

Provider's Private Pay Rates ACADEMY, INC.

Care Code	Description	FT	PT	PTL
INF	<12 Months	\$ 0.00	\$ 0.00	\$
TOD	12 <24 Months	\$ 0.00	\$ 0.00	\$
2YR	24 <36 Months	\$ 45.00	\$ 37.49	\$
PR3	36 <48 Months	\$ 40.00	\$ 33.00	\$
PR4	48 <60 Months	\$ 40.00	\$ 33.00	\$ 0.00
PR5	60 <72 Months	\$ 40.00	\$ 33.00	\$ 0.00
SCH	In School	\$ 39.00	\$ 15.00	\$ 12.50

[Cancel](#) [Save](#)

## Edit Differentials

Next, click the **Edit Differential Rates** button.

Unit of Care: Full-Time Daily Rates Rates in effect on: 7/1/2022

\* Special needs rate will be negotiated up to twenty (20) percent above the maximum approved base reimbursement rate established for infant care by the coalition pursuant to Rule 6M-4.500, F.A.C. The negotiated rate will be based on the level of care needed for an individual child.

	A	B	C	D	E	F	G	H	I	J	K	
Care Code	Description	Provider's Private Pay Rates	Coalition Reimbursement Rates	Approved Provider Reimbursement Rate without Gold Seal	Gold Seal Differential (Column B × percentage)	Approved Provider Reimbursement Rate with Gold Seal (Column C + D)	Provider's Private Pay Rates Upper Limit (Column A + 20%)	QPI Differential Rate (Column C × tier percentage)	Local QI Level Differential Rate (Column C × tier percentage)	Total Payment Rate (Column E + G + H)	Contracted Slots Differential Rate (per child flagged for contracted slots)	Child Assessment Differential Rate (Column C × tier percentage)

The differential rates page displays. Review and/or edit the differential rate settings (columns E, G, H, I, and K) for the established rate plan date range and click **Save**. Differential rates are turned on by selecting the **Yes** radio button and the tier level.

### NOTES:

- The Effective Date and End Date match the established rate plan and cannot be changed. If a differential applies to a length of time other than the established rate plan, an additional plan must be created. See *Amending SR Reimbursement Rates (by adding another rate plan)*.
- Providers participating in contracted slots require the total number of slots per care level which are automatically populated on the differentials page from the SR contract upon certification. (Children receiving a contracted slot must be identified within the **SR Program > SR Provider Enrollment** work queues.) See *Contracted Slots*.

Provider's Differential Rates ACADEMY, INC.

Yes No

Gold Seal Designation All Ages Effective Date 07/01/2022 End Date 12/31/2022

Quality Performance Incentive (QPI) 10% Effective Date 07/01/2022 End Date 12/31/2022

Child Assessment Effective Date 07/01/2022 End Date 12/31/2022

Local Quality Improvement (QI) Effective Date 07/01/2022 End Date 12/31/2022

Effective Date 07/01/2022 End Date 12/31/2022

Care Level	INF	TOD	2YR	PR3	PR4	PR5	Total
Enter Number of Contracted Slots	0	3	3	3	3	0	12

Cancel Save

## 2019-2020 Reimbursement Rate Plans

A note displays at the top of the Rate Plan – “\* Reimbursable rate is reduced because the amount exceeds the provider’s private pay rate upper limit set in Column F.” Any rates marked by a \*, show the provider is near the upper limit (Column F) with the differential, and the amount shown is what the provider will reimbursed.

**NOTE:** The rate plans for 2019-2020 allow the provider to exceed the private pay rate. For 2019-2020, the Provider cannot exceed Column F – 20% above the private pay rate.

SR Reimbursement Rates - 8469 - -													
Unit of Care		Full-Time Daily Rates		Rates in effect on		7/1/2019							
* Reimbursable rate is reduced because the amount exceeds the provider's private pay rate upper limit set in Column F.													
<a href="#">Edit Provider Rates</a> <a href="#">Edit Differential Rates</a>													
Care Code	Description	A	B	C	D	E	F	G	H	I	J	K	
		Provider's Private Pay Rates	Coalition Maximum Reimbursement Rates	Approved Provider Reimbursement Rate without Gold Seal (Column A or B, whichever is lower)	Gold Seal Differential (Column C x percentage)	Approved Provider Reimbursement Rate with Gold Seal (Column C + D; amount cannot exceed column F)	Provider's Private Pay Rates Upper Limit (Column A + 20%)	QPI Differential Rate (Column C x tier percentage)	Local QI Level Differential Rate (Column C x tier percentage)	Total Payment Rate (Column E + G + H; cannot exceed column F)	Contracted Slots Differential Rate (per child flagged for contracted slots)	Child Assessment Differential Rate (Column C x tier percentage)	
INF	<12 Months	\$22.00	\$21.00	\$21.00	\$3.15	\$24.15	\$26.40	\$1.47	*\$0.78	*\$26.40	\$10.00	*\$1.05	
TOD	12 <24 Months	\$23.00	\$20.00	\$20.00	\$3.00	\$23.00	\$27.60	\$1.40	\$2.60	\$27.00	\$11.00	*\$1.00	
2YR	24 <36 Months	\$24.00	\$19.50	\$19.50	\$2.93	\$22.43	\$28.80	\$1.37	\$2.54	\$26.34	\$12.00	\$0.98	
PR3	36 <48 Months	\$25.00	\$19.00	\$19.00	\$2.85	\$21.85	\$30.00	\$1.33	\$2.47	\$25.65	\$13.00	\$0.95	
PR4	48 <60 Months	\$26.00	\$19.00	\$19.00	\$2.85	\$21.85	\$31.20	\$1.33	\$2.47	\$25.65	\$14.00	\$0.95	
PR5	60 <72 Months	\$27.00	\$19.00	\$19.00	\$2.85	\$21.85	\$32.40	\$1.33	\$2.47	\$25.65	\$15.00	\$0.95	
SCH	In School	\$15.00	\$10.00	\$10.00	\$1.50	\$11.50	\$18.00	\$0.00	\$1.30	\$12.80	\$0.00	\$0.00	
SPCR	Special Needs	\$20.70	\$21.00	\$20.70	\$0.00	\$20.70	\$24.84	\$1.45	*\$2.69	*\$24.84	\$0.00	*\$1.04	

- Column A = displays amounts from the provider's contract for private pay rates (captured at the time of contract initiation from the provider's profile).
- Column B = displays amounts from the Coalition's SR Plan Rates (established on the **Admin Functions > Rates Management > SR Plan Rates** page).
- Column C = displays the approved provider reimbursement rate without Gold Seal (the lower of column A or B).
- Column D = displays the Gold Seal differential (column C x the percentage established on the **Admin Functions > Rates Management > SR Plan Rates** page).
- Column E = displays the approved provider reimbursement rate with Gold Seal (column C + D; amount cannot exceed column F; Gold Seal participation is established on the Edit Differentials tab).
- Column F = displays the provider's private pay rate upper limit (column A x 20%)
- Column G = displays the QPI differential rate (column C x tier percentage; QPI participation is established on the Edit Differentials tab).
- Column H = displays the Local QI differential rate (column C x tier percentage; QI participation is established on the Edit Differentials tab).
- Column I = displays the total payment to provider (column E + G + H; cannot exceed column F).
- Column J = displays the total contracted slot differential rate available to selected children (Contracted Slots participation is established on the Edit Differentials tab).
- Column K = child assessment differential rate (column C x tier percentage; child assessment participation is established on the Edit Differentials tab).

Hovering over a rate marked with a \*, displays the calculated amount prior to reaching the upper limit (Column F). The rate shown with a \*, is the amount the provider will be reimbursed.

SR Reimbursement Rates - 8469 - -

Unit of Care: Full-Time Daily Rates Rates in effect on: 7/1/2019

\* Reimbursable rate is reduced because the amount exceeds the provider's private pay rate upper limit set in Column F.

[Edit Provider Rates](#) [Edit Differential Rates](#)

Care Code	Description	A Provider's Private Pay Rates	B Coalition Maximum Reimbursement Rates	C Approved Provider Reimbursement Rate without Gold Seal (Column A or B, whichever is lower)	D Gold Seal Differential (Column C x percentage)	E Approved Provider Reimbursement Rate with Gold Seal (Column C + D; amount cannot exceed column F)	F Provider's Private Pay Rates Upper Limit (Column A + 20%)	G QPI Differential Rate (Column C x tier percentage)	H Local QI Level Differential Rate (Column C x tier percentage)	I Total Payment Rate (Column E + G + H; cannot exceed column F)	J Contracted Slots Differential Rate (per child flagged for contracted slots)	K Child Assessment Differential Rate (Column C x tier percentage)
INF	<12 Months	\$22.00	\$21.00	\$21.00	\$3.15	\$24.15	\$26.40	\$1.47	\$2.73 *\$0.78	\$26.40	\$10.00	\$1.05
TOD	12 <24 Months	\$23.00	\$20.00	\$20.00	\$3.00	\$23.00	\$27.60	\$1.40	\$2.60	\$27.00	\$11.00	\$1.00

While some information may be pre-populated for convenience, the remaining steps should be followed to ensure the correct provider reimbursement rates are recorded.

### Edit Provider Rate

Click the **Edit Provider Rates** button. The private pay rates page displays. Review and/or enter the provider's private pay rates (column A) for the established rate plan date range and click **Save**.

**NOTE:** Rates may be edited on or before the rate plan start date, after which they cannot be edited unless payment has not been issued yet. At that point, a new rate plan must be created.

Provider's Private Pay Rates randi's house

Care Code	Description	FT	PT	PTBA
INF	<12 Months	\$ 0.00	\$ 0.00	\$
TOD	12 <24 Months	\$ 0.00	\$ 0.00	\$
2YR	24 <36 Months	\$ 0.00	\$ 0.00	\$
PR3	36 <48 Months	\$ 0.00	\$ 0.00	\$
PR4	48 <60 Months	\$ 0.00	\$ 0.00	\$ 0.00
PR5	60 <72 Months	\$ 0.00	\$ 0.00	\$ 0.00
SCH	In School	\$ 0.00	\$ 0.00	\$ 0.00
SPCR	Special Needs	\$ 0.00	\$ 0.00	\$ 0.00

[Cancel](#) [Save](#)

### Edit Differentials

Next, click the **Edit Differential Rates** button.

SR Reimbursement Rates - 8469 - -

Unit of Care: Full-Time Daily Rates Rates in effect on: 7/1/2019

\* Reimbursable rate is reduced because the amount exceeds the provider's private pay rate upper limit set in Column F.

[Edit Provider Rates](#) [Edit Differential Rates](#)

Care Code	Description	A Provider's Private Pay Rates	B Coalition Maximum Reimbursement Rates	C Approved Provider Reimbursement Rate without Gold Seal (Column A or B, whichever is lower)	D Gold Seal Differential (Column C x percentage)	E Approved Provider Reimbursement Rate with Gold Seal (Column C + D; amount cannot exceed column F)	F Provider's Private Pay Rates Upper Limit (Column A + 20%)	G QPI Differential Rate (Column C x tier percentage)	H Local QI Level Differential Rate (Column C x tier percentage)	I Total Payment Rate (Column E + G + H; cannot exceed column F)	J Contracted Slots Differential Rate (per child flagged for contracted slots)	K Child Assessment Differential Rate (Column C x tier percentage)
INF	<12 Months	\$22.00	\$21.00	\$21.00	\$3.15	\$24.15	\$26.40	\$1.47	\$2.73 *\$0.78	\$26.40	\$10.00	\$1.05
TOD	12 <24 Months	\$23.00	\$20.00	\$20.00	\$3.00	\$23.00	\$27.60	\$1.40	\$2.60	\$27.00	\$11.00	\$1.00

The differential rates page displays. Review and/or edit the differential rate settings (columns E, G, H, I, and K) for the established rate plan date range and click **Save**. Differential rates are turned on by selecting the **Yes** radio button and the tier level.

**NOTE:** The Effective Date and End Date match the established rate plan and cannot be changed. If a differential applies to a length of time other than the established rate plan, an additional plan must be created. See *Amending SR Reimbursement Rates (by adding another rate plan)*. Providers participating in contracted slots require the total number of slots to be selected and rate amounts entered. (Children receiving a contracted slot must be identified within the **SR Program > SR Provider Enrollment** work queues.) See *Contracted Slots*.

Provider's Differential Rates

	Yes	No		Effective Date	End Date
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Gold Seal Designation <span style="border: 1px solid #ccc; padding: 2px;">▼</span>	<span style="border: 1px solid #ccc; padding: 2px;">04/01/2020</span>	<span style="border: 1px solid #ccc; padding: 2px;">06/30/2020</span>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Quality Performance Incentive (QPI) <span style="border: 1px solid #ccc; padding: 2px;">▼</span>	<span style="border: 1px solid #ccc; padding: 2px;">04/01/2020</span>	<span style="border: 1px solid #ccc; padding: 2px;">06/30/2020</span>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Child Assessment Effective Date	<span style="border: 1px solid #ccc; padding: 2px;">04/01/2020</span>	<span style="border: 1px solid #ccc; padding: 2px;">06/30/2020</span>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Local Quality Improvement (QI) <span style="border: 1px solid #ccc; padding: 2px;">▼</span>	<span style="border: 1px solid #ccc; padding: 2px;">04/01/2020</span>	<span style="border: 1px solid #ccc; padding: 2px;">06/30/2020</span>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Contracted Slots <span style="border: 1px solid #ccc; padding: 2px;"></span>	<span style="border: 1px solid #ccc; padding: 2px;">04/01/2020</span>	<span style="border: 1px solid #ccc; padding: 2px;">06/30/2020</span>

Cancel
Save ▶

## Amending SR Reimbursement Rates (by adding another rate plan)

Open the provider's admin page from their profile. Click the **SR Reimbursement Rates** button. The provider's reimbursement rate plan page appears. Click on the **Add Reimbursement Rates** button.

SR Reimbursement Rates For Randi's House Return to review

[+ Add Reimbursement Rates](#)

Coalition	County	Reimbursement Start Date	Reimbursement End Date		
ELC of TALLAHASSEE	KREPS ISLAND	9/1/2018	6/30/2019	<a href="#">Settings</a>	<a href="#">Reimbursement Rates</a>

The rate plan settings page appears. Enter the first day that the new rate plan is effective for the Reimbursement Start Date, then Enter the Reimbursement End Date and click **Save**.

Add Provider Reimbursement Rate

Coalition: ELC of TALLAHASSEE

Provider: randi's house

County: KREPS ISLAND

Reimbursement Provider Type: Center

Reimbursement Start Date: 09/17/2018

Reimbursement End Date: 06/30/2019

[Cancel](#) [Save](#)

Now, a new rate plan appears. The existing rate plan's Reimbursement End Date is changed by the system to end a day prior to the new rate plan's Reimbursement Start Date. Click on the **Reimbursement Rates** button for the new rate plan and proceed to review/modify the **Provider Rates** and **Differential Rates** accordingly.

SR Reimbursement Rates For Randi's House Return to review

[+ Add Reimbursement Rates](#)

Coalition	County	Reimbursement Start Date	Reimbursement End Date		
ELC of TALLAHASSEE	KREPS ISLAND	9/1/2018	9/16/2018	<a href="#">Settings</a>	<a href="#">Reimbursement Rates</a>
ELC of TALLAHASSEE	KREPS ISLAND	9/17/2018	6/30/2019	<a href="#">Settings</a>	<a href="#">Reimbursement Rates</a>

## Contracted Slots

### Setting Up a Provider with Contracted Slots

Using the provider's SR Reimbursement rates from their profile (Private Pay Rates tab, bottom section), click the **Edit Differentials** button. Turn on the Contracted Slots differential rates by selecting the **Yes** radio button, then click **Save**.

Providers participating in contracted slots require the total number of slots to be filled in and rate amounts entered for each level of care.

Provider's Differential Rates **FIRST STEPS IN LEARNING INC.**

Yes No

Gold Seal Designation  Effective Date 09/01/2019 End Date 06/30/2020

Quality Performance Incentive (QPI) 4%  Effective Date 09/01/2019 End Date 06/30/2020

Child Assessment Effective Date 09/01/2019 End Date 06/30/2020

Local Quality Improvement (QI)  Effective Date 09/01/2019 End Date 06/30/2020

Contracted Slots  Effective Date 09/01/2019 End Date 06/30/2020

Care Level	INF	TOD	2YR	PR3	PR4	PR5
Enter Rate	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00

Cancel Save

### Enrolling a Child in a Contracted Slot

The child has to have an active SR enrollment with the provider. If the enrollment has been terminated, the child will not be able to be enrolled in a contracted slot.

The children receiving a contracted slot must be identified within the **SR Program > SR Provider Enrollment** work queues. Search by provider name. The number of contracted slots for the provider are displayed.

Provider Search Results

Provider Name	Provider ID	Has Contracted Slots	Total Contracted Slots
HAMPSHIRE ACADEMY, INC	348	No	0

Providers that do not have contracted slots will not have the checkboxes to select a child for contracted slots enrollments.

Enrollments Results for HAMPSHIRE ACADEMY, INC - 348

Status	Child Name	Child Age	Unit of Care	Level of Care	Billing Group	Enrollment Start Date	Enrollment End Date
Enrolled	[REDACTED]	2 yrs	FT	2YR	BG8	06/13/2018	
Enrolled	[REDACTED]	2 yrs	FT	2YR	BG8	06/12/2018	
Enrolled	[REDACTED]	2 yrs	FT	2YR	BG1	06/20/2018	
Enrolled	[REDACTED]	2 yrs	FT	2YR	BG8	07/27/2018	
Enrolled	[REDACTED]	7 yrs	FT	SCH	BG3R	08/07/2018	
Enrolled	[REDACTED]	2 yrs	FT	2YR	BG1	09/10/2018	
Enrolled	[REDACTED]	3 yrs	FT	PR3	BG1	09/10/2018	
Enrolled	[REDACTED]	3 yrs	FT	PR3	BG8	09/26/2018	

Providers that have contracted slots will have checkboxes to select a child for contracted slots enrollments, and the number of available contracted slots is displayed.

Provider Search Results

Provider Name	Provider ID	Has Contracted Slots	Total Contracted Slots
FIRST STEPS IN LEARNING INC.	719	Yes	10

Enrollments Results for FIRST STEPS IN LEARNING INC. - 719

Status	Child Name	Child Age	Unit of Care	Level of Care	Billing Group	Enrollment Start Date	Enrollment End Date	Is Contracted Slot	Contracted Slot Start Date	Contracted Slot End Date
Enrolled	[REDACTED]	3 yrs	FT	PR3	BG8	07/18/2018		<input type="checkbox"/>		
Enrolled	[REDACTED]	3 yrs	FT	PR3	BG8	09/21/2018		<input type="checkbox"/>		
Enrolled	[REDACTED]	7 yrs	PT	SCH	BG8	10/11/2018		<input type="checkbox"/>		
Enrolled	[REDACTED]	1 yr	FT	TOD	BG8	10/26/2018		<input type="checkbox"/>		
Enrolled	[REDACTED]	3 yrs	FT	PR3	BG8	11/06/2018		<input type="checkbox"/>		
Enrolled	[REDACTED]	0 yr	FT	INF	BG8	11/06/2018		<input type="checkbox"/>		

The child's name, age, unit of care, level of care, billing group and enrollment dates are displayed.

Click on a contracted slots checkbox. A pop-up displays to enter the contracted slots enrollment dates.

Add Child to Contracted Slot

You have chosen to add this child to the contracted slot.

Contracted Slot Start Date \*

mm/dd/yyyy

Contracted Slot End Date \*

mm/dd/yyyy

Save Cancel

By checking the contracted slots checkbox, the Start and End date fields become required. The contracted slots dates do not have to coincide with the child exact enrollment dates, but the contracted slot start date cannot be prior to the SR enrollment Start Date. The Contracted Slot End date cannot be more than 60 days after the SR enrollment End Date. The contracted slots dates have to be within the provider's contracted slot agreement effective dates.

The provider is not allowed to select more than the amount of slots they have are contracted to have. If the provider has 10 slots in their contract, the coalition user can only fill 10 slots. Each time a slot is filled, the available slots decrease.

Enrollments Results for FIRST STEPS IN LEARNING INC. - 719 10 Contracted Slots - 9 Available

Status	Child Name	Child Age	Unit of Care	Level of Care	Billing Group	Enrollment Start Date	Enrollment End Date	Is Contracted Slot	Contracted Slot Start Date	Contracted Slot End Date
Enrolled	[REDACTED]	3 yrs	FT	PR3	BG8	07/18/2018		<input checked="" type="checkbox"/>	07/18/2018	06/30/2019
Enrolled	[REDACTED]	3 yrs	FT	PR3	BG8	09/21/2018		<input type="checkbox"/>		
Enrolled	[REDACTED]	7 yrs	PT	SCH	BG8	10/11/2018		<input type="checkbox"/>		
Enrolled	[REDACTED]	1 yr	FT	TOD	BG8	10/26/2018		<input type="checkbox"/>		

The termination date for the Contracted Slots enrollment can be postponed for up to 60 consecutive calendar days if a child ages out when school starts, leaves the program, or has a schedule change that is no longer Full-Time (FT).

Clicking a checked contracted checkbox displays the Update or End question.

The screenshot shows a web application interface for the Office of Early Learning. A modal dialog box titled "Update or End Contracted Slots" is open, asking "Do you want to update or end contracted slots?". Below the question are three buttons: "Update", "End", and "Cancel". The "Update" button is highlighted with an orange border. In the background, a table of enrollment data is visible, with the first row's "Is Contracted Slot" checkbox checked.

Selecting **End** will populate the current date, then click **Save**.

Selecting **Update** will require a new end date. The end date cannot be greater than 60 days after the SR enrollment end date. The new end date must be within the current billing period and cannot be in a previous month.

The provider will not see any indication of contracted slots enrollment on their enrollment and attendance roster.

The coalition will see the child’s contracted slot enrollment and rate in the provider’s Closed Attendance, Reimbursement Record.

Reimbursement Report for May Schools

Funder Type: SR      Payment Period: Feb-2019      Service Period: 01/01/2018 to 01/31/2019  
 Status: Closed Attendance      Provider Type: Family Child Care Home      Provider ID: 8457  
 Vendor Number: 18457      Provider Name: May Schools      Phone: (248) 324-2342  
 Site Address: 123 GAK ST TALLAHASSEE, FL 32301      County: Gadsden

Child Name	DOB	Billing Group	Eligibility Code	Care Level	Unit of Care	Days to be Paid	Total Payment Rate	Daily Parent CoPay Rate	Gross Payment Amount	Less Parent CoPay Amount	Net Payment Amount	Gold Self Amount	PPP Amount	PPP CA Amount	Q Amount	CS Amount	Status	Action
1. [REDACTED]	12/12/2016	BGP	APP	TOD	FT	19	\$0.05	\$0.05	\$0.95	\$11.97	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	Active	Adjust
TOD TOTALS									\$0.95	\$11.97	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
2. [REDACTED]	12/12/2015	CF	SN	ZYR	FT	6	\$0.09	\$0.00	\$0.54	\$0.00	\$0.54	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	Active	Adjust
3. [REDACTED]	12/12/2015	CF	SN	ZYR	FTFT	3	\$0.18	\$0.00	\$0.54	\$0.00	\$0.54	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	Active	Adjust
ZYR TOTALS									\$1.08	\$0.00	\$1.08	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
Totals									\$2.03	\$11.97	\$1.08	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		

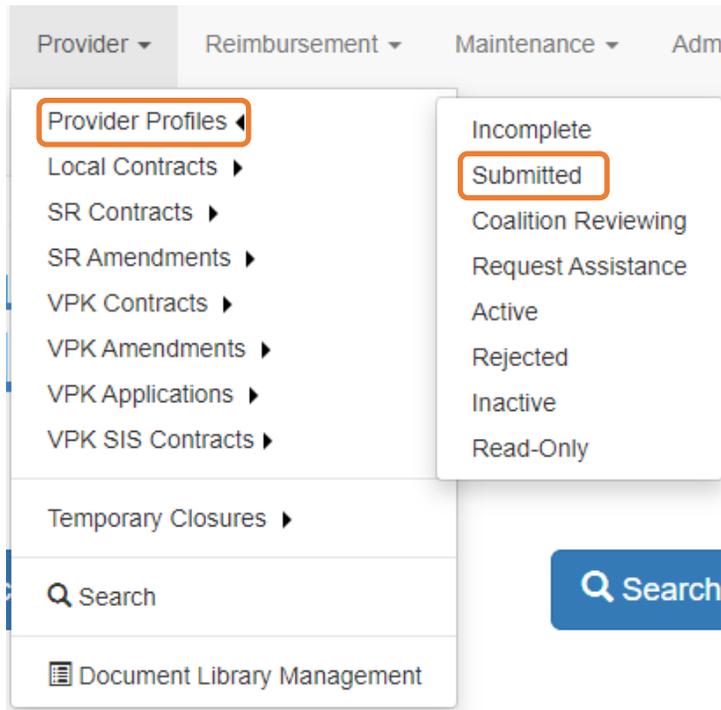
Continue

## Processing a Provider Portal Profile

From the Home screen, the coalition user will click the **Provider** menu.



Then, the coalition user will click the Provider Profiles and select **Submitted** work queue to review a list of all submitted profile requests. Coalition staff may click the provider ID link to open a profile.



### Request Assistance

Providers may request assistance from coalitions by using the Request Assistance feature. When selected by the provider, requests appear in the **Request Assistance** work queue. Coalition staff may click the provider ID link to open a profile. Once a profile is open, coalition staff may review the Provider Notes to locate information regarding the reason for the request.

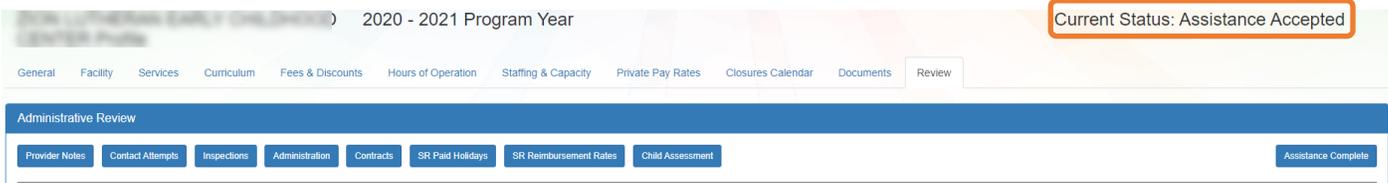


Next, coalition staff may select the **Cancel Assist** button or **Assist Provider** button.

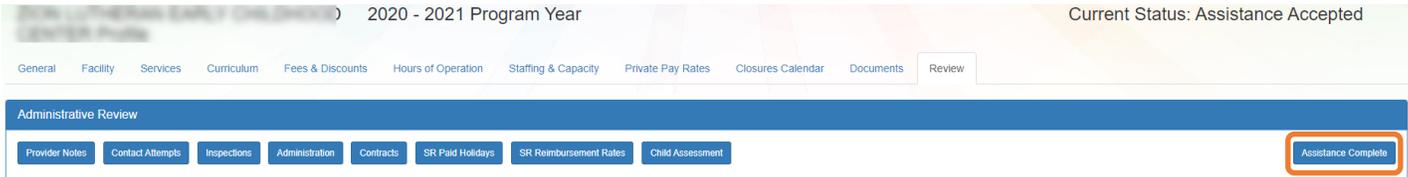


The **Cancel Assist** button will cancel the request and the provider will again be able to edit the profile. The profile status returns to its prior status.

The **Assist Provider** button places the profile in a status that allows coalition users to edit the profile. After clicking the **Assist Provider** button, the profile status will change to **Assistance Accepted**.



Once the coalition user has finished editing the provider profile, click the **Assistance Complete** button.



Then, the coalition user will fill in the Comments section of the **Assistance Request Completed** pop-up and click **Submit**.

**Assistance Request Completed** [Close]

If the assistance request has been completed, please add your comments to the provider and click the "Submit" button to give control back to the provider.

Comments  Send message

[Text Input Field]

[Submit] [Cancel]

If a provider needs help uploading a document, and the coalition has an electronic copy of the document, the provider may use the Need Assistance function to allow the coalition to upload the document.

Provider Notes will be generated to reflect the acceptance of the assistance request and the comment included after completing the assistance.

Provider Notes For Jim's House Of Learning 2

Show 10 entries

Date	Reason	Note	Created By
12/7/2016 4:11:31 PM	ASCMPL	Provider assistance completed. I just sent you an email about the correct edition of your curriculum. Message sent to Provider.	ledbetter.kiwanis@gmail
12/7/2016 4:06:08 PM	ASACPT	Profile assistance request has been accepted and is under review.	ledbetter.kiwanis@gmail
12/7/2016 2:35:28 PM	ASREQ	Provider has requested Profile Assistance on the [Provider Curriculum] section. I have a question about the edition year of my curriculum. by oeldemonstration+3@gmail.com.	oeldemonstration+3@gr
10/10/2016 2:53:16 PM	PSC	Profile status changed to Active.	jim.ledbetter@oel.myflor
10/10/2016 2:52:18 PM	UPRFL	Profile submitted by oeldemonstration+3@gmail.com	oeldemonstration+3@gr
10/10/2016 2:48:58 PM	PSC	Profile status changed to Rejected. Please provide additional documentation for your W-9.	jim.ledbetter@oel.myflor
10/10/2016 2:43:18 PM	PSC	Profile status changed to Coalition Reviewing.	jim.ledbetter@oel.myflor
10/10/2016 2:06:34 PM	UPRFL	Profile submitted by oeldemonstration+3@gmail.com	oeldemonstration+3@gr
Date	Reason	Note	Created By

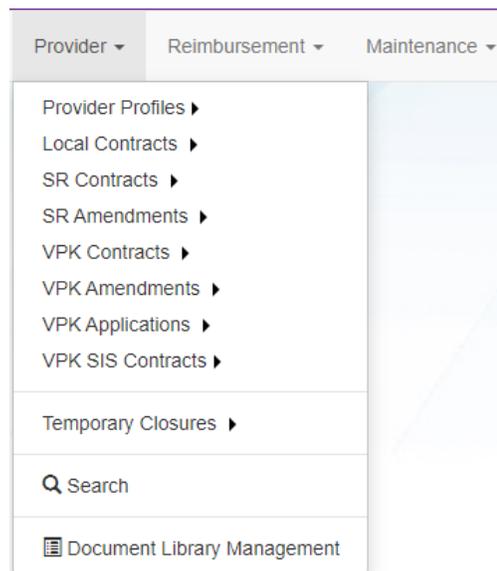
The provider profile will now return to the previous status, and the provider will again be able to edit the profile. However, if changes were made by the coalition, the provider profile will become Incomplete. The provider user may review the changes, sign and certify, and submit to the coalition.

## Assist Provider

In addition to the Request Assistance feature available to providers, coalition users can also help providers through the Assist Provider feature. This feature allows coalition users to put a provider profile in Assistance Accepted status and make edits to the profile without the provider having to submit a request for assistance. The initial profile status has a role in the steps required for editing and the resulting status. For example, if the initial provider profile status is Active\*, when the assistance is completed, the profile status becomes Incomplete in order for the provider to review and approve the changes. Other initial statuses are maintained when the assistance is completed (i.e. Incomplete stays Incomplete after assistance is completed). Editing is not available for Imported or Inactive profile statuses. Additionally, if the initial provider profile status is Submitted\*\*, the status must first be changed to Coalition Reviewing in order for editing to occur. See the chart below:

Initial Profile Status	Editing Available	Coalition Reviewing Necessary	Resulting Status
Incomplete	Yes	No	Incomplete
<b>Submitted**</b>	<b>No</b>	<b>Yes</b>	<b>Submitted</b>
Coalition Reviewing	Yes	No	Coalition Reviewing
Request Assistance	Yes	No	Varies
<b>Active*</b>	Yes	No	<b>Incomplete</b>
Rejected	No	No	Rejected
Inactive, Imported	No	N/A	N/A

Go to **Provider > Search**.



Enter the provider ID, Click **Search**.

**Provider Search**

Provider Type  VPK  SR  Local  CCR&R only  All

Coalitions  Just my coalition  All coalitions

Program Year

Principal ID

Principal Name

Profile Status

Doing Business As

Director's Name

**Provider ID**

Tax ID (FEIN or SSN)

Street Address

City

Registered County

License or Registration or Exempt or MSID

Identify the Program Year / Profile Status that needs assistance. Click the Profile ID.

**Provider Search Results** 2 Total Records

Show 10 entries ▾

Provider ID	Profile ID	Registration Number	Program Year	Profile Status
20837	102906	FHC433600	2019 - 2020	Active
20837	104765	FHC433600	2020 - 2021	Active

Click the **Assist Provider** button.

The screenshot shows the top navigation bar of a provider profile page. The text "2020 - 2021 Program Year" is highlighted in a red box. To the right, "Current Status: Active" is also highlighted in a red box. Below the navigation bar is a blue "Administrative Review" header with several tabs: Provider Notes, Contact Attempts, Inspections, Administration, Contracts, SR Paid Holidays, SR Reimbursement Rates, and Child Assessment. On the far right of this header, the "Assist Provider" button is highlighted in a red box, along with the "Change Profile Status" button.

The current status on the provider profile changes to **Assistance Accepted**. All tabs on the provider profile are accessible and the fields are editable with the exception of some fields on the Facility tab.

This screenshot shows the provider profile page after the status change. The "Current Status: Assistance Accepted" is highlighted in a red box. The "Assist Provider" button is no longer visible. The "Assistance Complete" button is now present on the right side of the "Administrative Review" header.

A provider note is added: "Coalition initiated Request Assistance to assist provider"

The screenshot shows a provider note entry. On the left, the date and time "4/6/2020 3:20:55 PM" are displayed. In the center, the provider name "CPAST" is shown. On the right, the note text "Coalition initiated Request Assistance to assist provider." is displayed.

Make any necessary edits to the profile.

This screenshot shows the provider profile page with the "Curriculum" tab highlighted in a red box. The "Administrative Review" header includes tabs for Provider Notes, Contact Attempts, Inspections, Administration, Contracts, SR Paid Holidays, SR Reimbursement Rates, Registration Fees, and Child Assessment. Below the header, there is a list of expandable sections: Business Info, General, Facility, Services, and Curriculum. The "Curriculum" section is highlighted in a red box.

Curriculum (select all that apply)		
Curriculum	Age Range	Edition/Year
Baby Doll Circle Time	Birth - 3	2012
Balanced Learning (Primrose)	Birth - K	2018
Beyond Centers & Circle Time	3 and 4	2nd edition/2007
Beyond Cribs & Rattles	Birth - 2	1st edition/2005
Big Day for PreK	4 to K	2018
Buttercups	Birth - 3	2017 - 2018
Complete Program for Early Literacy Success - Level Two	4	1st edition/2012
Connect 4 Learning	4 - K	1st edition 2016
Core Knowledge Preschool Program	3 and 4	2013
Creative Curriculum for Family Child Care	Birth - 4	2nd edition/2009

Save all changes and click **Back to Review Page**.

Curriculum (select all that apply)		
Curriculum	Age Range	Edition/Year
Baby Doll Circle Time	Birth - 3	2012
Balanced Learning (Primrose)	Birth - K	2018
Beyond Centers & Circle Time	3 and 4	2nd edition/2007
Beyond Cribs & Rattles	Birth - 2	1st edition/2005
Big Day for PreK	4 to K	2018
Buttercups	Birth - 3	2017 - 2018
Complete Program for Early Literacy Success - Level Two	4	1st edition/2012
Connect 4 Learning	4 - K	1st edition 2016
Core Knowledge Preschool Program	3 and 4	2013
Creative Curriculum for Family Child Care	Birth - 4	2nd edition/2009

Save Back to Review Page

Click the **Assistance Complete** button.

2020 - 2021 Program Year Current Status: Assistance Accepted

Profile

General Facility Services Curriculum Fees & Discounts Hours of Operation Staffing & Capacity Private Pay Rates Closures Calendar Documents Review

Administrative Review

Provider Notes Contact Attempts Inspections Administration Contracts SR Paid Holidays SR Reimbursement Rates Child Assessment **Assistance Complete**

A pop-up displays. Write a comment in the comment box and click **Submit**.

**NOTE:** *Send message* is checked by default. When *Send message* is checked, a message is sent to the provider and a provider note is written; when it is un-selected, only a provider note is written.

**Assistance Request Completed** ✕

If the assistance request has been completed, please add your comments to the provider and click the "Submit" button to give control back to the provider.

Comments  Send message

Curriculum added. |

Submit Cancel

The current status changes back to **Active**.

City of Tennessee Beach Parks and Recreation Agency Profile 2020 - 2021 Program Year Current Status: Active

General Facility Services Curriculum Fees & Discounts Hours of Operation Staffing & Capacity Private Pay Rates Closures Calendar Documents **Review**

Administrative Review

Provider Notes Contact Attempts Inspections Administration Contracts SR Paid Holidays SR Reimbursement Rates Child Assessment Assist Provider Change Profile Status

A provider note is added: "Provider assistance completed. Message sent to provider." The provider note will also include any comments entered.

4/6/2020 3:29:51 PM	ASC MPL	Provider assistance completed. Curriculum added. Message sent to Provider.
------------------------	---------	--

### Coalition Reviewing Status

To process a provider profile, the coalition user will select the **Submitted** work queue.

Provider ▾ Reimbursement ▾ Maintenance ▾ Adm

- Provider Profiles ▾
- Local Contracts ▾
- SR Contracts ▾
- SR Amendments ▾
- VPK Contracts ▾
- VPK Amendments ▾
- VPK Applications ▾
- VPK SIS Contracts ▾
- Temporary Closures ▾
- Q Search
- Document Library Management

- Incomplete
- Submitted
- Coalition Reviewing
- Request Assistance
- Active
- Rejected
- Inactive
- Read-Only

Q Search

Then, the coalition user will click the **Provider ID** link of the record assigned to review.

Provider ID	Program Year	Business Name	Contact Name	Contact Number	Status	Submitted Date	Last Modified By	Last Modified Date
7546	2017 - 2018	OEL	AB	(850) 717-8599	Submitted	10/27/2016	abarber548@yahoo.com	10/27/2016

The Administrative Review page will display. Click the **Change Profile Status** button to change the profile status to **Coalition Reviewing**.

City of Tennessee Beach Parks and Recreation Agency Profile 2020 - 2021 Program Year Current Status: Active

General Facility Services Curriculum Fees & Discounts Hours of Operation Staffing & Capacity Private Pay Rates Closures Calendar Documents **Review**

Administrative Review

Provider Notes Contact Attempts Inspections Administration Contracts SR Paid Holidays SR Reimbursement Rates Child Assessment Assist Provider **Change Profile Status**

Then, click the **Save** button to continue.

Provider Profile: Change Status Submitted

Profile Status: \*

Active  
CoalitionReviewing  
Inactive  
Rejected

Comments:

Note: In case of rejection this comment will be included in the Email Notification to the provider

Cancel Save

Once the status is changed to **Coalition Reviewing**, the following page will display:

Your Requested Action Has Been Performed

Please choose another action from the menu to continue working.

To begin the review process, the coalition user will go back to the Provider Profiles Quick Access Dropdown Queue, select **Coalition Reviewing**, and find the profile that was set to **Coalition Reviewing**.

After coalition review, the profile can be changed to **Rejected**, **Inactive**, or **Active** status. If the profile does not have the information needed to determine if the provider is eligible for funding, the profile should be **Rejected**. If the provider is no longer providing School Readiness or Voluntary Prekindergarten services, the profile should be set to **Inactive**. If the coalition determines the provider is eligible to receive funding, the profile should be set to **Active**.

## Rejected Status

To reject a profile, the coalition user must click the **Change Profile Status** button.

Once on the Change Profile Status page, select **Rejected** in the Profile Status dropdown menu.

Enter the reason for the rejection in the comments section; the comment will be included in the automated email sent to the Provider Portal user from **DONOTREPLY@oel.myflorida.com**. After entering all required fields, click **Save** to proceed.

Provider Profile: Change Status Coalition Reviewing

Profile Status: \*  
Rejected

Status Date:  
10/10/2016

Comments: \*  
Please provide additional documentation for your W-9.

Note: In case of rejection this comment will be included in the Email Notification to the provider

Cancel Save

Hello Jim Ledbetter,

The provider profile you submitted for Jim's House of Learning 2 was not approved for the following reason(s):

Please provide additional documentation for your W-9.

ELC of the Big Bend Region  
(866) 973-9030  
<http://www.elcbigbend.org/>

**Please do not reply to this message. Replies to this message are routed to an unmonitored mailbox. If you have any questions, please contact your Early Learning Coalition at the number listed above.**

The status has been updated at the top of the review page.

Jim's House of Learning 2 Profile Current Status: Rejected

General Business Contact Services Curriculum Fees & Discounts Hours of Operation Staffing & Capacity Private Play Rates Closures Calendar Documents Review

Once in **Rejected** status, the coalition user will not be able to edit the profile until the profile is resubmitted by the Provider Portal user.

## Active Status

To activate a profile, the coalition user must click the **Change Profile Status** button.

Once on the Change Profile Status page, select **Active** in the Profile Status dropdown menu.

An automated email will be sent to the Provider Portal user from **DONOTREPLY@oel.myflorida.com**. After entering all required fields, click **Save** to proceed.

Provider Profile: Change Status Submitted

Profile Status: \*  
Active

Status Date:  
10/10/2016

Sunbiz Document Number (if applicable):

Comments:

Note: In case of rejection this comment will be included in the Email Notification to the provider

Cancel Save

Hello Jim Ledbetter,

The provider profile you submitted for Jim's House of Learning 2 was approved. You may now log on to the Provider Portal with the user name and password at any time to update your information.

ELC of the Big Bend Region  
(866) 973-9030  
<http://www.elcbigbend.org/>

**Please do not reply to this message. Replies to this message are routed to an unmonitored mailbox. If you have any questions, please contact your Early Learning Coalition at the number listed above.**

The status has been updated at the top of the review page.

Jim's House of Learning 2 Profile

General Business Contact Services Curriculum Fees & Discounts Hours of Operation Staffing & Capacity Private Pay Rates Closures Calendar Documents Review

Current Status: Active

## Changing Profile Status

Once the coalition user is ready to update the status of a profile, click the **Change Profile Status** button.

City of Harrisburg Youth Parks and Recreation Agency Profile

2020 - 2021 Program Year

Current Status: Active

General Facility Services Curriculum Fees & Discounts Hours of Operation Staffing & Capacity Private Pay Rates Closures Calendar Documents Review

Administrative Review

Provider Notes Contact Attempts Inspections Administration Contracts SR Paid Holidays SR Reimbursement Rates Child Assessment

Assist Provider **Change Profile Status**

Once the new status is selected, the coalition user has the ability to add a comment and click the **Save** button.

Provider Profile: Change Status Active

Profile Status: \*

PendingUpdate  
Inactive  
Rejected

10/03/2016

Comments:

Note: In case of rejection this comment will be included in the Email Notification to the provider

Cancel **Save**

## Provider Profile Edits

After a provider profile has been set to Active status, if the provider makes a change and re-submits the profile, a notification will appear on the Administrative Review page to notify the coalition user that a change has been made to a profile section.



To see what specific answer has changed, expand the section that has the red flag and another red flag will show what answer has changed.

Click the headers or the + to expand and the - to collapse each section below. Click the  to navigate to that section.

-		General
		<b>General Data Has Changed</b>
1. Do you want to have your program referred to families seeking child care listings?		Yes
2. Do you want to complete a contract to participate in the School Readiness Program?		Yes
3. Do you want to complete a contract to participate in the Voluntary Prekindergarten (VPK) Education Program?		Yes
4. Do you want to complete a contract to receive local funding?		No
5. Business Ownership Type		Corporation
6. Legal Status		Exempt
7. Exemption Details		
Exempt Number		EXEMPT
Expiration Date		05/05/2017
Exemption Reason		School-Age Program
Master School ID (MSID)		
8. Provider Type		Center
9. Are you a Gold Seal provider?	<b>General Data Has Changed</b>	Yes
10. Are you an accredited provider?		Yes
10.1 Accreditations		ACCREDITED PROFESSIONAL PRESCHOOL LEARNING ENVIRONMENT

To see what the previous answer was, hover over the red flag.



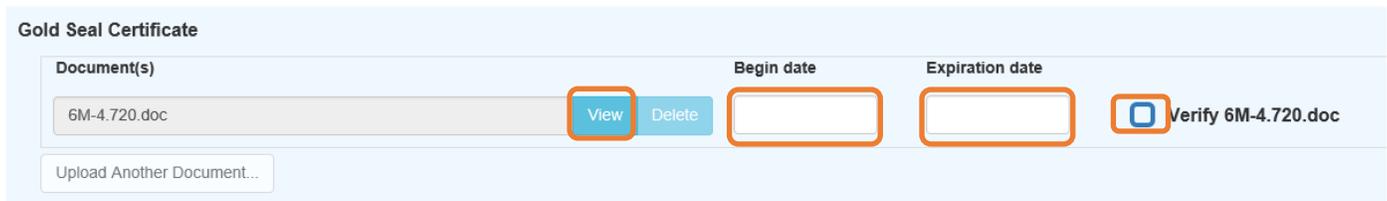
## Verifying Documents

Provider documents can be verified and have a begin date and expiration date added by clicking the **Documents** tab from the Administrative Review page.



A coalition user will then view the document by clicking the **View** button, complete the Begin date and Expiration date for the document, and verify the document by clicking the check box. A coalition user can re-verify a document for a subsequent contract year even if the document was verified in the previous contract year.

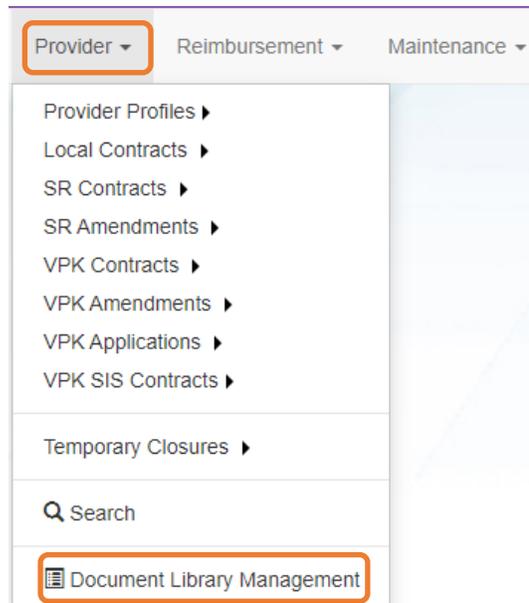
## Supporting Documents



## Document Library Management

The Document Library Management function allows a coalition user to review documents uploaded to the Provider Profile.

To access the Document Library Management function, coalition users will click the **Provider** button and then **Document Library Management**.



The folder list is standard for all providers, but a coalition-specific folder can be added. To add a new folder, coalition users will click the **Add New Folder** button.

## Document Library Management

**Add New Folder**Rename Folder

---

Select Provider:

Select Folder:

**View Files** **Move Files**

The coalition user will then create the new folder name and click the **Save Changes** button.

### Add New Folder ✕

---

Select Coalition:

\*Folder Name:

**Close** **Save Changes**

To rename a folder that is not predefined, coalition users will click the **Rename Folder** button.

## Document Library Management

Add New FolderRename Folder

---

Select Provider

Select Folder

View Files Move Files

### Rename Folder ✕

\* Select Folder:

\* Folder Name:

CloseSave Changes

The coalition user will then select the folder, rename the folder and click the **Save Changes** button.

The folder list is standard for all coalitions.

## Document Library Management

Add New FolderRename Folder

Select Provider

Select Folder 

- please select a folder -

Accreditation and / or Gold Seal

Contracts

Insurance Auto

Insurance Liability

Insurance-Worker Comp

License or Exemption

Miscellaneous

Monthly Adjustment Request

Monthly Classroom Transfer Forms

Monthly Extended Absence Request

Monthly Outstanding Parent Fee

Monthly Reimbursement Report

Monthly Sign in-out Sheet

Monthly VPK Child Withdrawal Forms

Provider Public Rate Sheet

Uncategorized

Unemployment Insurance

VPK Affidavit of Good Moral Character

VPK Background Screenings

VPK Curriculum

VPK Director Credentials

VPK Enrollment Certificates

VPK Instructor's Credentials

W9

View Files Move Files

Coalition users can view a provider's documents by selecting a provider and folder, then clicking **View Files**.

## Document Library Management

Add New FolderRename Folder

Select Provider

Select Folder

View Files Move Files

Coalition users can upload a new file to a provider's folder by clicking the **Upload New File** button, browsing for the file and clicking the **Attach Selected Document** button to complete the upload.

## Document Library Management - View Documents

**Provider Name:**  **Folder Create Date:** 10/25/2016

**Total Files:** 1

---

**Folder Details - Contracts** [Upload New File](#) [Rename File](#)

File Name	Download	Archive	Date Uploaded	Uploaded By
Koala.jpg	<a href="#">Download</a>	<a href="#">Archive</a>	12/07/2016	

Add New File ×

Select a document to upload.

- Select the folder from the drop down list to which you would like to upload a file to.
- Click the *Browse...* button to browse your documents and select the one that you want to upload to the folder.
- You may give a description to the file you are uploading.

Upload file to site: **Jim's House of Learning 2**

Select Destination Folder \*

Select File \*

Attach your document.

Click the *Attach Selected Document* button below to upload the selected document to your selected folder. This will upload a copy of your document and store it in the chosen folder. The upload process may take from several seconds to a *minute*, depending on the size of the document and the speed of you internet connection.

[Attach Selected Document](#)

[Cancel](#)

Coalition users can rename a file in a provider's folder by clicking the **Rename File** button, selecting the file, inserting a new file name and clicking the **Save Changes** button.

### Document Library Management - View Documents

**Provider Name:**

**Total Files:** 1 **Folder Create Date:** 10/25/2016

**Folder Details - Contracts**

File Name	Download	Archive	Date Uploaded	Uploaded By
Koala.jpg	<input type="button" value="Download"/>	<input type="button" value="Archive"/>	12/07/2016	

### Rename File ✕

**Site:** Jim's House of Learning 2

**Select Folder:**

**Select File:**

**File Name:**

## Document Library Management - View Documents

Provider Name:

Jim's House of Learning 2

Total Files:

1

Folder Create Date: 10/25/2016

### Folder Details - Contracts

Upload New File

Rename File

File Name	Download	Archive	Date Uploaded	Uploaded By
Koala.jpg	<a href="#">Download</a>	<a href="#">Archive</a>	12/07/2016	

Coalition users can download or archive a document in a provider's folder by clicking the **Download** or **Archive** button, respectively. If the provider has reached the maximum number of documents allowed on the Profile Documents tab, archiving documents will free up room to allow additional documents to be uploaded for coalition verification.

Providers can also archive documents by clicking the **Remove** button to remove a document from the profile documents screen and archive it in the appropriate Document Library Management folder.

Supporting Documents

Certificate of Licensure

Document(s)	View	Remove	Delete	Begin Date	Expiration Date
2019-2020 License.pdf	<a href="#">View</a>	<a href="#">Remove</a>	<a href="#">Delete</a>	02/23/2019	07/14/2019
2019-2020 New License.pdf	<a href="#">View</a>	<a href="#">Remove</a>	<a href="#">Delete</a>	02/23/2019	02/22/2020
2020-2021BKAllicense.pdf	<a href="#">View</a>	<a href="#">Remove</a>	<a href="#">Delete</a>	02/23/2020	02/22/2021
License2021.pdf	<a href="#">View</a>	<a href="#">Remove</a>	<a href="#">Delete</a>	02/21/2021	02/22/2022
PayStub2.docx	<a href="#">View</a>	<a href="#">Remove</a>	<a href="#">Delete</a>		

## Provider Address Changes

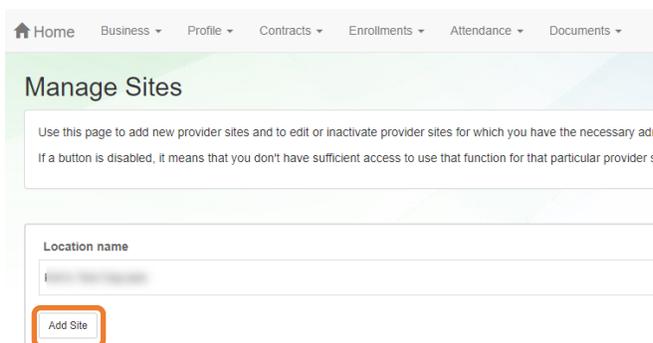
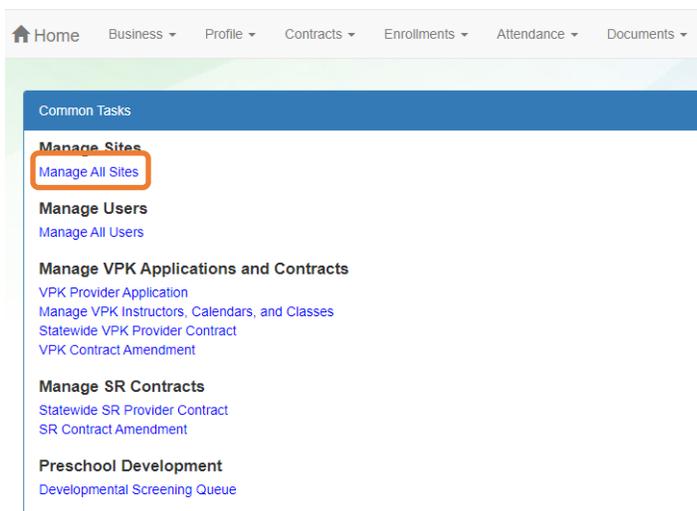
If a provider has a change to the facility address, there are several scenarios to consider, based on whether a new DCF license number is created.

- Scenario 1: NEW DCF license number/local licensing number/registration number, SAME owner
- Scenario 2: NEW DCF license number/local licensing number/registration number, NEW owner **OR** SAME DCF license number/local licensing number/registration number, NEW owner not already in EFS Mod
- Scenario 3: SAME DCF license number/local licensing number/registration number, NEW owner already in EFS Mod

### Scenario 1

A provider is opening a new provider facility/site, or a facility/site is moving, but the owner is the same.

If the provider has a change to the Facility Address and a new DCF license number/local licensing number/registration number is assigned, the provider will create a new site by clicking the Manage All Sites link on the Provider Dashboard, then click the **Add Site** button. They will then fill out the new facility information. This will create a new Provider ID, but keep the new facility under the same EIN/SSN and Principal ID.



All contracts under the old facility will need to be terminated and initiated under the new profile and Provider ID.

If the Facility Address and the Business Address (Principal Address) are the same and both need to change, please submit a Service Desk ticket so a data fix can be completed. Please indicate if the Mailing Address and Payment Mailing Address are also changing, along with the Facility Address and Business Address (Principal Address). The Business tab can have different addresses for the Business Address (Principal Address), Mailing Address, and Payment Mailing Address.

## Scenario 2

A provider is opening a new provider facility/site under a new owner or different EIN/SSN **OR** same DCF license number/local licensing number/registration number and a new owner not already in EFS Mod.

If a new provider facility/site is opening under a new owner, which means a new DCF license number/local licensing number/registration number AND a new EIN/SSN and Principal ID, the provider will need to create a new Provider Portal account by going to <https://providerservices.floridaearlylearning.com/Account/Register> and entering the new information. This new information will generate a new Principal ID and new Provider ID.

This scenario is also applicable if a provider facility/site has an ownership change, the DCF license number/local licensing number/registration number is the same, but the new owner does not already have a provider facility/site in EFS Mod.

## Scenario 3

A provider facility/site has an ownership change, the DCF license number/local licensing number/registration number is the same, and the new owner already has a provider facility/site in EFS Mod.

Please submit a Service Desk ticket to change the Principal ID and EIN/SSN from the old owner to the new owner.

## Provider Contracting

Prior to initiating SR contracts for a program year, the coalition must **first** establish the SR Plan Rates (**Admin Functions > Rates Management > SR Plan Rates**), **followed by** the SR Holiday Schedule (**Admin Functions > Calendar Management > SR Holiday Schedule**).

**NOTE:** If the SR Plan Rates are not established first, the Maximum Paid Closure Dates can't be saved and the Paid Closure Dates can't be added to the SR Holiday Schedule.

## Initiating a Contract

Only providers with an Active profile are eligible to have an electronic contract initiated, and only Contract Managers have the ability to initiate a contract. On the provider Administrative Review page, the Contract Manager must click the **Contracts** button, then, on the manage contracts page, click the **+Initiate Contract** button.

Ventura Day School Profile      2023 - 2024 Program Year      Current Status: Active

General   Facility   Services   Curriculum   Fees & Discounts   Hours of Operation   Staffing & Capacity   Private Pay Rates   Closures Calendar   Documents   Review

Administrative Review

Provider Notes   Contact Attempts   Inspections   Administration   **Contracts**   SR Paid Holidays   SR Reimbursement Rates   Child Assessment   Registration Fees   Assist Provider   Change Profile Status

### Provider Contracts

Manage Contracts For Ventura Day School      Return to review

Show 10 entries      + Initiate Contract

Contract ID	Type of Contract	Contract Name	Coalition	Status	Last Updated	Effective Date	Terminated	Program Year	Contract	Document	Action	
+	108412	SR	DEL-SR 20	ELC of TALLAHASSEE	Certified	02/23/2023	07/01/2022		2022 - 2023	View	Download	Change Status

Select a contract type from the **Type** dropdown menu.

Initiate Contract for Ventura Day School with ELC of TALLAHASSEE

Type: \* -- select --  
Start Date: \* 04/04/2023  
End Date: \* MM/DD/YYYY  
 Paper Process?

-- select --  
VPK  
SR  
Local  
VPK-APP

Select Contract(s)...

Coalition Contact Information

Name: \* Jennifer Ventura  
Email: \* jennifer.ventura.prod+TLHCoalAdm@gmail  
Phone: \* (850) 555-5555

Cancel Save

## SR Contract

SR contracts will default to an electronic process. Paper contracts cannot be created for SR. Select the start date (cannot be a date in the past), select the responsible parties for development screenings and subsequent development screenings, select notification recipient(s), select multiple sites (if needed), and update the coalition contact information (if needed).

### Initiate Contract for Ventura Day School with ELC of TALLAHASSEE

**Type:** \*  **Start Date:** \*  **End Date:** \*   Paper Process?  End On Fiscal Year?  Notify DCF?

SR Contract Information 2023 - 2024 profile is [Active]

**Responsible for development screenings:** \*  **Responsible for subsequent screenings:** \*

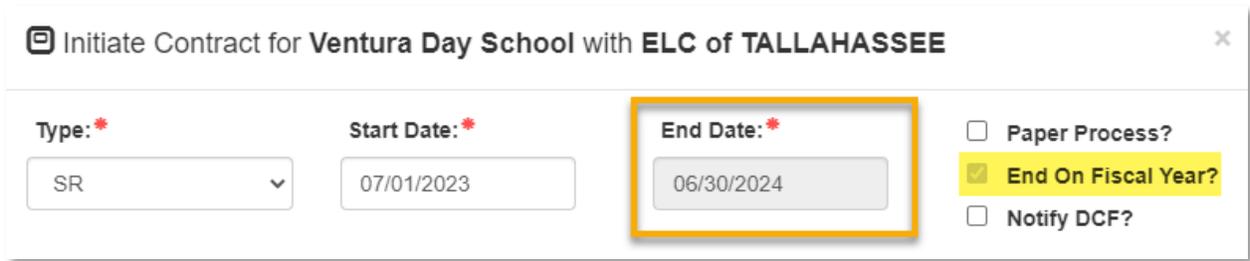
Provider Notification Information

**Email Notification To:**

Multiple Site Provider

**Multiple Site Selection:**

The contract end date defaults to the end of the fiscal year.

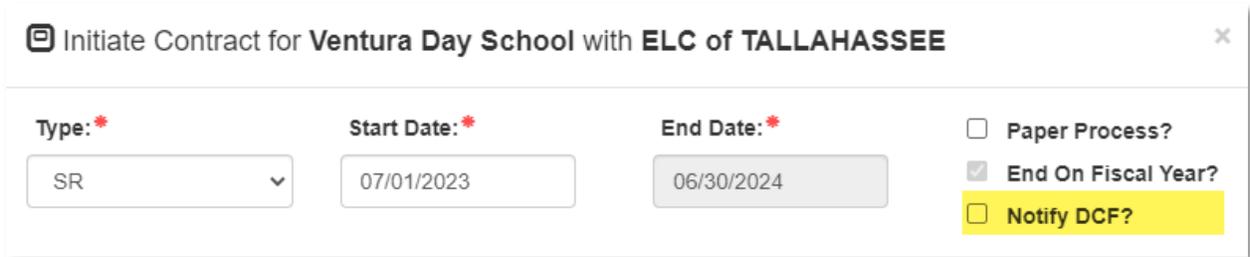


Initiate Contract for Ventura Day School with ELC of TALLAHASSEE

Type: SR Start Date: 07/01/2023 End Date: 06/30/2024

Paper Process?  End On Fiscal Year?  Notify DCF?

The coalition can elect to have DCF notified of a contract initiation process. DCF will also then receive notifications of a certified and terminated contract.



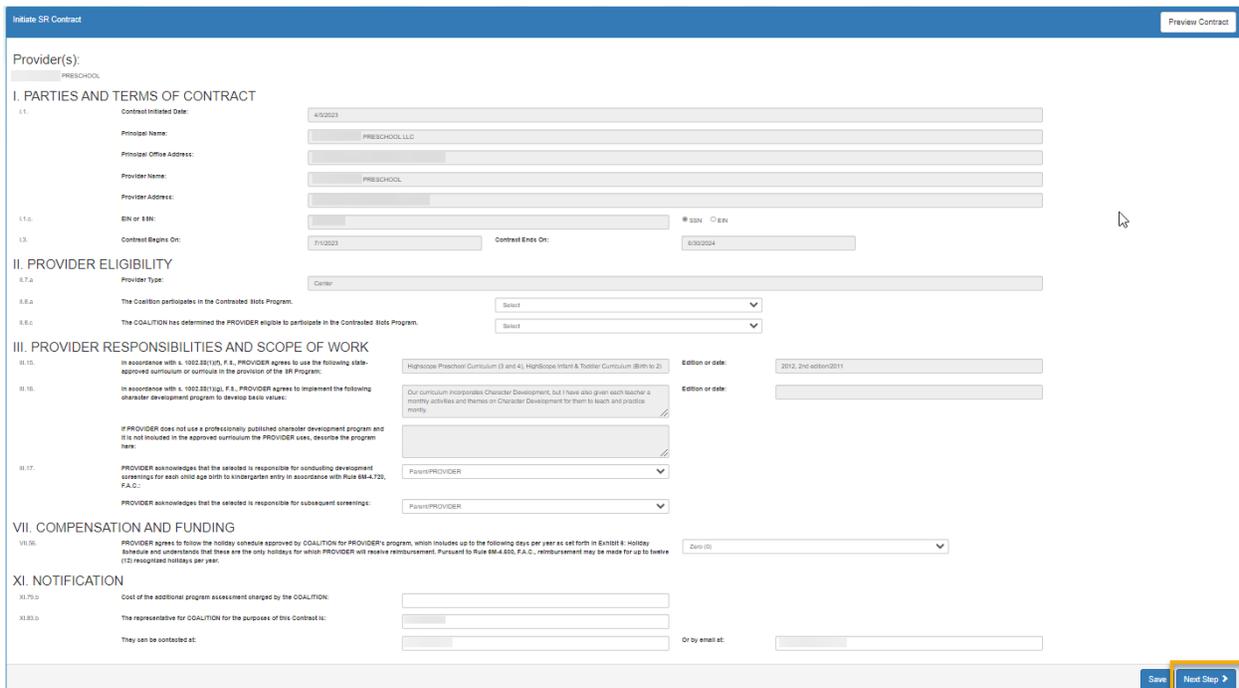
Initiate Contract for Ventura Day School with ELC of TALLAHASSEE

Type: SR Start Date: 07/01/2023 End Date: 06/30/2024

Paper Process?  End On Fiscal Year?  Notify DCF?

When the fields are completed, click the **Save** button.

After the **Save** button is clicked, the following data entry page displays. Select the EIN or SSN radio button and complete the fields (all are required), then click **Next Step**.



Initiate SR Contract

Provider(s): PRESCHOOL

I. PARTIES AND TERMS OF CONTRACT

1.1. Contract Initiated Date: 4/30/2023

Principal Name: PRESCHOOL LLC

Principal Office Address:

Provider Name: PRESCHOOL

Provider Address:

EIN or SSN:  SSN  EIN

1.1.e. Contract Begins On: 7/1/2023 Contract Ends On: 6/30/2024

II. PROVIDER ELIGIBILITY

1.7.a. Provider Type: Center

1.8.a. The COALITION participates in the Contracted Slots Program. Select

1.8.c. The COALITION has determined the PROVIDER eligible to participate in the Contracted Slots Program. Select

III. PROVIDER RESPONSIBILITIES AND SCOPE OF WORK

11.15. In accordance with s. 1002.38(1)(b), F.S., PROVIDER agrees to use the following state-approved curriculum or curriculum in the provision of the SR Program: Highscope Preschool Curriculum (3 and 4), Hardboise Infant & Toddler Curriculum (Birth to 2) Edition or date: 2012, 2nd edition 2011

11.16. In accordance with s. 1002.38(1)(g), F.S., PROVIDER agrees to implement the following shareholder development program to develop basic values: Our curriculum incorporates Character Development, but I have also given each teacher a monthly activities and themes on Character Development for them to teach and practice monthly. Edition or date:

11.17. PROVIDER acknowledges that the selected is responsible for conducting development screenings for each child age birth to kindergarten entry in accordance with Rule 68A-4.720, F.A.C.: Parent/PROVIDER

PROVIDER acknowledges that the selected is responsible for subsequent screenings: Parent/PROVIDER

VII. COMPENSATION AND FUNDING

11.16. PROVIDER agrees to follow the holiday schedule approved by COALITION for PROVIDER's program, which includes up to the following days per year as set forth in Exhibit 4: Holiday Schedule and understands that these are the only holidays for which PROVIDER will receive reimbursement. Pursuant to Rule 68A-6.00, F.A.C., reimbursement may be made for up to twelve (12) recognized holidays per year. Zero (0)

XI. NOTIFICATION

11.75.d. Cost of the additional program assessment charged by the COALITION:

11.83.b. The representative for COALITION for the purposes of this Contract is:

They can be contacted at:

Or by email at:

Save Next Step

After clicking **Next Step**, the following data entry page displays. Select from the dropdown fields, then click **Save & Initiate**.

**NOTE:** The same Quality Improvement Plan Strategies cannot be selected.

SR Contract Exhibit Data Entry Preview Contract

Provider: Precision Assets Academy Learning Center

Exhibit 1 PROVIDER Exempt from Program Assessment: Select

The COALITION has determined the PROVIDER is required to participate in a Quality Improvement plan.

Composite Program Assessment Score: [Text Input]

Exhibit 3 Quality Improvement Plan Strategies: Select

Exhibit 4 Contracted Slots Rate: Select

Exhibit 5 Quality Performance Incentive Rate: Select

Child Assessment Rate: Select

Local Quality Improvement (QI): Select

← Previous Step Save Save & Initiate →

After clicking the **Save & Initiate** button, the following displays. Click **Yes** to continue.

Confirm Initiate Contract

You are about to initiate the contract. This will set the contract status to initiated and you will not be able to make further changes to it as the Coalition. You will have to cancel the contract and re-initiate if you wish to undo this action.

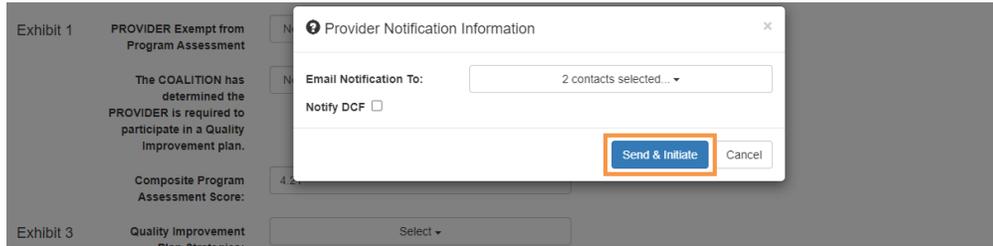
Do you want to save and initiate the contract?

No

Yes

Yes Cancel

After clicking **Yes**, the following displays. Select email address recipient(s) from the **Email Notification To:** dropdown, then click **Send & Initiate**.



Navigate to the provider manage contracts page. The SR contract has a status of Initiated and is available on the provider portal for the provider to edit.

### Provider Contracts

Manage Contracts For PRESCHOOL													Return to review
Show 10 entries													+ Initiate Contract
	Contract ID	Type of Contract	Contract Name	Coalition	Status	Last Updated	Effective Date	Terminated	Program Year	Contract	Document	Action	
+	113629	SR	DEL-SR 20	ELC of	Initiated	04/05/2023	07/01/2023		2023 - 2024	View	N/A	Cancel Contract	
+	106994	SR	DEL-SR 20	ELC of	Certified	02/23/2023	07/01/2022		2022 - 2023	View	Download	Change Status	

### Edit a Drafted Contract

After completing all fields on the exhibit data entry page, if the coalition user clicks the **Save** button instead of the **Save & Initiate** button and exits contract initiation, the contract is given a **"Drafted"** status.

SR Contract Exhibit Data Entry
Preview Contract

Provider: PRESCHOOL

Exhibit 1 PROVIDER Exempt from Program Assessment: No

The COALITION has determined the PROVIDER is required to participate in a Quality Improvement plan: Yes

Composite Program Assessment Score: 3.99

Exhibit 3 Quality Improvement Plan Strategies: 20-hours of IACET- or DEL-approved training

Exhibit 4 Contracted Slots Rate: Up to 10% of the approved base rate

Care Level	INF	TOD	ZYR	PR3	PR4	PR5	Total
Enter Number of Contracted Slots	2	2	4	5	5	2	20

Exhibit 5 Quality Performance Incentive Rate: N/A

Child Assessment Rate: 5.00%

Local Quality Improvement (QI): N/A

Previous Step
Save
Save & Initiate

To edit a **“Drafted”** contract, navigate to the provider manage contracts page. Click the **Edit Draft** button for the drafted contract.

### Provider Contracts

Contract ID	Type of Contract	Contract Name	Coalition	Status	Last Updated	Effective Date	Terminated	Program Year	Contract	Document	Action
113629	SR	DEL-SR 20	ELC of	Drafted	04/05/2023	07/01/2023		2023 - 2024	<a href="#">View</a>	N/A	<a href="#">Edit Draft</a> <a href="#">Cancel Contract</a>

### VPK Contract

VPK contracts will default to an electronic process. Paper contracts cannot be created for VPK. Select the program year, start date, select notification recipient(s), select multiple sites (if needed), and update the coalition contact information (if needed). Then click the **Save** button.

Initiate Contract for [redacted] with [redacted]

Type:  Start Date:   Paper Process?

VPK Contract Information 2023 - 2024 profile is [Active]

Program Year:

Provider Notification Information

Email Notification To:

Multiple Site Provider

Multiple Site Selection:

Coalition Contact Information

Name:  Email:  Phone:

After the **Save** button is clicked, the following page displays. Select the EIN or SSN radio button. Enter the cost of the additional program assessment. If none, enter "0". Update the coalition representative contact information if needed. Clicking **Save** will save changes made on the page.

Initiate VPK Contract Preview Contract

Provider(s):  
Day School

**I. PARTIES AND TERMS OF CONTRACT**

I.1. Contract Initiated Date: 3/31/2023  
Principal Name:  
Principal Office Address:

I.1.c. EIN or SSN:  SSN  EIN

I.3. Contract Begins On: 7/1/2023

**II. PROVIDER ELIGIBILITY**

II.7.a Provider Type: Center

**XII. NOTIFICATION**

XII.54.e. Cost of the additional program assessment charged by COALITION: \* 350.00  
The representative for COALITION for the purposes of this Contract is:  
They can be contacted at: (850) Or by email at: @gmail.com

**Save** **Save & Initiate >**

**NOTE:** To view the provider(s)' composite program assessment scores, click **Preview Contract**. The score displays on paragraph 7.f. for single site contracts or on the Exhibit 1: Provider Location List for multiple site contracts.

**Single Site:**

**f. Eligibility pursuant to ss. 1002.68(5)(a), F.S. PROVIDER acknowledges that PROVIDER must have a composite program assessment score that meets the contract minimum threshold in accordance with Rule 6M-8.621, F.A.C.**

PROVIDER's composite program assessment score: **School Year: 4.92; Summer: N/A** If PROVIDER has multiple sites, the program assessment score for each site is listed in Exhibit 1.

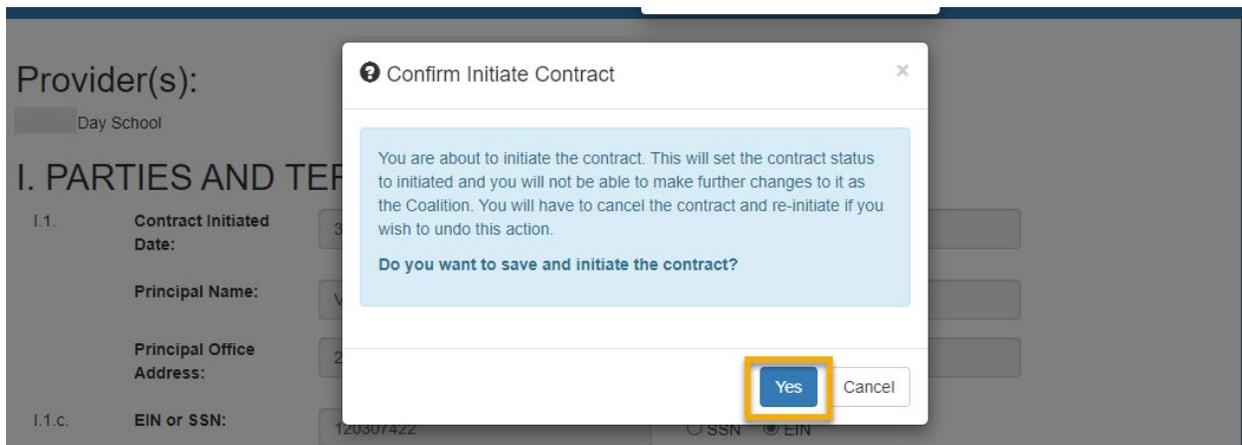
**Multiple Sites:**

**Exhibit 1: Provider Location List**

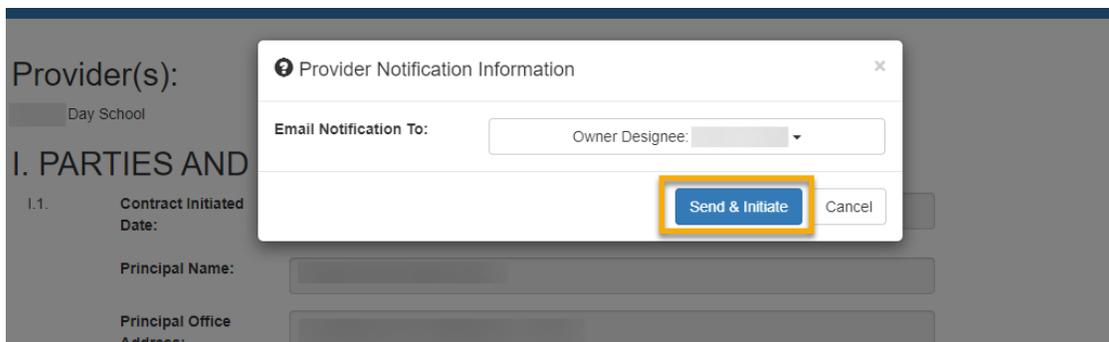
Provider Name: \_\_\_\_\_

Location Number	7416
Location Legal Name	
Doing Business As Name	
Physical Address	
Employer Identification Number	
School Year	Yes
Summer	No
Composite Program Assessment Score	School Year: 5.39; Summer: N/A
Official Use Only	

After clicking the **Save & Initiate** button, the following message displays. Click **Yes** to continue.



After clicking **Yes**, the following displays. Select email recipient(s) from the **Email Notification To:** dropdown, then click **Send & Initiate**.



From the Administrative Review page, click the **Contracts** button to navigate to the provider manage contracts page. The VPK contract has a status of **Initiated** and is available on the provider portal for the provider to edit.

### Provider Contracts

Manage Contracts For Day School												
Return to review												
Show 10 entries												
+ Initiate Contract												
Contract ID	Type of Contract	Contract Name	Coalition	Status	Last Updated	Effective Date	Terminated	Program Year	Contract	Document	Action	
113512	VPK	DEL-VPK 20	ELC of	Initiated	03/31/2023	07/01/2023		2023 - 2024	View	N/A	Cancel Contract	

### VPK-APP

VPK-APPs (VPK Provider Applications) – the VPK 10, VPK 11A, and VPK 11B – will default to an electronic process. Paper contracts cannot be created for VPK-APPs. Select the program year, notification recipient(s), and update the coalition contact information (if needed). Then click the **Save** button.

Initiate Contract for [redacted] with [redacted]

Type: \*  Paper Process?

VPK-APP

---

VPK Contract Information 2021 - 2022 profile is [Active]

Program Year: \* 2021 - 2022

---

Provider Notification Information

Email Notification To: Select Contact(s)...

---

Coalition Contact Information

Name: \* Email: \* Phone: \*

[redacted] [redacted] [redacted]

Cancel Save

The VPK-APP has a status of **Initiated** and is available on the provider portal for the provider to edit.

### Provider Contracts

Manage Contracts For [redacted]												
Return to review												
Show 10 entries												
+ Initiate Contract												
Contract ID	Type of Contract	Contract Name	Coalition	Status	Last Updated	Effective Date	Terminated	Program Year	Contract	Document	Action	
26467	VPK-APP	VPK 10,11A,11B	[redacted]	Initiated	04/26/2021			2021 - 2022	View	N/A	Cancel Application	
26467	VPK-APP	VPK 10,11A,11B	ELC of	Initiated	04/26/2021	04/26/2021		2021 - 2022	View	N/A	Cancel Application	

## School Board/District Contracts

For SR and VPK contracts with a school board/district, the contract can be downloaded as a .pdf and printed.

### Cancelling a Contract

A VPK Provider Application, VPK Contract or SR Contract can be cancelled if the contract status is **Initiated**, **Incomplete**, **Submitted**, **Coalition Reviewing** or **Reviewed**. The only statuses when a contract cannot be cancelled is **Rejected** or **Certified**. To cancel a contract, click the **Cancel** button. The below example is for cancelling a VPK Provider Application, so the button reads **Cancel Application**. If a VPK Contract or SR Contract is cancelled, the button will read **Cancel Contract**.

Provider Contracts

Manage Contracts For Jim's House Of Smarties Return to review

Show 10 entries Initiate Contract

Contract ID	Type of Contract	Contract Name	Coalition	Status	Last Updated	Effective Date	Terminated	Program Year	Contract	Document	Action
267	SR	OEL-SR 20	ELC of the Big Bend Region	Incomplete	04/23/2019	04/23/2019		2018 - 2019	<a href="#">View</a>	N/A	<a href="#">Cancel Contract</a>
266	VPK	OEL-VPK 20	ELC of the Big Bend Region	Submitted	04/23/2019	07/01/2019		2019 - 2020	<a href="#">View</a>	<a href="#">Download</a>	<a href="#">Cancel Contract</a>
31	VPK-APP	VPK 10,11A,11B	ELC of the Big Bend Region	Submitted	05/14/2018	05/15/2018		2017 - 2018	<a href="#">View</a>	<a href="#">Download</a>	<a href="#">Change Status</a>
30	VPK-APP	VPK 10,11A,11B	ELC of the Big Bend Region	Certified	05/14/2018	08/13/2018		2018 - 2019	<a href="#">View</a>	<a href="#">Download</a>	<a href="#">Change Status</a>

Contract ID Type of Contract Contract Name Coalition Status Last Updated Effective Date Terminated Program Year Contract Document Action

First Previous 1 Next Last

After clicking the **Cancel Application** button, the following message will display. Click the **No** or **Continue** button.

**Cancel Statewide VPK Provider Contract**

Contract for Jim's House of Smarties with ELC of the Big Bend Region  
VPK Contract ID: 266

Are you sure you want to cancel this contract?

[No](#) [Continue](#)

After clicking the **Continue** button, the following message will display. Enter a reason, and click the **Submit** button. Click the **Dismiss** button to not cancel the application/contract.

**Cancel Statewide VPK Provider Contract**

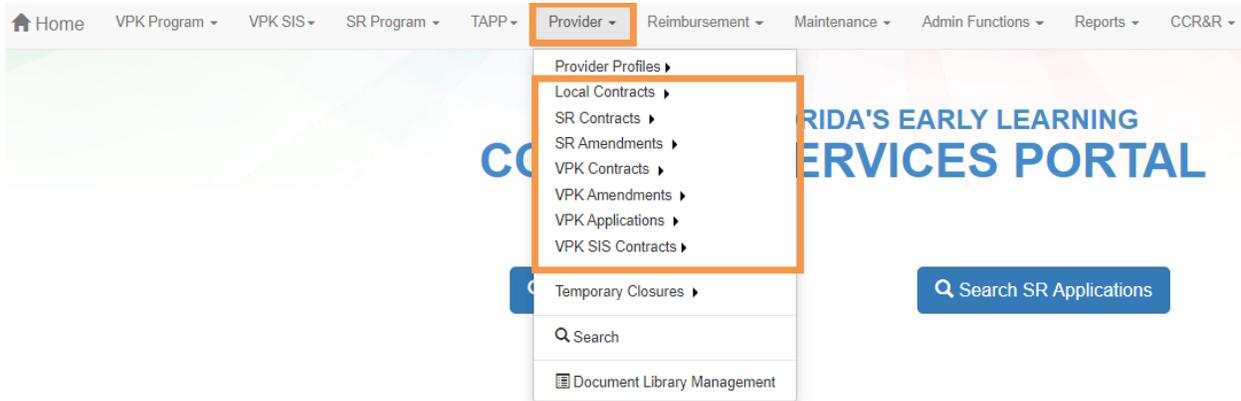
Contract for Jim's House of Smarties with ELC of the Big Bend Region  
VPK Contract ID: 266 Canceled as of 04/23/2019 15:29:19

Reason for Cancellation \*

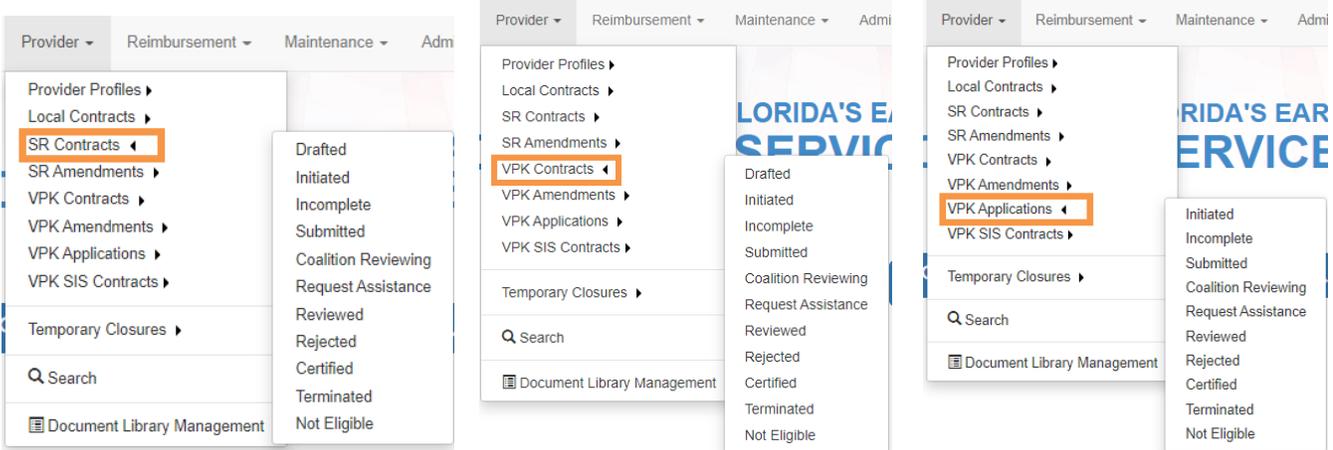
[Dismiss](#) [Submit](#)

## Processing a Contract

Select any of the contract options from the **Provider** dropdown menu to see a list of contracts with the selected status.



SR, VPK and VPK Provider Application contracts share most of the same contract statuses, while Local contracts have a limited number of statuses.



## Contract Status Definitions

### Drafted

The coalition has started the provider contract process for a provider with an **Active** profile.

### Initiated

The coalition has edited the provider contract draft, and the contract has been sent to the provider.

### Incomplete

The provider has started, but not submitted, a contract.

### Submitted

The authorized provider representative has electronically signed the contract and has submitted it to the coalition to be certified.

### Coalition Reviewing

The coalition is actively reviewing the contract.

### Request Assistance (not yet available)

The provider has requested assistance to complete the contract.

### Reviewed

The coalition has reviewed, but not certified, the contract.

### Rejected

The contract has missing or incorrect information that is necessary to approve the contract. Rejecting a contract will allow the provider to correct contract inputs that occurred during the contract edit process (such as signatures). Data that are populated in the contract from the provider profile cannot be changed by rejecting the contract. This information has to be corrected in the provider profile. Then, a new contract will need to be initiated to gather the new profile information.

### Certified

The authorized coalition representative has signed and certified the contract, and the provider is ready to provide early learning services.

### Terminated

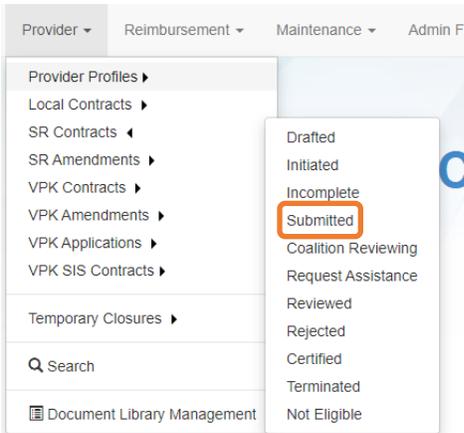
The coalition or provider, for one of several reasons, has revoked a provider contract: inactive provider, termination for cause, termination for fraud, emergency circumstances or provider decision.

### Not Eligible

The coalition has determined that the provider is not eligible for a contract.

## Reviewing a Contract

To review a contract, the coalition user will click the **Provider** dropdown menu, select a contract type (e.g. SR, VPK, VPK Application, etc.) and click **Submitted** to see all submitted contracts for that contract type.



Click the **Contract ID** of the desired contract.

Current Submitted SR Contracts 1 Total Records Program Year: 2023 - 2024

Show 10 entries Clear All Filters Search:  Export to Excel

Contract ID	Program Year	Contract Name	Provider ID	Doing Business As	Principal ID	Principal Name	Status	Last Modified By	Last Modified Date	Start Date	End Date
113626	2023 - 2024	DEL-SR 20					Submitted	@gmail.com	04/05/2023	07/01/2023	06/30/2024

Showing 1 to 1 of 1 entries Previous 1 Next

Then, the following displays. Click the **Change Contract Status** button.

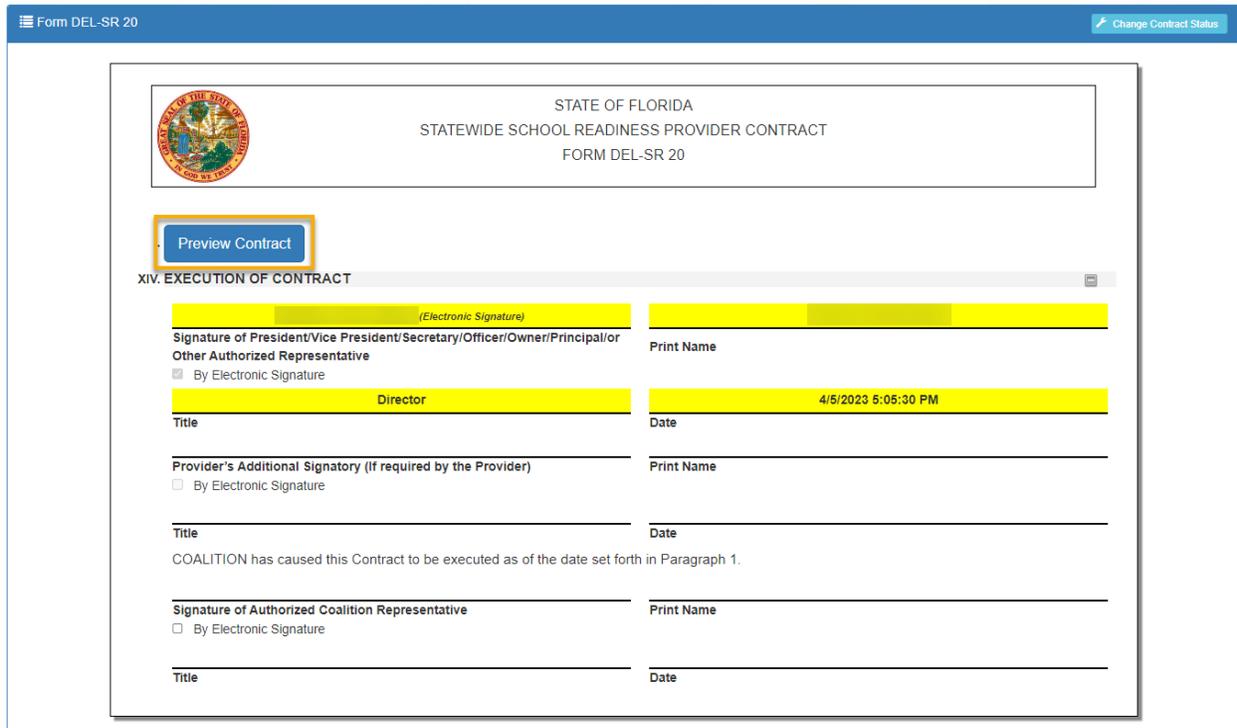
The screenshot shows the top of a web application window titled "Form DEL-SR 20". In the top right corner, there is a blue button labeled "Change Contract Status". Below this is a large white box containing the contract header: "STATE OF FLORIDA STATEWIDE SCHOOL READINESS PROVIDER CONTRACT FORM DEL-SR 20". To the left of the header is the Florida state seal. Below the header, there is a section titled "I. Preview Contract" with a sub-section "XIV. EXECUTION OF CONTRACT". This section contains several fields for electronic signatures, including "Signature of President/Vice President/Secretary/Officer/Owner/Principal/Other Authorized Representative", "Provider's Additional Signatory", and "Signature of Authorized Coalition Representative". Each signature field has a "By Electronic Signature" checkbox and a "Print Name" field. The "Director" field is pre-filled with the name "Director" and the date "4/5/2023 5:05:30 PM". Below the signature fields, there is a text block: "COALITION has caused this Contract to be executed as of the date set forth in Paragraph 1."

The following displays. Select **Coalition Reviewing** from the **Contract Status** dropdown menu and click **Save**.

The screenshot shows a web application window titled "Provider Contract: Change Status". At the top, it displays "Status: Submitted" and "Contract: DEL-SR 20". Below this, there is a "Contract Type:" field with the value "SR". The "Contract Status:" field is highlighted with a red box and has a dropdown menu open. The dropdown menu lists several options: "Drafted", "Coalition Reviewing" (which is highlighted with a mouse cursor), "Reviewed", "Rejected", "Certified", and "Not Eligible". At the bottom of the window, there are two buttons: "Cancel" and "Save", with the "Save" button highlighted by a red box. A small note at the bottom of the form reads: "Note: In case of rejection this comment will be included in the Email Notification to the provider".

## Signing a Contract

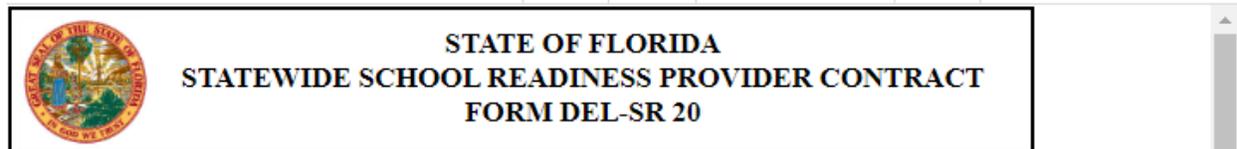
While on the signatures page, the Contract Manager can view the contract by clicking **Preview Contract**. The document viewer opens in a new browser tab. User can scroll through the pages or select the print icon to view a printable copy in PDF format.



The screenshot shows a web interface for a contract. At the top, there is a blue header with 'Form DEL-SR 20' on the left and 'Change Contract Status' on the right. Below the header is a white box containing the state seal of Florida on the left and the text 'STATE OF FLORIDA STATEWIDE SCHOOL READINESS PROVIDER CONTRACT FORM DEL-SR 20' on the right. A blue button labeled 'Preview Contract' is highlighted with a yellow border. Below this is a section titled 'XIV. EXECUTION OF CONTRACT'. It contains several rows of signature fields. The first row is for the 'Signature of President/Vice President/Secretary/Officer/Owner/Principal/ or Other Authorized Representative'. It has a yellow box for the signature, a yellow box for the 'Print Name', and a yellow box for the 'Date' which contains '4/6/2023 5:05:30 PM'. Below this are fields for 'Title' and 'By Electronic Signature' (checked). The second row is for the 'Provider's Additional Signatory (if required by the Provider)'. It has fields for 'Signature', 'Print Name', 'Title', and 'Date'. The third row is for the 'Signature of Authorized Coalition Representative'. It has fields for 'Signature', 'Print Name', 'Title', and 'Date'. A note states: 'COALITION has caused this Contract to be executed as of the date set forth in Paragraph 1.'



The screenshot shows a document viewer navigation bar. It includes a back arrow, a left arrow, a page number '1' in a box followed by 'of 25', a right arrow, a refresh icon, a left arrow, a zoom percentage '100%' in a box with a dropdown arrow, and a print icon.



### I. PARTIES AND TERMS OF CONTRACT

1. **Parties.** This Contract is made and entered into this 1st day of July, 2023, by and between the Early Learning Coalition of Broward (herein referred to as "COALITION"), and PRESCHOOL LLC doing business as (if applicable),  (herein referred to as "PROVIDER"), with its principal offices located at  and its provider physical site address (if the single site provider physical site address is different from principal office address) located at .
- a. **Multiple Public School Locations.** If PROVIDER is a school district executing a single Contract on behalf of multiple public school School Readiness (SR) Program PROVIDERS, a list of their names and their physical addresses are included in Exhibit 1: PROVIDER Location List. Thereafter, PROVIDER must include each location listed in Exhibit 1.

To electronically sign the contract, click the **By Electronic Signature** checkbox.

Form DEL-SR 20 Change Contract Status



STATE OF FLORIDA  
STATEWIDE SCHOOL READINESS PROVIDER CONTRACT  
FORM DEL-SR 20

I. [Preview Contract](#)

**XIV. EXECUTION OF CONTRACT**

<p style="text-align: center;"><i>(Electronic Signature)</i></p> <p>Signature of President/Vice President/Secretary/Officer/Owner/Principal/Other Authorized Representative</p> <p><input checked="" type="checkbox"/> By Electronic Signature</p> <p style="text-align: center;"><b>Director</b></p> <p>Title</p>	<p>Print Name</p> <p style="text-align: center;"><b>4/5/2023 5:05:30 PM</b></p> <p>Date</p>
<p>Provider's Additional Signatory (If required by the Provider)</p> <p><input type="checkbox"/> By Electronic Signature</p> <p>Title</p>	<p>Print Name</p> <p>Date</p>
<p>COALITION has caused this Contract to be executed as of the date set forth in Paragraph 1.</p>	
<p>Signature of Authorized Coalition Representative</p> <p><input checked="" type="checkbox"/> By Electronic Signature</p> <p>Title</p>	<p>Print Name</p> <p>Date</p>

After clicking the checkbox, the following message displays. Enter the signatory's business title and click **Yes**.

Form DEL-SR 20 Electronic Signature

You are about to electronically sign the Form DEL-SR 20.

Full Name: Jennifer Ventura

Title: \* Contracts Manager|

Click "Yes" to confirm your electronic signature.

Yes Cancel

After clicking the **Yes** button, the electronic signature of the signatory, printed name, title, and the date/time will populate, highlighted in yellow.

Form DEL-SR 20

Change Contract Status

STATE OF FLORIDA  
STATEWIDE SCHOOL READINESS PROVIDER CONTRACT  
FORM DEL-SR 20

I. Preview Contract

XIV. EXECUTION OF CONTRACT

(Electronic Signature)

Signature of President/Vice President/Secretary/Officer/Owner/Principal/ or Other Authorized Representative

By Electronic Signature

Director

Print Name

4/5/2023 5:05:30 PM

Date

Provider's Additional Signatory (If required by the Provider)

By Electronic Signature

Print Name

Date

COALITION has caused this Contract to be executed as of the date set forth in Paragraph 1.

(Electronic Signature)

Signature of Authorized Coalition Representative

By Electronic Signature

Contracts Manager

Print Name

4/6/2023 9:15:39 AM

Date

## Certifying a Contract

Once the contract has been electronically signed by the coalition representative, the Contract Manager can certify the contract by clicking the **Change Contract Status** button.

Form DEL-SR 20 Change Contract Status



STATE OF FLORIDA  
STATEWIDE SCHOOL READINESS PROVIDER CONTRACT  
FORM DEL-SR 20

I. [Preview Contract](#)

**XIV. EXECUTION OF CONTRACT**

<p>(Electronic Signature)</p> <p>Signature of President/Vice President/Secretary/Officer/Owner/Principal/Other Authorized Representative</p> <p><input type="checkbox"/> By Electronic Signature</p> <p>Director</p> <p>Title</p>	<p>Print Name</p> <p>4/5/2023 5:05:30 PM</p> <p>Date</p>
<p>Provider's Additional Signatory (if required by the Provider)</p> <p><input type="checkbox"/> By Electronic Signature</p> <p>Title</p>	<p>Print Name</p> <p>Date</p>
<p>COALITION has caused this Contract to be executed as of the date set forth in Paragraph 1.</p>	
<p>(Electronic Signature)</p> <p>Signature of Authorized Coalition Representative</p> <p><input checked="" type="checkbox"/> By Electronic Signature</p> <p>Contracts Manager</p> <p>Title</p>	<p>Print Name</p> <p>4/6/2023 9:15:39 AM</p> <p>Date</p>

After the **Change Contract Status** button is clicked, the following will display. The Contract Manager will change the Contract Status to Certified and click **Save**.

Provider Contract: Change Status

Status: Submitted  
Contract: DEL-SR 20

Contract Type:  
SR

Contract Status: Certified

Status Date:  
04/06/2023

Start Date:  
07/01/2023

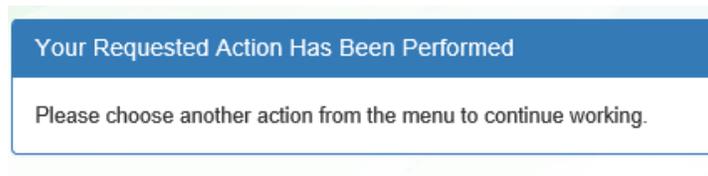
End Date:  
06/30/2024

Comments:

Note: In case of rejection this comment will be included in the Email Notification to the provider

Save

After the **Save** button is clicked, the following displays.



If the contract was not electronically signed, the following error message will display. Click **Cancel** and return to the electronic signatures page to sign the contract.

A screenshot of a web application interface titled "Provider Contract: Change Status". The header shows "Status: Certified" and "Contract: DEL-SR 20" on the left, and "Start Date: 7/1/2023" and "End Date: 6/30/2024" on the right. Below the header is a red error message box that says "Error : Coalition signature is required before a contract can be certified." The form contains several fields: "Contract Type" with a text input containing "SR"; "Contract Status" with a dropdown menu showing "Certified"; "Status Date" with a text input containing "04/09/2023"; "Start Date" with a date picker showing "07/01/2023"; "End Date" with a date picker showing "06/30/2024"; and "Comments" with a large text area. At the bottom, there is a "Cancel" button highlighted with a yellow border and a "Save" button.

## Rejecting a Contract

To reject a contract, the Contract Manager will select a Contract Status of **Rejected**, select a **Rejection Reason** and click **Save**.

Provider Contract: Change Status

Status: Submitted  
Contract: DEL-SR 20

Contract Type:  
SR

Contract Status: \*  
Rejected

Status Date:  
04/06/2023

Rejection Reason: \*

- Additional Information/Documentation Required
- Other
- Revisions Required
- Provider Ineligible to Contract for Program
- Health and Safety Inspection Not Completed or Scheduled
- Did Not Pass Health and Safety Pre-Inspections

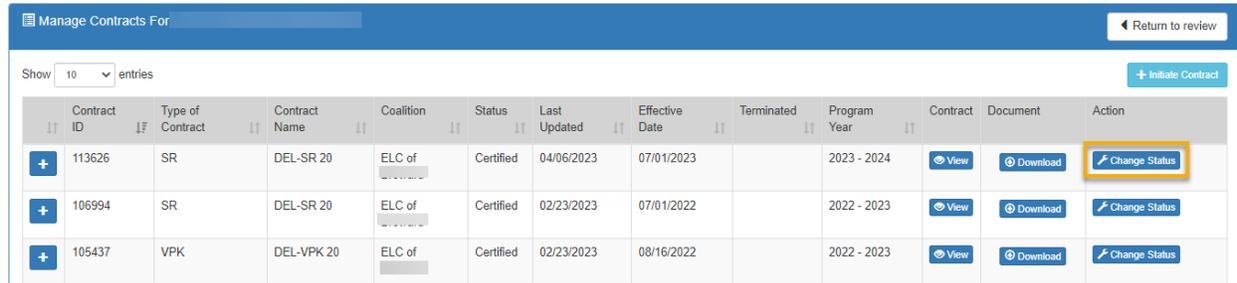
Note: In case of rejection this comment will be included in the Email Notification to the provider

Cancel Save

## Terminating a Contract

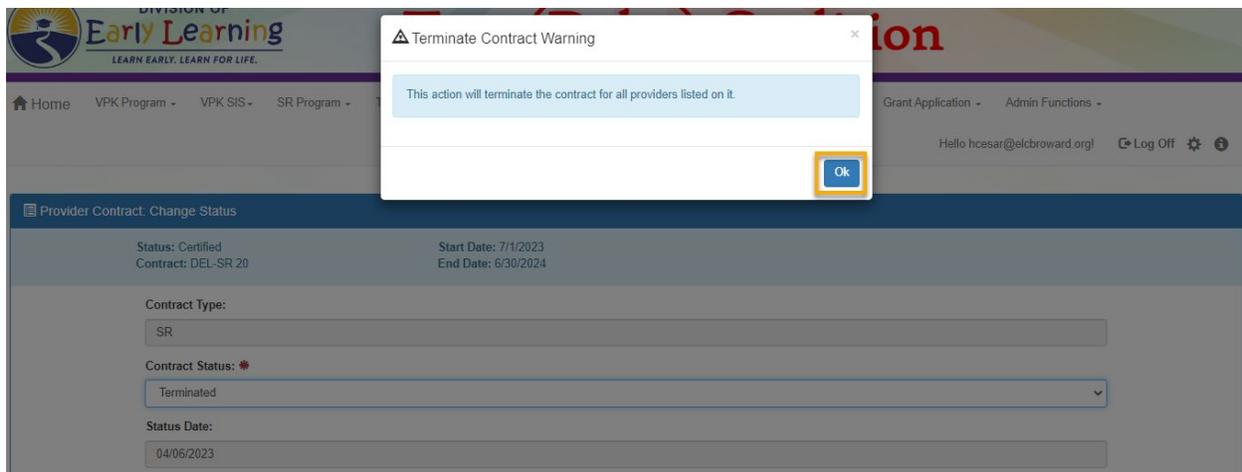
To terminate a **Certified** SR or VPK contract, from the provider manage contract page, the Contract Manager will click the **Change Status** button.

### Provider Contracts



Contract ID	Type of Contract	Contract Name	Coalition	Status	Last Updated	Effective Date	Terminated	Program Year	Contract	Document	Action
113626	SR	DEL-SR 20	ELC of	Certified	04/06/2023	07/01/2023		2023 - 2024	<a href="#">View</a>	<a href="#">Download</a>	<a href="#">Change Status</a>
106994	SR	DEL-SR 20	ELC of	Certified	02/23/2023	07/01/2022		2022 - 2023	<a href="#">View</a>	<a href="#">Download</a>	<a href="#">Change Status</a>
105437	VPK	DEL-VPK 20	ELC of	Certified	02/23/2023	08/16/2022		2022 - 2023	<a href="#">View</a>	<a href="#">Download</a>	<a href="#">Change Status</a>

Select a **Contract Status** of **Terminated**. The following message displays. Click the **Ok** button to continue.



**Terminate Contract Warning**

This action will terminate the contract for all providers listed on it.

**Ok**

Provider Contract: Change Status

Status: Certified  
Contract: DEL-SR 20

Start Date: 7/1/2023  
End Date: 6/30/2024

Contract Type:  
SR

Contract Status: \*  
Terminated

Status Date:  
04/06/2023

Next, select a **Termination Type** and corresponding **Termination Reason**.

**Provider Contract: Change Status**

Status: Certified  
Contract: DEL-SR 20

Start Date: 7/1/2023  
End Date: 6/30/2024

Contract Type:  
SR

Contract Status: \*  
Terminated

Status Date:  
04/06/2023

Termination Type: \*  
Termination Reason: \*  
Contract Termination Date: \*  
4/6/2023

Comments:

Note: In case of rejection this comment will be included in the Email Notification to the provider

Cancel Save

**Termination Type: \***

- Inactivation
- Termination for Cause
- Suspension
- Termination for Fraud, 5 year Revocation
- Termination for Cause, 5 year Revocation
- Termination for National Disqualification
- Emergency Termination
- Termination By Provider
- Appeal - Pending
- Emergency Termination, 5 year Revocation

**Termination Type: \***

Inactivation

**Termination Reason: \***

- Provider no longer wishes to participate in listing.
- Profile not updated by deadline.
- Ownership Change.
- Provider has a duplicate record.
- Incorrect Contract Version.

Termination Type: \*

Termination for Cause

Termination Reason: \*

Threat to child health, safety or welfare.  
Reason or probable cause to suspect fraud  
Failure to comply with contract - general.  
Failure to comply with contract - lapse of insurance.  
No school readiness contract due to curriculum requirement.  
Provider's license or registration has expired.  
DCF or licensing agent has revoked license or registration.  
Refusal to accept notice described under contract.  
Failure to satisfactorily pass the health and safety inspections.  
Failure to implement corrective action.  
Failure to comply with terms of probation.  
Provider shares an officer or director with a provider that is on the United States Department of Agriculture National Disqualified list of offenders.  
Provider is listed on the Department of Agriculture National Disqualified list of offenders.  
Provider has been cited for a class I violation.

Termination Type: \*

Suspension

Termination Reason: \*

Suspected fraud.

Termination Type: \*

Termination for Fraud, 5 year Revocation

Termination Reason: \*

Convicted of, found guilty of, or pleads guilty or nolo contendere to public assistance fraud.

Termination Type: \*

Termination for Cause, 5 year Revocation

Termination Reason: \*

Provider shares an officer or director with a provider that is convicted of, found guilty of, pleads guilty or nolo contendere regardless of adjudication to public assistance fraud- ineligible for funding for a 5 year period.  
Action or lack of action which threatens the health and safety or welfare of children  
Failure to satisfactorily pass the health and safety inspections  
Material failure to comply with terms of contract -including lapse in liability insurance, or not being a legally operating provider.  
Failure to implement corrective action.  
Failure to comply with terms of probation.  
Provider fails to implement approved improvement plan or staff development plan. Ineligible for VPK funding for a 5 year period.  
Provider is on probation 3 or 3+ years without Good Cause Exemption.  
Failure to comply with pre and post assessment requirements.  
Refusal to accept any notice in which the coalition is required to send to the provider.

Termination Type: \*

Termination for National Disqualification

Termination Reason: \*

Provider placed on USDA National Disqualified List

Termination Type: \*

Emergency Termination

Termination Reason: \*

Notification by the Department of Children and Families or local licensing agency that actions or inactions of the provider pose an immediate and serious danger to the health and safety or welfare of children.

Termination Type: \*

Termination By Provider

Termination Reason: \*

Provider is no longer in business.  
 Provider is deceased.  
 Provider no longer wishes to accept SR funding.  
 Provider no longer wishes to accept VPK funding  
 Provider has completed their 540 or 300 instructional hours for their current contract.  
 Ownership of the child care site/location has changed.  
 Contract terminated because change not permitted by amendment

Termination Type: \*

Appeal - Pending

Termination Reason: \*

Provider can not receive SR or VPK funding until the appeals process is completed.

Termination Type: \*

Emergency Termination, 5 year Revocation

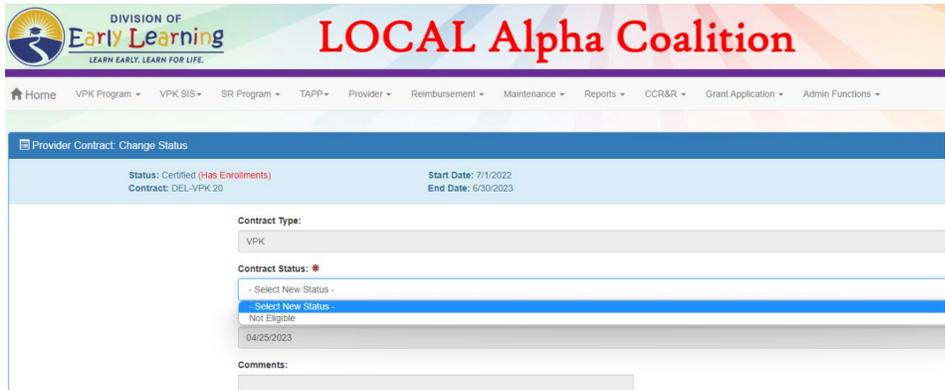
Termination Reason: \*

Emergency Termination, 5 year Revocation

Enter comments, then click the **Save** button.

**NOTE:** A VPK contract cannot be terminated if there are VPK enrollments for the provider with the following statuses: Enrollment Submitted, Enrolled – Change Requested, Enrolled, Coalition Reviewing.

If a VPK enrollment has any of the above statuses, “Has Enrollments” will appear in red next to the Contract Status and the Terminate option will not appear in the drop down list.



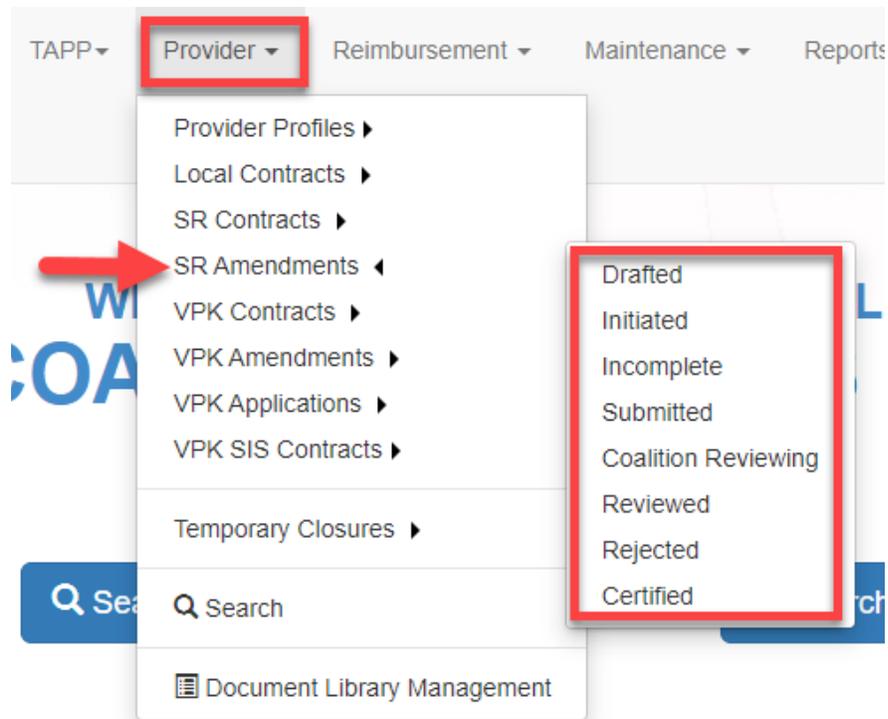
## Amending a Contract

Please note the following prerequisites to amend a provider contract:

1. The contract to be amended must be certified.
2. Any existing amendments to the current program year contract must be certified before a new amendment to the contract can be initiated.
3. Amendments can be backdated to the date of the contract or latest **Certified** amendment for the same program year.

### SR Contract Amendment

To access the SR contract amendment work queues, navigate to **Provider > SR Amendments**.



The amendment queues correspond to each of the amendment statuses:

- Drafted
- Initiated
- Incomplete
- Submitted
- Coalition Reviewing
- Reviewed
- Rejected
- Certified

Select a queue. Click the Amendment ID link to preview, sign, and change the amendment status, depending on the amendment stage.

Current Submitted SR Amendments

Show 10 entries Clear All Filters Search:

Amendment ID	Contract Type	Contract Name	Principal ID	Principal Name	Coalition	Amendment Status	Start Date	End Date
<a href="#">21</a>	SR	SR 20 Amendment	6076			Submitted		6/30/2020

Showing 1 to 1 of 1 entries Previous 1 Next

SR Amendment Change Amendment Status

[Preview Amendment](#)

*(Electronic Signature)*

Signature of President/Vice President/Secretary/Officer/Owner/Principal/ or Other Authorized Representative Print Name

By Electronic Signature

Owner 1/10/2020 2:30:25 PM

Title Date

Provider's Additional Signatory (If required by the Provider)

By Electronic Signature

Title Print Name

Date

COALITION has caused this Contract to be executed as of the date set forth in Paragraph 1.

Signature of Authorized Coalition Representative Print Name

By Electronic Signature

Title Date

### Manually Initiating an Amendment (Non-Profile-Related Changes)

From the provider profile Administrative Review page, click **Contracts**.

2021 - 2022 Program Year Current Status: Active

General Facility Services Curriculum Fees & Discounts Hours of Operation Staffing & Capacity Private Pay Rates Closures Calendar Documents **Review**

Administrative Review

Provider Notes Contact Attempts Inspections Administration **Contracts** SR Paid Holidays SR Reimbursement Rates Child Assessment Registration Fees Assist Provider Change Profile Status

Click the headers or the + to expand and the - to collapse each section below. Click the [Button](#) to navigate to that section.

+ Business Info

+ General

The Manage Contracts page for the provider displays. Click the plus sign “+” to the left of the SR 20 contract to expand the amendment section. Then, click the **Initiate Amendment** button.

**NOTE:** The contract and any of its existing amendments must be in **Certified** status before a new amendment can be initiated.

### Provider Contracts

The screenshot shows the 'Manage Contracts For' interface. At the top, there is a 'Return to review' button and an '+ Initiate Contract' button. Below this is a table with columns: Contract ID, Type of Contract, Contract Name, Coalition, Status, Last Updated, Effective Date, Terminated, Program Year, Contract, Document, and Action. The first row shows Contract ID 78474, Type of Contract SR, Contract Name OEL-SR 20, Status Certified, Last Updated 06/03/2021, Effective Date 07/01/2021, and Program Year 2021 - 2022. A red arrow points to a minus sign icon to the left of the first row. Below the table, there is an expanded section for the selected contract, showing an 'Amendment ID' table with columns: Amendment ID, Status, View, Document, and Action. A red box highlights the '+ Initiate Amendment' button in the top right corner of this expanded section. Below the expanded section, there is a message: 'This contract currently has no amendments.' and navigation buttons: First, Previous, Next, Last.

Click **Yes** to confirm and initiate an amendment or click **Cancel** to close the confirmation window.

The screenshot shows the 'Confirm Initiate Amendment' dialog box. The dialog box has a title bar with a close button. The main text of the dialog box asks: 'Are you sure you want to initiate an amendment for this contract?'. Below the text are two buttons: 'Yes' and 'Cancel'. The 'Yes' button is highlighted with a red box. The background of the screenshot shows the 'Provider Contracts' page with the 'Office of Early Learning' logo and navigation menu.

When **Yes** is clicked, the Initiate SR Amendment page for coalition-relevant changes displays.

The screenshot shows the 'Initiate SR Amendment' page. At the top, there is a blue header with the title 'Initiate SR Amendment' and two buttons: 'Return to Manage Contracts' and 'Preview Amendment'. Below the header is a light blue box with the instruction 'Select the Coalition relevant changes to the contract.' Underneath, there is a list of six items, each with an unchecked checkbox:

- Change in Party Responsible for Administering Initial Developmental Screenings
- Change in Party Responsible for Administering Subsequent Developmental Screenings
- Change in PROVIDER'S eligibility for the Contracted Slots Program.
- Change in COALITION'S participation in the Contracted Slots Program.
- Number of Holidays
- Coalition Contact Persons and Information

At the bottom right of the page, there are two buttons: 'Save' and 'Next Step >'.

The coalition-relevant changes that can be manually selected are:

- Change in Party Responsible for Administering Initial Developmental Screenings
- Change in Party Responsible for Administering Subsequent Developmental Screenings
- Change in PROVIDER'S eligibility for the Contracted Slots Program
- Change in COALITION'S participation in the Contracted Slots Program
- Number of Holidays – This is the coalition-approved number of holidays per year
- Coalition Contact Persons and Information

When a box is selected, fields for the previous value, new value, and reason for modification appear. The previous value is pre-populated, and the user must select or type in the new value and the reason for modification.

**NOTE:** A reason for modification is not captured for “Number of Holidays” and “Coalition Contact Persons and Information,” similar to the 20A

This screenshot shows the 'Initiate SR Amendment' page with two items selected. The first two items have their checkboxes checked, and their respective input fields are visible:

- Change in Party Responsible for Administering Initial Developmental Screenings
  - The removed party is: Parent/PROVIDER
  - The replacement party is: Select
  - Reason for modification: [Text area]
- Change in Party Responsible for Administering Subsequent Developmental Screenings
  - The removed party is: Parent/PROVIDER
  - The replacement party is: Select
  - Reason for modification: [Text area]

The remaining three items are not selected:

- Change in PROVIDER'S eligibility for the Contracted Slots Program.
- Change in COALITION'S participation in the Contracted Slots Program.
- Number of Holidays
- Coalition Contact Persons and Information

At the bottom right, the 'Save' and 'Next Step >' buttons are present.

**NOTE:** The **Preview Amendment** button is available to view the SR 20A form throughout the amendment process.

Select the box for one or more coalition-relevant changes, choose the new selection from the dropdown menu, enter the reason for modification if applicable, then click **Next Step**.

The Initiate SR Amendment page for provider-relevant (principal Location and profile) changes displays.

The boxes on this page are automatically selected if the provider made changes to those items after the contract or latest amendment was executed. Click **Next Step** to proceed.

**NOTE:** Provider-relevant changes will be covered later in the “Provider-Related Changes” section.

The Add or Remove Providers page displays for adding or removing provider(s) from the contract, if applicable. Click **Next Step** to proceed.

**NOTE:** Adding or removing providers will be covered later in the “Adding or Removing Providers” section.

After clicking **Next Step**, the SR Contract Exhibit Data Entry page displays. The previous fields are populated with the selections from the contract or latest amendment. Make any new selections, if applicable, enter the reason for modification, then click **Save & Initiate**.

SR Amendment Exhibit Data Entry [Return to Manage Contracts](#) [Preview Amendment](#)

Provider: XXXXXXXXXX Learning Center, L.L.C

---

**Exhibit 1**      Change in PROVIDER'S exemption from Program Assessment Requirements.

The previous selection is:

The new selection is:

Reason for modification:

Previous Composite Program Assessment Score:

New Composite Program Assessment Score:

Reason for modification:

**Exhibit 3**      Previously selected Quality Improvement Plan Strategies:

New Quality Improvement Plan Strategies:

Reason for modification:

**Exhibit 4**      Contracted Slots Rate:

**Exhibit 5**      Previously selected Quality Performance Incentive Rate:

New Quality Performance Incentive Rate:

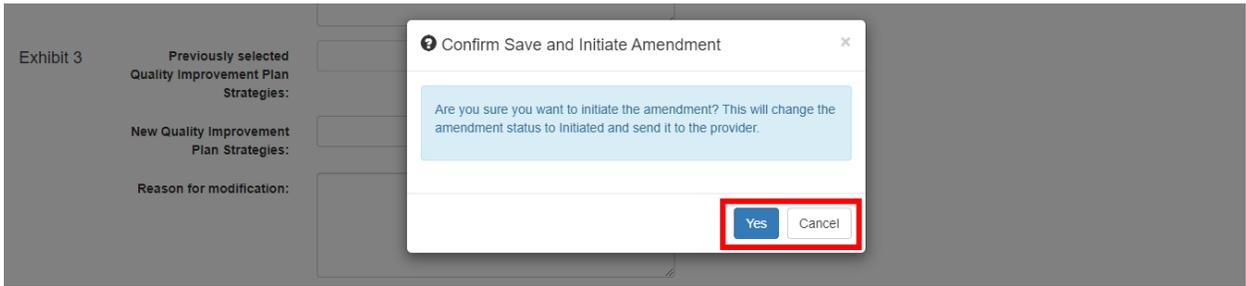
Previously selected Child Assessment Rate:

New Child Assessment Rate:

---

[Previous Step](#) [Save](#) [Save & Initiate](#)

The Confirm Save and Initiate Amendment pop-up message appears. Click **Yes** to initiate the amendment and send it to the provider, or **Cancel** to close the message.



When the **Yes** button is clicked, the user is navigated to the Manage Contracts page. Click the plus “+” sign to the left of the SR 20 contract to expand the amendment section. The amendment is in **Initiated** status.

To preview the initiated SR 20A form and any associated exhibits, click the **View** button

### Provider Contracts

Manage Contracts For Return to review

Show 10 entries + Initiate Contract

Contract ID	Type of Contract	Contract Name	Coalition	Status	Last Updated	Effective Date	Terminated	Program Year	Contract	Document	Action
78474	SR	OEL-SR 20		Certified	06/03/2021	07/01/2021		2021 - 2022	<a href="#">View</a>	<a href="#">Download</a>	<a href="#">Change Status</a>

Show 10 entries All previous amendments must be certified in order to further amend the contract. + Initiate Amendment

Amendment ID	Status	View	Document	Action
18484	Initiated	<a href="#">View</a>		<a href="#">Cancel</a>

First Previous 1 Next Last

To verify that a provider note was written when the amendment was initiated, click the **Return to review** button to return to the Administrative Review page, then click **Provider Notes**.



The screenshot shows the 'Provider Notes For' section. It includes a 'Return to review' button and a '+ Add Provider Note' button. Below these is a table with the following data:

Date	Reason	Custom Code	Note	Created By
6/3/2021 4:39:05 PM	CSTAT		Provider Contract Amendment initiated. *ID: 18484 *Type: SR	

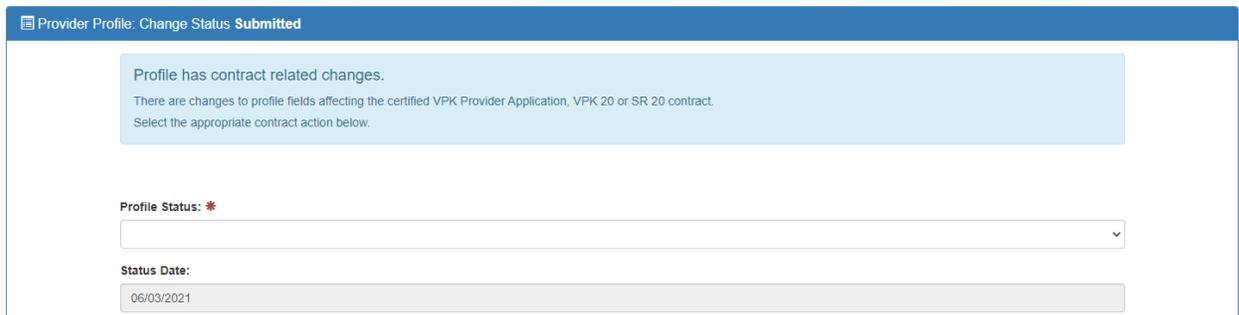
The amendment is now available in the **Provider > SR Amendments > Initiated** queue.

**NOTE:** An email notification is sent to the provider's contact email address when the SR amendment is initiated.

### Provider-Related Contract Changes

When a provider makes changes to their profile that warrant an SR contract amendment and submits the profile, the coalition will have the option to automatically draft an amendment upon approving the provider profile.

When the coalition reviews the profile changes and clicks the **Change Profile Status** button on the provider Administrative Review page, a message informs the user that the profile has contract-related changes.



When the profile status is set to **Active**, the option to initiate an SR contract amendment appears (checked).

Provider Profile: Change Status Submitted

Profile has contract related changes.  
There are changes to profile fields affecting the certified VPK Provider Application, VPK 20 or SR 20 contract.  
Select the appropriate contract action below.

Initiate SR Contract Amendment

Profile Status: \*

Active

Status Date:

06/03/2021

SUNBIZ Document Number (if applicable):

Comments:

Note: In case of rejection this comment will be included in the Email Notification to the provider

Cancel Save

**NOTE:** If the coalition unchecks the box and saves, an SR amendment will not be drafted. If the user later decides to initiate an amendment, they can do so manually from the Manage Contracts page for the provider. The manually-initiated amendment will include the profile changes.

To create the amendment, leave the “Initiate SR Contract Amendment” box selected and click **Save**.

Your Requested Action Has Been Performed

Please choose another action from the menu to continue working.

Navigate to the provider’s Administrative Review page and click the **Contracts** button to access the Manage Contracts page.

2021 - 2022 Program Year Current Status: Active

General Facility Services Curriculum Fees & Discounts Hours of Operation Staffing & Capacity Private Pay Rates Closures Calendar Documents Review

Administrative Review

Provider Notes Contact Attempts Inspections Administration **Contracts** SR Paid Holidays SR Reimbursement Rates Child Assessment Registration Fees Assist Provider Change Profile Status

Click the headers or the + to expand and the - to collapse each section below. Click the Button to navigate to that section.

+ Business Info

+ General

The Manage Contracts page for the provider displays. Click the plus “+” sign to the left of the SR 20 contract to expand the amendment section. The auto-generated amendment is in **Drafted** status. Click the **Edit Draft** button.

### Provider Contracts

Manage Contracts For [Contract Name] Return to review

Show 10 entries + Initiate Contract

Contract ID	Type of Contract	Contract Name	Coalition	Status	Last Updated	Effective Date	Terminated	Program Year	Contract	Document	Action
78474	SR	OEL-SR 20	[Redacted]	Certified	06/03/2021	07/01/2021		2021 - 2022	<a href="#">View</a>	<a href="#">Download</a>	<a href="#">Change Status</a>

Show 10 entries All previous amendments must be certified in order to further amend the contract. + Initiate Amendment

Amendment ID	Status	View	Document	Action
18486	Drafted	<a href="#">View</a>		<a href="#">Edit Draft</a> <a href="#">Cancel</a>

First Previous 1 Next Last

Click the **Next Step** button on the coalition-relevant changes page.

Initiate SR Amendment Return to Manage Contracts Preview Amendment

Select the Coalition relevant changes to the contract.

- Change in Party Responsible for Administering Initial Developmental Screenings
- Change in Party Responsible for Administering Subsequent Developmental Screenings
- Change in PROVIDER'S eligibility for the Contracted Slots Program.
- Change in COALITION'S participation in the Contracted Slots Program.
- Number of Holidays
- Coalition Contact Persons and Information

[Save](#) [Next Step >](#)

The Initiate SR Amendment page for provider-relevant (principal location and profile) changes displays.

If the profile change is one of those listed on the provider-relevant changes page, the applicable box would be checked, sometimes with the new value. Enter a reason for the modification if applicable, then click **Next Step**.

If the provider modified one or more of the items listed below, the box is automatically selected on the provider-relevant changes page:

- Location of the Provider’s Principal Office – This is selected if the principal business physical address was modified
- Doing Business As Name (DBA)
- Curriculum
- Character Development Program
- Change in Signature Authority
- Gold Seal Status
- Liability Insurance – This is selected if a new verified liability insurance document was uploaded since the contract or latest amendment and the begin date starts on or after the date the amendment is initiated
- Provider Reimbursed Rates – This is selected if there was a change to the differential question on the profile Private Pay Rates page, SR daily rates\*, registration fees, and/or operational hours
  - \*An amendment is triggered if a provider changes a FT/PT daily rate to zero (\$0.00) or changes a FT/PT rate from zero (\$0.00) to an amount greater than \$0.00.
  - Assumptions: \$0.00 FT/PT rate means that the provider does not provide services for the care level. A FT/PT rate greater than \$0.00 means that the provider provides services for the care level.

**NOTE:** “Reimbursement Rates Established” is not a change by the provider, but it is automatically selected if the COALITION modifies its SR max rates.

The previous and/or new values are populated based on changes to the provider’s business info or profile. Enter a reason for modification if applicable, then click **Next Step**.

Initiate SR Amendment Return to Manage Contracts | Preview Amendment

The Provider relevant changes will be automatically selected and populated based on the Provider's recent profile changes.

**Location of the Provider's Principal Office (1).**

The deleted address is: 3900

The replacement address is: 3902

Reason for modification: Corrected the physical street address of the principal office.

---

**Provider:**

Doing Business As Name (DBA).

Curriculum

The state-approved curriculum will now be: Frog Street Pre-K (3 and 4) (1st edition/2013), Frog Street Pre-K 2020 (4 to K) (1st edition 2020)

Character Development Program

Change in Signature Authority.

Reimbursement Rates Established

Gold Seal Status

Previously: Gold Seal for Birth to 5

Now: Gold Seal for school age children

Reason for modification: Provider lost Gold Seal for birth to 5 and gained Gold Seal for school age

Liability Insurance

Provider Reimbursement Rates

Previous Step | Save | **Next Step**

The Add or Remove Providers page displays for adding provider(s) or removing provider(s) from the contract if applicable. Click **Next Step** to proceed.

Add or Remove Providers Return to Manage Contracts | Preview Amendment

Select the providers that you wish to ADD to the contract.

Select the providers that you wish to REMOVE from the contract.

Is A Provider You Expect To See Not Listed? Click Here For More Information.

Select

No providers to select.

Previous Step | Save | **Next Step**

**NOTE:** Adding or removing providers will be covered later in the “Adding or Removing Providers” section.

The SR Contract Exhibit Data Entry page displays. The previous fields are populated with the selections from the contract or latest amendment. Make any new selections if applicable and enter the reason for modification. Then click **Save & Initiate**.

SR Amendment Exhibit Data Entry Return to Manage Contracts Preview Amendment

Provider: XXXXXXXXXX Learning Center, L.L.C

**Exhibit 1** Change in PROVIDER'S exemption from Program Assessment Requirements.

The previous selection is: Yes

The new selection is: Select

Reason for modification:

Previous Composite Program Assessment Score:

New Composite Program Assessment Score:

Reason for modification:

**Exhibit 3** Previously selected Quality Improvement Plan Strategies:

New Quality Improvement Plan Strategies: Select -

Reason for modification:

**Exhibit 4** Contracted Slots Rate: N/A

**Exhibit 5** Previously selected Quality Performance Incentive Rate: N/A

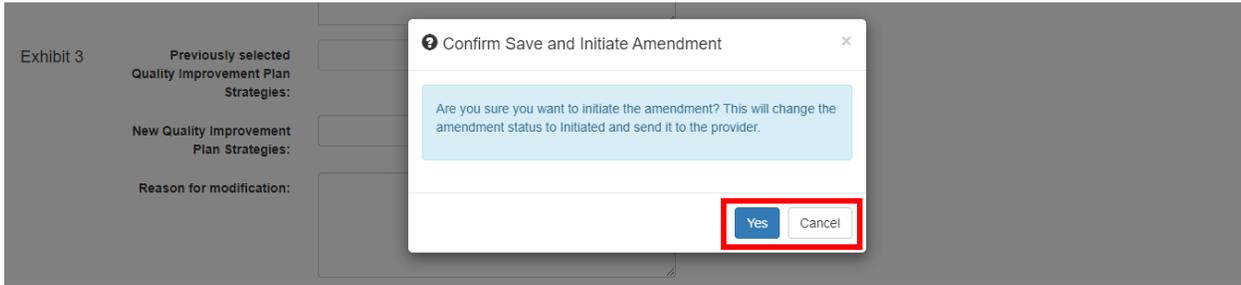
New Quality Performance Incentive Rate: Select

Previously selected Child Assessment Rate: 5.00%

New Child Assessment Rate: Select

Previous Step Save Save & Initiate

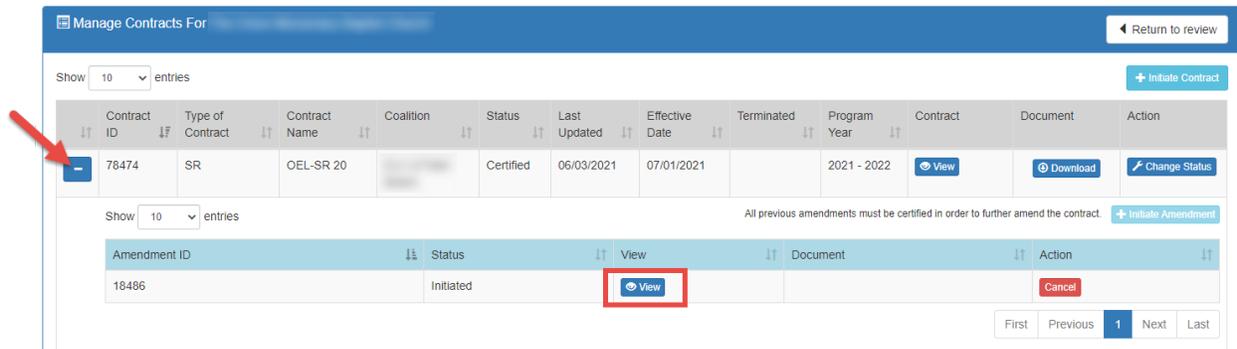
The Confirm Save and Initiate Amendment pop-up message appears. Click **Yes** to initiate the amendment and send it to the provider or **Cancel** to close the message.



When the **Yes** button is clicked, the user is navigated to the Manage Contracts page. Click the plus “+” sign to the left of the SR 20 contract to expand the amendment section. The amendment is in **Initiated** status.

To preview the initiated SR 20A form and any associated exhibits, click the **View** button.

### Provider Contracts



To verify that a provider note was written when the amendment was initiated, click the **Return to review** button to return to the Administrative Review page, then click **Provider Notes**.



The amendment is now available in the **Provider > SR Amendments > Initiated** queue.

**NOTE:** An email notification is sent to the provider’s contact email address when the SR amendment is initiated.

## Adding or Removing Providers

For multiple-site providers, the Add or Remove Providers page allows the coalition to add provider(s) or remove provider(s) from the contract.

**NOTE:** If a provider you expect to see is not listed, it may be due to:

- The provider has a certified or in-progress SR 20 contract with the initiating coalition for the same program year
- The provider did not complete the health and safety inspection by DCF (question #2.1 on the profile General tab is “No”)
- The provider has invalid (expired) curricula
- The provider’s legal status or provider type does not match the provider(s) currently on the contract

To add an eligible provider to the contract, select the provider from the ADD list. Then, click **Save**.

To remove a provider, select the provider from the REMOVE list, then click the **Save** button. At least one provider must remain on the contract.

Clicking **Save** on this page will bring up the reason for modification box.

The screenshot shows the 'Add or Remove Providers' interface. At the top, there are navigation buttons: 'Return to Manage Contracts' and 'Preview Amendment'. The main area is divided into two columns. The left column, titled 'Select the providers that you wish to ADD to the contract.', contains a link 'Is A Provider You Expect To See Not Listed? Click Here For More Information.', a dropdown menu, and a 'Select all' button. The right column, titled 'Select the providers that you wish to REMOVE from the contract.', contains a 'Select' dropdown menu. At the bottom, there are three buttons: 'Previous Step', 'Save' (highlighted with a green box), and 'Next Step' (with a red 'X' over it).

The screenshot shows the 'Add or Remove Providers' interface. At the top, there are navigation buttons: 'Return to Manage Contracts' and 'Preview Amendment'. The main area is divided into two columns. The left column, titled 'Select the providers that you wish to ADD to the contract.', contains a link 'Is A Provider You Expect To See Not Listed? Click Here For More Information.' and a dropdown menu showing 'No providers to select.'. The right column, titled 'Select the providers that you wish to REMOVE from the contract.', contains a dropdown menu showing 'The Union Missionary Baptist Church' and a red error message: 'At least one provider must remain on the contract.'. At the bottom, there are three buttons: 'Previous Step', 'Save' (highlighted with a green box), and 'Next Step' (with a red 'X' over it).

Enter the reason for adding or removing the provider(s), then click **Next Step**.

Add or Remove Providers

Return to Manage Contracts Preview Amendment

Revert Changes

Provider: [blurred text]

Enter the reason for this provider's addition to the contract:

Adding new site #2 to the contract.

Previous Step Save Next Step

**NOTE:** To abandon changes and return to the Add or Remove Providers page, click the **Revert Changes** button.

Next, the Exhibit Data entry page displays for any added providers and original provider(s) on the contract. Complete all applicable fields for the added provider(s). On the original provider, amend any selections if applicable, then click **Save & Initiate**.

SR Amendment Exhibit Data Entry Preview Contract

---

Provider: **Previous Assets Academy Learning Center** ← **Provider being added to the contract**

Exhibit 1 PROVIDER Exempt from Program Assessment

The COALITION has determined the PROVIDER is required to participate in a Quality Improvement plan.

Composite Program Assessment Score:

Exhibit 3 Quality Improvement Plan Strategies:

Exhibit 4 Contracted Slots Rate:

Exhibit 5 Quality Performance Incentive Rate:

Child Assessment Rate:

Local Quality Improvement (QI):

---

Provider: **Learning Center, L.L.C** ← **Original Provider**

Exhibit 1 Change in PROVIDER'S exemption from Program Assessment Requirements.

The previous selection is:

The new selection is:

Reason for modification:

Previous Composite Program Assessment Score:

New Composite Program Assessment Score:

Reason for modification:

Exhibit 3 Previously selected Quality Improvement Plan Strategies:

New Quality Improvement Plan Strategies:

Reason for modification:

Exhibit 4 Contracted Slots Rate:

Exhibit 5 Previously selected Quality Performance Incentive Rate:

New Quality Performance Incentive Rate:

Previously selected Child Assessment Rate:

New Child Assessment Rate:

← Previous Step Save **Save & Initiate** →

The Confirm Save and Initiate Amendment pop up message appears. Click **Yes** to initiate the amendment and send it to the provider or **Cancel** to close the message.

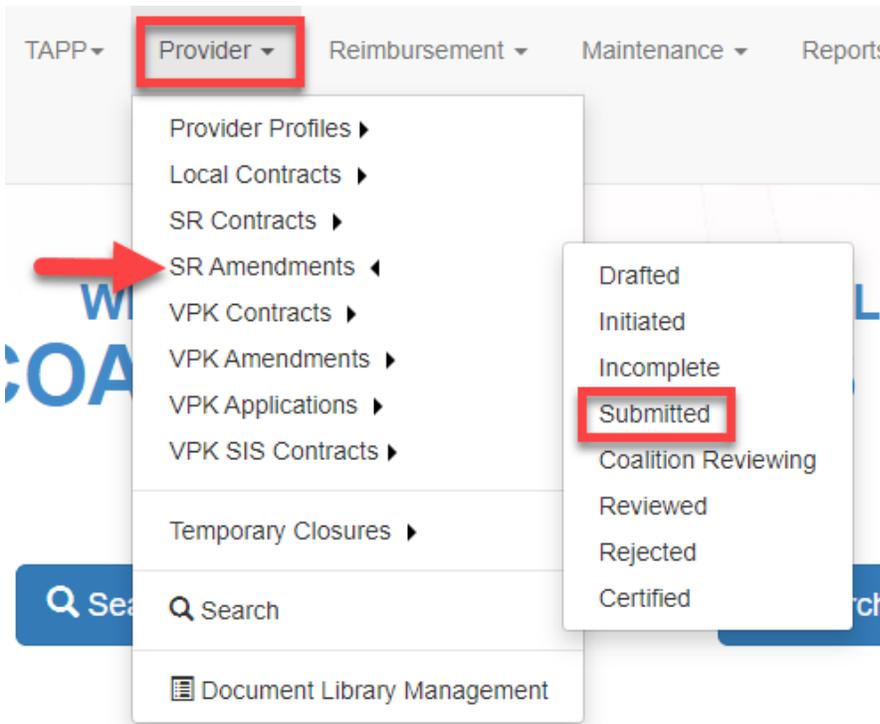


After clicking **Yes**, the amendment status changes to **Initiated** and the amendment is available in the **Provider > SR Amendments > Initiated** queue.

### Reviewing and Certifying an SR Amendment

When the provider has submitted an SR amendment, the amendment will be available in the SR Amendments Submitted queue.

Navigate to **Provider > SR Amendments > Submitted**.



Click the **Amendment ID** link for the provider.

Current Submitted SR Amendments **68 Total Records** Program Year: 2022 - 2023

Show  entries Clear All Filters Search:  Export to Excel

Amendment ID	Program Year	Contract Name	Provider ID	Doing Business As	Principal ID	Principal Name	Amendment Status	Last Modified By	Last Modified Date	Start Date	End Date
<input type="text" value="Filter"/>											
36721	2022 - 2023	SR 20 Amendment					Submitted		07/26/2022		06/30/2023
<b>37397</b>	2022 - 2023	SR 20 Amendment					Submitted		08/10/2022		06/30/2023

On the signatures page, click **Preview Amendment** to view the SR 20A form in a new browser tab.

To electronically sign the amendment, click the “By Electronic Signature” box for the coalition.

SR Amendment Change Amendment Status

**Preview Amendment**

(Electronic Signature)

Signature of President/Vice President/Secretary/Officer/Owner/Principal/Other Authorized Representative  Print Name

By Electronic Signature

Director  6/27/2021 8:48:24 PM

Title  Date

Provider's Additional Signatory (if required by the Provider)  Print Name

By Electronic Signature

Title  Date

COALITION has caused this Contract to be executed as of the date set forth in Paragraph 1.

Signature of Authorized Coalition Representative  Print Name

By Electronic Signature

Title  Date

The SR Amendment Electronic Signature pop-up window appears. Enter the signatory's business title (not a name), then click **Yes**. To close the window without signing, click **Cancel**.

SR Amendment Electronic Signature

You are about to electronically sign the SR Amendment.

Full Name: Jennifer Ventura

Title: \*

Click "Yes" to confirm your electronic signature.

Yes Cancel

When **Yes** is clicked, the coalition user's electronic signature, printed name, title, and the date are populated on the signatures page. Click **Change Amendment Status** to proceed.

The screenshot shows the 'SR Amendment' form with a 'Change Amendment Status' button in the top right corner. The form contains two main signature sections:

- Authorized Representative:** Includes a signature field (redacted), a checkbox for 'By Electronic Signature' (checked), a title field containing 'Director', and a date field containing '6/27/2021 8:48:24 PM'.
- Authorized Coalition Representative:** Includes a signature field (redacted), a checkbox for 'By Electronic Signature' (checked), a title field containing 'Contracts Manager', and a date field containing '6/27/2021 9:22:53 PM'.

There is also a section for 'Provider's Additional Signatory' which is currently empty.

**NOTE:** To remove the coalition’s signature, deselect the “By Electronic Signature” box and click **Yes** in the confirmation modal.

To place the amendment in **Coalition Reviewing**, **Reviewed**, or **Rejected** status, click the **Change Amendment Status** button. Select a status and click **Save**. To access the amendment, navigate to the **Provider > SR Amendments > Coalition Reviewing** or **Reviewed** or **Rejected** queue, depending on the status.

If the amendment is rejected, the amendment is sent back to the provider portal for revisions. The provider will have to re-sign, certify, and submit the amendment, and the coalition will access the amendment in the **Profile > SR Amendments > Submitted** queue.

To place the amendment in **Certified** status from the signatures page, click the **Change Amendment Status** button and set the status to **Certified**.

The screenshot shows the 'Amendment: Change Status' modal. The current status is 'Coalition Reviewing'. The 'Amendment Type' is 'SR'. The 'Amendment Status' dropdown menu is open, showing options: 'Reviewed', 'Certified', and 'Rejected'. A red arrow points to the 'Certified' option. There is a 'Comments' text area and a note at the bottom: 'Note: In case of rejection this comment will be included in the Email Notification to the provider'. 'Cancel' and 'Save' buttons are at the bottom.

Enter the amendment start date, then click **Save**.

**NOTE:** Amendments can be backdated to the effective date of the contract or latest certified amendment for the same program year. Amendments can also be future dated up to the contract/amendment end date.

Amendment: Change Status

Status: Coalition Reviewing

Amendment Type: SR

Amendment Status: \* Certified

Status Date: 06/27/2021

Start Date: 07/01/2021

Save

Navigate to the provider's Manage Contracts page to view the certified amendment. Click the plus "+" sign to the left of the SR 20 contract to expand the amendment section. The amendment is in **Certified** status.

To download a PDF of the certified SR 20A and any associated exhibits, click the **Download** button.

Provider Contracts

Manage Contracts For [Contract Name] Return to review

Show 10 entries Initalize Contract

Contract ID	Type of Contract	Contract Name	Coalition	Status	Last Updated	Effective Date	Terminated	Program Year	Contract	Document	Action	
+	83406	SR	OEL-SR 20		Certified	06/27/2021	07/01/2021		2021 - 2022	<a href="#">View</a>	<a href="#">Download</a>	<a href="#">Change Status</a>

Show 10 entries Initalize Amendment

Amendment ID	Status	Effective Date	View	Document	Action
	Certified	07/01/2021	<a href="#">View</a>	<a href="#">Download</a>	

To verify that a provider note was written when the amendment was certified, click the **Return to review** button to return to the Administrative Review page, then click **Provider Notes**.

Administrative Review

Provider Notes | Contact Attempts | Inspections | Administration | Contracts | SR Paid Holidays | SR Reimbursement Rates | Child Assessment | Registration Fees | Assist Provider | Change Profile Status

Provider Notes For [Provider Name] Return to review

Show 10 entries + Add Provider Note

Date	Reason	Custom Code	Note	Created By
6/27/2021 9:42:36 PM	CSTAT		Provider Contract Amendment status changed. *ID: 18461 *Type: SR *Status Change: Coalition Reviewing to Certified *Comments: N/A.	
6/27/2021 9:26:44 PM	CSTAT		Provider Contract Amendment status changed. *ID: 18461 *Type: SR *Status Change: Submitted to Coalition Reviewing *Comments: N/A.	
6/27/2021 8:56:35 PM	PSC		A new SR Amendment has been submitted for review on 6/27/2021 8:56:35 PM.	
6/27/2021 7:41:11 PM	PSC		Provider Contract Amendment status changed to incomplete. *ID: 18461 *Type: SR	
6/27/2021 7:24:00 PM	CSTAT		Provider Contract Amendment initiated. *ID: 18461 *Type: SR	

The amendment is available in the **Provider > SR Amendments > Certified** queue.

## Cancelling an SR Amendment

Cancelling an amendment will delete the amendment from the system. To cancel an amendment at any stage prior to being certified, on the Manage Contracts page, click the plus “+” sign to the left of the contract to expand the amendment section. Then, click the red **Cancel** button.

Provider Contracts

Manage Contracts For

Show 10 entries

Contract ID	Type of Contract	Contract Name	Coalition	Status	Last Updated	Effective Date	Terminated	Program Year	Contract	Document	Action
78474	SR	OEL-SR 20		Certified	06/03/2021	07/01/2021		2021 - 2022	View	Download	Change Status

Show 10 entries

All previous amendments must be certified in order to further amend the contract.

Amendment ID	Status	View	Document	Action
18483	Drafted	View		Edit Draft <b>Cancel</b>

First Previous 1 Next Last

**NOTE:** Once the amendment is certified, the **Cancel** button is no longer available for that amendment.

The Confirm Cancel Amendment pop-up message displays. Click **Yes** to permanently delete the amendment, or **Cancel** to close the message.

Provider Contracts

Confirm Cancel Amendment

Are you sure you want to cancel this amendment? The amendment will be deleted, and this action cannot be undone.

Yes Cancel

When **Yes** is selected, the amendment is deleted from the system and is no longer visible on the provider Manage Contracts page.

To view the provider note for a canceled amendment, click the **Return to review** button to return to the Administrative Review page, then click **Provider Notes**.

Administrative Review

**Provider Notes** Contact Attempts Inspections Administration Contracts SR Paid Holidays SR Reimbursement Rates Child Assessment Registration Fees Assist Provider Change Profile Status

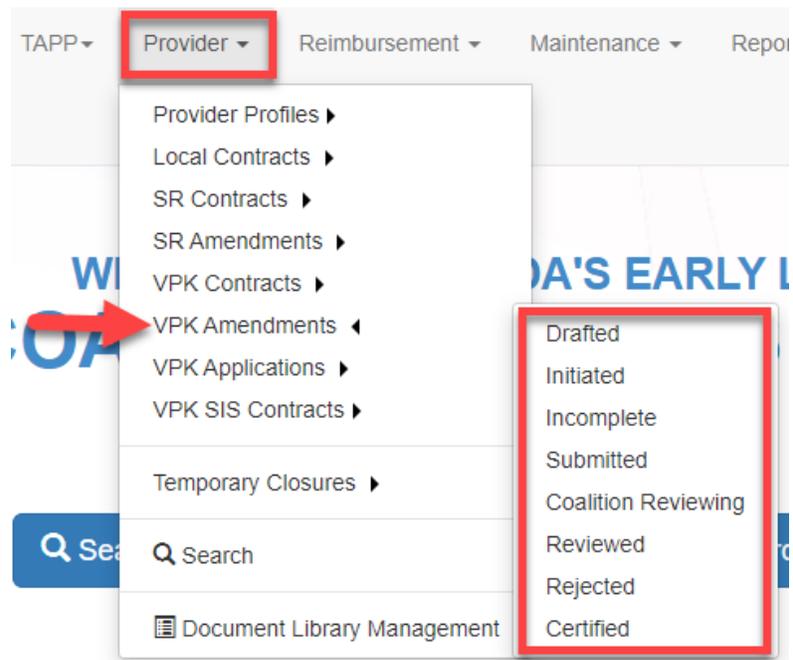
Provider Notes For

Show 10 entries

Date	Reason	Custom Code	Note	Created By
6/3/2021 3:19:41 PM	PSC		The SR amendment [ID: 18483] was canceled by [redacted] on 6/3/2021 3:19:41 PM.	[redacted]

## VPK Contract Amendment

To access the VPK contract amendment work queues, navigate to **Provider > VPK Amendments**.



The amendment queues are:

- Drafted
- Initiated
- Incomplete
- Submitted
- Coalition Reviewing
- Reviewed
- Rejected
- Certified

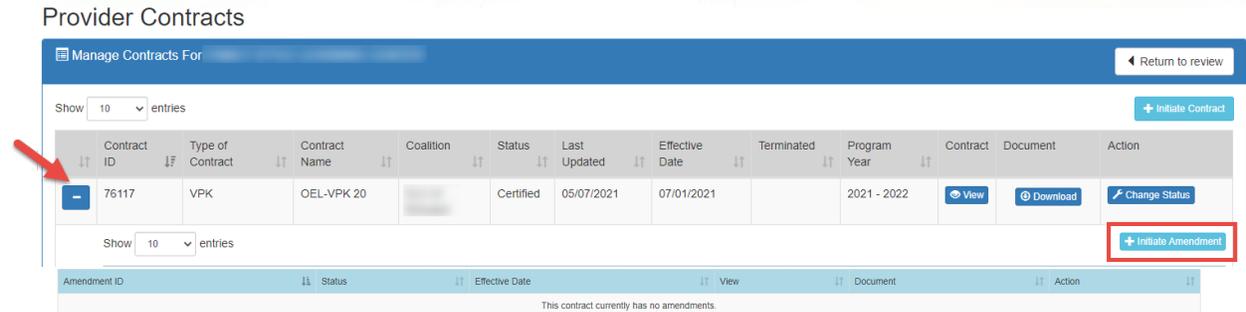
**NOTE:** The queues correspond to each of the available amendment statuses.

## Initiating a VPK Amendment

From the provider profile Administrative Review page, click **Contracts**.

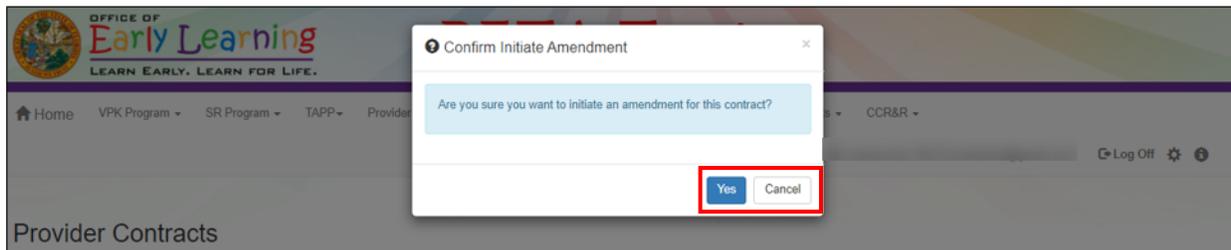


The Manage Contracts page for the provider displays. Click the plus "+" sign to the left of the VPK 20 contract to expand the amendment section. Then, click the **Initiate Amendment** button.

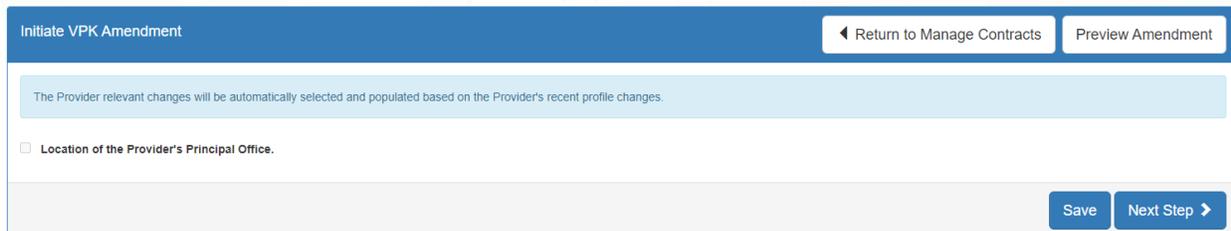


**NOTE:** The contract and any of its existing amendments must be in **Certified** status before a new amendment can be initiated for that contract.

A Confirm Initiate Amendment pop-up message displays. Click **Yes** to confirm that you want to initiate an amendment, or click **Cancel** to close the confirmation window.



After clicking **Yes**, the Initiate VPK Amendment page for provider-relevant changes displays.



The box on this page is automatically selected if the principal office physical location (**Provider Portal > Business > Business Info > Physical Address Information**) has been modified since the contract or latest VPK amendment for the same contract year. The deleted and replacement addresses for the principal office's location are displayed.

If the location of the provider's principal office has changed, type in the reason for modification, then click **Next Step**. If there is no change, click **Next Step** to proceed.

**NOTE:** Do not initiate an amendment for location of the Provider's principal office if children are in care at that location. A change to the principal office physical location where children are in care requires a new VPK contract.

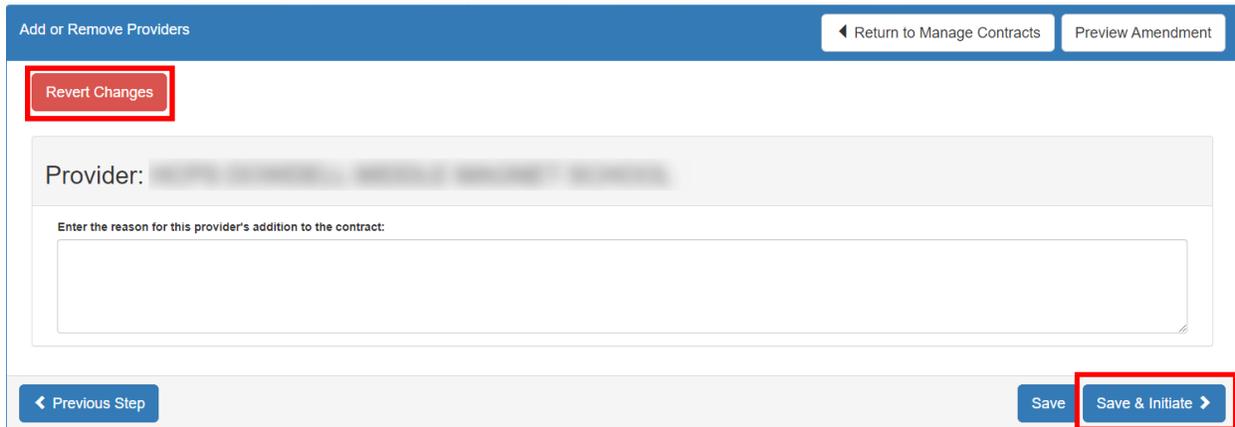
The Add or Remove Providers page displays for the user to add provider locations to, or remove locations from, the contract. If no changes are needed, click **Save & Initiate** to proceed.

**NOTE:** If a provider you expect to see is not listed, it may be due to:

- The provider has an in-progress or certified VPK 20 contract for the same program year
- The provider has invalid (expired) curricula
- The provider's legal status or provider type does not match the provider(s) currently on the contract

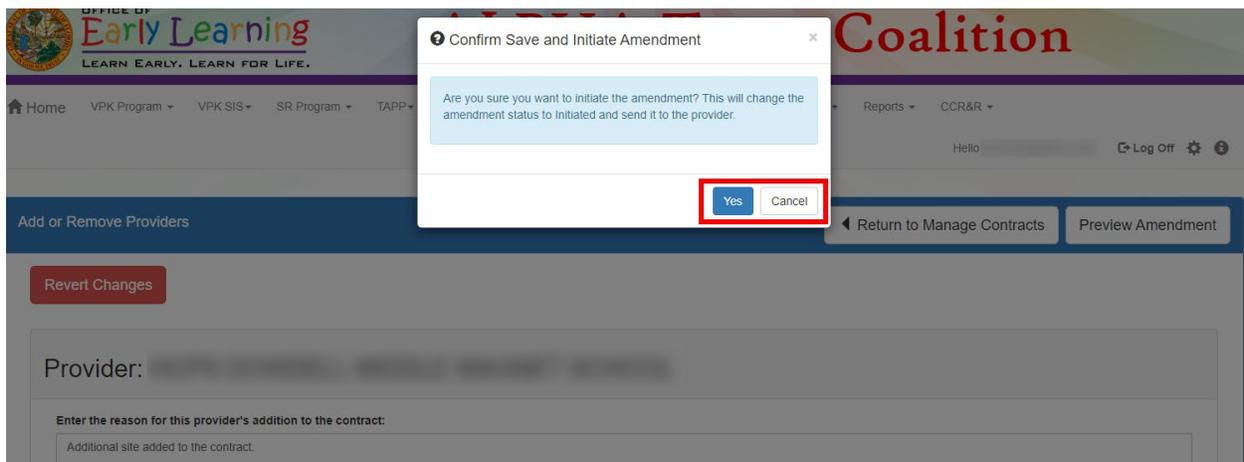
To add or remove eligible provider(s) from the contract, select the provider(s) from the list, then click **Save**. Clicking **Save** will bring up the reason for modification box.

Enter the reason for adding or removing provider(s), then click **Save & Initiate**. To abandon changes and return to the Add or Remove Providers page, click **Revert Changes**.



The screenshot shows the 'Add or Remove Providers' interface. At the top, there are two buttons: 'Return to Manage Contracts' and 'Preview Amendment'. Below this is a 'Revert Changes' button, which is highlighted with a red box. The main form area contains a 'Provider:' field and a text area for 'Enter the reason for this provider's addition to the contract:'. At the bottom of the form, there are three buttons: 'Previous Step', 'Save', and 'Save & Initiate', with the 'Save & Initiate' button highlighted by a red box.

When **Save & Initiate** is clicked, the Confirm Save and Initiate Amendment pop-up message appears. Click **Yes** to initiate the amendment and send it to the provider, or **Cancel** to close the message.



The screenshot shows a pop-up message titled 'Confirm Save and Initiate Amendment'. The message asks: 'Are you sure you want to initiate the amendment? This will change the amendment status to Initiated and send it to the provider.' Below the message are two buttons: 'Yes' and 'Cancel', with the 'Yes' button highlighted by a red box. The background shows the 'Add or Remove Providers' form with the 'Save & Initiate' button highlighted by a red box.

When the **Yes** button is clicked, the user is navigated to the Manage Contracts page. Click the plus “+” sign to the left of the VPK 20 contract to expand the amendment section. The amendment is in **Initiated** status.

To preview the **Initiated** VPK 20A form, and any associated exhibits, click the **View** button.

## Provider Contracts

Manage Contracts For

Show 10 entries

Contract ID	Type of Contract	Contract Name	Coalition	Status	Last Updated	Effective Date	Terminated	Program Year	Contract	Document	Action
58526	SR	OEL-SR 20		Certified	04/29/2021	07/21/2020		2020 - 2021	View	Download	Change Status
39205	SR	OEL-SR 20		Certified	04/29/2021	07/01/2019		2019 - 2020	View	Download	Change Status
27626	SR	OEL-SR 20		Certified	05/24/2019	07/01/2018		N/A	View	Download	Change Status
53426	VPK	OEL-VPK 20		Certified	06/24/2020	07/01/2020		2020 - 2021	View	Download	Change Status

Show 10 entries

All previous amendments must be certified in order to further amend the contract.

Amendment ID	Status	View	Document	Action
16867	Initiated	View		Cancel

First Previous 1 Next Last

To verify that a provider note was written when the amendment was initiated, click the **Return to review** button to return to the Administrative Review page.

## Provider Contracts

Manage Contracts For

Show 10 entries

Return to review

Administrative Review

Provider Notes Contact Attempts Inspections Administration Contracts SR Paid Holidays SR Reimbursement Rates Child Assessment Registration Fees Assist Provider Change Profile Status

Provider Notes For

Show 10 entries

Return to review

Date	Reason	Custom Code	Note	Created By
5/7/2021 7:05:54 PM	CSTAT		Provider Contract Amendment Initiated. *ID: 16867 *Type: VPK	

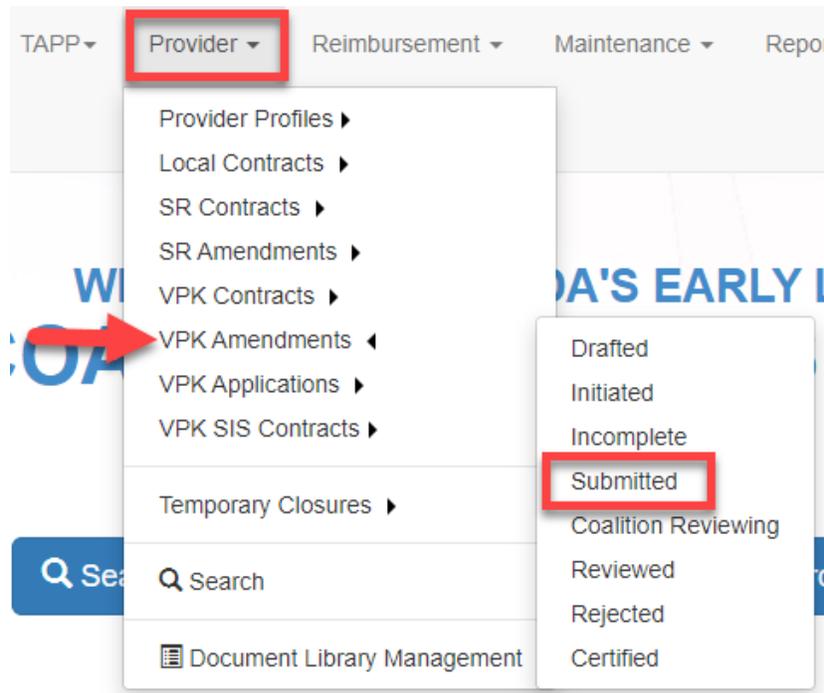
The amendment is now available at **Provider > VPK Amendments > Initiated**.

**NOTE:** An email notification is sent to the provider's contact email address when the VPK amendment is initiated.

**NOTE:** If the provider decides to opt-in or opt-out of the VPK Advance Payment after the contract is **Certified**, an amendment must be initiated. If no other changes are needed, such as provider's principal office location or adding/removing providers, the coalition user will click the **Next Step** buttons to skip through those pages and click the **Save & Initiate** button. The provider will edit the amendment and select yes or no to the VPK Advance Payment options on the amendment and then submit the amendment to the coalition.

## Reviewing and Certifying a VPK Amendment

When the provider has signed and submitted the VPK amendment, navigate to **Provider > VPK Amendments > Submitted**.



Click the Amendment ID link for the provider.

Current Submitted VPK Amendments 1 Total Records Program Year: 2022 - 2023

Show 10 entries

[Clear All Filters](#) Search:  [Export to Excel](#)

Amendment ID	Program Year	Contract Name	Provider ID	Doing Business As	Principal ID	Principal Name	Amendment Status	Last Modified By	Last Modified Date	Start Date	End Date
<a href="#">38602</a>	2022 - 2023	VPK 20 Amendment					Submitted		08/31/2022		06/30/2023

Showing 1 to 1 of 1 entries

[Previous](#) [1](#) [Next](#)

On the signatures page, click **Preview Amendment** to view the VPK 20A form. To sign the amendment, click the By Electronic Signature box for the authorized coalition representative.

The screenshot shows a web interface for a VPK Amendment. At the top left, there is a menu icon and the text "VPK Amendment". At the top right, there is a button labeled "Change Amendment Status". The main content area is a form titled "Preview Amendment" (indicated by a red box). The form is divided into several sections for signatures:

- Authorized Representative:** Includes a checkbox for "By Electronic Signature" (checked), a "Title" field with the value "Director", and a "Date" field with the value "5/10/2021 10:41:11 AM".
- Provider's Additional Signatory (If required by the Provider):** Two identical sections, each with a "By Electronic Signature" checkbox (unchecked) and empty "Title" and "Date" fields.
- Authorized Coalition Representative:** Includes a checkbox for "By Electronic Signature" (unchecked), and empty "Title" and "Date" fields. A red arrow points to this checkbox.

Below the signature sections, there is a text block: "COALITION has caused this Contract to be executed as of the date set forth in Paragraph 1."

When the By Electronic Signature box is selected, the VPK Amendment Electronic Signature pop-up message displays. Enter the signatory's business title (not a name), then click **Yes**. To close the message without signing, click **Cancel**.

The screenshot shows a pop-up window titled "VPK Amendment Electronic Signature". The window contains the following elements:

- A blue header bar with the text: "You are about to electronically sign the VPK Amendment."
- A "Full Name:" label followed by the text "Jennifer Ventura".
- A "Title:" label with a red asterisk, followed by an empty text input field.
- A message: "Click 'Yes' to confirm your electronic signature."
- At the bottom right, there are two buttons: "Yes" (highlighted with a yellow box) and "Cancel".

When **Yes** is clicked, the coalition user's name, title, and the date are populated on the signature page. To remove the coalition's signature, uncheck the By Electronic Signature box and click **Yes** in the pop-up message.

After signing the amendment, click the **Change Amendment Status** button.

Set the amendment status to **Coalition Reviewing** or **Reviewed**, if applicable. To reject the amendment back to the provider for revisions, set the status to **Rejected**. If rejected, the provider will have to re-sign, certify, and submit the amendment, and the coalition will access the amendment in the **Profile > VPK Amendments > Submitted** queue.

When the contract is ready to be certified, click the **Change Amendment Status** button on the signatures page and set the amendment status to **Certified**.

Enter the amendment start date, then click **Save**.

**NOTE:** Amendments can be backdated to the effective date of the contract or latest certified amendment for the same program year. Amendments can also be future dated up to the contract/amendment end date.

Amendment: Change Status

Status: Submitted

Amendment Type: VPK

Amendment Status: Certified

Status Date: 02/13/2020

Start Date: 02/13/2020

End Date: 05/30/2020

Cancel Save

Amendment: Change Status

Status: Submitted

Amendment Type: VPK

Amendment Status: Certified

Status Date: 05/25/2021

Start Date: 05/25/2021

End Date: 06/30/2021

Cancel Save

### Your Requested Action Has Been Performed

Please choose another action from the menu to continue working.

Navigate to the provider's Manage Contracts page to view the certified amendment. Click the plus "+" sign to the left of the VPK 20 contract to expand the amendment section. The amendment is in **Certified** status.

To preview the certified VPK 20A form and any associated exhibits, click the **View** button, or click the **Download** button to download the amendment as a PDF.

### Provider Contracts

Manage Contracts For

Show 10 entries

Contract ID	Type of Contract	Contract Name	Coalition	Status	Last Updated	Effective Date	Terminated	Program Year	Contract	Document	Action
58526	SR	OEL-SR 20		Certified	04/29/2021	07/21/2020		2020 - 2021	View	Download	Change Status
53426	VPK	OEL-VPK 20		Certified	06/24/2020	07/01/2020		2020 - 2021	View	Download	Change Status

Show 10 entries

Amendment ID	Status	View	Document	Action
16967	Certified	View	Download	

First Previous 1 Next Last

## Cancelling a VPK Amendment

Cancelling an amendment will delete the amendment from the system. To cancel an amendment at any stage prior to being certified, from the Manage Contracts page, click the plus “+” sign to the left of the contract to expand the amendment section. Then, click the red **Cancel** button.

The screenshot shows the 'Manage Contracts For' interface. A table lists contracts with columns for Contract ID, Type of Contract, Contract Name, Coalition, Status, Last Updated, Effective Date, Terminated, Program Year, Contract, Document, and Action. The second contract (ID 53426, Type VPK) is expanded to show a sub-table of amendments. The sub-table has columns for Amendment ID, Status, View, Document, and Action. The amendment with ID 17893 and status 'Drafted' has a red box around its 'Cancel' button. A red arrow points to the minus sign (-) next to the contract ID 53426.

**NOTE:** Once the amendment is certified, the **Cancel** button is no longer available for that amendment.

The Confirm Cancel Amendment pop-up message displays. Click **Yes** to permanently delete the amendment, or **Cancel** to close the message.

The screenshot shows a 'Confirm Cancel Amendment' dialog box. The message inside asks: 'Are you sure you want to cancel this amendment? The amendment will be deleted, and this action cannot be undone.' At the bottom of the dialog, there are two buttons: 'Yes' and 'Cancel', both of which are highlighted with red boxes.

When **Yes** is selected, the amendment is deleted from the system and is no longer visible on the provider Manage Contracts page.

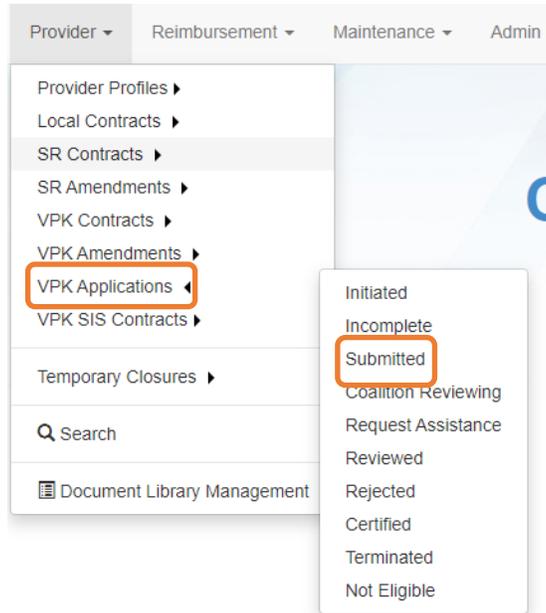
To view the provider note for a canceled amendment, click the **Return to review** button to return to the Administrative Review page, then click **Provider Notes**.

The first screenshot shows the 'Administrative Review' page with a navigation bar. The 'Provider Notes' button is highlighted with a red box. The second screenshot shows the 'Provider Notes For' page with a table of notes. The table has columns for Date, Reason, Custom Code, Note, and Created By. A note is displayed with the following text: '5/25/2021 7:50:57 PM | PSC | | The VPK amendment [ID: 17893] was canceled by [redacted] on 5/25/2021 7:50:57 PM. | [redacted]'.

## Processing a VPK-APP

### Reviewing a VPK-APP

To review a VPK-APP, the coalition user will click the **Provider** dropdown menu, select VPK Applications and click **Submitted** to see all submitted VPK-APPs.



Click the Contract ID of the desired VPK-APP.

Current Submitted VPK-APP Contracts 7 Total Records Program Year: 2021 - 2022

Show 10 entries Clear All Filters Search:

Contract ID	Program Year	Contract Name	Provider ID	Doing Business As	Principal ID	Principal Name	Status	Last Modified By	Last Modified Date	Start Date	End Date
31826	2021 - 2022	VPK 10,11A,11B					Submitted		03/10/2022	07/01/2021	05/26/2022

Then, the following will display.

Smoke Test 2016 - 2017 (Submitted) Change Status

Attendance Policy VPK Director VPK Instructors VPK Calendars VPK Class(es) Review Certify and Submit

### Attendance Policy Submission

A VPK Provider must

- ✓ Adopt an attendance policy that aligns with VPK rules and statutes and requires parents to verify the child's attendance each month on forms required by Rule 6M-8.305, F.A.C.
- ✓ Provide a copy of its attendance policy to the early learning coalition before executing a contract by uploading to the portal (below)
- ✓ Provide a copy of this policy to parents of each VPK child admitted into the provider's VPK program (at the time of enrollment)
- ✓ Not amend its attendance policy for its VPK program duration of the VPK contract

**Please Note**

Section 1002.71, F.S., states a private prekindergarten provider or public school may not require payment of a fee or charge for services provided for a child enrolled in VPK during a period reported for funding purposes; or require a child to enroll for, or require the payment of any fee or charge for, supplemental services as a condition of admitting a child for enrollment in the VPK program.

File Name	Uploaded On	Size	Verified By	Verified On
Upload Docs.jpg <a href="#">Download</a>	06/23/2017	73 KB	florindalbrown@gmail.com	06/23/2017

The coalition user can click on each tab to review the information.

To verify a document, the coalition user can click the **Verify** button on the VPK Director, VPK Instructor, VPK Calendars and VPK Class(es) tabs.

Smoke Test 2016 - 2017 (Submitted) Change Status

Attendance Policy VPK Director VPK Instructors VPK Calendars VPK Class(es) Review Certify and Submit

★ Janet Jackson

Telephone Number: 999999999  
 Email: Test@gmail.com  
 Credential Type: VPK Director Credential  
 Credential Certificate Number: 26591621  
 Credential Issue Date: 06/01/2017  
 Credential Expiration Date: 06/30/2017

Supporting Documents: Edit

File Name	Document Type	Issued On	Expires On	Uploaded On	Size	Verified By	Verified On
flower-purple-lcal-blossa.jpg	Background Screening			06/23/2017	835 KB	florindalbrown@gmail.com	06/23/2017
flower-purple-lcal-blossa.jpg	Affidavit of Good Moral Character			06/23/2017	835 KB	florindalbrown@gmail.com	06/23/2017
C:\Users\jrm.leadbetter\Pictures\Saved Pictures\TEST DOCUMENT.docx	Credential			06/28/2017	15 KB		

Smoke Test 2016 - 2017 (Submitted) Change Status

Attendance Policy VPK Director VPK Instructors VPK Calendars VPK Class(es) Review Certify and Submit

AS16 Verify

Non-Instructional, Site Closures and Exceptional Instructional Days: June 2017 month list

Calendar Name: Calendar Name  
 Program Type: School Year (540 hours)  
 Calendar Start Date: 06/01/2017  
 Calendar End Date: 06/11/2017

Instructional Days:

Day	Start Time	End Time
Monday	08:00 AM	04:00 PM
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		
Sunday		

Sun	Mon	Tue	Wed	Thu	Fri	Sat
28	29	30	31	1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	1

Total Calculated Hours: 80.00  
 Total VPK Instructional Days: 10

Smoke Test 2016 - 2017 (Submitted) Change Status

Attendance Policy VPK Director VPK Instructors VPK Calendars VPK Class(es) Review Certify and Submit

AS16 Verify

June 2017 month list

Class Map  
 Class Calendar: Calendar Name  
 Main Curriculum: BABY DOLL CIRCLE TIME  
 Class Start Date: 06/01/2017  
 Class End Date: 06/11/2017

Instructors:

Name	Type
Michael Jackson	Lead

Sun	Mon	Tue	Wed	Thu	Fri	Sat
28	29	30	31	1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	1

After clicking the **Verify** button, the coalition user's email address and verification date will populate in each tab.

Supporting Documents: [Edit](#)

File Name	Document Type	Issued On	Expires On	Uploaded On	Size	Verified By	Verified On
flower-purple-lcal-blossa.jpg <a href="#">Download</a>	Background Screening			06/23/2017	835 KB	florindalbrown@gmail.com	06/23/2017
flower-purple-lcal-blossa.jpg <a href="#">Download</a>	Affidavit of Good Moral Character			06/23/2017	835 KB	florindalbrown@gmail.com	06/23/2017
C:\Users\jim.ledbetter\Pictures\Saved Pictures\TEST DOCUMENT.docx <a href="#">Download</a>	Credential			06/28/2017	15 KB	oeldemonstration+elc@gmail.com	06/28/2017



**Verified By oeldemonstration+elc@gmail.com, On 06/28/2017**

Calendar Name: Calendar Name  
 Program Type: School Year (540 hours)  
 Calendar Start Date: 06/01/2017  
 Calendar End Date: 08/11/2017



**Verified By oeldemonstration+elc@gmail.com, On 06/28/2017**

Class Name: N/A  
 Class Calendar: Calendar Name  
 Main Curriculum: BABY DOLL CIRCLE TIME  
 Class Start Date: 06/01/2017  
 Class End Date: 08/11/2017

### Viewing VPK-APP Removed Items

Items that have been removed from the VPK-APP by the provider can be viewed on the following tabs:

- VPK Director
- VPK Instructors
- VPK Calendars
- VPK Classes
- Review

On the VPK Director, VPK Instructors, VPK Calendars, and VPK Classes tabs, click the checkbox to show any removed items on each tab.

Attendance Policy [VPK Director](#)  [VPK Instructors](#) [VPK Calendars](#) [VPK Classes\(es\)](#) [Review](#) [Certify and Submit](#)

Show removed class instructors

File Name	Document Type	Issued On	Expires On	Uploaded On	Size	Verified By	Verified On
Background Screening.pdf <a href="#">Download</a>	Background Screening	06/25/2019	01/23/2022	07/23/2019	182 KB		07/24/2019
Attestation of Good and Moral Character.pdf <a href="#">Download</a>	Affidavit of Good Moral Character			07/23/2019	144 KB		07/24/2019
Educator Certificate.pdf <a href="#">Download</a>	Credential	06/10/2019	06/30/2022	07/23/2019	90 KB		07/24/2019
transcripts.pdf <a href="#">Download</a>	Additional Documentation			07/23/2019	788 KB		07/24/2019
-Attestation.pdf <a href="#">Download</a> <a href="#">Verify</a>	Affidavit of Good Moral Character	05/13/2021		05/19/2021	146 KB		
-Attestation.pdf <a href="#">Download</a> <a href="#">Verify</a>	Affidavit of Good Moral Character			06/25/2021	150 KB		

File Name	Document Type	Issued On	Expires On	Uploaded On	Size	Verified By	Verified On
-clearance_001.pdf <a href="#">Download</a>	Background Screening	02/21/2017	02/15/2022	03/23/2016	85 KB		03/26/2016
-affidavit_001.pdf <a href="#">Download</a>	Affidavit of Good Moral Character	05/21/2014		03/23/2016	145 KB		03/26/2016
-attestation.pdf <a href="#">Download</a>	Affidavit of Good Moral Character	05/13/2021		05/19/2021	144 KB		
-attestation.pdf <a href="#">Download</a>	Affidavit of Good Moral Character			06/25/2021	154 KB		
-attestation.pdf <a href="#">Download</a>	Affidavit of Good Moral Character	05/13/2021		06/25/2021	154 KB		06/26/2021
TEST DOCUMENT.docx <a href="#">Download</a>	Background Screening			07/27/2021	11 KB		

## Editing a VPK-APP

Coalition users can click the **Edit** button on the VPK Director and VPK Instructors tabs to edit information. Documents may be uploaded by users, and un-verified documents may be deleted.

Smoke Test 2016 - 2017 (Submitted) Change Status

Attendance Policy VPK Director VPK Instructors VPK Calendars VPK Class(es) Review Certify and Submit

Michael Jackson

SSN: 999999999  
Degree: Received a B.S. or a B.A.  
Type: Lead  
Credential: Family Child Care Home or Large Family Child Care Home 30-hour training course  
Start Date: 06/03/2017  
End Date:  
Certified Teacher? Yes

Supporting Documents Edit

File Name	Document Type	Issued On	Expires On	Uploaded On	Size	Verified By	Verified On
flower-purple-lcal-blosso.jpg	Background Screening	06/08/2017	06/30/2017	06/23/2017	835 KB	florndatbrown@gmail.com	06/23/2017

If edits are made to a tab, the coalition user must click the **Update** button to save the changes.

Smoke Test 2016 - 2017 (Submitted) Change Status

Attendance Policy VPK Director VPK Instructors VPK Calendars VPK Class(es) Review Certify and Submit

VPK Director Name: Janet Jackson  
Telephone Number: 999999999  
Email: Test@gmail.com  
Credential Type: VPK Director Credential  
Credential Certificate Number: 26591621  
Credential Issue Date: 06/01/2017  
Credential Expiration Date: 06/30/2017

Document Type:  
 Background Screening  
 Affidavit of Good Moral Character  
 Credential  
 Additional Documentation

Choose Files: Browse... Choose documents by clicking Browse button

Document Issued Date: Enter or Select Date  
Document Expiration Date: Enter or Select Date

Upload

File Name	Document Type	Issued On	Expires On	Uploaded On	Size	Verified By	Verified On
flower-purple-lcal-blosso.jpg	Background Screening	Enter or Set	Enter or Set	06/23/2017	835 KB	florndatbrown@gmail.com	06/23/2017
flower-purple-lcal-blosso.jpg	Affidavit of Good Moral Character	Enter or Set	Enter or Set	06/23/2017	835 KB	florndatbrown@gmail.com	06/23/2017
C:\Users\jim.ledbetter\Pictures\Saved Pictures\TEST DOCUMENT.docx	Credential	Enter or Set	Enter or Set	06/28/2017	15 KB		

Update Issued, Expiration Dates Cancel

## Reviewing a VPK-APP for Ownership Change

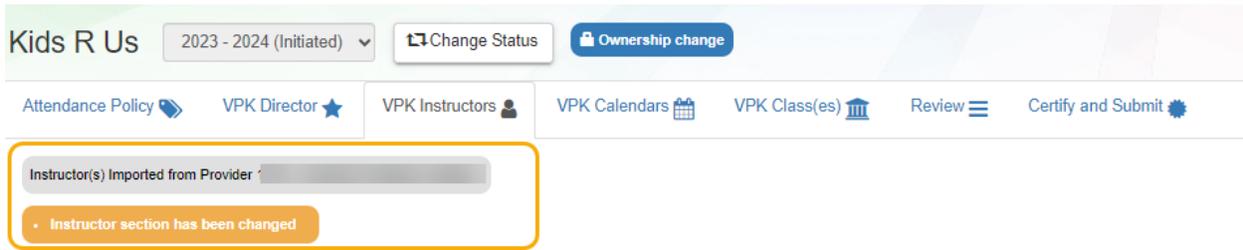
If a provider has undergone a change of ownership, as indicated during their provider account registration, the initiation of a new VPK-APP under the new provider ID will copy over the most recently certified VPK-APP from the old provider ID. This copy over will be indicated by the **Ownership Change** icon on the VPK-APP.

Kids 2023 - 2024 (Initiated) Change Status Ownership change

Attendance Policy VPK Director VPK Instructors VPK Calendars VPK Class(es) Review Certify and Submit

Attendance Policy Submission

Additionally, text will be displayed on the sections of the VPK-APP to indicate the previous provider site from which the VPK-APP sections were copied, as well as text indicating that the section has been changed.

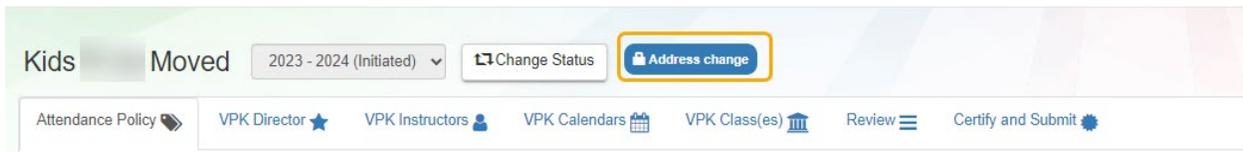


**NOTE:** Once the VPK-APP information has been copied over from the previous provider ID, changes to the attendance, director, instructor, calendar, and classes sections can be made.

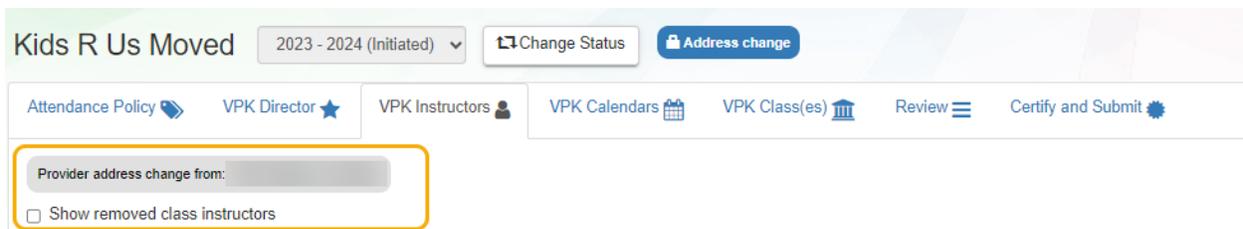
With this copy over, providers who do not update the calendars should have the same VPK progress monitoring windows as they did under the previous Provider ID.

### Reviewing a VPK-APP for Location Change

If a provider has undergone a change in physical location, as indicated on the **Add Site** page of the **Manage All Sites** page, the initiation of a new VPK-APP under the new provider ID will copy over the most recently certified VPK-APP from the old provider ID. This copy over will be indicated by the **Address Change** icon on the VPK-APP.



Additionally, text will be displayed on the sections of the VPK-APP to indicate the previous provider site location from which the VPK-APP sections were copied from.



**NOTE:** Once the VPK-APP information has been copied over from the previous provider ID, changes to the attendance, director, instructor, calendar, and classes sections can be made.

With this copy over, providers who do not update the calendars should have the same VPK progress monitoring windows as they did under the previous Provider ID.

## Certifying a VPK-APP for Ownership Change

When the status for the new VPK-APP is changed to **Certified**, the enrollments from the previous Provider ID will be copied over.

Sara's Demo Daycare

Request/Change VPK Enrollment | Bulk VPK Enrollment

VPK Program Year: 2023-2024 | VPK Session: School-year (540 hours) | VPK Class: AF23 - | Class Start Date: 08/14/2023 | Class End Date: 05/09/2024

Max Class Size: 20 | VPK Enrollment Limit: 20 | VPK Class Enrollment Count: 16 | Non-VPK Children Count: 0

**Please Note:** Based on the VPK session and instructors assigned, the maximum class size is 20. The class must have a minimum of 4 VPK children to start.

Certificate Number: | Child First Name: | Child Last Name: | Child DOB: MM/DD/YYYY | [Enroll to this Class](#)

Actions	Certificate Number	Child First Name	Child Last Name	Child DOB	Child Age	Student ID	Anticipated Start Date	Actual Start Date	Termination Effective Date	Status
<a href="#">Class change</a> <span>Never Attended</span>							08/14/2023 <a href="#">Change</a>			Enrollment Submitted
<a href="#">Class change</a> <span>Never Attended</span>							08/14/2023 <a href="#">Change</a>			Enrollment Submitted
<a href="#">Class change</a> <span>Never Attended</span>							08/14/2023 <a href="#">Change</a>			Enrollment Submitted
<a href="#">Class change</a> <span>Never Attended</span>							08/14/2023 <a href="#">Change</a>			Enrollment Submitted
<a href="#">Class change</a> <span>Never Attended</span>							08/14/2023 <a href="#">Change</a>			Enrollment Submitted
<a href="#">Class change</a> <span>Never Attended</span>							08/14/2023 <a href="#">Change</a>			Enrollment Submitted
<a href="#">Class change</a> <span>Never Attended</span>							08/14/2023 <a href="#">Change</a>			Enrollment Submitted
<a href="#">Class change</a> <span>Never Attended</span>							08/14/2023 <a href="#">Change</a>			Enrollment Submitted
<a href="#">Class change</a> <span>Never Attended</span>							08/14/2023 <a href="#">Change</a>			Enrollment Submitted
<a href="#">Class change</a> <span>Never Attended</span>							08/14/2023 <a href="#">Change</a>			Enrollment Submitted

**NOTE:** Though the enrollments will be copied over once the VPK-APP is certified, the provider should have a certified VPK Contract (DEL-VPK 20) when providing services. Services provided before a new VPK contract is certified may require a line item adjustment.

Additionally, the previous provider site will be in **Read Only Mode**.

The following message will display on the dashboard of the provider portal:

Home | Business | Profile | Contracts | Enrollments | Attendance | Documents

**Read Only Mode**

This Account is in Read-only mode due to a change in ownership. Please contact your local ELC to discuss any concerns or questions.

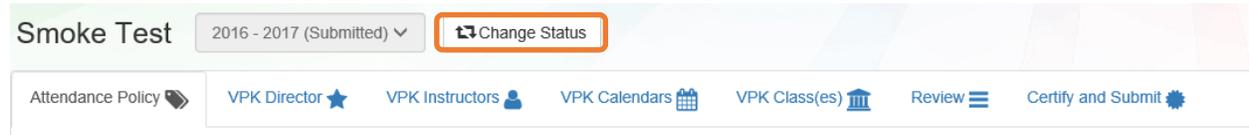
**Common Tasks**

- VPK Provider Application
- Manage VPK Instructors, Calendars, and Classes
- Statewide VPK Provider Contract
- VPK Contract Amendment

**Broadcast Messages**

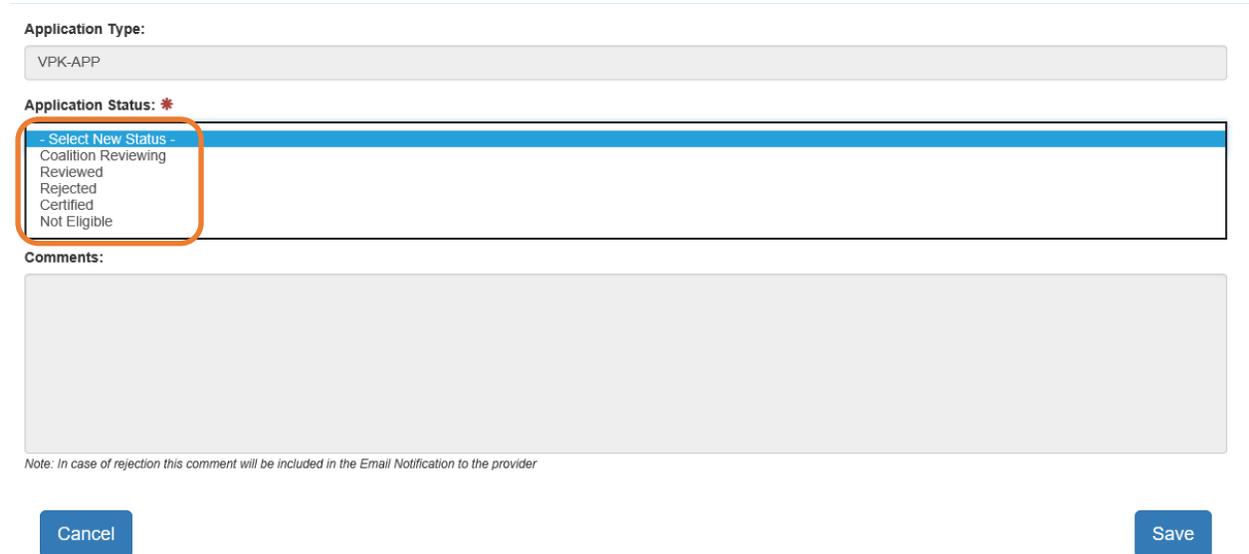
## Changing VPK-APP Status

A coalition user can change a VPK-APP's status by clicking the **Change Status** button on any tab of the VPK-APP.



The screenshot shows the top navigation bar of the VPK-APP interface. The title is "Smoke Test" and the current year is "2016 - 2017 (Submitted)". A "Change Status" button is highlighted with an orange box. Below the navigation bar are several tabs: "Attendance Policy", "VPK Director", "VPK Instructors", "VPK Calendars", "VPK Class(es)", "Review", and "Certify and Submit".

Then, select a new status.



The screenshot shows the "Change Status" form. The "Application Type" is set to "VPK-APP". The "Application Status" dropdown menu is open, showing options: "- Select New Status -", "Coalition Reviewing", "Reviewed", "Rejected", "Certified", and "Not Eligible". The "Coalition Reviewing" option is highlighted. Below the dropdown is a "Comments" text area. At the bottom, there are "Cancel" and "Save" buttons. A note at the bottom states: "Note: In case of rejection this comment will be included in the Email Notification to the provider".

## VPK-APP Status Definitions

### *Coalition Reviewing*

The coalition is actively reviewing the VPK-APP.

### *Reviewed*

The coalition has reviewed, but not certified, the VPK-APP.

### *Rejected*

The VPK-APP has missing or incorrect information that is necessary for approval.

### *Certified*

The VPK-APP is approved.

**NOTE:** The VPK-APP can't be certified if one or more VPK Class(es) and/or Calendar(s) has not been verified.

### *Not Eligible*

The coalition has determined that the provider is not eligible for a VPK-APP.

**NOTE:** The provider can edit the VPK-APP in any status but must certify and submit the VPK-APP to notify the coalition that edits have been made.

## Refreshing a VPK-APP

If a Provider Portal user has changed a profile field that affects the VPK-APP, the following will display on review.

Curriculum		
Curriculum	Age Range	Edition/Year
Baby Doll Circle Time	Birth - 3	2012
Beyond Centers & Circle Time	3 and 4	2nd edition/2007
Beyond Cribs & Rattles	Birth - 2	1st edition/2005
Other		

After the coalition user clicks the **Change Profile Status** button...

Administrative Review

Provider Notes | Contact Attempts | Inspections | Administration | Contracts | SR Paid Holidays | SR Reimbursement Rates | Child Assessment | Assist Provider | **Change Profile Status**

...the following will display.

Provider Profile: Change Status Submitted

Profile has contract related changes.  
There are changes to profile fields affecting the certified or pending VPK Provider Application (VPK 10, 11A, 11B).  
Select the appropriate contract action below:

Update existing VPK App and notify provider

Profile Status: \*

Active  
CoalitionReviewing  
Inactive  
Rejected

Comments:

Note: In case of rejection this comment will be included in the Email Notification to the provider

Cancel Save

When the **Save** button is clicked, the provider's VPK-APP status will change to **Incomplete**. The Provider Portal user will then review the VPK-APP and re-submit the edited VPK-APP. If the coalition user un-checks the **Update existing VPK App and notify provider** checkbox, but decides to update and notify, the VPK-APP can be re-initiated again and the checkbox left checked.

## Provider Contracts

Manage Contracts For Jim's House Of Canes & Gators Return to review

Show 10 entries + Initiate Contract

Contract ID	Type of Contract	Contract Name	Coalition	Status	Last Updated	Start Date	End Date	Terminated	Contract	Document	Action
26804	VPK-SIS	VPK SIS 20S	ELC of the Big Bend Region	Terminated	06/26/2017	05/18/2017	6/30/2017	4/28/2017	Paper	None	Change Status
26788	VPK-SIS	VPK SIS 20S	ELC of the Big Bend Region	Certified	04/04/2017	04/04/2017	6/30/2017		Paper	None	Edit Change Status
26731	SR	SR (Paper)	OEL	Terminated	06/30/2017	01/01/2017	1/1/2018	6/30/2017	Paper	None	Change Status
26723	SR	SR (Paper)	OEL	Terminated	04/05/2017	01/10/2017	1/10/2018	4/4/2017	Paper	None	Change Status
180	VPK	OEL-VPK 20	ELC of the Big Bend Region	Not Eligible	05/24/2017	07/01/2017	6/30/2018		View	N/A	Amend Change Status
157	VPK	OEL-VPK 20	ELC of the Big Bend Region	Terminated	06/26/2017	07/01/2017	3/2/2019	6/26/2017	Paper	None	Amend Change Status
156	VPK	OEL-VPK 20	ELC of the Big Bend Region	Terminated	05/26/2017	07/01/2017	6/30/2018	5/26/2017	View	N/A	Amend Change Status
139	VPK	OEL-VPK 20	ELC of the Big Bend Region	Certified	04/04/2017	07/01/2017	6/30/2018		View	N/A	Amend Change Status
45	VPK-APP	VPK 10,11A,11B	ELC of Palm Beach	Incomplete	08/11/2017	06/21/2017	7/27/2018		View	N/A	Change Status

Contract ID Type of Contract Contract Name Coalition Status Last Updated Start Date End Date Terminated Contract Document Action

First Previous 1 Next Last

The provider owner and VPK director will receive the following email from **DONOTREPLY@oel.myflorida.com**.

From: <[OELSystemTest@oel.myflorida.com](mailto:OELSystemTest@oel.myflorida.com)>  
 Date: Wed, Aug 16, 2017 at 12:06 PM  
 Subject: Signature Required - VPK Provider Application Updated  
 To: [alatham77@gmail.com](mailto:alatham77@gmail.com)  
 Cc: [ME@nowhere.com](mailto:ME@nowhere.com)

Hello,

The VPK Provider Application (VPK 10,11A, 11B) forms have been updated for Maggie Mae Daycare. Your review and signature is required. Please log on the Provider Portal and go to the Contracts menu, and choose Manage Contracts. On this page, locate your VPK-APP and click Edit. Review the VPK Provider Application information and submit your signature on the Certify and Submit tab.

Please review and submit your signature as quickly as possible.

Thank you,

ELC of the Big Bend Region  
 (866) 973-9030  
<http://www.elcbigbend.org/>

Please do not reply to this message. Replies to this message are routed to an unmonitored mailbox. If you have questions, please contact your [early learning coalition](#).

After the Provider Portal user submits the edited VPK-APP, the coalition user will click the **Change Status** button...

### Provider Contracts

Manage Contracts For Jim's House Of Canes & Gators Return to review

Show 10 entries Initiate Contract

Contract ID	Type of Contract	Contract Name	Coalition	Status	Last Updated	Start Date	End Date	Terminated	Contract	Document	Action
26804	VPK-SIS	VPK SIS 20S	ELC of the Big Bend Region	Terminated	06/26/2017	05/18/2017	6/30/2017	4/28/2017	Paper	None	<a href="#">Change Status</a>
26788	VPK-SIS	VPK SIS 20S	ELC of the Big Bend Region	Certified	04/04/2017	04/04/2017	6/30/2017		Paper	None	<a href="#">Edit</a> <a href="#">Change Status</a>
26731	SR	SR (Paper)	OEL	Terminated	06/30/2017	01/01/2017	1/1/2018	6/30/2017	Paper	None	<a href="#">Change Status</a>
26723	SR	SR (Paper)	OEL	Terminated	04/05/2017	01/10/2017	1/10/2018	4/4/2017	Paper	None	<a href="#">Change Status</a>
180	VPK	OEL-VPK 20	ELC of the Big Bend Region	Not Eligible	05/24/2017	07/01/2017	6/30/2018		<a href="#">View</a>	N/A	<a href="#">Amend</a> <a href="#">Change Status</a>
157	VPK	OEL-VPK 20	ELC of the Big Bend Region	Terminated	06/26/2017	07/01/2017	3/2/2019	6/26/2017	Paper	None	<a href="#">Amend</a> <a href="#">Change Status</a>
156	VPK	OEL-VPK 20	ELC of the Big Bend Region	Terminated	05/26/2017	07/01/2017	6/30/2018	5/26/2017	<a href="#">View</a>	N/A	<a href="#">Amend</a> <a href="#">Change Status</a>
139	VPK	OEL-VPK 20	ELC of the Big Bend Region	Certified	04/04/2017	07/01/2017	6/30/2018		<a href="#">View</a>	N/A	<a href="#">Amend</a> <a href="#">Change Status</a>
45	VPK-APP	VPK 10,11A,11B	ELC of Palm Beach	Submitted	08/11/2017	06/21/2017	7/27/2018		<a href="#">View</a>	<a href="#">Download</a>	<a href="#">Change Status</a>

First Previous 1 Next Last

...and change the VPK-APP status to **Certified**.

VPK Provider Application: Change Status

Status: Submitted  
Application: OEL-VPK 10

**Application Type:**  
VPK-APP

**Application Status:** \*  
Certified

**Status Date:**  
08/11/2017

**Start Date:**  
07/01/2017

**End Date:**  
07/27/2018

**Comments:**

Note: In case of rejection this comment will be included in the Email Notification to the provider

The coalition user can also refresh the VPK-APP by clicking the **Initiate Contract** button.

### Provider Contracts

Manage Contracts For Jim's House Of Canes & Gators Return to review

Show 10 entries Initiate Contract

Contract ID	Type of Contract	Contract Name	Coalition	Status	Last Updated	Start Date	End Date	Terminated	Contract	Document	Action
26804	VPK-SIS	VPK SIS 20S	ELC of the Big Bend Region	Terminated	06/26/2017	05/18/2017	6/30/2017	4/28/2017	Paper	None	<a href="#">Change Status</a>
26788	VPK-SIS	VPK SIS 20S	ELC of the Big Bend Region	Certified	04/04/2017	04/04/2017	6/30/2017		Paper	None	<a href="#">Edit</a> <a href="#">Change Status</a>
26731	SR	SR (Paper)	OEL	Terminated	06/30/2017	01/01/2017	1/1/2018	6/30/2017	Paper	None	<a href="#">Change Status</a>

This will change the status of an existing VPK-APP to **Incomplete** from any status.

## Provider Contracts

Manage Contracts For Jim's House Of Canes & Gators Return to review

Show 10 entries + Initiate Contract

Contract ID	Type of Contract	Contract Name	Coalition	Status	Last Updated	Start Date	End Date	Terminated	Contract	Document	Action
26804	VPK-SIS	VPK SIS 20S	ELC of the Big Bend Region	Terminated	06/26/2017	05/18/2017	6/30/2017	4/28/2017	Paper	None	<a href="#">Change Status</a>
26788	VPK-SIS	VPK SIS 20S	ELC of the Big Bend Region	Certified	04/04/2017	04/04/2017	6/30/2017		Paper	None	<a href="#">Edit</a> <a href="#">Change Status</a>
26731	SR	SR (Paper)	OEL	Terminated	06/30/2017	01/01/2017	1/1/2018	6/30/2017	Paper	None	<a href="#">Change Status</a>
26723	SR	SR (Paper)	OEL	Terminated	04/05/2017	01/10/2017	1/10/2018	4/4/2017	Paper	None	<a href="#">Change Status</a>
180	VPK	OEL-VPK 20	ELC of the Big Bend Region	Not Eligible	05/24/2017	07/01/2017	6/30/2018		<a href="#">View</a>	N/A	<a href="#">Amend</a> <a href="#">Change Status</a>
157	VPK	OEL-VPK 20	ELC of the Big Bend Region	Terminated	06/26/2017	07/01/2017	3/2/2019	6/26/2017	Paper	None	<a href="#">Amend</a> <a href="#">Change Status</a>
156	VPK	OEL-VPK 20	ELC of the Big Bend Region	Terminated	05/26/2017	07/01/2017	6/30/2018	5/26/2017	<a href="#">View</a>	N/A	<a href="#">Amend</a> <a href="#">Change Status</a>
139	VPK	OEL-VPK 20	ELC of the Big Bend Region	Certified	04/04/2017	07/01/2017	6/30/2018		<a href="#">View</a>	N/A	<a href="#">Amend</a> <a href="#">Change Status</a>
45	VPK-APP	VPK 10,11A,11B	ELC of Palm Beach	Incomplete	08/11/2017	06/21/2017	7/27/2018		<a href="#">View</a>	N/A	<a href="#">Change Status</a>

Contract ID Type of Contract Contract Name Coalition Status Last Updated Start Date End Date Terminated Contract Document Action

First Previous 1 Next Last

A Provider Portal user can also trigger a refresh of a **Certified** VPK-APP by editing the VPK-APP. This will change the status to **Incomplete** from **Certified** and then the user can submit the edited VPK-APP for coalition review.

## Vendor Number Entry

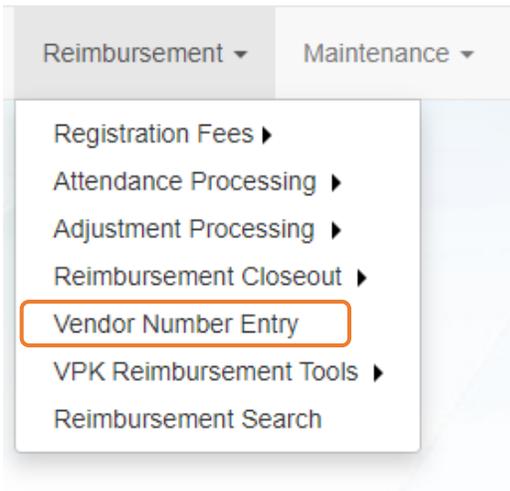
A vendor number is required for contracted providers. Coalitions may review a Tableau report to identify providers with or without vendor numbers, as well as create and manage vendor numbers.

### Accessing the Vendor Number Report in Tableau

Coalition users with a Tableau account may access the Vendor Number Report by going to <https://oel-reports.floridaearlylearning.com>. From Projects, select the ~Mod 3.0~ folder. Select the **Vendor Number Report** workbook. Select the **Provider Vendor Dashboard** view (to search specific providers) or the **Vendor Number Report** view (to see all providers).

### Adding/Viewing Vendor Numbers

To begin, go to the Reimbursement menu item and select Vendor Number Entry.



A provider search page displays. Enter search criteria for a provider and click **Search**.

A screenshot of the 'Provider Search' form. The form contains several fields for search criteria: 'Provider Type' (checkboxes for VPK, VPK/SIS, SR, Local, CCR&R only, All), 'Coalitions' (radio buttons for 'Just my coalition' and 'All coalitions'), 'Program Year' (dropdown), 'Principal ID' (text input), 'Principal Name' (text input), 'Profile Status' (dropdown), 'Doing Business As' (text input), 'Director's Name' (text input), 'Provider ID' (text input), 'Tax ID (FEIN or SSN)' (text input), 'Street Address' (text input), 'City' (text input), 'Registered County' (dropdown), and 'License or Registration or Exempt or MSID' (text input). At the bottom of the form, there are two buttons: 'Reset' and 'Search'. The 'Search' button is highlighted with an orange border.



When complete, click the **Add Vendor Number** button. The saved vendor number list updates with the new information.

The screenshot shows the 'Vendor Number List' interface. At the top, there is a 'Provider Information' section with the following details:

- Provider ID: 19461
- Doing Business As Name: randi's house
- Street Address: 123 OAK ST TALLAHASSEE, FL 32301
- Registered County: KREPS ISLAND

Below this, there is a 'Coalition' dropdown set to 'ELC of TALLAHASSEE' and a search field. A table displays the following vendor numbers:

Vendor Number	Description	EFS Legacy Provider/Extension	Funder Type	Created Date	Created By	Remove
123456			SR	12/9/2018	alatham77+00998@gmail.com	X
123456			VPK	12/9/2018	alatham77+00998@gmail.com	X
123456			Local	12/9/2018	alatham77+00998@gmail.com	X

At the bottom, there is an 'Add A Vendor Number' form with fields for Vendor Number, Description, EFS Legacy Provider/Extension, and Funder Type, and an 'Add Vendor Number' button highlighted with an orange border.

## Removing Vendor Numbers

To remove a vendor number, follow the steps above to locate the provider through the Vendor Number Entry provider search and click the **View Vendor Number** button. In the saved vendor number list, click the Remove (X) button. A confirmation window displays. Click Yes to remove the vendor number or click Cancel to abandon the action.

## Assigning Vendor Numbers to a VPK Class

Assigning a vendor number to a VPK class is an optional feature and may not be used by all coalitions. During reimbursement, the system will first look to see if a VPK class has a specific vendor number assigned, if not, the system will use the top VPK vendor number created (if more than one VPK vendor number exists).

To assign a vendor number to specific VPK class, follow the steps above to locate the provider through the Vendor Number Entry provider search, click the **View Vendor Number** button, and create the vendor numbers to be used by each class at the provider.

The screenshot shows the 'Vendor Number List' interface for a different provider. The 'Provider Information' section includes:

- Provider ID: 19449
- Doing Business As Name: Growing Up Strong
- Street Address: 205 MARRIOTT DR TALLAHASSEE, FL 32301
- Registered County: KREPS ISLAND

The 'Coalition' is 'ELC of TALLAHASSEE'. The table below shows four vendor numbers, with the row for '55-987654' highlighted with an orange border:

Vendor Number	Description	EFS Legacy Provider/Extension	Funder Type	Created Date	Created By	Remove
123456			SR	12/9/2018	alatham77+00998@gmail.com	X
123456			Local	12/9/2018	alatham77+00998@gmail.com	X
55-987654	VPK Headstart Class		VPK	12/9/2018	alatham77+00998@gmail.com	X
75-654111	VPK County Class		VPK	12/9/2018	alatham77+00998@gmail.com	X

The 'Add A Vendor Number' form at the bottom is also visible.

With the VPK vendor numbers created, go to the Provider menu item and select **Search**. Enter criteria to locate the VPK provider and click the **Search** button. Results display. Click the **Profile ID** link to open the provider's profile.

Provider Search Results 2 Total Records

Show 10 entries -

Provider ID	Profile ID	Registration Number	Program Year	Profile Status	Submitted Date	Doing Business As	Director Name	Tax ID	Principal ID	Principal Name	Street Address	Address Line2	City	ZIP	County	Requested Contract T
19449	<a href="#">60984</a>	3409823409842	2017 - 2018	Active	06/30/2018	Growing Up Strong	Andrea Latham	0893485	14896	Growing Up Strong, LLC	205 MARRIOTT DR		TALLAHASSEE	32301	KREPS ISLAND	Both VPK and SR
19449	<a href="#">60991</a>	3409823409842	2018 - 2019	Active	07/01/2018	Growing Up Strong	Andrea Latham	0893485	14896	Growing Up Strong, LLC	205 MARRIOTT DR		TALLAHASSEE	32301	KREPS ISLAND	Both VPK and SR

On the provider's Administrative Review task bar, click the **Contracts** button.

Administrative Review

Provider Notes | Contact Attempts | Inspections | Administration | **Contracts** | SR Paid Holidays | SR Reimbursement Rates | Child Assessment

Assist Provider | Change Profile Status

Then, click the **View** button for the VPK Provider Application (VPK-APP) for the applicable program year.

Manage Contracts For Growing Up Strong Return to review

Show 10 entries Iniate Contract

Contract ID	Type of Contract	Contract Name	Coalition	Status	Last Updated	Start Date	End Date	Terminated	Contract	Document	Action
27708	VPK	OEL-VPK 20	ELC of TALLAHASSEE	Incomplete	07/01/2018	07/01/2018	6/30/2019		<a href="#">View</a>	N/A	<a href="#">Cancel Contract</a>
27703	SR	OEL-SR 20	ELC of TALLAHASSEE	Certified	07/29/2018	07/18/2018	6/30/2019		<a href="#">View</a>	<a href="#">Download</a>	<a href="#">Amend</a> <a href="#">Change Status</a>
27700	VPK	OEL-VPK 20	ELC of TALLAHASSEE	Certified	06/30/2018	06/30/2018	6/30/2018		<a href="#">View</a>	<a href="#">Download</a>	<a href="#">Amend</a> <a href="#">Change Status</a>
10214	VPK-APP	VPK 10,11A,11B	ELC of TALLAHASSEE	Certified	07/17/2018	07/01/2018	5/31/2019		<a href="#">View</a>	<a href="#">Download</a>	<a href="#">Change Status</a>
10211	VPK-APP	VPK 10,11A,11B	ELC of TALLAHASSEE	Certified	06/30/2018	06/30/2018	7/26/2018		<a href="#">View</a>	<a href="#">Download</a>	<a href="#">Change Status</a>

Contract ID | Type of Contract | Contract Name | Coalition | Status | Last Updated | Start Date | End Date | Terminated | Contract | Document | Action

First Previous 1 Next Last

The VPK Provider Application displays. Click the **VPK Class(es)** tab. For each class that needs a specific vendor number assigned, click the **Update** button.

Attendance Policy | VPK Director | VPK Instructors | VPK Calendars | **VPK Class(es)** | Review | Certify and Submit

AF18  
Verified By alatham77+OELelc@gmail.com, On 07/03/2018  
Class Name: Purple Room  
Class Calendar: Fall  
Main Curriculum: SCHOLASTIC ENGLISH  
Class Start Date: 07/02/2018  
Class End Date: 06/30/2019  
Vendor Number: [Update](#)  
Instructors:

July 2018

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4 NonInstructional Holiday	5	6	7

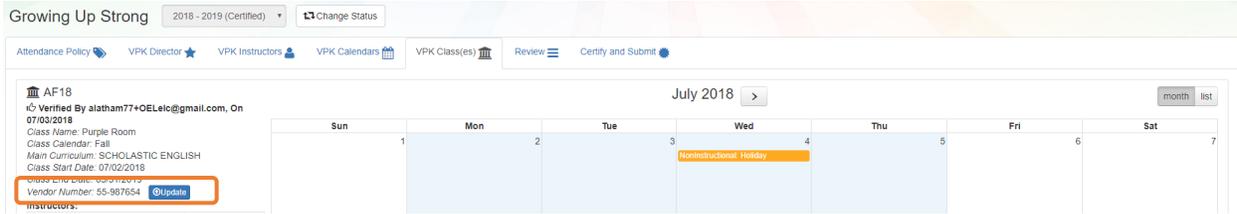
A window displays with the available VPK vendor numbers. Choose the vendor number can click the **Select** button.

Vendor Number

Vendor Number	Description	EFS Legacy Provider/Extension	Action
55-987654	VPK Headstart Class		<a href="#">Select</a>
75-654111	VPK County Class		<a href="#">Select</a>

Close

Now, the vendor number is assigned to the specific VPK class. Repeat as needed.

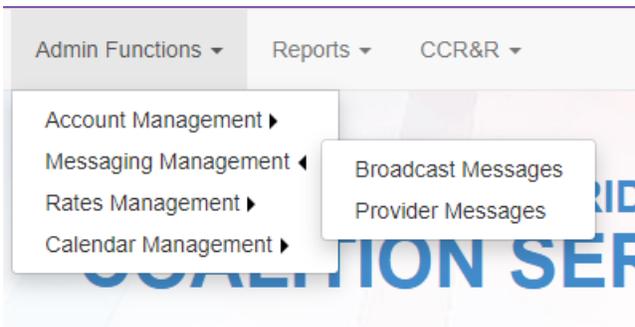


## Provider Messaging

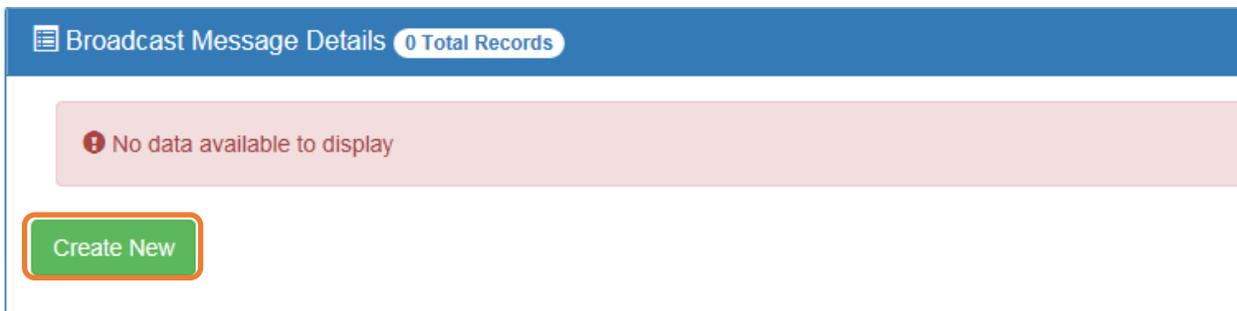
### Broadcast Message Management (not yet available)

The Broadcast message management function allows coalitions to send messages to all providers in the coalition service area. This function is only available to CP Admins and DEL admins. Currently, coalitions cannot send to SR, VPK, or CCR&R providers each, but must send a message to all providers, regardless of services provided.

To access the Broadcast message management function, CP Admin will click the **Admin Functions** button, select **Messaging Management** and then **Broadcast messages**.



Then, click the **Create New** button.



The CP Admin will then select the audience for the message, decide which county(ies) (if a multi-county coalition) for the message, complete the Message field and select the Begin Date and End Date for the message. Unchecking the **Show** check box will hide the message from providers. Click the **Save** button to send the message.



The CP Admin will then complete the Provider Message and Provider Site fields. When the provider reads the message, the Read By and Read Date fields will be completed. Click the **Save** button to send the message.

Provider Message Details

Provider Message \* 

Provider Site \* *Enter the first 3 letters of the provider name*

Read By

Read Date

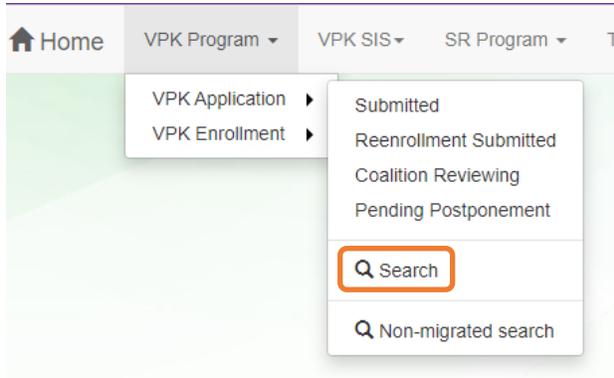
Created By: ledbetter.kiwanis@gmail.com Created Date: 9/29/2016 11:56:18 AM

## VPK Enrollment

Coalitions may create new enrollments through the system or upload a bulk enrollment file in lieu of a provider submission. Additionally, coalition users manage enrollments by reviewing provider requests or saving changes directly.

### Creating New Enrollments

Coalition users will navigate to the VPK Application menu item and select the **Search** option to locate the approved VPK child.



Clicking on the child's COE number opens their application record.

VPK Application Search

By Person Info

Person Type  Child  Primary Parent

First Name

Last Name

Date of Birth

By Application Info

Certificate Number

County for Services

Program Year

VPK Session

Record Phase  VPK Application  VPK Reenrollment

Application Status

Reset Search

Show  entries  Search:

COE Number	Child First Name	Child Last Name	Child DOB	Parent First Name	Parent Last Name	County	Program Year	VPK Status
<input type="text" value="VPK1116598-2018"/>	Baby Ruth	Latham	9/9/2013	Andrea	Latham	KREPS ISLAND	2018 - 2019	Approved

Showing 1 to 1 of 1 entries

Previous 1 Next

Within the application record, click the **Enroll** button.

VPK Application For **Baby Ruth Latham**

Certificate Number: **VPK1116598-2018**      Current Application Status: **Approved**      Program Year: **2018 - 2019**

CHILD INFORMATION	PARENT OR GUARDIAN INFORMATION
<p><b>Baby Ruth Latham</b></p> <p>Ethnicity : <b>Not answered</b>      Gender : <b>Female</b>      Race : <b>Prefer not to answer</b> DOB : <b>09/09/2013</b>      SSN : Primary Language : <b>English</b>      County for Services : <b>KREPS ISLAND</b> Preferred Program Setting : <b>Private provider (child care, private school, faith-based)</b> Desired VPK Session : <b>School year (540 hours)</b> Child admitted to Kindergarten? : <b>No</b></p> <p><input checked="" type="checkbox"/> Current Age Verification   Verified by alatham77+00998@gmail.com on 07/24/2018 <input checked="" type="checkbox"/> <b>No Current IEP</b></p> <p><input type="button" value="VPK01 form"/>   <input type="button" value="VPK02 form"/></p> <p><input type="button" value="Re-open Application"/>   <input checked="" type="button" value="Enroll"/>   <input type="button" value="Reviewed"/>   <input type="button" value="Inactivate"/></p>	<p><b>Andrea Latham</b></p> <p>Ethnicity : <b>Not answered</b>      Gender : <b>Female</b>      Race : <b>Prefer not to answer</b> Relationship to Child : <b>Parent/Step Parent</b> Preferred Method of Contact : <b>Email</b>      Address : <input type="text"/> <input checked="" type="checkbox"/> <b>Email</b> : alatham77+prod3@gmail.com      <input type="checkbox"/> <b>Primary</b>: (850) 321-5286 <input type="checkbox"/> <b>Secondary</b>:</p> <p><input checked="" type="checkbox"/> Current Proof of Residence   Verified by alatham77+00998@gmail.com on 07/24/2018 Family is not displaced.</p>

CASE NOTES

Now, the enrollment record opens for the child.

VPK Enrollment for Latham, Baby Ruth

Certificate Number: **VPK1116598-2018**      Issue Date: **07/24/2018**      Current Enrollment Status: **Enrollment Ended (Terminated)**      Program Year: **2018 - 2019**

Provider Info	Current Enrollment Info
<p>Provider ID</p> <p>Provider Name <input type="text" value="Enter the first 3 letters of the provider name"/></p> <p>Provider Address</p> <p>County of Service</p> <p>Provider Phone</p> <p>Provider Email</p>	<p>Class ID <input type="text" value=""/></p> <p>VPK Class Start Date: <input type="text" value=""/></p> <p>VPK Class End Date: <input type="text" value=""/></p> <p>VPK Calendar: <input type="text" value=""/></p> <p>Billing Group: <input type="text" value="VPK"/>      VPK Session: <input type="text" value="School year (540 hours)"/></p> <p>Anticipated Start Date: <input type="text" value="12/08/2018"/>      Eligibility: <input type="text" value="VPK"/>      Actual Start Date: <input type="text" value="N/A"/></p>

First, enter the provider name. As text is entered, matching providers are identified and display in a drop down. Select the provider and press the **Enter** key. Then, the provider information appears.

VPK Enrollment for Latham, Baby Ruth

Certificate Number: **VPK1116598-2018**      Issue Date: **07/24/2018**      Current Enrollment Status: **Enrollment Ended (Terminated)**      Program Year: **2018 - 2019**

Provider Info	Current Enrollment Info
<p>Provider ID: 19449</p> <p>Provider Name: <input type="text" value="Enter the first 3 letters of the provider name"/> <input type="text" value="Growing Up Strong"/></p> <p>Provider Address: 205 MARRIOTT DR TALLAHASSEE, FL 32301</p> <p>County of Service: KREPS ISLAND</p> <p>Provider Phone: 5555555555</p> <p>Provider Email: alatham77@gmail.com</p>	<p>Class ID: <input type="text" value="-- Select --"/></p> <p>VPK Class Start Date: <input type="text" value=""/></p> <p>VPK Class End Date: <input type="text" value=""/></p> <p>VPK Calendar: <input type="text" value=""/></p> <p>Billing Group: <input type="text" value="VPK"/>      VPK Session: <input type="text" value="School year (540 hours)"/></p> <p>Anticipated Start Date: <input type="text" value="12/08/2018"/>      Eligibility: <input type="text" value="VPK"/>      Actual Start Date: <input type="text" value="N/A"/></p>

Use the Class ID drop down to select the appropriate class for enrollment. Then, the class information appears. Next, enter the anticipated start date for the child.

**NOTE:** The anticipated start date cannot be before the class start date or before the COE issue date (or before a termination date) - see highlighted dates.

VPK Enrollment for Latham, Baby Ruth

Certificate Number: **VPK1116598-2018** Issue Date: **07/24/2018** Current Enrollment Status: **Enrollment Ended (Terminated)** Program Year: **2018 - 2019**

**Provider Info**

Provider ID: 19449  
 Provider Name: *Enter the first 3 letters of the provider name*  
 Growing Up Strong  
 Provider Address: 205 MARRIOTT DR TALLAHASSEE, FL 32301  
 County of Service: KREPS ISLAND  
 Provider Phone: 5555555555  
 Provider Email: alatham77@gmail.com

**Current Enrollment Info**

Class ID: AF18 - Purple Roo  
 VPK Class Start Date: **07/02/2018** VPK Class End Date: 05/31/2019  
 VPK Calendar: A VPK Session: School Year (540 hours)  
 Billing Group: VPK Eligibility: VPK  
**Anticipated Start Date: 07/24/2018** Actual Start Date: N/A

**Enrollment Actions To-Date**

Anticipated Start Date	Class ID	Class Transfer Effective Date	Termination Effective Date	Termination Reason	Submitted By	Submitted On Date
No Records Found.						

**Other Enrollments for Child**

Enrollment ID	COE Number	Program Year	Provider	Enrollment Status	Actual Start Date	Termination Effective Date	Last Action Date	
33724	VPK1116598-2018	2018	Growing Up Strong	Enrollment Ended (Terminated)	N/A	<b>07/24/2018</b>	07/24/2018	<input type="button" value="Re-open"/>

**Case Notes**

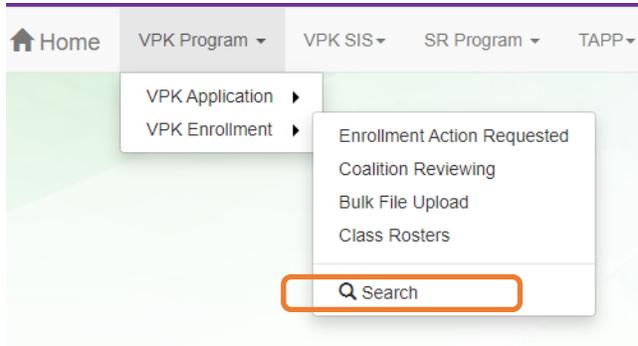
add your note here...

Status Records:  Custom Code Type:  Custom Code:

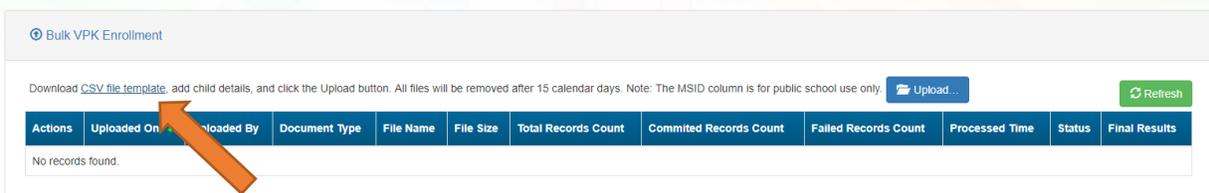
The page refreshes and the application records appears. Now, the button says **View Enrollment**. When clicked, the Enrolled record displays.

## Creating New Enrollments through a Bulk File Upload

In addition to the enrollment method described in “Creating New Enrollments through the Coalition Services Portal” coalition users may submit enrollment requests on behalf of providers via a file process. To begin, click the **VPK Enrollment** menu item, then **Bulk File Upload**. The bulk file processing page displays.



Next, click on the link to download the **CSV file template**. The file may appear at the bottom of the computer screen depending on the user’s browser.



Open the file and expand the columns. Each column is explained below.

	A	B	C	D	E	F	G	H	I
1	Provider ID	Certification Number	Child First Name	Child Last Name	Child DOB(MM/DD/YYYY)	VPK Program Year	Class ID	Anticipated Start Date(MM/DD/YYYY)	MSID(XX-XXXX)
2									
3									
4									

- A. **Provider ID** = this is the provider ID for the site.
- B. **Certification Number** = this is the child’s certificate number listed on their COE. The field is not case sensitive, however, the certificate number must be entered exactly as it appears on the COE (i.e. VPK#####-YYYY).



STATE OF FLORIDA  
VOLUNTARY PREKINDERGARTEN (VPK) EDUCATION PROGRAM  
**Child Certificate of Eligibility**

**I. CHILD CERTIFICATE OF ELIGIBILITY** (Issued by Early Learning Coalition, through the Family Portal)

1. VPK program year 2017-2018 <b>F</b>	2. Certificate number VPK1095621-2017 <b>B</b>	3. Certificate issue date 6/30/2018	4. Parent email address [Redacted]
5. Parent name [Redacted]	6. Primary contact number [Redacted]	7. Secondary contact number [Redacted]	
8. Child's full name KitKat Latham <b>C</b> <b>D</b>	9. Child's date of birth 09/09/2012 <b>E</b>	10. County [Redacted]	

- C. **Child First Name** = this is the child's first name listed on their COE. The field is not case sensitive.
- D. **Child Last Name** = this is the child's last name listed on their COE. Do not include a suffix (if any). The field is not case sensitive.
- E. **Child DOB (MM/DD/YYYY)** = this is the child's date of birth listed on their COE. The field will accept M/D/YYYY as well.
- F. **VPK Program Year** = this is the child's approved VPK program year listed on their COE. The field is looking for the first 4-digit year only. For example, if the VPK program year is 2017-2018, the entry would be 2017. Generally, the 4-digit VPK program year matches the year included at the end of the child's COE number.
- G. **Class ID** = this is the desired class's 4-digit ID. The class ID must be entered as the 4-digit assigned ID. Do not include the class name (if any). Looking at the example below, the entry would be "AS17" not "Songbirds" or "AS17-Songbirds."

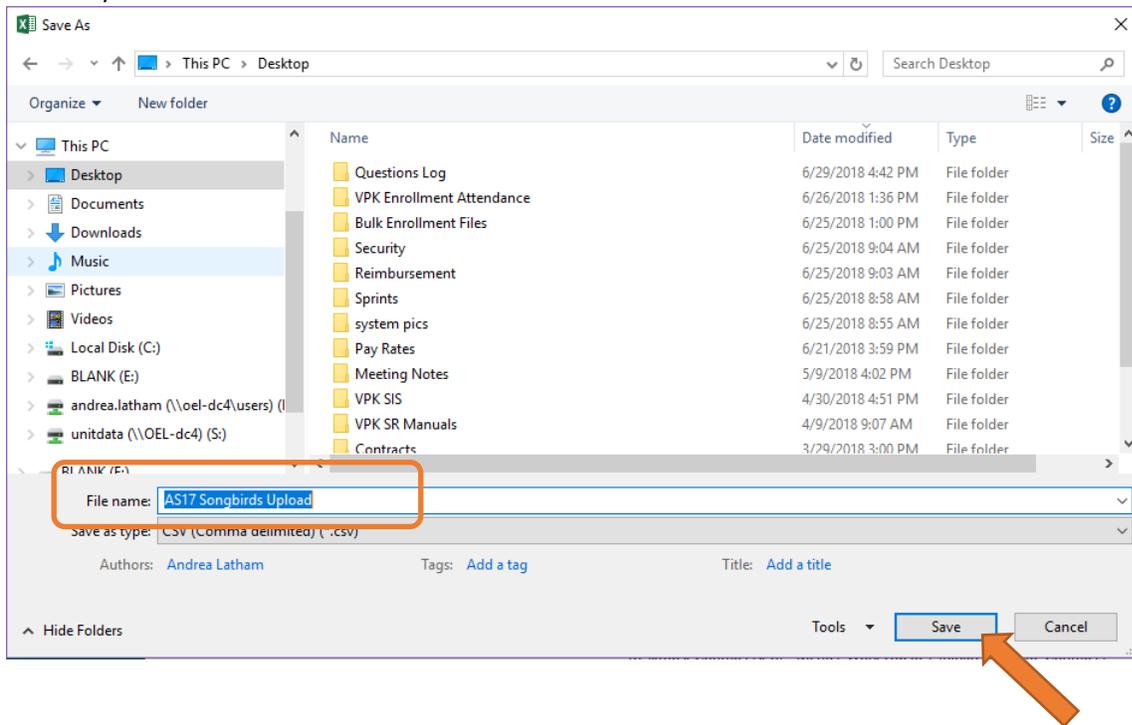
Request/Change VPK Enrollment [Bulk VPK Enrollment](#)

VPK Program Year: 2017-2018 VPK Session: Summer (300 hours) **VPK Class: AS17 - Songbirds** Class Start Date: 06/04/2018 Class End Date: 07/26/2018

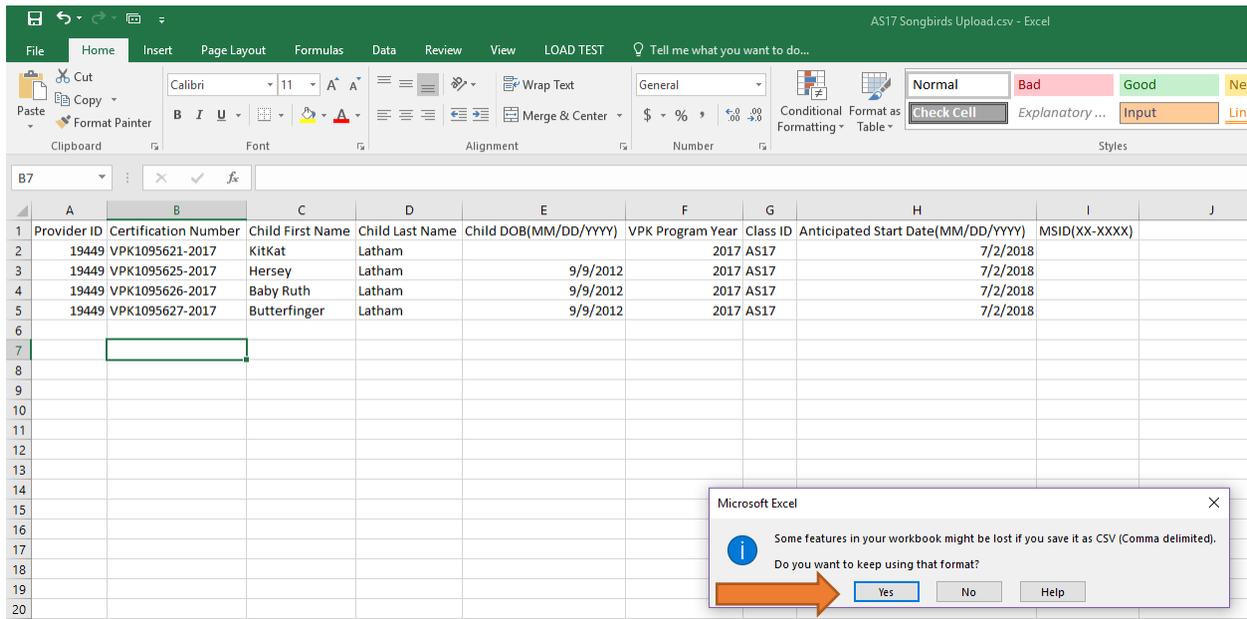
- H. **Anticipated Start Date (MM/DD/YYYY)** = this is the date the child will begin attending class. Typically, this is the class start date unless the child is starting after the class begins. **NOTE:** An anticipated start date cannot be before the class start date or after the class end date. And, an anticipated start date cannot be before the child's COE issue date. The field will accept M/D/YYYY as well.
- I. **MSID (XX-XXXX)** = this field is for public schools only. Public schools may enter their Master School Identification (MSID) number in a 6-digit format, where the first 2 digits are the district number followed by a hyphen and 4-digit school number. The MSID number can be used in lieu of the Provider ID in column A. Both IDs are accepted.

When the file is complete, name it and save it as a CSV file type.

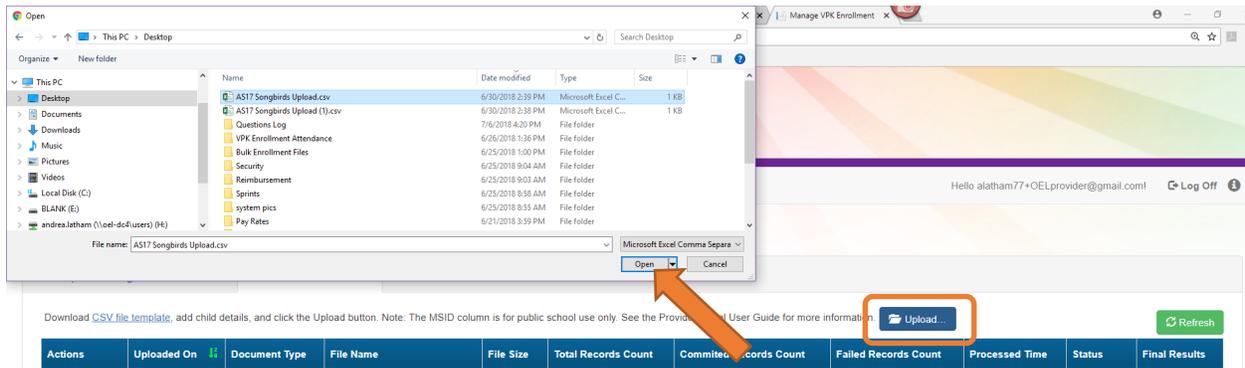
**NOTE:** It may be helpful to include your provider name and class in the file name if troubleshooting is ever necessary.



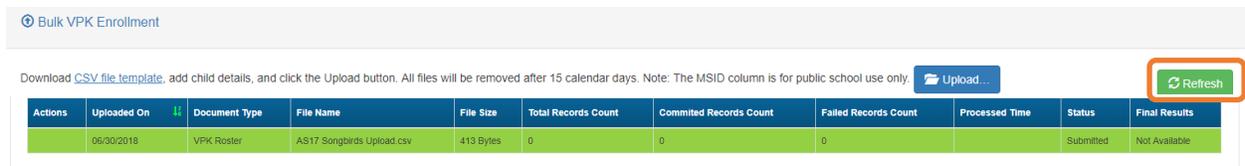
When changing the file format to CSV, Excel often displays a message to ask if you want to keep using that format. If this message appears, click **Yes**.



Click the **Upload** button. A window displays. Select your file and click **Open**.



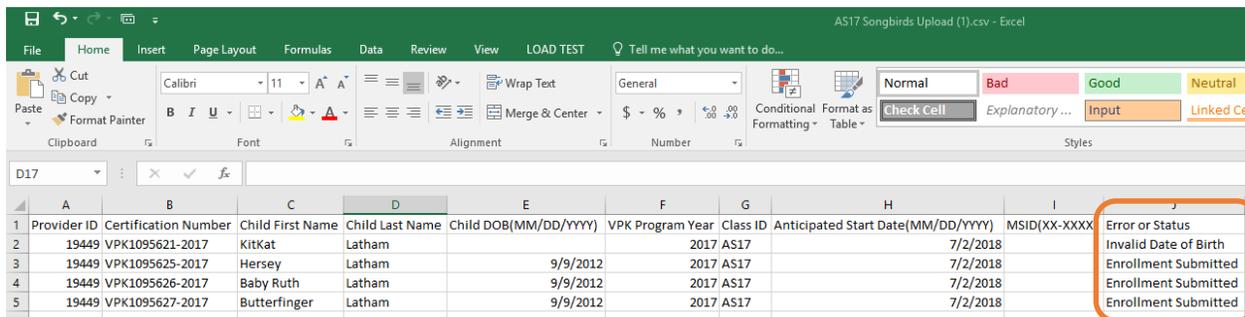
The file upload will begin. The file details will populate on a row and turn green. Click the **Refresh** button to populate the results.



The file details will be updated. The file size, total records count, committed records count, failed records count, processed time, status, and final results are updated. The file results are also returned and can be downloaded by clicking on the **Download** button.

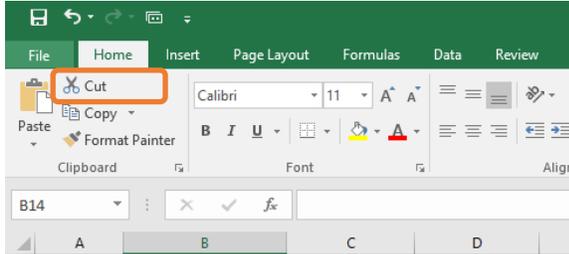


In this example, there is one failed record and three committed records. The file download will include the error message and status for each record submitted. The three committed records are now “Enrollment Submitted” and the failed record was not included because of an invalid date of birth. The same validations that occur with a manual child enrollment occur with the bulk enrollment file process.



The three committed records are displayed on the class’s enrollment roster as “Enrollment Submitted” and appear in the **VPK Enrollment> Enrollment Action Requested** work queue for review/approval/rejection. In addition, the family receives a notification that their child’s enrollment is in progress. The same processes that occur with a manual child enrollment occur with the bulk enrollment file process.

**NOTE:** When correcting records and re-uploading the file, be sure to remove the “Error or Status” column as it is not accepted for the upload. Also, it is best to NOT include records that have already been submitted successfully as they will now error as having been processed. When removing successful records and the Error or Status column, it is best to highlight the row/column and use the cut/delete option instead of just deleting the information. Excel often retains formats even if the cells are now empty.



### VPK-20 Contract Verification

A provider must have a Certified VPK-20 contract on the Anticipated Start Date before an enrollment can be added. In the below example, the VPK application information is entered by the coalition, and the **Save & Enroll** button is clicked.

VPK Enrollment for [redacted] Household (HH\_0000000000)

Certificate Number: VPK1[redacted]-2020 Issue Date: 01/28/2020 Current Enrollment Status: Program Year: 2020 - 2021

Provider Info		Current Enrollment Info	
Provider ID	6888	Class ID	AF20 - AF20
Provider Name	BOCC SOUTH COUNTY HEAD START CENTER	VPK Class Start Date:	01/26/2021
Provider Address	215 SE. 14TH AVENUE RUSKIN, FL 33570	VPK Calendar:	C-M-F 8.5 - 11.5 2.5 - 4.5
County of Service	Hillsborough	Billing Group:	VPK
Provider Phone	5555555555	Anticipated Start Date:	03/30/2021
Provider Email		VPK Class End Date:	06/30/2021
		VPK Session:	School Year (540 hours)
		Eligibility:	VPK
		Actual Start Date:	N/A

Enrollment Actions To-Date

Anticipated Start Date	Class ID	Class Transfer Effective Date	Termination Effective Date	Termination Reason	Submitted By	Submitted On Date
No Records Found.						

**Save & Enroll** Cancel

In this example, the provider does not have a Certified VPK-20 contract for the Anticipated Start Date of 03/30/2021, so an error message displays, alerting the coalition that the enrollment cannot be submitted.

Coalition Services

---

Sorry, something went wrong while processing your request.

---

Your last action was not completed for the following reason.

Enrollment cannot be submitted without a certified VPK-20 contract. Please initiate contracting processes with the provider.

You can click on button below to return to what you were doing or go to the home page.

[Return to home page](#) [Return to previous](#)

In the below example, the VPK application information is entered by the provider, and the **+ Enroll to this Class** button is clicked.

BOCC SOUTH COUNTY HEAD START CENTER

[Request/Change VPK Enrollment](#) [Bulk VPK Enrollment](#)

VPK Program Year: 2020-2021 VPK Session: School-year (540 hours) VPK Class: AF20 - AF20 Class Start Date: 01/26/2021 Class End Date: 06/30/2021

Max Class Size: 20 VPK Children Count: 20 Non-VPK Children Count: 0

**Please Note:** Based on the VPK session and instructors assigned, the maximum class size is 20. The class must have a minimum of 4 VPK children to start.

Certificate Number: VPK [redacted]-2020 Child First Name: [redacted] Child Last Name: A [redacted] Child DOB: [redacted] **Enroll to this Class**

Actions	Certificate Number	Child First Name	Child Last Name	Child DOB	Child Age	Student ID	Anticipated Start Date
---------	--------------------	------------------	-----------------	-----------	-----------	------------	------------------------

In this example, the provider does not have a Certified VPK-20 contract, so an error message displays, alerting the provider that the enrollment cannot be submitted.

Request Enrollment ×

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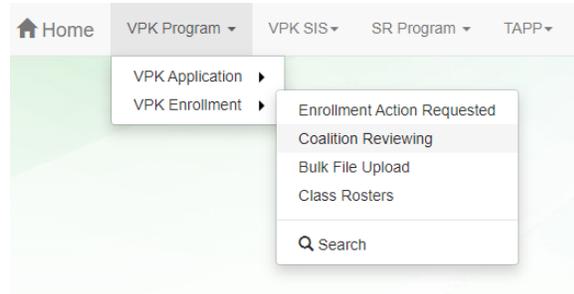
Enrollment cannot be submitted without a certified VPK-20 contract. Please contact your early learning coalition for assistance.

---

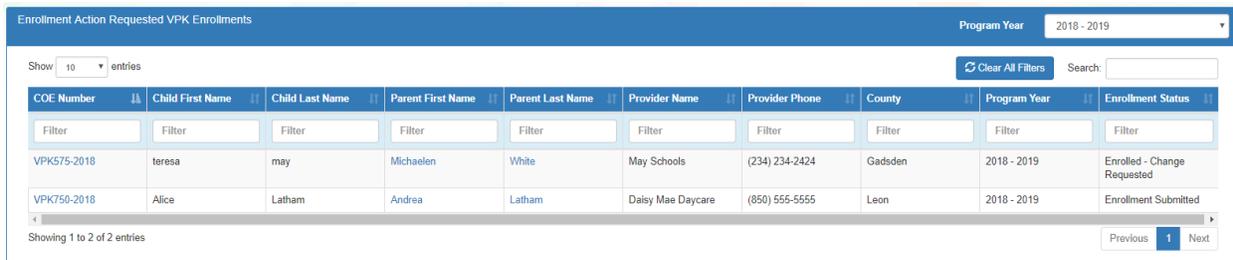
[Ok](#)

## Reviewing VPK Enrollment Requests

Coalition users will navigate to the VPK Enrollment menu item and select the **Enrollment Action Requested** work queue to review/approve/reject enrollment requests made by the provider. Requests include new enrollments, class transfers, and child terminations.



The Enrollment Action Requested work queue displays the certificate of eligibility (COE) number, child name, parent name, provider name, provider phone number, provider county, program year, and enrollment status. The columns may be sorted by clicking on the column header. Each column may be filtered by typing criteria in the column's filter field. Additionally, there is a program year filter and search feature that can filter results.



COE Number	Child First Name	Child Last Name	Parent First Name	Parent Last Name	Provider Name	Provider Phone	County	Program Year	Enrollment Status
VPK575-2018	teresa	may	Michaelen	White	May Schools	(234) 234-2424	Gadsden	2018 - 2019	Enrolled - Change Requested
VPK750-2018	Alice	Latham	Andrea	Latham	Daisy Mae Daycare	(850) 555-5555	Leon	2018 - 2019	Enrollment Submitted

Clicking on the child's COE number opens the enrollment record. Clicking on the parent's name opens the household view.

The child's enrollment record contains *Provider Information* (on the left) and the *Current Enrollment Information* (on the right). The *Enrollment Actions To-Date* area displays the current request that was made by the provider with action buttons to **Approve**, **Reject**, or **Set Coalition Reviewing**.

Below, there are two more sections: *Other Enrollments for Child* and *Case Notes*. The *Other Enrollments for Child* area displays the enrollment history attached to this COE (i.e. cancellations, class transfers, rejections, etc.). The *Case Notes* area allows coalition users to create and view case notes related to the enrollment.

To create a case note, type in the text box area and click **Add Case Note**.

**NOTE:** When assigning a custom code to a case note, select the Custom Code Type and Custom Code prior to clicking **Add Case Note**.

To view case notes, click **Status Records**.

**Case Note History**

Show  entries Search:

Code	Custom Code	Date Created	Event	Description	Notes	User
ENRV		7/7/2018 10:02:28 AM	VPK County of Service Change	Child ID: 2230 Name: Apple Latham County of Service was changed during VPK enrollment from: Clay to : Leon		alatham77+0033@gmail.com
ENRV		7/7/2018 10:02:28 AM	Enrollment Submitted	*Child ID: 2230 *Name: Apple Latham *Program: VPK *Status: Enrollment Submitted *Provider ID: 8433 *Class ID: AF18 *Anticipated Start Date: 08/20/2018		alatham77+0033@gmail.com

Previous **1** Next

[Close](#)

In this example, the child had a VPK County of Service Change during the enrollment process. The COE listed Clay as the county of service and it was automatically updated to the provider's county (Leon) during the enrollment process. This enables the coalition of the provider to process the enrollment request without having the original coalition manually update the child's application record.

Case notes have a search feature that can filter results. Click **Close** to close the window.

## New Enrollments

New enrollment requests appear in the **Enrollment Action Requested** work queue as *Enrollment Submitted*. Click on the **COE number** to continue. The child's enrollment record opens. The *Enrollment Actions To-Date* area displays the current request that was made by the provider with action buttons to Approve, Reject, or Set to Coalition Reviewing.

### Set Coalition Reviewing

Coalition users may place an enrollment request in the Coalition Reviewing status by clicking the **Set Coalition Reviewing** action button. This action changes the record's status from *Enrollment Submitted* to *Coalition Reviewing* and moves the record to the Coalition Reviewing work queue. The family, provider, and coalition will see the status update within the respective portals. The family and provider will not receive an email notification for this action.

### Reject

Coalition users may reject an enrollment request by clicking the **Reject** action button. A window will appear to enter comments for the enrollment case note. The user must click **Save** to complete this action; otherwise click **Cancel** to abandon the rejection. Rejecting an enrollment request changes the record's status from *Enrollment Submitted* to *Enrollment Rejected*. In this status, the enrollment request is cancelled and the enrollment process starts over. The provider's VPK Director receives an email notification to inform them the enrollment process could not be completed for the child and the child's record is no longer listed on the class roster in the Provider Portal. The family also receives an email notification to inform them the enrollment process could not be completed for their child; instructions are provided to log into the Family Portal to download the child's COE and select another VPK provider.

### Approve

Coalition users may approve an enrollment request by clicking the **Approve** action button. Approving an enrollment request changes the record's status from *Enrollment Submitted* to *Enrolled*. The family, provider, and

coalition will see the status update within the respective portals. The family receives an email notification to inform them the enrollment process is complete for their child. The provider will not receive an email notification for this action.

### Class Transfers

Class transfer requests appear in the **Enrollment Action Requested** work queue as *Enrolled-Change Requested*. Click on the **COE number** to continue. The child’s enrollment record opens. The *Enrollment Actions To-Date* area displays the current request that was made by the provider with action buttons to **Approve**, **Reject**, or **Set Coalition Reviewing**.

**NOTE:** During a class transfer, a child has two enrollment records; one for their current class (*Enrolled*) and one for the pending class transfer (*Enrolled-Change Requested*).

**NOTE:** Once a class change request is submitted to the coalition by a provider, a subsequent class change request for the same child is not allowed until the initial class change request is processed by the coalition.

VPK Enrollment for Latham, Apple

Certificate Number: VPK737-2018      Issue Date: 07/07/2018      Current Enrollment Status: Enrollment Submitted      Program Year: 2018 - 2019

**Provider Info**

Provider ID: 8433  
 Provider Name: Daisy Mae Daycare  
 Provider Address: 250 MARRIOTT DR TALLAHASSEE, FL 32399-6535  
 County of Service: Leon  
 Provider Phone: (850) 555-5555      Provider Email: rose@nowhere.com

**Current Enrollment Info**

Class ID: BF18  
 VPK Class Start Date: 08/20/2018      VPK Class End Date: 05/17/2019  
 VPK Calendar: Fall PM      VPK Session: School year (540 hours)  
 Billing Group: VPK      Eligibility: VPK  
 Anticipated Start Date: 08/20/2018      Actual Start Date: N/A

Remove Enrollment from Provider - Child never attended

**Enrollment Actions To-Date**

Anticipated Start Date	Class ID	Class Transfer Effective Date	Termination Effective Date	Termination Reason	Submitted By	Submitted On Date
08/20/2018	BF18				Daisy Mae Daycare	07/07/2018
08/20/2018	AF18	08/20/2018			Daisy Mae Daycare	07/07/2018

Approve    Reject    Set Coalition Reviewing

### Set Coalition Reviewing

Coalition users may place a class transfer request in the Coalition Reviewing status by clicking the **Set Coalition Reviewing** action button. This action changes the pending class transfer record’s status from *Enrolled-Change Requested* to *Coalition Reviewing* and moves the record to the Coalition Reviewing work queue. The family will not see the status change on their dashboard in the Family Portal. However, the provider and coalition will see the status update within the respective portals. The family and provider will not receive an email notification for this action.

### Reject

Coalition users may reject a class transfer request by clicking the **Reject** action button. A window will appear to enter comments for the enrollment case note. The user must click **Save** to complete this action; otherwise click **Cancel** to abandon the rejection. Rejecting the pending class transfer record cancels the class transfer. The rejected class transfer request is no longer active or visible to the provider in the second class; only the enrolled record remains active in the first class. The provider’s VPK Director receives an email notification to inform them the change request was not approved for the child. The family will not receive an email notification for this action.

### Approve

Coalition users may approve a class transfer request by clicking the **Approve** action button. Approving a class transfer request will change the pending class transfer record's status from *Enrolled-Change Requested* to *Enrolled*. The enrolled record in the first class is terminated with the class transfer effective date. The family, provider, and coalition will see the status update within the respective portals. The family and provider will not receive an email notification for this action.

### Terminations

Termination requests appear in the **Enrollment Action Requested** work queue as *Enrolled-Change Requested*. Click on the **COE number** to continue. The child's enrollment record opens. The *Enrollment Actions To-Date* area displays the current request that was made by the provider with action buttons to **Approve**, **Reject**, or **Set Coalition Reviewing**.

VPK Enrollment for Latham, Apple

Certificate Number: VPK737-2018      Issue Date: 07/07/2018      Current Enrollment Status: Enrollment Submitted      Program Year: 2018 - 2019

**Provider Info**

Provider ID: 8433  
Provider Name: Daisy Mae Daycare  
Provider Address: 250 MARRIOTT DR TALLAHASSEE, FL 32399-6535  
County of Service: Leon  
Provider Phone: (850) 555-5555      Provider Email: rose@nowhere.com

**Current Enrollment Info**

Class ID: BF18  
VPK Class Start Date: 08/20/2018      VPK Class End Date: 05/17/2019  
VPK Calendar: Fall PM      VPK Session: School year (540 hours)  
Billing Group: VPK      Eligibility: VPK  
Anticipated Start Date: 08/20/2018      Actual Start Date: N/A

Remove Enrollment from Provider - Child never attended

**Enrollment Actions To-Date**

Anticipated Start Date	Class ID	Class Transfer Effective Date	Termination Effective Date	Termination Reason	Submitted By	Submitted On Date
08/20/2018	BF18				Daisy Mae Daycare	07/07/2018
08/20/2018	AF18	08/20/2018			Daisy Mae Daycare	07/07/2018

Approve    Reject    Set Coalition Reviewing

### Set Coalition Reviewing

Coalition users may place a termination request in the Coalition Reviewing status by clicking the **Set Coalition Reviewing** action button. This action changes the pending termination record's status from *Enrolled-Change Requested* to *Coalition Reviewing* and moves the record to the Coalition Reviewing work queue. The family will not see the status change on their dashboard in the Family Portal. However, the provider and coalition will see the status update within the respective portals. The family and provider will not receive an email notification for this action.

### Reject

Coalition users may reject a termination request by clicking the **Reject** action button. A window will appear to enter comments for the enrollment case note. The user must click **Save** to complete this action; otherwise click **Cancel** to abandon the rejection. Rejecting the request cancels the termination and changes the record's status from *Enrolled-Change Requested* to *Enrolled*. The provider's VPK Director receives an email notification to inform them the change request was not approved for the child. The family will not receive an email notification for this action.

### Approve

Coalition users may approve a termination request by clicking the **Approve** action button. Approving a termination request will change the record's status from *Enrolled-Change Requested* to *Enrollment Ended* (once the termination effective date is reached). The family, provider, and coalition will see the status update within the respective portals. The provider's VPK Director receives an email notification to inform them the enrollment has

ended and the child's record is no longer listed on the class roster in the Provider Portal (once the termination effective date is reached). The family also receives an email notification to inform them the enrollment has ended; instructions are provided to log into the Family Portal to request reenrollment if hours remain unused.

[Edit Termination Information](#)

If the VPK enrollment status is Enrollment Ended (Terminated), a VPK Application Manager can change the termination date or termination reason if the date and/or reason was incorrectly entered by the provider.

From the enrollment screen, click the **[Edit Termination Info](#)** link.

Current Enrollment Status: **Enrollment Ended (Terminated)**

Program Year: **2018 - 2019**

Current Enrollment Info

Class ID	AF18 - VPK		
VPK Class Start Date:	08/20/2018	VPK Class End Date:	06/07/2019
VPK Calendar:	VPK	VPK Session:	School year (540 hours)
Billing Group:	VPK	Eligibility:	VPK
Anticipated Start Date:	08/20/2018	Actual Start Date:	08/20/2018

[Edit Termination Info](#)

Fill out the required fields and click **Save**.

## Terminate Enrollment

Select the reason for terminating this enrollment.

**Last Day of Services:** \* 

**Termination Reason:** \*  

**Comments:** \*

Cancel

Save

### Saving Enrollment Changes Directly

Coalition users may also open an enrollment record and make changes directly, such as changing a class, terminating the enrollment or cancelling the enrollment.

### Class Transfers

To save a class transfer change, open the enrollment record. Use the Class ID drop down to select the class to transfer to.

VPK Enrollment for Latham, Baby Ruth

Certificate Number: VPK1116598-2018    Issue Date: 07/24/2018    Current Enrollment Status: **Enrolled**    Program Year: 2018 - 2019

Provider Info		Current Enrollment Info	
Provider ID	19448	Class ID	AF18 - School Yea
Provider Name	<i>Enter the first 3 letters of the provider name</i> Kim's Test Daycare	VPK Class Start Date:	08/13/2018
Provider Address	2305 HOME CT TALLAHASSEE, FL 32303	VPK Class End Date:	05/24/2019
County of Service	KREPS ISLAND	VPK Calendar:	School Year
Provider Phone	(850) 555-5555	VPK Session:	School year (540 hours)
Provider Email	trokekim+prov1dir@gmail.com	Billing Group:	VPK
		Eligibility:	VPK
		Anticipated Start Date:	08/13/2018
		Actual Start Date:	N/A

 Remove Enrollment from Provider - Child never attended

Enrollment Actions To-Date

Anticipated Start Date	Class ID	Class Transfer Effective Date	Termination Effective Date	Termination Reason	Submitted By	Submitted On Date
08/13/2018	AF18				Kim's Test Daycare	12/08/2018

 Save  Terminate

When the class changes, a "Class Change Effective Date" appears. Enter the first day the child will begin in the new class and click **Save**.

VPK Enrollment for Latham, Baby Ruth

Certificate Number: VPK1116598-2018    Issue Date: 07/24/2018    Current Enrollment Status: Enrolled    Program Year: 2018 - 2019

**Provider Info**

Provider ID: 19448  
 Provider Name: Enter the first 3 letters of the provider name  
 Kim's Test Daycare  
 Provider Address: 2305 HOME CT TALLAHASSEE, FL 32303  
 County of Service: KREPS ISLAND  
 Provider Phone: (850) 555-5555  
 Provider Email: trokekim+prov1dir@gmail.com

**Current Enrollment Info**

Class ID: BF18 - School Year    Class Change Effective Date:   
 VPK Class Start Date: 08/13/2018    VPK Class End Date: 05/24/2019  
 VPK Calendar: A    VPK Session: School Year (540 hours)  
 Billing Group: VPK    Eligibility: VPK  
 Anticipated Start Date: 08/13/2018    Actual Start Date: N/A

Remove Enrollment from Provider - Child never attended

**Enrollment Actions To-Date**

Anticipated Start Date	Class ID	Class Transfer Effective Date	Termination Effective Date	Termination Reason	Submitted By	Submitted On Date
08/13/2018	AF18				Kim's Test Daycare	12/08/2018

The page refreshes and the enrollment record is updated.

### Terminations

To save a termination change, open the enrollment record and click **Terminate**. A pop-up message displays to collect termination information. Enter the last day that services will be/were rendered and select the reason for termination. The Termination Effective Date is displayed below the Last Day of Services as one day after the last day of services. Therefore, the Termination Effective Date is the first day the child is NOT attending class. Click **Save** to complete the task or click **Close** to abandon the termination and close the window.

**Terminate Enrollment**

Select the reason for terminating this enrollment.

Last Day of Services:   
 Termination Effective Date: 12/22/2018

Termination Reason:

Comments:

The page refreshes and the enrollment record is updated.

### Update Anticipated Start Date

To save an updated anticipated start date, open the enrollment record. Enter a new Anticipated Start Date and click **Save**. **NOTE:** An anticipated start date cannot be changed if an Actual Start Date is recorded. Also, the validations must still be met (i.e. the anticipated start date cannot be before the class start date or after the class end date; and, it cannot be before the child's COE issue date).

VPK Enrollment for Latham, Bacon

Certificate Number: VPK727-2018      Issue Date: 06/27/2018      Current Enrollment Status: Enrolled      Program Year: 2018 - 2019

**Provider Info**

Provider ID: 8489  
Provider Name: Enter the first 3 letters of the provider name  
Provider Address: 2308 APALACHEE PKWY TALLAHASSEE, FL 32301  
County of Service: Leon  
Provider Phone: (555) 555-5555  
Provider Email: dalmatian@nowhere.com

**Current Enrollment Info**

Class ID: FF18 - BBQ Room  
VPK Class Start Date: 07/16/2018      VPK Class End Date: 03/22/2019  
VPK Calendar: Fall Is Here      VPK Session: School year (540 hours)  
Billing Group: VPK      Eligibility: VPK  
Anticipated Start Date: 07/16/2018      Actual Start Date: N/A

Remove Enrollment from Provider - Child never attended

**Enrollment Actions To-Date**

Anticipated Start Date	Class ID	Class Transfer Effective Date	Termination Effective Date	Termination Reason	Submitted By	Submitted On Date
07/16/2018	FF18				Provider In Time	07/31/2018

Save Terminate

### Remove Enrollment from Provider - Child Never Attended

Coalition users may remove an enrollment from a provider, in effect cancelling the enrollment. This feature may be used if the child never attended and no reimbursement will be sought for the enrollment. To use this feature, open the enrollment record and click the **Remove Enrollment from Provider - Child Never Attended** button. A window displays to confirm the action. Click **Remove** to continue or click **Cancel** to abandon the action and close the window.

VPK Enrollment for Latham, Bacon

Certificate Number: VPK727-2018      Issue Date: 06/27/2018      Current Enrollment Status: Enrolled      Program Year: 2018 - 2019

**Provider Info**

Provider ID: 8489  
Provider Name: Enter the first 3 letters of the provider name  
Provider Address: 2308 APALACHEE PKWY TALLAHASSEE, FL 32301  
County of Service: Leon  
Provider Phone: (555) 555-5555  
Provider Email: dalmatian@nowhere.com

**Current Enrollment Info**

Class ID: FF18 - BBQ Room  
VPK Class Start Date: 07/16/2018      VPK Class End Date: 03/22/2019  
VPK Calendar: Fall Is Here      VPK Session: School year (540 hours)  
Billing Group: VPK      Eligibility: VPK  
Anticipated Start Date: 07/16/2018      Actual Start Date: N/A

Remove Enrollment from Provider - Child never attended

**Confirm Enrollment Cancellation**

If you remove this enrollment, you will not be able to make further changes to it.  
Are you sure you want to remove it?

Remove Cancel

**Enrollment Actions To-Date**

Anticipated Start Date	Class ID	Class Transfer Effective Date	Termination Effective Date	Termination Reason	Submitted By	Submitted On Date
07/16/2018	FF18				Provider In Time	07/31/2018

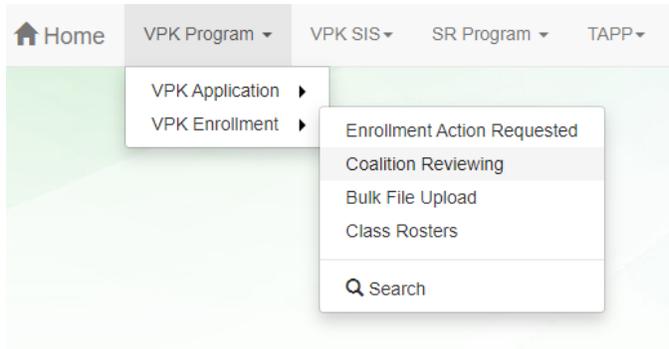
Save Terminate

Removing an enrollment changes the record's status to *Enrollment Cancelled* and the enrollment process starts over for the family. The provider's VPK Director will receive an email notification to inform them the enrollment is removed; no attendance or reimbursement may be sought. The child's record is no longer listed on the class enrollment roster or attendance roster in the Provider Portal. The family will receive an email notification to inform them the enrollment for their child was cancelled; instructions are provided to log into the Family Portal to download the child's COE and select another VPK provider.

This feature is available until the actual start date is recorded through the attendance process. When the actual start date is populated in the column, the **Never Attended** button is no longer available.

## Review Class Rosters

Coalition users can navigate to the VPK Enrollment menu item and select the **Class Rosters** link to view provider rosters by class.



The View Class Rosters page displays.

A screenshot of the 'View Class Rosters' page. It features a blue header with the page title. Below the header, there are two input fields: 'Provider Name' and 'Provider ID'. To the right of these fields is a blue button labeled 'Search for Provider'.

Enter the provider name or provider ID and click the **Search for Provider** button. Next, the provider information and class selections appear.

A screenshot of the 'View Class Rosters' page after a search. The search fields and button are still present. The 'Provider ID' field now contains the value '19449'. To the right, a 'Provider Info' box displays: 'Doing Business As: Growing Up Strong', 'Address: 205 MARRIOTT DR TALLAHASSEE, FL 32301', and 'Provider ID: 19449'. Below the search fields, there are three dropdown menus: 'VPK Program Year', 'VPK Session', and 'VPK Class'.

Select the VPK program year, session, and class to view the roster. When selected, class information displays.

View Class Rosters

**Provider Name**

**Provider ID**  Search for Provider

**Provider Info**

**Doing Business As:** Growing Up Strong      **Provider ID:** 19449

**Address:** 205 MARRIOTT DR TALLAHASSEE, FL 32301

**VPK Program Year**

**VPK Session**

**VPK Class**

**Class Info**

**Class Start Date:** 7/2/2018      **Class End Date:** 5/31/2019

**Max Class Size:** 11      **VPK Children Count:** 11      **Non-VPK Children Count:** 0

Show  entries
Clear All Filters

Action	Certificate Number	Child First Name	Child Last Name	Child DOB	Child Age	Anticipated Start Date	Actual Start Date	Termination Effective Date	Status
	Filter	Filter	Filter	Filter	Filter	Filter	Filter	Filter	Filter
View Enrollment	VPK1109705-2018	Reese's Pieces	Latham	9/9/2013	5	7/18/2018	7/18/2018		Enrolled
View Enrollment	VPK1109698-2018	Twix	Latham	9/9/2013	5	7/18/2018	7/18/2018		Enrolled
View Enrollment	VPK1109624-2018	Snickers	Latham	9/9/2013	5	7/18/2018	7/18/2018		Enrolled
View Enrollment	VPK1109732-2018	Three Musketeers	Latham	9/9/2013	5	7/17/2018	7/17/2018		Enrolled
View Enrollment	VPK1109729-2018	Crunch	Latham	9/9/2013	5	7/17/2018	7/17/2018		Enrolled
View Enrollment	VPK1109713-2018	Payday	Latham	9/9/2013	5	7/17/2018	7/17/2018		Enrolled
View Enrollment	VPK1116592-2018	Milky Way	Latham	9/9/2013	5	7/24/2018	7/24/2018		Enrolled
View Enrollment	VPK1116587-2018	Goodbar	Latham	9/9/2013	5	7/24/2018	7/24/2018		Enrolled

Columns may be sorted, filtered, and searched as needed. Clicking the **View Enrollment** button opens the child's enrollment record. The class rosters duplicate the provider roster view (without provider action buttons).

## SR Enrollment

### SR-20 Contract Verification

A provider must have a Certified SR-20 contract or an active SR-20 contract extension on the Enrollment Start Date before an enrollment can be added. In the below example, the provider does not have a Certified SR-20 contract for the Enrollment Start Date of 03/01/2021, so a validation message displays, and the enrollment cannot be saved.

The screenshot shows the 'Add Enrollment' form with the following details:

- Select a Provider for I:** Other: Altha Public School
- Details of Selected Provider:**
  - Name: Altha Public School
  - Location: 25820 NE FUQUA CIR, ALTHA, Florida 32421-3485, Calhoun
  - Contact Phone Number: (850) 674-8734
  - Contact Email Address: staci.williams@calhounfscschools.org
  - Provider Type: Public School
  - Profile Status: Active
  - Program Year: 2020 - 2021
  - Gold Seal Type: Not a Gold Seal provider
  - Hours of Business: M-F 7:45am-2:30pm
  - Child Ages: 3 YR - 6 YR
- Enrollment Start Date:** 03/01/2021. A red box highlights this field with the message: "The provider does not have a Certified SR contract on this date."
- Continuation of Services:** Is this enrollment a continuation of services with the selected provider?  Yes  No
- Eligibility Information:**
  - Eligibility Begin Date: 01/02/2021
  - Eligibility End Date: 01/02/2022
  - Level of Care: 48 < 60 Months
  - Full time Co-payment
  - Part time Co-payment
  - Copy in Effect

Buttons: Save, Cancel

### Pending Family Acceptance Status

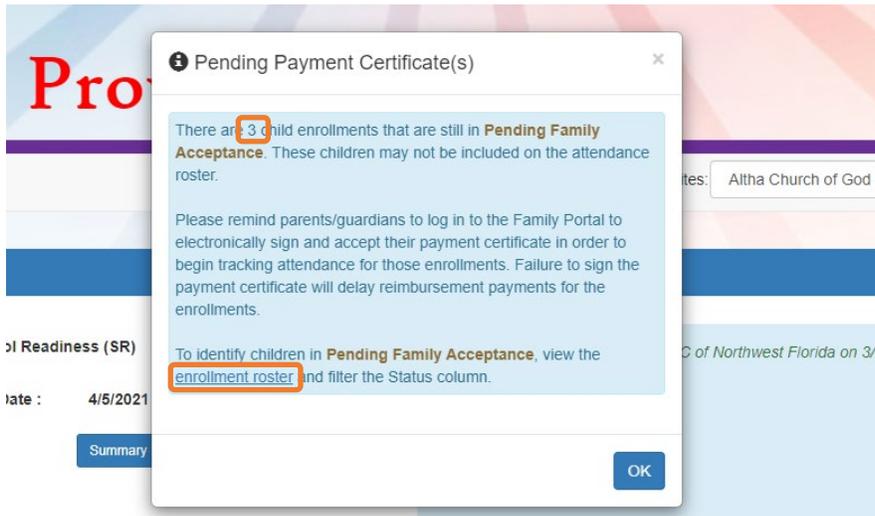
When a new School Readiness enrollment is created for an eligible child, families must accept the terms and conditions, establish their consent for developmental screening and/or child assessment, and sign the payment certificate. Families receive an email notification from DEL every five days until these steps are completed and the enrollment status changes from **Pending Family Acceptance** to **Enrolled**.

New enrollments in **Pending Family Acceptance** will not be visible on provider attendance rosters and will only appear once the family signs the payment certificate; however, there are exceptions.

- New enrollments for at-risk children (BG1) or at-risk children in relative care (BG3R) billing groups in **Pending Family Acceptance** will populate on attendance rosters
- Existing enrollments in **Pending Family Acceptance** that have already been submitted for attendance in previous months will continue to populate on attendance rosters

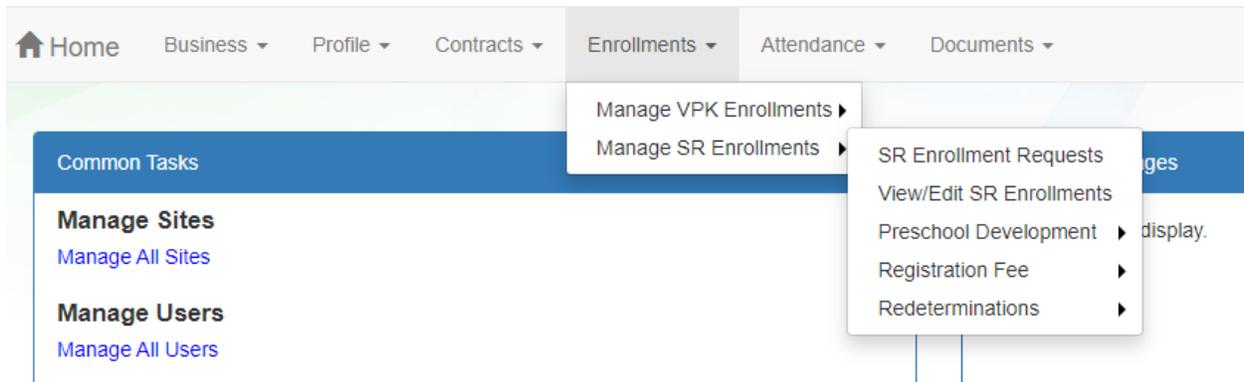
Providers will be able to process attendance and be paid for these enrollments, but not until the payment certificate is signed by the family.

If a provider has new enrollments in **Pending Family Acceptance**, when the provider accesses SR attendance, a pop-up window will display with a count of those new enrollments and a link to the Manage SR Enrollment queue.

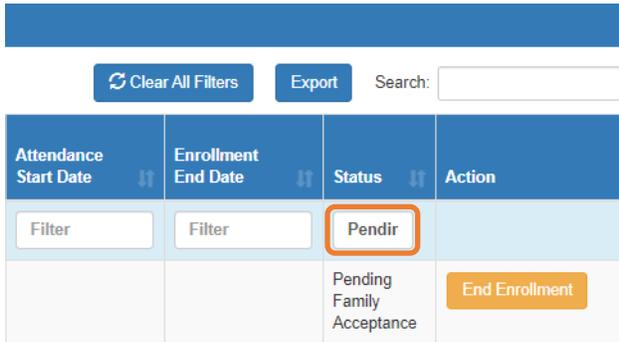


### Viewing Enrollments in Pending Family Acceptance

To view enrollments in **Pending Family Acceptance**, navigate to **Enrollments > Manage SR Enrollments > View/Edit SR Enrollments**.



Then, enter "Pending" in the Status column filter.

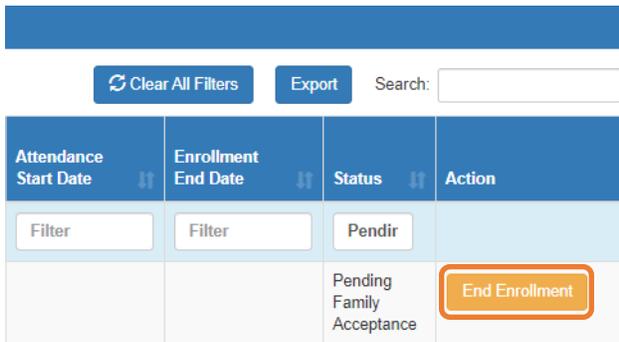


A screenshot of a web interface showing a table with columns: Attendance Start Date, Enrollment End Date, Status, and Action. Above the table are buttons for 'Clear All Filters' and 'Export', and a search input field. The 'Status' column has a filter box containing 'Pendir' (circled in orange). The table has one row with 'Pending Family Acceptance' in the Status column and an 'End Enrollment' button in the Action column.

Attendance Start Date	Enrollment End Date	Status	Action
Filter	Filter	Pendir	
		Pending Family Acceptance	End Enrollment

### Ending Enrollments in Pending Family Acceptance

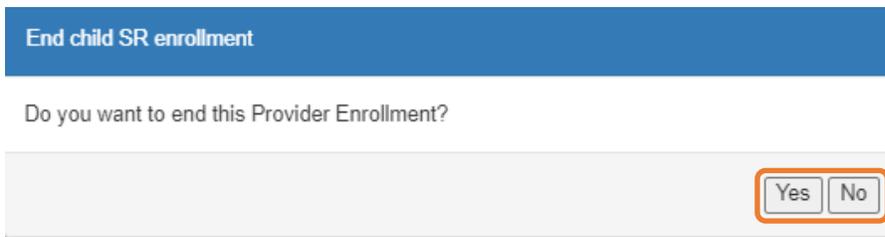
Providers can end enrollments in **Pending Family Acceptance**. Search for enrollments in **Pending Family Acceptance**, as detailed above, then click the **End Enrollment** button.



A screenshot of a web interface showing a table with columns: Attendance Start Date, Enrollment End Date, Status, and Action. Above the table are buttons for 'Clear All Filters' and 'Export', and a search input field. The 'Status' column has a filter box containing 'Pendir'. The table has one row with 'Pending Family Acceptance' in the Status column and an 'End Enrollment' button (circled in orange) in the Action column.

Attendance Start Date	Enrollment End Date	Status	Action
Filter	Filter	Pendir	
		Pending Family Acceptance	End Enrollment

A confirmation pop-up window displays. Click **Yes** to continue or **No** to stop the End Enrollment process.



A confirmation pop-up window titled 'End child SR enrollment'. It asks 'Do you want to end this Provider Enrollment?' and has two buttons: 'Yes' and 'No' (both circled in orange).

End child SR enrollment

Do you want to end this Provider Enrollment?

Yes No

After clicking the **Yes** button, the following pop-up window displays. Complete the required information and click **Save**.

End SR Enrollment

You have chosen to end enrollment for this child.

End Enrollment Reason \*

-- Select a Termination Reason --

Last Attendance Date \*

MM/DD/YYYY

Is there a past due parent fee? \*

Yes  No

Past Due Parent Fee

\$

Is there a payment plan in place?

Yes  No

Please attach payment plan document.

Choose File No file chosen

Save Cancel

After clicking **Save**, a confirmation pop-up window displays. Click **Yes** to end the enrollment or **Cancel** to cancel the End Enrollment process.

End SR Enrollment

Confirm End Enrollment

Ending the enrollment on this day means that reimbursements will not be provided for services after this date. End this enrollment with the specified dates?

Yes Cancel

After clicking the **Yes** button, a pop-up window displays a message that the enrollment is ended. Click **Ok** to continue.

End Enrollment

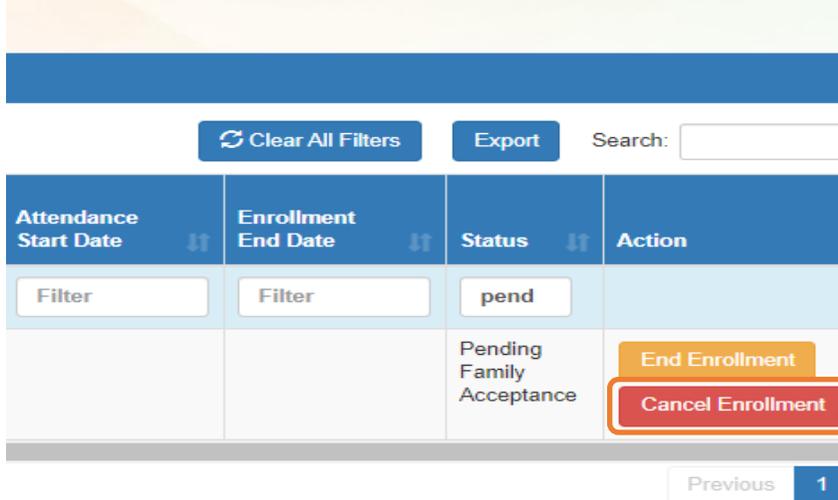
Child enrollment was successfully ended.

Ok

## Cancelling Enrollments in Pending Family Acceptance

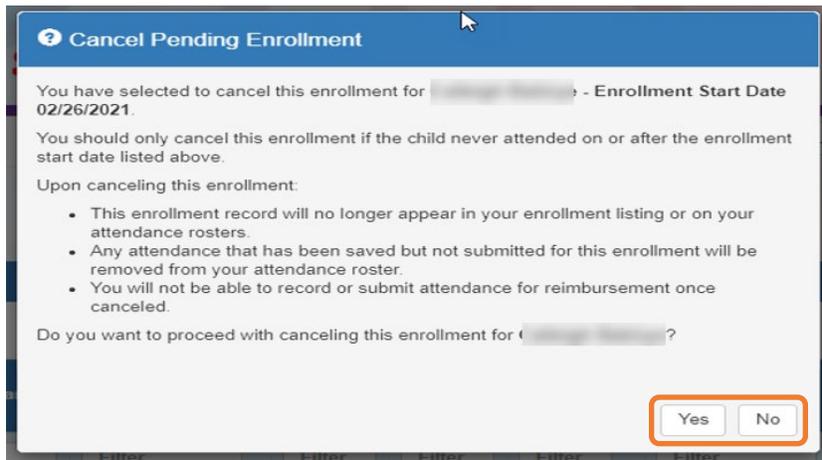
Providers can cancel enrollments in **Pending Family Acceptance**, but only if the enrollment is not for an at-risk child (BG1) or at-risk child in relative care (BG3R) and attendance has not been submitted for the enrollment.

Search for enrollments in **Pending Family Acceptance**, as detailed above, then click the **Cancel Enrollment** button.



Attendance Start Date	Enrollment End Date	Status	Action
Filter	Filter	pend	
		Pending Family Acceptance	<input type="button" value="End Enrollment"/> <input type="button" value="Cancel Enrollment"/>

Previous 1



**Cancel Pending Enrollment**

You have selected to cancel this enrollment for [Child Name] - Enrollment Start Date 02/26/2021.

You should only cancel this enrollment if the child never attended on or after the enrollment start date listed above.

Upon canceling this enrollment:

- This enrollment record will no longer appear in your enrollment listing or on your attendance rosters.
- Any attendance that has been saved but not submitted for this enrollment will be removed from your attendance roster.
- You will not be able to record or submit attendance for reimbursement once canceled.

Do you want to proceed with canceling this enrollment for [Child Name] ?

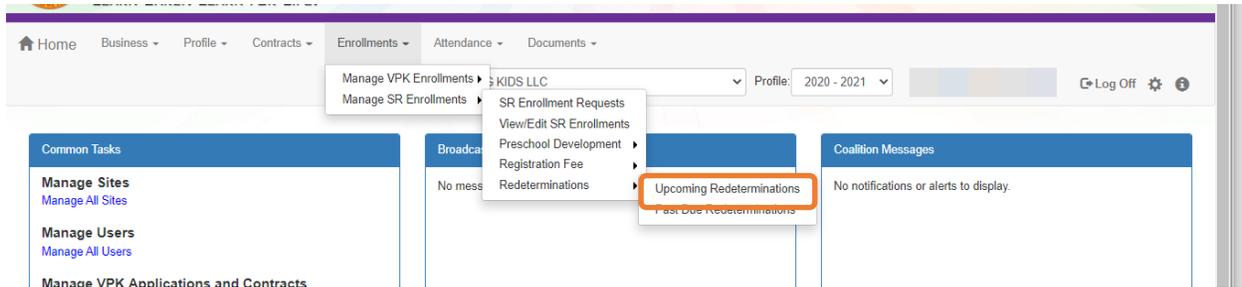
Click **Yes** to cancel the enrollment and remove it from the SR Enrollment queue. Click **No** to stop the Cancel Enrollment process.

## SR Eligibility Redeterminations

The SR Eligibility Redetermination menu allows providers to view enrollments with “upcoming” or “past due” redeterminations. These queues are for informational purposes only and aid providers in knowing when an enrolled child is reaching the end of their School Readiness eligibility.

### Upcoming Eligibility Redeterminations

To see the enrollments with upcoming eligibility redeterminations, the provider navigates to **Enrollments > Manage SR Enrollments > Redeterminations > Upcoming Redeterminations**.

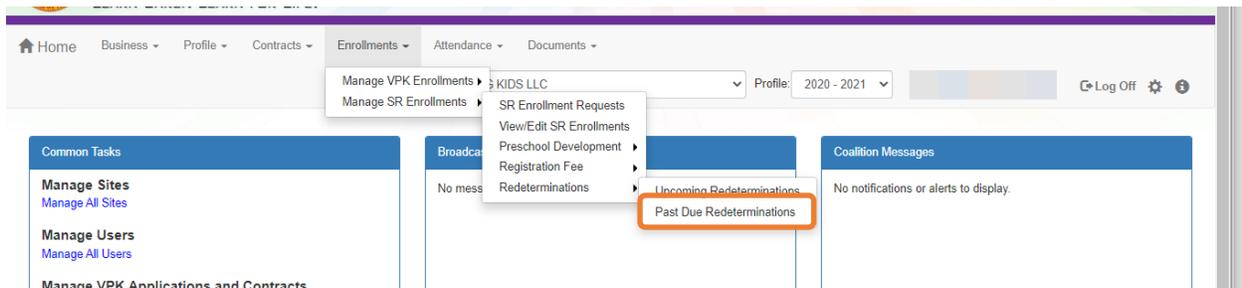


Redetermination records will only appear in the Provider Portal Upcoming Redetermination queue when:

- Child eligibility status is Eligible
- Child enrollment status is Enrolled or Pending Family Acceptance
- The redetermination is within 15 days from the due date

### Past Due Eligibility Redeterminations

To see the enrollments with past due eligibility redeterminations, the provider navigates to **Enrollments > Manage SR Enrollments > Redeterminations > Past Due Redeterminations**.



Redetermination records will only appear in the Provider Portal Past Due Redetermination queue when:

- Child eligibility status is Eligible
- Child enrollment status is Enrolled or Pending Family Acceptance
- The redetermination is at least one day past the redetermination due date

After clicking the **Upcoming Redeterminations** or **Past Due Redeterminations** link, the following appears.

Click Here For Filtering Tips

Show 10 entries Clear All Filters Export Search:

Child Name	Eligibility Assignment Start Date	Eligibility Assignment End Date	Payment Certificate
<input type="text" value="Filter"/>	<input type="text" value="Filter"/>	<input type="text" value="Filter"/>	
Etti	08/03/2020	03/11/2021	<a href="#">View</a>
Flo	12/05/2020	03/11/2021	<a href="#">View</a>
Ge	12/07/2020	03/08/2021	<a href="#">View</a>
Gie	09/03/2020	02/26/2021	<a href="#">View</a>
Jyc	02/26/2020	02/26/2021	<a href="#">View</a>
Na	11/09/2020	02/26/2021	<a href="#">View</a>

Showing 1 to 6 of 6 entries Previous 1 Next

Click the link for a child name in the Child Name column, and a pop-up message displays child eligibility and enrollment details for the child.

Click [View](#) in the Payment Certificate column, and a pop-up message displays the payment certificate for the enrollment. If the payment certificate does not exist, the [View](#) button will not be active, but hovering over the button displays a message: "The payment certificate is not viewable until signed by the parent."

**NOTE:** If the ELC changes the Household Eligibility Status from **Redetermination** to **Active** or **Inactive**, the child's eligibility will be removed from Redetermination status and the record(s) will be removed from the Provider Portal Redetermination queues.

Child Eligibility Details

Child Information		
Name	Date of Birth	Age
Etti		1

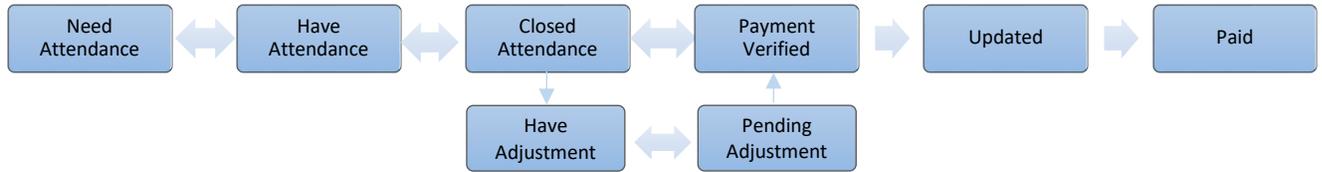
Parent Contact Information		
Name	Telephone	
Mrs. M.	(555) 555-5555	
Address		
2		
City	State	Zip Code
Mount Dora	FL	32757

Eligibility Information		
EV Number	Billing Group	Co-Payment
EV_0000437	BG8	\$4.25
Eligibility Status	Eligibility Start Date	Eligibility End Date
COALITION REVIEWING	08/03/2020	03/11/2021
Enrollment Status	Redetermination Due Date	
Enrolled	03/11/2021	

Close

## Attendance and Reimbursement Processing

The EFS Mod financial system operates on a 12-month payment year (July 1 to June 30). Each payment period or month, providers submit attendance rosters for childcare services rendered during a service period. As these child records move through the payment cycle, different statuses are assigned.



1. Need Attendance – Outstanding attendance for a service period not yet submitted.
2. Have Attendance – Submitted attendance.
3. Closed Attendance – Approved attendance.
4. Payment Verified – Verified reimbursement detail.
5. Have Adjustment – Approved attendance in need of reimbursement detail correction.
6. Pending Adjustment – Reimbursement detail corrections pending approval.
7. Updated – Locked reimbursement detail.
8. Paid – Transmitted reimbursement detail.

At any given time, coalitions are see how many individual records are in each status for the current payment period by viewing the *Review & Close Payment Period* page (under the **Reimbursement > Reimbursement Closeout** menu).

Review & Close Payment Period										
Payment Period Summary										
Use this page to review and close										
Funding Type	Payment Period	Have Attendance	Closed Attendance	Pending Adjustment	Payment Verified	Updated	Paid	Enrollments w/ Match Assessed	Assessed Match Amount	Action or Status
VPK	April 2020	5232	610	5	1	0	0	-	-	Open
SR	April 2020	960	6103	1	0	0	0	0	0.00	Open
Local	April 2020	-	8	0	1	0	0	-	-	Open
VPK Advance-VPK	April 2020	-	-	-	0	0	0	-	-	Close
VPK Advance-VPKS	April 2020	-	-	-	0	0	0	-	-	Close
VPK SIS	April 2020	-	-	-	0	0	0	-	-	Close

### Payment Periods

Attendance records for service periods move through different statuses within a payment period. The payment period automatically opens on the first of each month and automatically closes on the last day of the month. However, coalitions may choose to manually end a payment period early, such as on the 20<sup>th</sup> of each month, by using the *Review & Close Payment Period* feature. Closing a payment period, whether automatically or manually, opens the next payment period. Only one payment period is open at a time. Any records that are not in the Paid status when the payment period closes, carryover into the next payment period in the same status so they may continue to be worked until the Paid status is reached.

## Service Periods

Service periods are one month. Service periods begin on the first day of the month and end on the last day of the month. When a child is enrolled with a provider, an attendance record is created. Providers are able to mark attendance during service periods in which the child is enrolled, beginning on the child's anticipated start date until the child's enrollment has ended. Each service period has a defined due date established by the statewide provider contract process. Providers that submit attendance before the end of the service period or after the service period due date are messaged accordingly. For example, attendance cannot be recorded for a day that has not occurred yet, therefore providers are alerted that future days are not reimbursable upon early submission. When submitting after the service period due date, providers are alerted that reimbursement may be delayed.

## Attendance Process - VPK

The provider attendance process is based on reporting exceptions. VPK providers must report absences for enrolled children during each service period for each approved class. Information about the class, such as the start/end date and non-instructional days, are from the provider's VPK Provider Application. Information about the child, such as the child's anticipated start date and termination effective date, are from the child's enrollment record. Corrections to the class information or child information must be made in their source areas, not the attendance feature. Class and child information are refreshed each time an un-submitted attendance roster is opened by the provider.

Providers record attendance for each day the class is scheduled to be in session during the child's enrollment. As days occur in the month, they default to present (X). Providers click on a child's name and day to change the present (X) indicator to absent (A). No absent reasons or other information is collected on the provider's screen during the VPK attendance process. Features include a **Search** button (to search for any criteria included in the roster list, such as a name, age, billing group) and a **Summary** button (to display the entire class roster in a single month view and print).

**VPK Attendance Roster**

Program Type: **VPK** Voluntary PreKindergarten (VPK)

Service Period: 8/1/2018 to 8/31/2018 Due Date: 9/6/2018

Class ID: AF18 **Summary**

**Class attendance has NOT been submitted to Coalition at this time.**

Class	AF18-Frontierland	Max Class Size	11
Start Date	8/13/2018	End Date	5/31/2019
Curriculum	Knowledge Universe Early Foundations Discovery Infants	Edition	2004

Search:

1 to 4 of 4 enrolled

Child Name	DOB	Age	Billing Group	Status
1. Baloo Latham	2/2/2014	4y	VPK	
2. Blue Fairy Latham	8/8/2013	5y	VPK	
3. Cinderella Latham	7/7/2013	5y	VPK	
4. Pinocchio Latham	12/12/2013	4y	VPK	

Indicate the child's attendance below. Supporting documentation may be uploaded to the Document Management Library as needed.

**Attendance Calendar**

**August 2018**

Sun	Mon	Tue	Wed	Thu	Fri	Sat
29	30	31	1	2	3	4
			*	*	*	*
5	6	7	8	9	10	11
*	*	*	*	*	*	*
12	13	14	15	16	17	18
*	X	X	X	X	X	*
19	20	21	22	23	24	25
*	X	X	X	X	X	*
26	27	28	29	30	31	1
*	X	X	X	X	X	

**Child's Current Information**

Name: Blue Fairy Latham  
 DOB: 8/8/2013 Age: 5  
 Status: Enrolled BGrp: VPK  
 Cert: VPK752-2018  
 Class: AF18-Frontierland Room

**Monthly Attendance Summary**

Days Present: 15  
 Days absent: 0

Enrolled/Present  
 Absent

As absences are recorded, they are saved automatically. However, providers may choose to use the **Save** button to save their work periodically or when moving from child to child. When all child absences are recorded for the service period, the provider will click the **Submit to Coalition** button. This brings the provider to a *Sign and Certify* page where the page displays the summary view and collects the user's submission information.

Once submitted, providers see a submitted message in the class summary box and the "SUB" status in the Status column for each child record on the attendance roster. As the individual child records move through the payment period, their status is reflected in the provider's attendance roster Status column. On the Provider Portal, the child record statuses may be "SUB" (Submitted), "REJ" (Rejected), or "APP" (Approved). It is possible that a provider has some children listed as Approved and some children listed as Rejected after their submission. Providers are notified when rejections occur so they may re-visit the attendance roster to edit and re-submit. Only records that do not have a status or are rejected may be edited.

VPK Attendance Roster

Program Type: VPK Voluntary PreKindergarten (VPK)

Service Period: 8/1/2018 to 8/31/2018 Due Date: 8/6/2018

Class ID: AF18 Summary

Class attendance was submitted to Coalition on 10/24/2018 by alatham77+0033@gmail.com.

Class: AF18-Flower Room Max Class Size: 11

Start Date: 8/13/2018 End Date: 5/3/2019

Curriculum: Pathways to Preschool Edition: 2nd edition/2011

Search:

1 to 4 of 4 enrolled

Child Name	DOB	Age	Billing Group	Status
1. Anel Latham	2/2/2014	4y	VPK	✓ SUB
2. Bambi Latham	1/1/2014	4y	VPK	✓ SUB
3. Suse Fairy Latham	8/8/2013	5y	VPK	✓ SUB
4. Pinocchio Latham	12/12/2013	4y	VPK	✓ SUB

Indicate the child's attendance below. Supporting documentation may be uploaded to the Document Management Library as needed.

Attendance Calendar

August 2018

Select a child to edit attendance

Sun	Mon	Tue	Wed	Thu	Fri	Sat
	29	30	31	1	2	3
				4		

Child record statuses also change on the Coalition Services Portal. Prior to the attendance roster being submitted by the provider, the child records were in the "Need Attendance" status. Once submitted, the child records are moved to the "Have Attendance" status. Approved records move forward to the "Closed Attendance" status while rejected records move back to the "Have Attendance" status. Additional information about the attendance process on the Coalition Services Portal is described in this guide.

## Attendance Process - SR

The provider attendance process is based on reporting exceptions. SR providers must report absences for enrolled children during each service period for each contracted coalition. Information about the provider's operational schedule and site closures are from the provider's profile. Information about paid holidays are from the provider's SR Paid Holidays maintained by the coalition. Information about the child, such as the child's name, enrollment start and end dates, are from the child's enrollment record. Corrections to this information must be made in their source areas, not the attendance feature. Enrollment information is refreshed each time an un-submitted attendance roster is opened by the provider.

Providers record attendance for each day the site is opened and the child is scheduled for service during the child's enrollment. As days occur in the month, they default to present (X). Providers click on a child's name and day to change the present (X) indicator to absent (A). A reason for the absence must be selected. Documentation and a note to the coalition are optional. Non-scheduled days appear as NS on the attendance roster. If needed, providers may change a NS day to present (X) or even absent (A). Features include a **Search** button (to search for any criteria included in the roster list, such as a name, age, billing group) and a **Summary** button (to display the entire roster in a single month view and print).

**SR Attendance Roster**

Program Type\*: SR School Readiness (SR) **Attendance has NOT been submitted to ELC of the Big Bend Region.**

Service Period\*: 9/1/2018 to 9/30/2018 Due Date: 10/3/2018

Coalition\*: ELC of the Big Bend Regic **Summary**

Care Level: INF, TOD, 2YR, PR3, PR4  
 Hours Of Operation: M-F 6:00am-6:30pm  
 SR/Local Funding Students: 6  
 Paid Holidays: 2018-09-03

Search:

1 to 6 of 6 enrolled

Child Name	DOB	Age	Billing Group	Status
1. Daphne Latham	3/3/2018	1y	BG8	
2. Fred Latham	3/3/2018	1y	BG8	
3. Scooby-Doo Latham	7/7/2015	2y	CCEP	
4. Scrappy-Doo Latham	8/8/2017	1y	CCEP	
5. Shaggy Latham	11/11/2014	4y	BG3	
6. Velma Latham	5/5/2016	2y	33-ALF	

Indicate the child's attendance below. Supporting documentation may be uploaded to the Document Management Library as needed.

**Attendance Calendar**

September 2018

Sun	Mon	Tue	Wed	Thu	Fri	Sat
26	27	28	29	30	31	1
						*
2	3	4	5	6	7	8
*	H	X	X	X	X	*
	PT	PT	PT	PT	PT	
9	10	11	12	13	14	15
*	X	X	X	X	X	*
	PT	PT	PT	PT	PT	
16	17	18	19	20	21	22
*	X	X	X	X	X	*
	PT	PT	PT	PT	PT	
23	24	25	26	27	28	29
*	X	X	X	X	X	*
	PT	PT	PT	PT	PT	
30	1	2	3	4	5	6
*						

**Child's Current Information**

Name: Fred Latham  
 DOB: 3/3/2018 Age: 1  
 Copay: \$0.63 BGrp: BG8  
 Status: Enrolled

**Monthly Attendance Summary**

Anticipated Start Date: 7/1/2018  
 Days Absent: 0  
 Days Present: 19  
 Reimbursed Holidays: 1  
 Non-Reimbursable Days: 0

Legend:  
 X: Enrolled/Present  
 A: Absent  
 NS: Non-Reimbursable/Non-Scheduled Days

Buttons: Save, Save & Exit, Cancel, Submit to Coalition

Consecutive absences can be entered by using a date range. A document can be attached to the absence range and the document will be associated to every day entered in the date span.

Absence From: 10/08/2021 Absence To: 10/08/2021

**Enzo Celestino**

Reason\*: Military Deployment

Note:

Max length allowed is 500 characters: 500 remaining.

Attach your document

PayStub2.docx **Remove**

## Removing an Absence

Absences entered by mistake can be changed back to present by clicking on the "A." The below pop-up message appears. To undo the absence, click the **Remove Absence** button. That day will show an "X", the absence reason is removed, and the attachment is removed.

Absence From: 10/08/2021      Absence To: 10/08/2021

**Enzo Celestino**

Reason: Military Deployment

Note:   
 Max length allowed is 500 characters: 500 remaining.

Attach your document:   
 PayStub2.docx      Remove

Remove Absence      Save      Cancel

Indicate the child's attendance below. Supporting documentation may be uploaded to the Document Management Library as needed.

Attendance Calendar						
October 2021						
Sun	Mon	Tue	Wed	Thu	Fri	Sat
26	27	28	29	30	1	2
					X FT	*
3	4	5	6	7	8	9
*	X FT	A	A	A	X FT	*
10	11	12	13	14	15	16
*	X FT	X FT	X FT	X FT	X FT	*
17	18	19	20	21	22	23
*	X FT	X FT	X FT	X FT	X FT	*
24	25	26	27	28	29	30
*	X FT					
31	1	2	3	4	5	6

**Child's Current Information**

Name: ██████████

DOB: 3/9/2018      Age: 3

Copay: \$2.15      BGrp: BG8

Status: Enrolled

**Monthly Attendance Summary**

Anticipated Start Date: 8/5/2021

**Absences**

10/05/2021    10/07/2021

10/06/2021

Days Absent: 3

Days Present: 14

Reimbursed Holidays: 0

Non-Reimbursable Days: 0

RWA: No

Schedule Note: N/A

### Note:

**X** - Enrolled/Present – Allows Date Span Absence

**A** - Absent – Allows Date Span Absence

**CR** - Reimbursable Temporary Closure Day - Partial – Allows Date Span Absence

**CN** - Non-Reimbursable Temporary Closure Day – Partial – Allows Date Span Absence

**N** - Non-Reimbursable Day – Does Not Allow Date Span Absence

**NS** - Non-Scheduled Day – Does Not Allow Date Span Absence

**H** - Paid Holiday – Does Not Allow Date Span Absence

**T** - Terminated/Enrollment Ended – Do Not Allow Date Span Absence

**\*** - Closed – Does Not Allow Date Span Absence

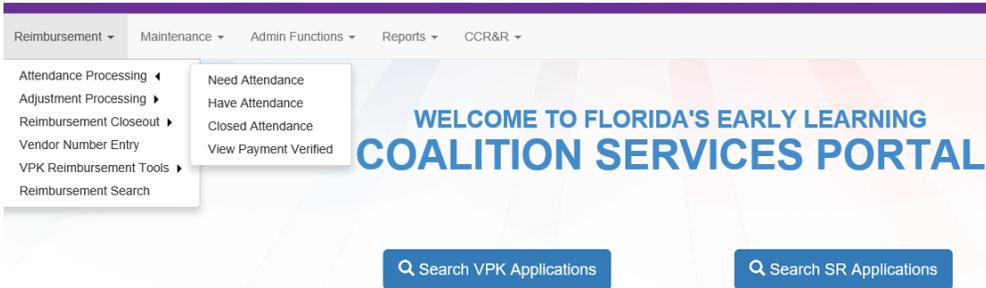
**CR** - Reimbursable Temporary Closure Day - Whole Site – Does Not Allow Date Span Absence

**CN** - Non-Reimbursable Temporary Closure Day - Whole Site – Does Not Allow Date Span Absence

**Attendance has not started** – Does Not Allow Date Span Absence

## Attendance Processing

The Attendance Processing work queues are available under the Reimbursement menu item. The work queues include Need Attendance, Have Attendance, and Closed Attendance.



## Need Attendance

The Need Attendance work queue displays all the outstanding attendance rosters for providers by service period and funder type. Each provider that has an un-submitted attendance record for a child enrollment are represented here. The column filters and search feature may be used to filter the results by specific criteria such as a county name or provider name.

The screenshot shows the "Need Attendance" Work Queue interface. At the top, there are filters for County (All), Funder Type (VPK), and Service Period (1, 2023), along with a Submit button. Below the filters, there is a "Show 10 search results" indicator and a "Clear All Filters" button. The main table displays the following data:

Action	Provider ID	Provider Name	County	Service Period	Funder Type	VPK Class ID	Status	Last Modified Date	Last Modified By
Incomplete	19448	Kim's Test Daycare	KREPS ISLAND	January 2023	VPK	BF22	Need Attendance	04/20/2023	Tosin2694+providerprod@gmail.com
Missing	20174	Jamie's house	MATHISTOWN	January 2023	VPK	AF22	Need Attendance		
Missing	23036	Kim's Test Daycare #2 - UPDATED DBA	KREPS ISLAND	January 2023	VPK	AF22	Need Attendance		

At the bottom of the table, it says "Showing 1 to 3 of 3 search results." and there are "Previous", "1", and "Next" navigation buttons.

Coalition users cannot open or view the attendance rosters from this work queue. However, whether or not the provider has opened or worked on the attendance roster is known by looking at the Action column. The Action column has two indicators: Missing or Incomplete. Missing means the provider has not opened the roster. Incomplete means the provider has been working on the roster. In addition, the Last Modified Date and Last Modified By information will be populated. As attendance rosters are submitted, their status changes to Have Attendance. Therefore, they will not be listed in this work queue anymore. However, if the provider has one or more rejected attendance records (from Have Attendance), the service period roster will be listed in the Need Attendance work queue again because the provider has outstanding child attendance records that are not yet submitted for a service period. An additional report is available in Tableau with additional information about the outstanding child attendance records.

## Have Attendance

The Have Attendance work queue displays all the submitted attendance rosters for providers by county and funder type. Each provider that has submitted attendance records for a child enrollment are represented here. The column filters and search feature may be used to filter the results by specific criteria such as a county name, service period, or provider name. Attendance rosters submitted after their service period due date are bolded in red and have a warning symbol (⚠️) to indicate their late submission. Coalitions may choose to work the late rosters or skip over them. Any rosters that do not reach the Paid status when the payment period closes, remain in their current status in the new payment period to continue being worked.

Have Attendance Work Queue Return to Search

Click Here For Filtering Tips

County: Funder Type: All VPK Submit

Show 10 search results Clear All Filters Search

Action	Provider ID	Provider Name	County	Service Period	Funder Type	VPK Class ID	Status	Received Date	Last Modified Date	Last Modified By
	Filter	Filter	Filter	Filter	Filter	Filter	Filter	Filter	Filter	Filter
<a href="#">Review</a>	19448	Kim's Test Daycare	KREPS ISLAND	September 2020	VPK	AF26-Class A	Have Attendance	04/29/2021 ⚠️	04/29/2021	trokekim-prov1@gmail.com
<a href="#">Review</a>	19448	Kim's Test Daycare	KREPS ISLAND	November 2022	VPK	AF22-Class A	Have Attendance	04/29/2023 ⚠️	04/29/2023	Tosin2694+providerprod@gmail.com
<a href="#">Review</a>	19448	Kim's Test Daycare	KREPS ISLAND	November 2022	VPK	BF22-Class B	Have Attendance	04/29/2023 ⚠️	04/29/2023	Tosin2694+providerprod@gmail.com
<a href="#">Review</a>	19448	Kim's Test Daycare	KREPS ISLAND	December 2022	VPK	AF22-Class A	Have Attendance	04/29/2023 ⚠️	04/29/2023	Tosin2694+providerprod@gmail.com
<a href="#">Review</a>	19448	Kim's Test Daycare	KREPS ISLAND	December 2022	VPK	BF22-Class B	Have Attendance	04/29/2023 ⚠️	04/29/2023	Tosin2694+providerprod@gmail.com

To begin reviewing submitted attendance records, click on the **Review** link. The attendance roster opens. The top portion of the roster contains information about the provider and attendance roster. The service period, due date, and submitted date are displayed. Again, attendance rosters submitted after their service period due date are bolded in red and have a warning symbol (⚠️) to indicate late submission.

Each record must have a status of Approved or Rejected to continue with the roster processing. Children with 3 or fewer absences default to the Approved status. Children with 4 or more absences must have the status selected.

Approved records will move forward in the reimbursement process to Closed Attendance. Rejected records will move backward in the reimbursement process to Need Attendance. Rejecting records is necessary when corrections are needed to the child enrollment information, attendance, or schedule (i.e. closures). Once rejected, edits to the enrollment, attendance, and schedule may be updated. Then, the provider may review and re-submit. **Rejecting one or more records will not prevent the other approved records from moving forward in the reimbursement process.**

Growing Up Strong - AF18 - Purple Room - Nov-2018

Child Name	DOB	Age	Billing Group	Thu 11/1	Fri 11/2	Sat 11/3	Sun 11/4	Mon 11/5	Tue 11/6	Wed 11/7	Thu 11/8	Fri 11/9	Sat 11/10	Sun 11/11	Mon 11/12	Tue 11/13	Wed 11/14	Thu 11/15	Fri 11/16	Sat 11/17	Sun 11/18	Mon 11/19	Tue 11/20	Wed 11/21	Thu 11/22	Fri 11/23	Sat 11/24	Sun 11/25	Mon 11/26	Tue 11/27	Wed 11/28	Thu 11/29	Fri 11/30	Days Present	Days Absent	CR Days	Status	Action
1. Crunch Latham	9/9/2013	5y	VPK	X	*	*	*	X	X	X	X	*	*	*	X	X	X	X	*	*	*	X	X	X	*	*	*	*	X	X	X	X	CR	16	0	1	Approved	Reject
2. Goodbar Latham	9/9/2013	5y	VPK	X	*	*	*	X	X	X	X	*	*	*	A	X	X	X	*	*	*	X	X	X	*	*	*	*	X	X	X	CR	15	1	1	Approved	Reject	
3. Krackel Latham	9/9/2013	5y	VPK	X	*	*	*	X	X	X	X	*	*	*	X	X	X	X	*	*	*	X	X	X	*	*	*	*	X	X	X	CR	16	0	1	Approved	Reject	
4. Mentos Latham	9/9/2013	5y	VPK	X	*	*	*	X	X	X	X	*	*	*	X	X	X	X	*	*	*	X	X	X	*	*	*	*	X	X	X	CR	16	0	1	Approved	Reject	
5. Milky Way Latham	9/9/2013	5y	VPK	X	*	*	*	X	A	X	X	*	*	*	X	X	X	A	*	*	*	X	X	X	*	*	*	*	X	X	X	CR	14	2	1	Approved	Reject	
6. Nestle Latham	1/1/2014	4y	VPK	X	*	*	*	X	X	X	X	*	*	*	X	X	X	X	*	*	*	X	X	X	*	*	*	*	X	X	X	CR	16	0	1	Approved	Reject	
7. Payday Latham	9/9/2013	5y	VPK	X	*	*	*	X	X	X	X	*	*	*	X	X	X	X	*	*	*	X	X	X	*	*	*	*	X	X	X	CR	16	0	1	Approved	Reject	
8. Reese's Pieces Latham	9/9/2013	5y	VPK	X	*	*	*	X	X	X	X	*	*	*	X	X	X	X	*	*	*	X	X	X	*	*	*	*	X	X	X	CR	16	0	1	Approved	Reject	
9. Snickers Latham	9/9/2013	5y	VPK	X	*	*	*	X	X	X	X	*	*	*	X	X	X	X	*	*	*	X	X	X	*	*	*	*	X	X	X	CR	16	0	1	Approved	Reject	
10. Three Musketeers Latham	9/9/2013	5y	VPK	X	*	*	*	X	X	X	X	*	*	*	X	X	X	X	*	*	*	X	X	X	*	*	*	*	X	X	X	CR	16	0	1	Approved	Reject	
11. Twix Latham	9/9/2013	5y	VPK	X	*	*	*	X	X	X	A	*	*	*	X	X	X	X	*	*	*	X	X	X	*	*	*	*	X	X	X	CR	15	1	1	Approved	Reject	

**NOTE:** For VPK rosters, 1) absences between the anticipated start date and first present day are not reimbursable, and 2) absences between the last present day and termination effective date are not reimbursable. While actual absences are recorded in Have Attendance, the system excludes these absences from payment calculations in Closed Attendance.

To reject a single record, click the **Reject** action button for that row. A pop-up message appears to collect the rejection reason and comment.

**NOTE:** The rejection reasons are the same for both SR and VPK programs so they may not be applicable in all cases. Selecting "Other" requires a comment.

Reject Attendance Roster ✕

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Child Name On Attendance: **Krackel Latham**

- Child marked present/absent conflicts with sign-in sheet
- Child absence documentation needs correction
- Provider requested attendance roster be returned for corrections
- Other

Comments:

◀ Cancel
Reject Attendance Record ▶

Once rejected, the child record status and action button change on the roster. The child record status may be changed back to approved by clicking the **Approve** action button. Statuses are not committed until the **Continue/Approve Roster** button is selected. In other words, it will not notify the provider of a rejected record as soon as the status is changed on the screen. There is another step to complete the process before the status is committed and notification of rejected records is sent.

Growing Up Strong - AF18 - Purple Room - Nov-2018

Child Name	DOB	Age	Billing Group	Thu 11/1	Fri 11/2	Sat 11/3	Sun 11/4	Mon 11/5	Tue 11/6	Wed 11/7	Thu 11/8	Fri 11/9	Sat 11/10	Sun 11/11	Mon 11/12	Tue 11/13	Wed 11/14	Thu 11/15	Fri 11/16	Sat 11/17	Sun 11/18	Mon 11/19	Tue 11/20	Wed 11/21	Thu 11/22	Fri 11/23	Sat 11/24	Sun 11/25	Mon 11/26	Tue 11/27	Wed 11/28	Thu 11/29	Fri 11/30	Days Present	Days Absent	CR Days	Status	Action
1. Crunch Latham	9/9/2013	5y	VPK	X	*	*	*	X	X	X	X	*	*	*	X	X	X	X	*	*	*	X	X	X	*	*	*	*	X	X	X	CR	16	0	1	Approved	Reject	
2. Goodbar Latham	9/9/2013	5y	VPK	X	*	*	*	X	X	X	X	*	*	*	A	X	X	X	*	*	*	X	X	X	*	*	*	*	X	X	X	CR	15	1	1	Approved	Reject	
3. Krackel Latham	9/9/2013	5y	VPK	X	*	*	*	X	X	X	X	*	*	*	X	X	X	X	*	*	*	X	X	X	*	*	*	*	X	X	X	CR	16	0	1	Rejected	Approve	
4. Mentos Latham	9/9/2013	5y	VPK	X	*	*	*	X	X	X	X	*	*	*	X	X	X	X	*	*	*	X	X	X	*	*	*	*	X	X	X	CR	16	0	1	Approved	Reject	
5. Milky Way Latham	9/9/2013	5y	VPK	X	*	*	*	X	A	X	X	*	*	*	X	X	X	A	*	*	*	X	X	X	*	*	*	*	X	X	X	CR	14	2	1	Approved	Reject	
6. Nestle Latham	1/1/2014	4y	VPK	X	*	*	*	X	X	X	X	*	*	*	X	X	X	X	*	*	*	X	X	X	*	*	*	*	X	X	X	CR	16	0	1	Approved	Reject	
7. Payday Latham	9/9/2013	5y	VPK	X	*	*	*	X	X	X	X	*	*	*	X	X	X	X	*	*	*	X	X	X	*	*	*	*	X	X	X	CR	16	0	1	Approved	Reject	
8. Reese's Pieces Latham	9/9/2013	5y	VPK	X	*	*	*	X	X	X	X	*	*	*	X	X	X	X	*	*	*	X	X	X	*	*	*	*	X	X	X	CR	16	0	1	Approved	Reject	
9. Snickers Latham	9/9/2013	5y	VPK	X	*	*	*	X	X	X	X	*	*	*	X	X	X	X	*	*	*	X	X	X	*	*	*	*	X	X	X	CR	16	0	1	Approved	Reject	
10. Three Musketeers Latham	9/9/2013	5y	VPK	X	*	*	*	X	X	X	X	*	*	*	X	X	X	X	*	*	*	X	X	X	*	*	*	*	X	X	X	CR	16	0	1	Approved	Reject	
11. Twix Latham	9/9/2013	5y	VPK	X	*	*	*	X	X	X	A	*	*	*	X	X	X	X	*	*	*	X	X	X	*	*	*	*	X	X	X	CR	15	1	1	Approved	Reject	

When all records have a status, click **Continue/Approve Roster**. When rejected records appear, the **Continue** button brings the coalition user to the *Complete Roster Processing* pop-up message, where the summary is displayed and comments are captured for the provider case notes. When the **Complete Roster Processing** button is clicked, the statuses are committed. Rejected records are returned to Need Attendance so corrections may be made. The provider will receive a dashboard notification and the user that submitted the attendance roster will receive an email instructing them to log in to the Provider Portal to review and edit the rejected records (indicated with "REJ"). The rejected records for the service period move back to Need Attendance. The approved records for the service period move forward to Closed Attendance.

**Attendance Processing**

Total rejected records to return to provider 1

Total approved records for reimbursement 10

Rejected Attendance Records: Krackel Latham

Comments (for Provider Case Notes):

11/01/2018 to 11/30/2018

12/09/2018

alatham77+OELprovider@gmail.com

06/31/2019

Cancel
Complete Attendance Processing

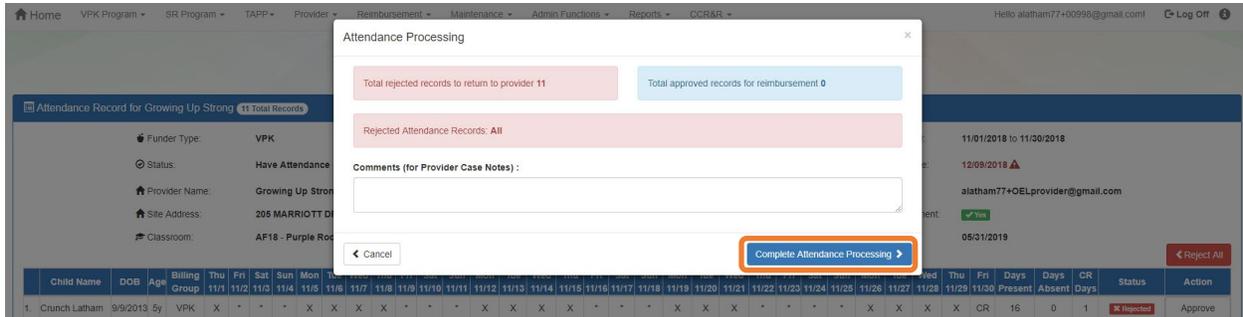
**NOTE:** It is possible to reject all children on the roster at once by using the **Reject All** button. A message appears to confirm that the coalition user would like to reject all the children on the roster and return the roster to the provider for editing.

**Reject All Children**

Are you sure that you want to reject all children on this roster and return the roster to the provider for editing?

No
Yes

Clicking **Yes** continues the process. This gives all records the rejected status. Next, click the **Continue** button. This brings the coalition user to the *Complete Roster Processing* pop-up message, where the summary is displayed and comments are captured for the provider case notes. When the **Complete Attendance Processing** button is clicked, the statuses are committed. The provider receives notifications and records as moved as described above.



SR, SR Plus and Local rosters in Have Attendance function similarly to VPK in regards to rejecting records, giving each record a status, and completing roster processing. However, there are some differences. SR, SR Plus and Local rosters include a reimbursement code for each absence and display the unit of care per day.

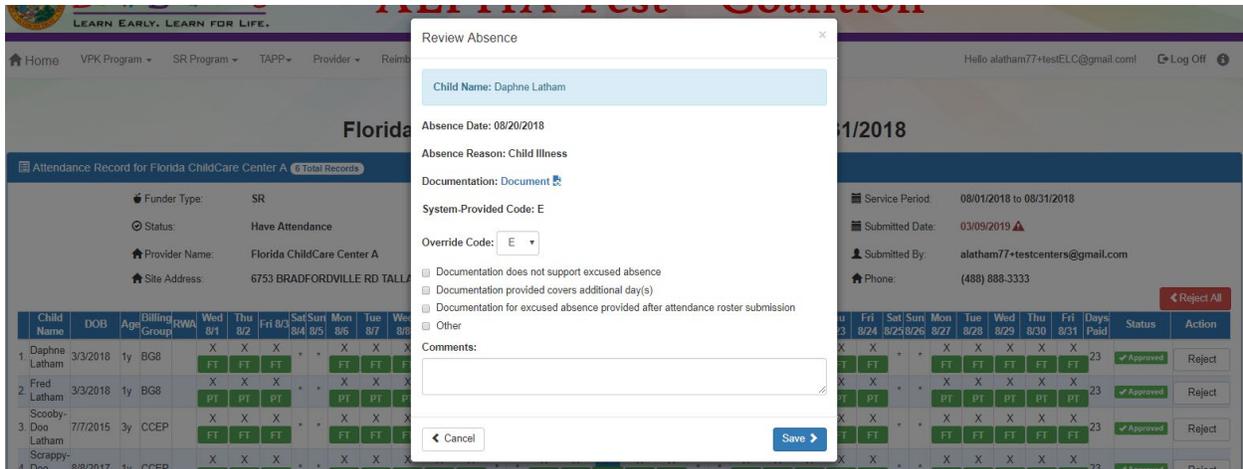
**Florida ChildCare Center A - 08/01/2018 to 08/31/2018**

Attendance Record for Florida ChildCare Center A (6 Total Records)

Funder Type: SR | Payment Period: Mar - 2019 | Service Period: 08/01/2018 to 08/31/2018  
 Status: Have Attendance | Due Date: 09/06/2018 | Submitted Date: 03/09/2019  
 Provider Name: Florida ChildCare Center A | Provider ID: 9504 | Submitted By: alatham77+testcenters@gmail.com  
 Site Address: 6753 BRADFORDVILLE RD TALLAHASSEE, FL 32309 | County: Leon | Phone: (488) 888-3333

Child Name	DOB	Age	Billing Group	RWA	Wed 8/1	Thu 8/2	Fri 8/3	Sat 8/4	Sun 8/5	Mon 8/6	Tue 8/7	Wed 8/8	Thu 8/9	Fri 8/10	Sat 8/11	Sun 8/12	Mon 8/13	Tue 8/14	Wed 8/15	Thu 8/16	Fri 8/17	Sat 8/18	Sun 8/19	Mon 8/20	Tue 8/21	Wed 8/22	Thu 8/23	Fri 8/24	Sat 8/25	Sun 8/26	Mon 8/27	Tue 8/28	Wed 8/29	Thu 8/30	Fri 8/31	Days Paid	Status	Action
1. Daphne Latham	3/3/2018	1y	BG8		X	X	X			X	X	X	X	X			X	X	X	X	X			E	X	X	X	X		X	X	X	X	23	Approved	Reject		
2. Fred Latham	3/3/2018	1y	BG8		FT	FT	FT			FT	FT	FT	FT	FT			X	X	X	X	X			FT	FT	FT	FT	FT		X	X	X	X	23	Approved	Reject		
3. Scooby-Doo Latham	7/7/2015	3y	CCEP		X	X	X			X	X	X	X	X			X	X	X	X	X			X	X	X	X	X		X	X	X	X	23	Approved	Reject		
4. Scrapy Latham	8/8/2017	1y	CCEP		X	X	X			X	X	X	X	X			X	X	X	X	X			X	X	X	X	X		X	X	X	X	23	Approved	Reject		
5. Shaggy Latham	11/11/2014	4y	BG3		X	X	X			X	X	X	X	X			X	X	X	X	X			X	X	X	X	X		X	X	X	X	23	Approved	Reject		
6. Velma Latham	5/5/2016	2y	ALF		FT	FT	FT			FT	FT	FT	FT	FT			X	X	X	X	X			FT	FT	FT	FT	FT		X	X	X	X	23	Approved	Reject		

As providers record absences on the Provider Portal, the user will select a reason and optionally leave a note or upload a document. The absence information can be viewed in Have Attendance by clicking on the coded absence.



The system will code absences one to three as “E” for excused. The system will code absences four to ten as “A” for authorized. Absences 11 or more are coded as “N” for non-reimbursable. Coalition users may override the absence code by choosing another reimbursement code (within the system limitations of three E’s and seven A’s) and clicking **Save**. Absences due to disaster declarations are coded “D”, are not included in the 10-absence limit, and are considered paid absences.

Another feature of SR, SR Plus and Local attendance is the ability for providers to change the unit of care on the roster. This feature may be removed at a later time, but in the meantime, if a provider uses the feature the attendance roster in Have Attendance highlights the change in red.

Child Name	DOB	Age	Billing Group	RWA	Sat 9/1	Sun 9/2	Mon 9/3	Tue 9/4	Wed 9/5	Thu 9/6	Fri 9/7	Sat 9/8	Sun 9/9	Mon 9/10	Tue 9/11	Wed 9/12	Thu 9/13	Fri 9/14	Sat 9/15	Sun 9/16	Mon 9/17	Tue 9/18	Wed 9/19	Thu 9/20	Fri 9/21	Sat 9/22	Sun 9/23	Mon 9/24	Tue 9/25	Wed 9/26	Thu 9/27	Fri 9/28	Sat 9/29	Sun 9/30	Days Paid	Status	Action
1. Daphne Latham	3/3/2018	1y	BG8			H	X	X	X	X	X			X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	20	Approved	Reject
2. Fred Latham	3/3/2018	1y	BG8			H	E	E	E	E	A			A	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	20		Approve Reject

The unit of care change can be viewed in Have Attendance by clicking on the highlighted value. A pop-up message displays to accept or override the change.

Coalition staff can see a quick summary of SR enrollment details in Have Attendance. Click a **Child Name** link.

After the **Child Name** link is clicked, the following will display.

SUN	MON	TUE	WED	THU	FRI	SAT
NS	FT	FT	FT	FT	FT	NS

**School Holiday**

## Closed Attendance

The Closed Attendance work queue displays all the approved attendance records for providers by county and funder type. At this point, reimbursement calculations are run. The School Readiness funder type, the Local funder type and the SR Plus funder type are separated. The column filters and search feature may be used to filter the results by specific criteria such as a county name, service period, or provider name.

County:  Funder Type:

Show:  search results  Search:

Action	Provider ID	Provider Name	County	Service Period	Funder Type	VPK Class ID	Status	Received Date	Last Modified Date	Last Modified By
<a href="#">Review</a>	19449	Growing Up Strong	KREPS ISLAND	November 2018	VPK	AF18	Closed Attendance			
<a href="#">Review</a>	19449	Growing Up Strong	KREPS ISLAND	October 2018	VPK	AF18	Closed Attendance			
<a href="#">Review</a>	19449	Growing Up Strong	KREPS ISLAND	September 2018	VPK	AF18	Closed Attendance			
<a href="#">Review</a>	19449	Growing Up Strong	KREPS ISLAND	August 2018	VPK	AF18	Closed Attendance			
<a href="#">Review</a>	19449	Growing Up Strong	KREPS ISLAND	July 2018	VPK	AF18	Closed Attendance			

Showing 1 to 5 of 5 search results

To begin reviewing approved attendance records with reimbursement detail, click on the **Review** link. The approved attendance records display with calculations. The top portion of the roster contains information about the provider and attendance roster, including whether closures are included and the vendor number for payment.

Growing Up Strong - AF18 - Purple Room - Dec - 2018

Reimbursement Record for Growing Up Strong

Funder Type: **VPK**      Payment Period: **Dec - 2018**      Service Period: **07/18/2018 to 07/31/2018**  
 Attendance Status: **Closed Attendance**      Advance Payment:  **Yes**      Has Closures:  **No**  
 Provider Name: **Growing Up Strong**      Provider ID: **19449**      Vendor Number: **55-987654**   
 Provider Address: **205 MARRIOTT DR TALLAHASSEE, FL 32301**      Provider County: **KREPS ISLAND**      Provider Phone: **(555) 555-5555**  
 Classroom: **AF18 - Purple Room**      Class Start Date: **07/02/2018**      Class End Date: **06/31/2019**

	Child Name	DOB	Billing Group	Care Level	Days Absent	Days Present	Total Instructional Hours	Hours Absent	Hours Attended	Hours Paid	Rate	Amount	Status	Action
1.	Reese's Pieces Latham	9/9/2013	VPK	PR4	0	8	24.00	0.00	24.00	24.00	\$4.38	\$105.12		<input type="button" value="Verify"/> <input type="button" value="Adjust"/>
2.	Snickers Latham	9/9/2013	VPK	PR4	0	8	24.00	0.00	24.00	24.00	\$4.38	\$105.12		<input type="button" value="Verify"/> <input type="button" value="Adjust"/>
3.	Three Musketeers Latham	9/9/2013	VPK	PR4	0	9	27.00	0.00	27.00	27.00	\$4.38	\$118.26		<input type="button" value="Verify"/> <input type="button" value="Adjust"/>
4.	Crunch Latham	9/9/2013	VPK	PR4	0	9	27.00	0.00	27.00	27.00	\$4.38	\$118.26		<input type="button" value="Verify"/> <input type="button" value="Adjust"/>
5.	Payday Latham	9/9/2013	VPK	PR4	0	9	27.00	0.00	27.00	27.00	\$4.38	\$118.26		<input type="button" value="Verify"/> <input type="button" value="Adjust"/>

Similar to Have Attendance, each record in Closed Attendance must have a status of Verified or Adjusted in order to continue with the roster processing.

Similar to Have Attendance, coalition staff can see a quick summary of SR enrollment details in Closed Attendance. Click a **Child Name** link.

Attendance Record for [Child Name] 10 Total Records

Funder Type: SR | Status: Have Attendance | Provider Name: [Redacted] | Site Address: [Redacted]

Payment Period: Apr - 2019 | Due Date: 09/06/2018 | County: Hillsborough

Service Period: 08/01/2018 to 08/31/2018 | Submitted Date: 03/20/2019 | Submitted By: [Redacted] | Phone: [Redacted]

Child Name	DOB	Age	Billing Group	RWA	Wed 8/1	Thu 8/2	Fri 8/3	Sat 8/4	Sun 8/5	Mon 8/6	Tue 8/7	Wed 8/8	Thu 8/9	Fri 8/10	Sat 8/11	Sun 8/12	Mon 8/13	Tue 8/14	Wed 8/15	Thu 8/16	Fri 8/17	Sat 8/18	Sun 8/19	Mon 8/20	Tue 8/21	Wed 8/22	Thu 8/23	Fri 8/24	Sat 8/25	Sun 8/26	Mon 8/27	Tue 8/28	Wed 8/29	Thu 8/30	Fri 8/31	Days Paid	Status	Action
[Child Name]	12/30/2015	3y	BG8		X	X	X	NS	-	X	X	X	X	X	NS	-	X	X	X	X	X	NS	-	X	X	X	X	X	NS	-	X	X	X	X	X	23	Approved	Reject
[Child Name]	11/13/2013	5y	BG8		X	X	X	FT	-	X	X	X	X	X	T	T	-	T	T	T	T	T	-	T	T	T	T	T	T	T	T	T	T	T	1	Approved	Reject	

After the **Child Name** link is clicked, the following will display.

Enrollment Information for [Child Name]

**Birth Date:** 12/30/2015 | **Co-Payment:** \$6.40

**Billing Group:** BG8 | **Copay In Effect:** FT | **Level of Care:** 24 < 36 Months

**Anticipated Start:** 4/5/2018 | **Actual Start:** 4/5/2018 | **Terminated On:** 12/30/2018

**School Calendar:** Hillsborough County Public Schools

**Daily Care Schedule**

SUN	MON	TUE	WED	THU	FRI	SAT
NS	FT	FT	FT	FT	FT	NS

**School Holiday**

Close

Verified records will move forward in the reimbursement process to Payment Verified. Adjusted records will move to the Need Adjustment work queue for editing. **Marking one or more records for adjustment will not prevent the other verified records from moving forward in the reimbursement process.**

An individual record or an entire roster can be sent back to Have Attendance by clicking the **Back to "Have"** button. If the provider needs to make additional changes to the individual record or entire roster, the records can be rejected, moving the status back to Need Attendance.

Reimbursement Record for [Child Name] 6 Total Records

Funder Type: SR | Status: Closed Attendance | Vendor Number: [Redacted] | Site Address: [Redacted]

Payment Period: Apr - 2019 | Provider Type: Family Child Care Home | Provider ID: [Redacted] | Provider Name: [Redacted] | County: Hillsborough | Phone: (813) 453-6136

Service Period: 01/01/2019 to 01/31/2019

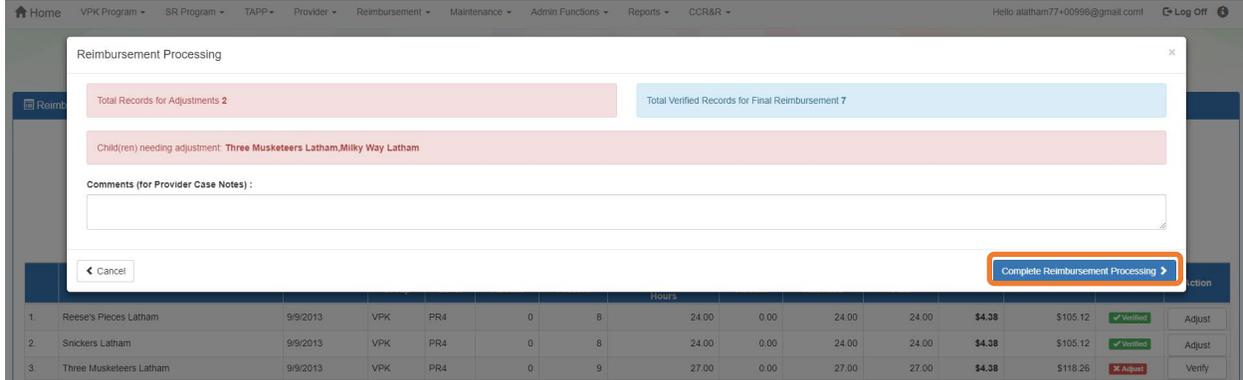
Buttons: Provider Rates, Refresh Calculations, Move All to 'Have'

Child Name	DOB	Billing Group	Eligibility Code	Care Level	Unit of Care	Days to be Paid	Total Payment Rate	Daily Parent CoPay Rate	Gross Payment Amount	Less Parent CoPay Amount	Net Payment Amount	Gold Seal Amount	PFP Amount	PFP CA Amount	QI Amount	CS Amount	Status	Action
[Child Name]	6/10/2016	BG8	ECON	2YR	FT	4	\$19.80	\$5.50	\$79.20	\$22.00	\$57.20	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	Verified	Adjust Back to 'Have' Continue

**NOTE:** If any records have CCEP in the Billing Group column, those must be changed to SR Match through the Bulk Billing Group Transfer process. See the *Bulk Billing Group Transfer* section for more details.

When all records have a status, click **Continue**. This brings the coalition user to the *Complete Reimbursement Processing* pop-up message, where the summary is displayed and comments are captured for the provider case notes.

When the **Complete Reimbursement Processing** button is clicked, the statuses are committed.



Records marked for Adjustment move to the Have Adjustment work queue. Records marked as Verified move forward in the reimbursement process and may be Updated.

**\*\*Printing Tip** – An enhancement has been logged to include a print feature as well as a method to recall previously worked rosters. In the meantime, when all records have a status, prior to clicking **Continue**, follow the steps below to select all, copy, and paste the information into an Excel document that can be saved locally.

1. Click on the webpage (anywhere)
2. Hold the CTRL key and press A (CTRL + A)
3. Then, hold the CTRL key and press C (CTRL + C)
4. Open Excel
5. Then, in the Excel document, hold the CTRL key and press V (CTRL + V)
6. Save file locally (remove header/menu information that was included in copy/paste if needed)

*VPK Calculations in Closed Attendance*

VPK calculations in Closed Attendance are specific to the class calendar and individual enrollment record with 80/20 included in Hours Paid.

- Total Instructional Hours are the sum of instructional hours scheduled for the child’s enrollment during the service period.
- Hours Absent and Hours Attended are the sum of instructional hours on the individual days the child attended or missed. Remember, VPK calendars can have variances per day such that most weekdays are three hours and one day is four hours (for example). Therefore, it makes a difference which day the child attended or missed.
- Hours Paid and Amount is the result of the 80/20 calculation as follows:

	<b>Total VPK Instructional Hours (54) x Rate (\$4.36) = Maximum Provider Reimbursement (\$235.44)</b>
Bulk1 Attend	Total Hours Attended (54) / 0.8 = Hours Paid (84.38) Hours Paid ≥ Total Instructional Hours, then use Maximum Provider Reimbursement Hours Paid (54) x Rate (\$4.36) = Amount (\$235.44)
Bulk2 Attend	Total Hours Attended (39) / 0.8 = Hours Paid (48.75) Total VPK Instructional Hours (54) – Hours Paid (48.75) = Non-Reimbursable Hours (5.25) Non-Reimbursable Hours (5.25) x Rate (\$4.36) = 80/20 Adjustment (\$22.89) Max Provider Reimbursement (\$235.44) - 80/20 Adjustment (\$22.89) = Amount (\$212.55) Hours Paid (48.75) x Rate (\$4.36) = Amount (\$212.55)
Bulk3 Attend	Total Hours Attended (33) / 0.8 = Hours Paid (41.25) Total VPK Instructional Hours (54) – Hours Paid (41.25) = Non-Reimbursable Hours (12.75) Non-Reimbursable Hours (12.75) x Rate (\$4.36) = 80/20 Adjustment (\$55.59) Max Provider Reimbursement (\$235.44) - 80/20 Adjustment (\$55.59) = Amount (\$179.85) Hours Paid (41.25) x Rate (\$4.36) = Amount (\$179.85)

	Child Name	DOB	Billing Group	Care Level	Days Absent	Days Present	Total Instructional Hours	Hours Absent	Hours Attended	Hours Paid	Rate	Amount	Status	Action
1.	Bulk1 Attend	5/5/2013	VPK	PR5	0	18	54.00	0.00	54.00	54.00	\$4.36	\$235.44		Verify Adjust
2.	Bulk2 Attend	5/6/2014	VPK	PR4	5	13	54.00	15.00	39.00	48.75	\$4.36	\$212.55		Verify Adjust
3.	Bulk3 Attend	5/7/2014	VPK	PR4	7	11	54.00	21.00	33.00	41.25	\$4.36	\$179.85		Verify Adjust

### SR Calculations in Closed Attendance

SR and SR Plus calculations in Closed Attendance are specific to the provider reimbursement rate plan in effect during the service period. To view the provider's rate plans, click the **Provider Rates** button.

**Note:** SR and SR Plus use the same provider rate plan and calculations.

Reimbursement Record for Florida ChildCare Center A 6 Total Records

Funder Type: SR      Payment Period: Mar - 2019      Service Period: 08/01/2018 to 08/31/2018  
 Status: Closed Attendance      Provider Type: Center      Provider ID: 9504  
 Vendor Number: 55-1996      Provider Name: Florida ChildCare Center A      Phone: (488) 888-3333  
 Site Address: 6753 BRADFORDVILLE RD TALLAHASSEE, FL 32309      County: Leon

[Provider Rates](#) [Refresh Calculations](#)

	Child Name	DOB	Billing Group	Eligibility Code	Care Level	Unit of Care	Days to be Paid	Total Payment Rate	Daily Parent CoPay Rate	Gross Payment Amount	Less Parent CoPay Amount	Net Payment Amount	Gold Seal Amount	PFP Amount	PFP CA Amount	QI Amount	CS Amount	Status	Action
1.	Daphne Latham	3/3/2018	BG8	ECON	INF	FT	23	\$30.00	\$1.25	\$690.00	\$28.75	\$661.25	\$115.00	\$0.00	\$0.00	\$0.00	\$0.00	Verified	Adjust
INF TOTALS										\$690.00	\$28.75	\$661.25	\$115.00	\$0.00	\$0.00	\$0.00	\$0.00		
2.	Scrappy-Doo Latham	8/8/2017	CCEP	P1	TOD	FT	5	\$28.80	\$0.63	\$144.00	\$3.15	\$140.85	\$24.00	\$0.00	\$0.00	\$0.00	\$0.00	Verified	Adjust
3.	Scrappy-Doo Latham	8/8/2017	CCEP	P1	TOD	PT	18	\$11.50	\$0.63	\$207.00	\$11.34	\$195.66	\$50.40	\$0.00	\$0.00	\$0.00	\$0.00	Verified	Adjust
TOD TOTALS										\$351.00	\$14.49	\$336.51	\$74.40	\$0.00	\$0.00	\$0.00	\$0.00		
4.	Scooby-Doo Latham	7/7/2015	CCEP	P1	PR3	FT	23	\$28.80	\$1.25	\$662.40	\$28.75	\$633.65	\$110.40	\$0.00	\$0.00	\$0.00	\$0.00	Verified	Adjust
PR3 TOTALS										\$662.40	\$28.75	\$633.65	\$110.40	\$0.00	\$0.00	\$0.00	\$0.00		
5.	Shaggy Latham	11/11/2014	BG3	28A	PR4	FT	23	\$27.60	\$1.25	\$634.80	\$28.75	\$606.05	\$105.80	\$0.00	\$0.00	\$0.00	\$0.00	Verified	Adjust
PR4 TOTALS										\$634.80	\$28.75	\$606.05	\$105.80	\$0.00	\$0.00	\$0.00	\$0.00		
Totals										\$2,338.20	\$100.74	\$2,237.46	\$405.60	\$0.00	\$0.00	\$0.00	\$0.00		

[Continue](#)

This opens a new browser tab with the provider's reimbursement rate plans. Click on the **Reimbursement Rates** button.

SR Reimbursement Rates For Florida ChildCare Center A Return to review

[Add Reimbursement Rates](#)

Coalition	County	Reimbursement Start Date	Reimbursement End Date		
ELC of the Big Bend Region	Leon	7/1/2018	6/30/2019	<a href="#">Settings</a>	<a href="#">Reimbursement Rates</a>

Now, the rates appear.

SR Reimbursement Rates - 9504 --

Unit of Care: Full-Time Daily Rates      Rates in effect on: 7/1/2018

[Edit Provider Rates](#)      [Edit Differential Rates](#)

Care Code	Description	A	B	C	D	E	F	G	H	I	J	K
		Provider's Private Pay Rates	Coalition Maximum Reimbursement Rates	Approved Provider Reimbursement Rate without Gold Seal (Column A or B, whichever is lower)	Gold Seal Differential (Column B - percentage)	Approved Provider Reimbursement Rate with Gold Seal (Column C-D; amount cannot exceed column A)	Provider's Private Pay Rates Upper Limit (Column A + 20%)	PFP Tier Differential Rate (Column C x tier percentage)	PFP Child Assessment Differential Rate (Column C x tier percentage)	QI Level Differential Rate (Column C x tier percentage)	Total Payment Rate (Column E + G + H + I; cannot exceed column F)	Contracted Slots Differential Rate (per child flagged for contracted slots)
INF	<12 Months	\$36.00	\$25.00	\$25.00	\$5.00	\$30.00	\$43.20	\$0.00	\$0.00	\$0.00	\$30.00	\$0.00
TOD	12 <24 Months	\$35.00	\$24.00	\$24.00	\$4.80	\$28.80	\$42.00	\$0.00	\$0.00	\$0.00	\$28.80	\$0.00
2YR	24 <36 Months	\$34.00	\$24.00	\$24.00	\$4.80	\$28.80	\$40.80	\$0.00	\$0.00	\$0.00	\$28.80	\$0.00
PR3	36 <48 Months	\$33.00	\$24.00	\$24.00	\$4.80	\$28.80	\$39.60	\$0.00	\$0.00	\$0.00	\$28.80	\$0.00
PR4	48 <60 Months	\$32.00	\$23.00	\$23.00	\$4.60	\$27.60	\$38.40	\$0.00	\$0.00	\$0.00	\$27.60	\$0.00
PR5	60 <72 Months	\$31.00	\$23.00	\$23.00	\$4.60	\$27.60	\$37.20	\$0.00	\$0.00	\$0.00	\$27.60	\$0.00
SCH	In School	\$0.00	\$18.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
SPCR	Special Needs	\$0.00	\$25.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

- Column A represents the provider's private pay rates (source = Edit Provider Rates).

- Column B represents the coalition’s maximum reimbursement rates for the provider type and county (*source = Admin Functions > Rates Management > SR Rate Plans*).
- Column C represents the approved reimbursement rate (lower of columns A or B) without Gold Seal (or other differentials).
- Column J represents the total payment rate (approved reimbursement rate with Gold Seal and other differentials).

Looking back at the Closed Attendance calculations, coalition users may confirm the rates in use.

- The *Total Payment Rate* for each child’s care level and unit of care in Closed Attendance match Column J of the provider reimbursement rate plan.
- The *Total Payment Rate* multiplied by *Days to be Paid* equals the *Gross Payment Amount*.
- The *Daily Parent CoPay Rate* multiplied by *Days to be Paid* equals the *Less Parent CoPay Amount*.
- The differential amounts (i.e. *Gold Seal Amount, PFP Amount, PFP CA Amount, QI Amount, CS Amount, and Special Needs Amount*) are already included in the *Gross Payment Amount* as they are part of the *Total Payment Rate*, however, they can be confirmed by multiplying *Days to be Paid* and the differential rate on the Reimbursement Rate Plan.

**NOTE:** If changes to a rate plan are needed there are several options:

1. Remove a rate plan. Use the **Provider Rates** button in Closed Attendance to go to the provider’s reimbursement rate plan page. Then, click the **Settings** button and **Remove** button if reimbursement has never been processed against the rate plan. A new reimbursement rate plan can be created.
2. Edit a rate plan. Use the **Provider Rates** button in Closed Attendance to go to the provider’s reimbursement rate plan page. Then, click the **Reimbursement Rates** button. Next, click the **Edit Provider Rates** or **Edit Differential Rates** buttons to make edits if reimbursement has never been processed against the rate plan.
3. End a rate plan and make a new one. Use the **Provider Rates** button in Closed Attendance to go to the provider’s reimbursement rate plan page. Then, click the **Add Reimbursement Rates** button. Enter the start and end date for the new plan and click **Save**. Next, click the **Reimbursement Rates** button to set up the plan (by clicking the **Edit Provider Rates** or **Edit Differential Rates** buttons).

Once back in Closed Attendance, click the **Refresh Calculations** button to update with the new rate plan information.

#### *Missing Rates*

If a provider rate is missing for a care level in Closed Attendance, a red error message will display in the Total Payment Rate column and at the bottom of the page. A coalition user can enter the rate on the provider’s behalf. Click the **\$ Provider Rates** button.

SR Nicholas Creek Orthodox Preschool | Jan - 2022

Reimbursement Record for SR | 1 Total Records

Funder Type: SR | Payment Period: Jan - 2022 | Service Period: 08/01/2021 to 08/31/2021  
 Status: Closed Attendance | Provider Type: Center | Provider ID: 18462  
 Vendor Number: [Redacted] | Provider Name: [Redacted] | Phone: [Redacted]  
 Site Address: [Redacted] | County: Pinellas

Has Closures: No | Provider Rates | Refresh Calculations | Move All to 'Have'

Showing 1 to 1 of 1 search results.

Last Name	First Name	DOB	Billing Group	Eligibility Code	Care Level	Unit of Care	Days to be Paid	Total Payment Rate	Daily Parent CoPay Rate	Gross Payment Amount	Less Parent CoPay Amount	Net Payment Amount	Gold Seal Amount	QPI Amount	Child Assessment Amount	Local QI Amount	CS Amount	Status	Action
[Filter]	[Filter]	[Filter]	BGB	SRMT	SCH	PT	14	\$0.90	\$0.00	\$0.00	\$12.60	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		Back to 'Have'
<b>Totals</b>								\$0.00	\$12.60	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00			

Showing 1 to 1 of 1 search results.

At least one record has a missing or negative rate amount.

This opens a new browser tab with the provider's reimbursement rate plans. Click the **Reimbursement Rates** button for the appropriate reimbursement rate plan.

SR Reimbursement Rates For [Redacted] | Return to review

Add Reimbursement Rates

Coalition	County	Reimbursement Start Date	Reimbursement End Date	Settings	Reimbursement Rates
ELC of Pinellas	Pinellas	7/1/2018	6/30/2019	Settings	Reimbursement Rates
ELC of Pinellas	Pinellas	7/1/2019	1/31/2020	Settings	Reimbursement Rates
ELC of Pinellas	Pinellas	2/1/2020	6/30/2020	Settings	Reimbursement Rates
ELC of Pinellas	Pinellas	7/1/2020	12/31/2020	Settings	Reimbursement Rates
ELC of Pinellas	Pinellas	1/1/2021	6/30/2021	Settings	Reimbursement Rates
ELC of Pinellas	Pinellas	7/1/2021	6/30/2022	Settings	Reimbursement Rates

In this example, the Part-Time Daily Rate for SCH is \$0.00. Click **Edit Provider Rates**.

SR Reimbursement Rates - 18462 - -

Unit of Care: Part-Time Daily Rates | Rates in effect on: 7/1/2021

\* Reimbursable rate is reduced because the amount exceeds the provider's private pay rate upper limit set in Column F.

Edit Provider Rates | Edit Differential Rates

Care Code	Description	A Provider's Private Pay Rates	B Coalition Maximum Reimbursement Rates	C Approved Provider Reimbursement Rate without Gold Seal (Column A or B, whichever is lower)	D Gold Seal Differential (Column C x percentage)	E Approved Provider Reimbursement Rate with Gold Seal (Column C + D; amount cannot exceed column F)	F Provider's Private Pay Rates Upper Limit (Column A + 20%)	G QPI Differential Rate (Column C x tier percentage)	H Local QI Level Differential Rate (Column C x tier percentage)	I Total Payment Rate (Column E + G + H; cannot exceed column F)	J Contracted Slots Differential Rate (per child flagged for contracted slots)	K Child Assessment Differential Rate (Column C x tier percentage)
INF	<12 Months	\$0.00	\$45.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
TOD	12 -<24 Months	\$0.00	\$33.15	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
2YR	24 -<36 Months	\$20.00	\$24.65	\$20.00	\$0.00	\$20.00	\$24.00	\$0.00	\$0.00	\$20.00	\$0.00	\$0.00
PR3	36 -<48 Months	\$20.00	\$17.36	\$17.36	\$0.00	\$17.36	\$24.00	\$0.00	\$0.00	\$17.36	\$0.00	\$0.00
PR4	48 -<60 Months	\$20.00	\$17.36	\$17.36	\$0.00	\$17.36	\$24.00	\$0.00	\$0.00	\$17.36	\$0.00	\$0.00
PR5	60 -<72 Months	\$20.00	\$17.36	\$17.36	\$0.00	\$17.36	\$24.00	\$0.00	\$0.00	\$17.36	\$0.00	\$0.00
SCH	In School	\$0.00	\$12.38	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
SPCR	Special Needs	\$0.00	\$54.01	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Enter the correct rate. For this example, the rate is \$20.00. Only \$0.00 rates are editable. Click **Save**.

Provider's Private Pay Rates

Care Code	Description	FT	PT	PTL
INF	<12 Months	\$ 0.00	\$ 0.00	\$ 0.00
TOD	12 <24 Months	\$ 0.00	\$ 0.00	\$ 0.00
2YR	24 <36 Months	\$ 32.00	\$ 20.00	\$ 0.00
PR3	36 <48 Months	\$ 32.00	\$ 20.00	\$ 0.00
PR4	48 <60 Months	\$ 32.00	\$ 20.00	\$ 0.00
PR5	60 <72 Months	\$ 32.00	\$ 20.00	\$ 0.00
SCH	In School	\$ 32.00	\$ 20.00	\$ 0.00
SPCR	Special Needs	\$ 0.00	\$ 0.00	\$ 0.00

Cancel Save >

A confirmation window will display. Click **Yes** or **Cancel**.

DIVISION OF Early Learning  
LEARN EARLY. LEARN FOR LIFE.

ALPHA

Confirm Provider Rates Change

Are you sure you want to save the Provider Rates change? This action is permanent and cannot be edited after saving.

Yes Cancel

Care Code	Description	FT	PT	PTL
INF	<12 Months	\$ 0.00	\$ 0.00	\$ 0.00
TOD	12 <24 Months	\$ 0.00	\$ 0.00	\$ 0.00
2YR	24 <36 Months	\$ 32.00	\$ 20.00	\$ 0.00
PR3	36 <48 Months	\$ 32.00	\$ 20.00	\$ 0.00
PR4	48 <60 Months	\$ 32.00	\$ 20.00	\$ 0.00
PR5	60 <72 Months	\$ 32.00	\$ 20.00	\$ 0.00
SCH	In School	\$ 32.00	\$ 20.00	\$ 0.00
SPCR	Special Needs	\$ 0.00	\$ 0.00	\$ 0.00

Cancel Save >

For each affected record, click the **Back to Have** button.

St. Nicholas Greek Orthodox Preschool - Jan - 2022

Reimbursement Record for 1 Total Records

**Funder Type:** SR      **Payment Period:** Jan - 2022      **Service Period:** 08/01/2021 to 08/31/2021  
**Status:** Closed Attendance      **Provider Type:** Center      **Provider ID:** 18462  
**Vendor Number:** ██████████      **Provider Name:** ██████████      **Phone:** ██████████  
**Site Address:** ██████████      **County:** Pinellas      **Has Closures:** ✖ No

Provider Rates    Refresh Calculations    Move All to 'Have'

Showing 1 to 1 of 1 search results.

Clear All Filters Search:

Last Name	First Name	DOB	Billing Group	Eligibility Code	Care Level	Unit of Care	Days to be Paid	Total Payment Rate	Daily Parent CoPay Rate	Gross Payment Amount	Less Parent CoPay Amount	Net Payment Amount	Gold Seal Amount	QPI Amount	Child Assessment Amount	Local OI Amount	CS Amount	Status	Action
Filter	Filter		Filter	Filter	Filter	Filter												Filter	
			BG8	SRMT	SCH	PT	14	▲ Rate	\$0.90	\$0.00	\$12.60	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		Back to 'Have'
<b>Totals</b>										\$0.00	\$12.60	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		

Showing 1 to 1 of 1 search results.

▲ At least one record has a missing or negative rate amount.

In Have Attendance, move the provider records to Closed Attendance. In Closed Attendance, the missing rate error is resolved, and the amount in the Total Payment Rate is based on the lower amount of the Provider Private Pay Rate and the Coalition Maximum Reimbursement Rate for that Care Level.

**St. Nicholas Greek Orthodox Preschool** Jan - 2022

Reimbursement Record for St. Nicholas Greek Orthodox Preschool 1 Total Records

Funder Type: **SR**

Status: **Closed Attendance**

Vendor Number: [REDACTED]

Site Address: [REDACTED]

Payment Period: **Jan - 2022**

Provider Type: **Center**

Provider Name: [REDACTED] Preschool

County: **Pinellas**

Service Period: **08/01/2021 to 08/31/2021**

Provider ID: **18462**

Phone: [REDACTED]

Has Closures: No

Provider Rates
Refresh Calculations
Move All to 'Have'

Showing 1 to 1 of 1 search results.

Clear All Filters

Last Name	First Name	DOB	Billing Group	Eligibility Code	Care Level	Unit of Care	Days to be Paid	Total Payment Rate	Daily Parent CoPay Rate	Gross Payment Amount	Less Parent CoPay Amount	Net Payment Amount	Gold Seal Amount	OPI Amount	Child Assessment Amount	Local OI Amount	CS Amount	Status	Action
Filter	Filter		Filter	Filter	Filter	Filter												Filter	
T		1	BG8	SRMT	SCH	PT	14	\$12.38	\$0.90	\$173.32	\$12.60	\$160.72	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	Verified ✓	Adjust Back to 'Have'
<b>Totals</b>										<b>\$173.32</b>	<b>\$12.60</b>	<b>\$160.72</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>		

Showing 1 to 1 of 1 search results.

Continue >

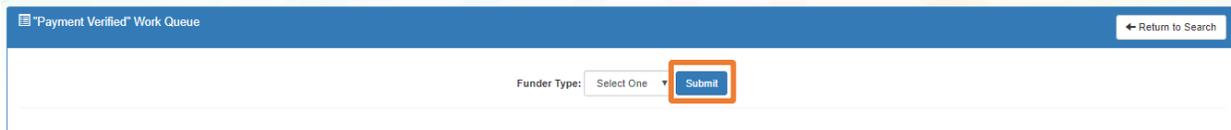
## Payment Verified Work Queue

When a record, month (MTH), current period adjustment (MTH), prior period adjustment (PPA), or line item adjustment (LIA) is in Payment Verified status for the current payment period, it will display on the Payment Verified Work Queue. The Payment Verified Work Queue is only available for the following:

- For MTH records, selecting the record will move the record back to Closed Attendance
- For MTH records (current period adjustments), selecting the record will move the record back to Closed Attendance and delete the adjustment information
- For PPA and LIA records, selecting the record will delete the adjustment

From the Coalition Portal, navigate to **Reimbursement > Attendance Processing > View Payment Verified**.

On the Payment Verified Work Queue, select the Funder Type. Clicking the **Submit** button will display the selected funder type's work queue.



### *SR and SR Plus*

The search field displays at the top and will filter the work queue based on the information entered. The work queue displays 10 records per page by default. The work queue can be changed to display 10, 25, 50, or 100 records per page. If more than 10 records are available, then pagination is available. The number of entries display at the bottom of the work queue.

Only SR records in Payment Verified status will display in the queue. Clicking on the **Select All** checkbox will select all records on the screen. The following columns display in the work queue:

- Child Name
- Provider ID
- Provider Name
- Service Period
- Care Level
- Unit of Care
- Billing Group
- Match Funder ID-Name
- Match Funder Amount
- VPK Class ID
- Enrollment ID
- Is Adjustment
- Record Type
- Reimbursement ID

The work queue is sorted alphabetically by Child Name, by default. Each of the columns have a search filter to narrow the results. Clicking on a column header will sort the work queue by that criterion. Clicking the **Return to Search** button will navigate to the Payment Verified Work Queue Search screen.

The screenshot shows the "Payment Verified" Work Queue interface. At the top, there is a "Return to Search" button. Below it, a "Funder Type" dropdown is set to "SR" with a "Submit" button. A "Show 10 entries" dropdown and a "Clear All Filters" button are also present. The main table has 15 columns, each with a "Filter" button below the header. Two records are displayed in the table:

Select All	Child Name	Provider ID	Provider Name	Service Period	Care Level	Unit of Care	Billing Group	Match Funder ID-Name	Match Funder Amount	VPK Class ID	Enrollment ID	Is Adjustment	Record Type	Reimbursement ID
<input type="checkbox"/>				Apr 2019	PR5	FTFT	BG3AP					Yes	LIA	
<input type="checkbox"/>				Oct 2019	PR4	PT	WRC					Yes	LIA	

At the bottom of the table, it says "Showing 1 to 2 of 2 entries" and "Previous 1 Next". A "Run" button is highlighted with a red box at the bottom center of the interface.

After selecting one or more records to remove from the Payment Verified work queue, clicking the **Run** button opens the confirmation pop-up window. The confirmation pop-up shows the number of records that are impacted and the action that will be taken:

- PPA records will be deleted
- LIA records will be deleted
- MTH records will be moved to closed attendance

The screenshot shows the "Confirm Processing Actions" pop-up window. It has a close button (X) in the top right corner. The window contains three summary boxes:

- Total PPA Records to be DELETED: 0
- Total MTH Records to be moved to Closed Attendance: 1
- Total LIA Records to be DELETED: 0

Below these boxes, the question "Are you sure you want to continue?" is displayed. At the bottom right, there are "Yes" and "Cancel" buttons.

## VPK

The search field displays at the top and will filter the work queue based on the information entered. The work queue displays 10 records per page by default. The work queue can be changed to display 10, 25, 50, or 100 records per page. If more than 10 records are available, then pagination is available. The number of entries display at the bottom of the work queue.

Only VPK records in Payment Verified status will display in the queue. Clicking on the **Select All** checkbox will select all records on the screen. The following columns display in the work queue:

- Child Name
- Provider ID
- Provider Name
- Service Period
- Care Level
- Unit of Care
- Billing Group
- Match Funder ID-Name
- Match Funder Amount
- VPK Class ID
- Enrollment ID
- Is Adjustment
- Record Type
- Reimbursement ID

The work queue is sorted alphabetically by Child Name, by default. Each of the columns have a search filter to narrow the results. Clicking on a column header will sort the work queue by that criterion. Clicking the **Return to Search** button will navigate to the Payment Verified Work Queue Search screen.

Show 10 entries Clear All Filters Search:

Select All	Child Name	Provider ID	Provider Name	Service Period	Care Level	Unit of Care	Billing Group	Match Funder ID-Name	Match Funder Amount	VPK Class ID	Enrollment ID	Is Adjustment	Record Type	Reimbursement ID
	Filter	Filter	Filter	Filter	Filter	Filter	Filter	Filter	Filter	Filter	Filter	Filter	Filter	Filter
<input type="checkbox"/>				Sep 2019	PRS	PT	VPK					No	MTH	
<input type="checkbox"/>				Aug 2018	VPK	PT	VPK					Yes	LIA	
<input type="checkbox"/>				Aug 2018	VPK	PT	VPK					Yes	LIA	
<input type="checkbox"/>				Aug 2019	VPK	PT	VPK					Yes	LIA	
<input type="checkbox"/>				Aug 2019	PRS	PT	VPK					No	MTH	
<input type="checkbox"/>				Sep 2019	PRS	PT	VPK					No	MTH	
<input type="checkbox"/>				Jul 2019	PRS	PT	VPK					No	MTH	
<input type="checkbox"/>				Aug 2019	PRS	PT	VPK					No	MTH	
<input type="checkbox"/>				Sep 2019	PRS	PT	VPK					No	MTH	
<input type="checkbox"/>				Oct 2019	PRS	PT	VPK					No	MTH	

Showing 1 to 10 of 39 entries Previous 1 2 3 4 Next

**Run**

After selecting one or more records to remove from the Payment Verified work queue, clicking the **Run** button opens the confirmation pop-up window. The confirmation pop-up shows the number of records that are impacted and the action that will be taken:

- PPA records will be deleted
- LIA records will be deleted
- MTH records will be moved to closed attendance

**Confirm Processing Actions** ✕

---

Total PPA Records to be DELETED: 0

Total MTH Records to be moved to Closed Attendance: 1

Total LIA Records to be DELETED: 0

Are you sure you want to continue?

Yes
Cancel

### Local

The search field displays at the top and will filter the work queue based on the information entered. The work queue displays 10 records per page by default. The work queue can be changed to display 10, 25, 50, or 100 records per page. If more than 10 records are available, then pagination is available. The number of entries display at the bottom of the work queue.

Only Local records in Payment Verified status will display in the queue. Clicking on the **Select All** checkbox will select all records on the screen. The following columns display in the work queue:

- Child Name
- Provider ID
- Provider Name
- Service Period
- Care Level
- Unit of Care
- Billing Group
- Match Funder ID-Name
- Match Funder Amount
- VPK Class ID
- Enrollment ID
- Is Adjustment
- Record Type
- Reimbursement ID

The work queue is sorted alphabetically by Child Name, by default. Each of the columns have a search filter to narrow the results. Clicking on a column header will sort the work queue by that criterion. Clicking the **Return to Search** button will navigate to the Payment Verified Work Queue Search screen. Selecting one or more entries and clicking on the **Run** button will do the following:

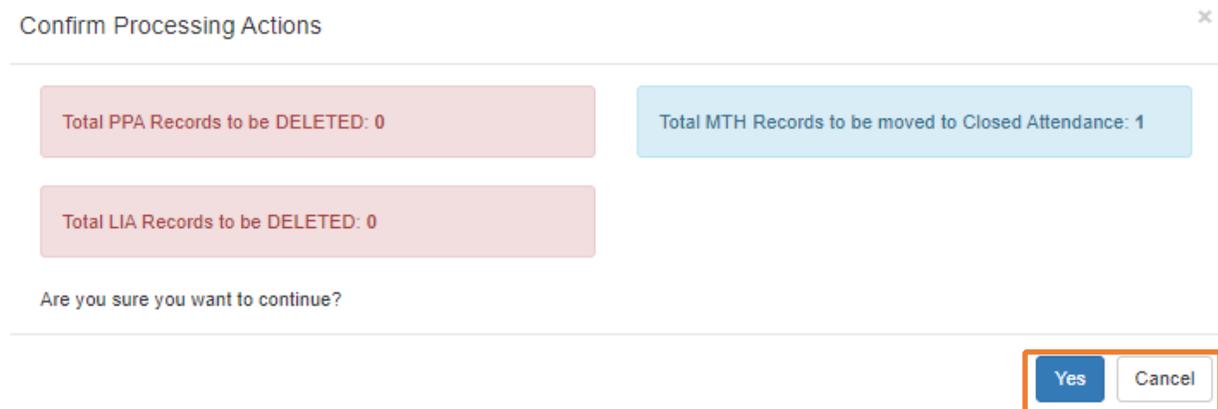
- Open the Confirm Submit for Reimbursement modal
- For MTH records, selecting the record will move the record back to Closed Attendance
- For MTH records (current period adjustments), selecting the record will move the record back to Closed Attendance and delete the adjustment information
- For PPA and LIA records, selecting the record will delete the adjustment

The screenshot shows the "Payment Verified" Work Queue interface. At the top, there is a "Return to Search" button. Below that, the "Funder Type" is set to "Local" with a "Submit" button. The interface displays "10 entries" and a "Clear All Filters" button. The table has the following columns: Select All, Child Name, Provider ID, Provider Name, Service Period, Care Level, Unit of Care, Billing Group, Match Funder ID-Name, Match Funder Amount, VPK Class ID, Enrollment ID, Is Adjustment, Record Type, and Reimbursement ID. Each column has a "Filter" button below it. A single record is shown with the following data: Service Period: Apr 2019, Care Level: SCH, Unit of Care: FT, Billing Group: 33-PR11, Match Funder ID-Name: 8-New Provider, Is Adjustment: No, Record Type: MTH. At the bottom, there is a "Showing 1 to 1 of 1 entries" message and a pagination bar with "Previous", "1", and "Next" buttons. A "Run" button is highlighted with an orange box at the bottom center of the interface.

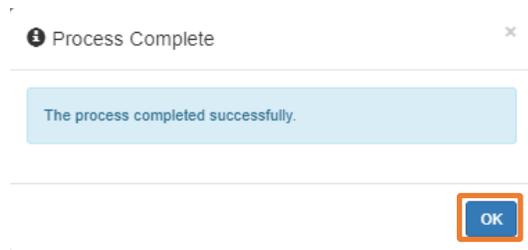
## Confirmation Modal

Clicking the **Run** button opens the confirmation pop-up window. The confirmation pop-up shows the number of records that are impacted and the action that will be taken:

- PPA records will be deleted
- LIA records will be deleted
- MTH records will be moved to closed attendance



Clicking the **Cancel** button will close the modal and the entries will remain in the Payment Verified Work Queue.



## Registration Fees

Providers will request registration fee payments through the Provider Portal. Once those requests are submitted, they will display in the Coalition's Registration Fee work queue.

To view/process Registration Fees navigate to **Reimbursement > Registration Fees > Pending Payments**

Coalitions can **Approve**, **Reject**, or mark the record **Ineligible** for payment. Hovering over each button displays a brief explanation.

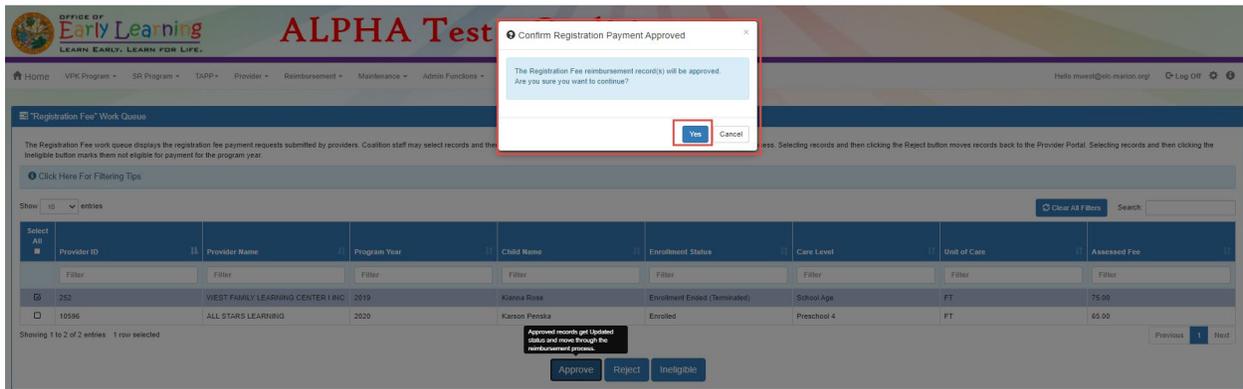
The screenshot shows the "Registration Fee" Work Queue interface. The navigation menu includes Home, VPK Program, VPK SIS, SR Program, TAPP, Provider, Reimbursement, Maintenance, Reports, CCR&R, Grant Application, and Admin Functions. The "Registration Fees" dropdown menu is open, showing options like Attendance Processing, Adjustment Processing, Reimbursement Closeout, Vendor Number Entry, VPK Reimbursement Tools, and Reimbursement Search. The main content area displays a table with columns: Select All, Provider ID, Provider Name, Program Year, Child Name, Enrollment Status, Care Level, Unit of Care, and Assessed Fee. Three rows of data are visible, all from "EARLY LEARNING CENTER OF SUNRISE, LLC" in 2022. The first two rows have "Enrollment Ended (Terminated)" status, and the third is "Enrolled". Below the table are "Approve", "Reject", and "Ineligible" buttons. A tooltip above the "Approve" button reads: "These records will go back to the provider so they can re-submit."

## Approve the Registration Fee Request

The list displays the children submitted by the provider. To approve the registration fee payment, select the checkbox for the child(ren) and click the **Approve** button.

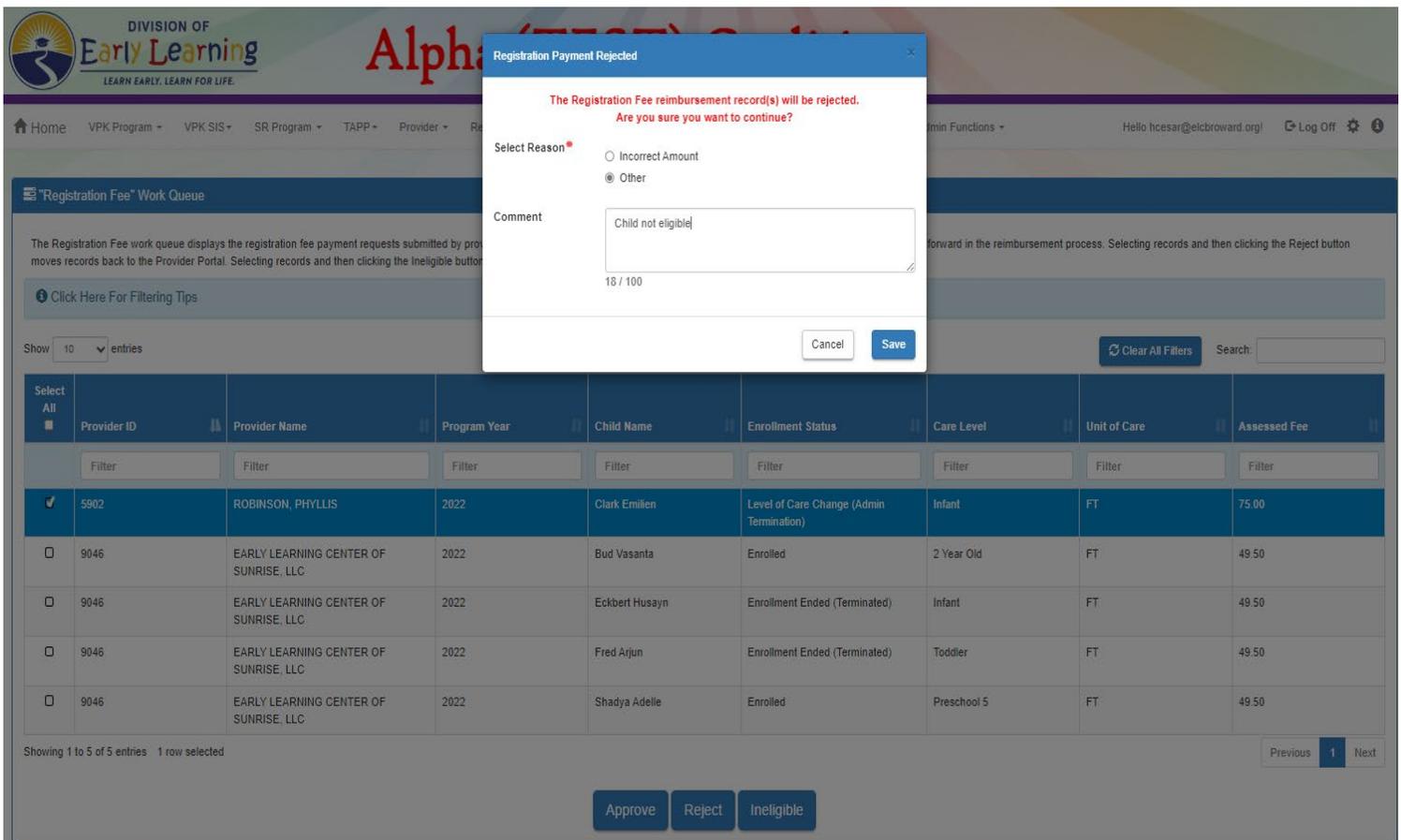
The screenshot shows the "Registration Fee" Work Queue interface. The navigation menu includes Home, VPK Program, SR Program, TAPP, Provider, Reimbursement, Maintenance, Admin Functions, Reports, and CCR&R. The main content area displays a table with columns: Select All, Provider ID, Provider Name, Program Year, Child Name, Enrollment Status, Care Level, Unit of Care, and Assessed Fee. Two rows of data are visible: one from "WEST FAMILY LEARNING CENTER INC" in 2019 with "Enrollment Ended (Terminated)" status, and one from "ALL STARS LEARNING" in 2020 with "Enrolled" status. Below the table are "Approve", "Reject", and "Ineligible" buttons. The "Approve" button is highlighted with a red box.

On the Confirm Registration Payment Approved pop-up window, click **Yes**. The Registration Fee record's status is now **Updated**.



### Reject the Registration Fee Request

If the coalition determines that the record is incorrect, it can be rejected back to the provider for correction. Rejected records can be re-submitted to the coalition for payment. To reject a record, check the checkbox and click **Reject**. A Registration Payment Rejected pop-up window displays. Select either Incorrect Amount or Other. If Other is selected, a comment is required. A comment for Incorrect Amount may be entered but is not required. Click **Save** and the record is rejected. The Process Complete pop-up window is displayed, Click **OK** to return to the Registration Fee Work Queue.



## Mark the Registration Fee Requests 'Ineligible'

If the coalition determines that a record is ineligible for registration fee payment, then the coalition will check the checkbox for the record and click the **Ineligible** button. A Registration Payment Ineligible pop-up window displays. Select one of the four reasons: Child Not Eligible, Child Not Eligible for Hardship, Duplicate Child, or Other. If Other is selected, a comment is required. Comments may be entered for Child Not Eligible, Child Not Eligible for Hardship, and Duplicate Child but is not required. Click **Save** and the record is marked as Ineligible. The Process Complete pop-up window is displayed, Click **OK** to return to the Registration Fee Work Queue.

**NOTE:** The Registration Fee record gets the status of **Ineligible** with \$0 payment. Provider will NOT be able to re-submit these records for payment.

The screenshot shows the 'Registration Fee' Work Queue interface. A modal window titled 'Registration Payment Ineligible' is open, displaying the following content:

**The Registration Fee reimbursement record(s) will be marked ineligible. Are you sure you want to continue?**

Select Reason \*

- Child Not Eligible
- Child Not Eligible For Hardship
- Duplicate Child
- Other

Comment

Transferred after 10 days

25 / 100

Buttons: Cancel, Save

The background interface shows a table with the following columns: Select, Provider ID, Provider Name, Program Year, Child Name, Enrollment Status, Care Level, Unit of Care, and Assessed Fee. The first row is selected, showing Provider ID 5902, Provider Name ROBINSON, PHYLLIS, Program Year 2022, Child Name Clark Emilian, Enrollment Status Level of Care Change (Admin Termination), Care Level Infant, Unit of Care FT, and Assessed Fee 75.00. Below the table, there are buttons for Approve, Reject, and Ineligible.



## Ineligible Registration Fee Work Queue (Override)

When a provider dismisses a child for registration fee payments on the Provider Portal, the child will show in the Ineligible Registration Fee Work Queue on the Coalition Portal. If the child was dismissed for the registration fee payment in error, coalition users can override and allow the registration fee payment to be processed.

In the Coalition Portal, navigate to the provider's Administrative Review screen and click the **Registration Fees** button.

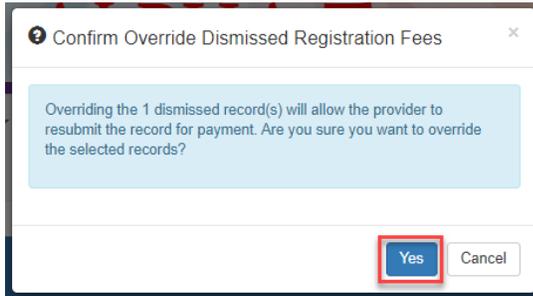
The screenshot shows the 'Administrative Review' section of a provider's profile for the 2020-2021 Program Year. The current status is 'Active'. The 'Registration Fees' button is highlighted with a red box. Below the buttons, there are expandable sections for Business Info, General, Facility, and Services.

The Ineligible Registration Fee Work Queue displays. This lists all children at the provider that have been dismissed for registration fees for the current program year. Select the check box for the child and click the **Override** button. There is an option to select all children in the queue to override.

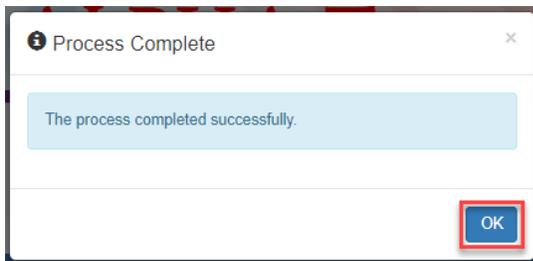
The screenshot shows the 'Ineligible Registration Fee Work Queue' table. The table has columns for Program Year, Child Name, Assessed Fee, Dismissed Date, and Dismissed By. The 'Select All' checkbox is highlighted with a red box. Below the table, there is an 'Override' button also highlighted with a red box.

Select All	Program Year	Child Name	Assessed Fee	Dismissed Date	Dismissed By
<input type="checkbox"/>	2020		0.00	03/09/2021	
<input type="checkbox"/>	2020		0.00	03/11/2021	
<input type="checkbox"/>	2020		0.00	03/11/2021	
<input type="checkbox"/>	2020		0.00	03/11/2021	

After clicking the **Override** button, the Confirm Override Dismissed Registration Fees pop-up window displays. Click the **Yes** button to override the records.



After clicking the **Yes** button on the Confirm Override Dismissed Registration Fees pop-up window, the Process Complete pop-up message opens. Click the **OK** button to close the window.

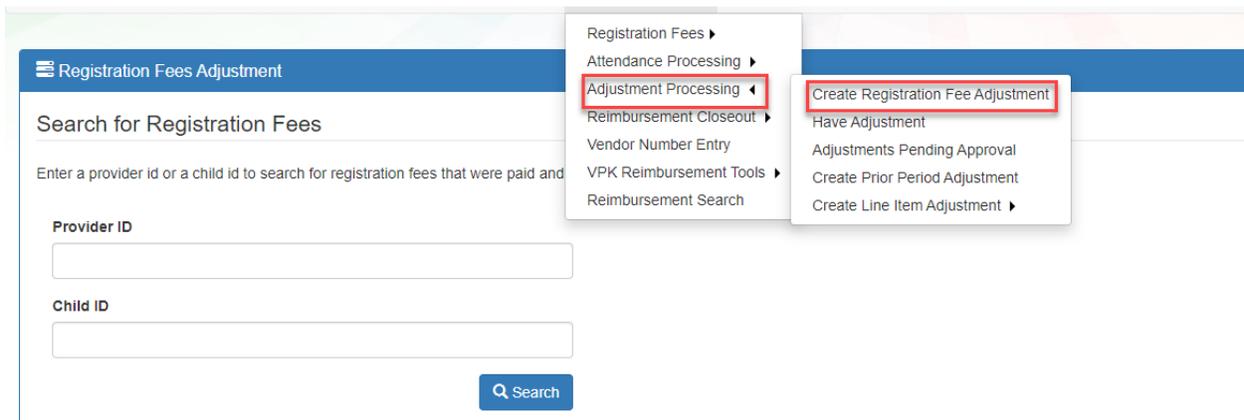


After the coalition has overridden the registration fee for payment, the child will show in the list of children eligible for registration fee payment on the Provider Portal. The provider can process the request for registration fee payments as usual.

### Registration Fee Reversals (Adjustments)

Coalitions can create a reversal (adjustment) for a registration fee that has been paid. Navigate to **Reimbursement > Adjustment Processing > Create Registration Fee Adjustment**

On the Registration Fee Adjustment screen, search by the Provider ID and/or the Child ID, then click the **Search** button.



The Registration Fees Search Results screen displays the search results based on the criteria entered. To adjust a record, click the **Adjust** button.

Registration Fees Search Results

Search Results ← Return to Search

Click Here For Filtering Tips

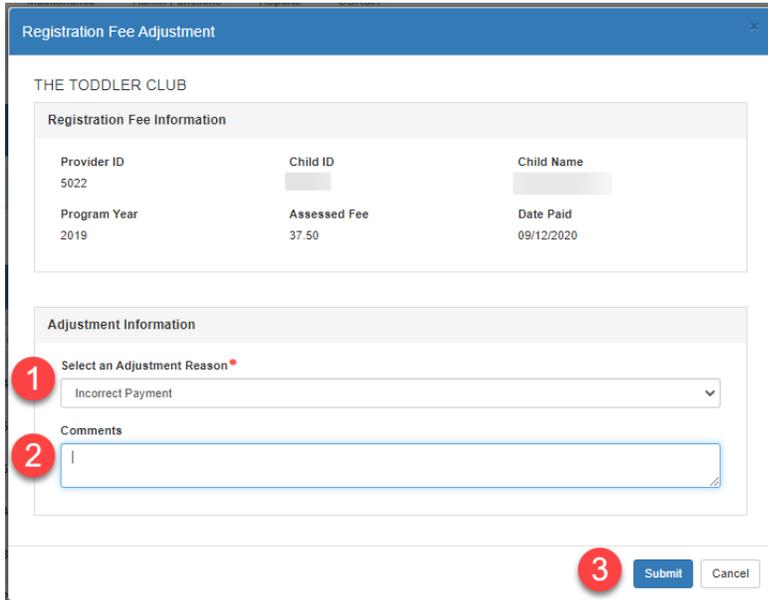
Show 10 entries Search:

Provider ID	Provider Name	Child ID	Child Name	Program Year	Date Paid	Assessed Fee	Action
<input type="text" value="Filter"/>							
5022	THE TODDLER CLUB			2019	09/12/2020	37.50	<b>Adjust</b>
5022	THE TODDLER CLUB			2019	09/12/2020	37.50	Adjust
5022	THE TODDLER CLUB			2019	09/12/2020	25.00	Adjust
5022	THE TODDLER CLUB			2019	09/12/2020	75.00	Adjust
5022	THE TODDLER CLUB			2019	09/12/2020	25.00	Adjust
5022	THE TODDLER CLUB			2019	09/12/2020	37.50	Adjust
5022	THE TODDLER CLUB			2019	09/12/2020	37.50	Adjust
5022	THE TODDLER CLUB			2019	09/12/2020	37.50	Adjust
5022	THE TODDLER CLUB			2019	09/12/2020	37.50	Adjust
5022	THE TODDLER CLUB			2019	09/12/2020	75.00	Adjust

Showing 1 to 10 of 105 entries Previous 1 2 3 4 5 ... 11 Next

The Registration Fee Adjustment pop-up window displays the details of the record. The adjustment will fully reverse the registration fee assessed.

1. Select the reason for the adjustment
2. Enter a comment
3. Click the **Submit** button

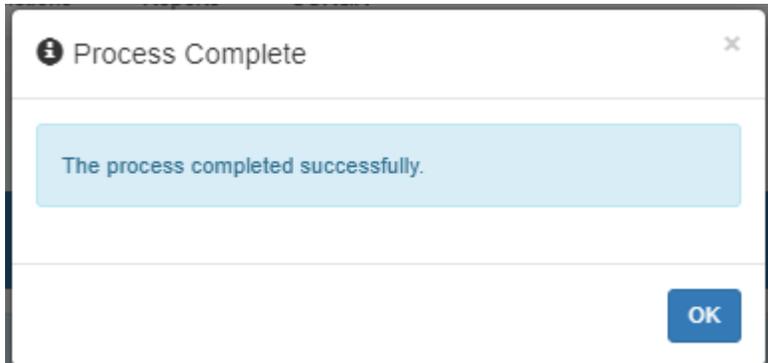


The screenshot shows a 'Registration Fee Adjustment' window for 'THE TODDLER CLUB'. It contains two main sections: 'Registration Fee Information' and 'Adjustment Information'. The 'Registration Fee Information' section displays a table with the following data:

Provider ID	Child ID	Child Name
5022		
Program Year	Assessed Fee	Date Paid
2019	37.50	09/12/2020

The 'Adjustment Information' section includes a dropdown menu for 'Select an Adjustment Reason' with 'Incorrect Payment' selected, a text input field for 'Comments', and 'Submit' and 'Cancel' buttons at the bottom right. Red numbered callouts (1, 2, 3) highlight the dropdown, the comments field, and the Submit button respectively.

The Process Complete pop-up window opens. Click the **OK** button.



The screenshot shows a 'Process Complete' window with a blue message box containing the text 'The process completed successfully.' and an 'OK' button at the bottom right.

After the registration fee reversal is completed, it will display on the 5045 as a RFR negative amount.

## Complete the Payment Transmittal Process

Navigate to **Reimbursement > Reimbursement Closeout > Run Payment Transmittal File**

Click **Run Transmittal File** button. Records that were in **Updated** status are now in **Paid** status.

### *Verify Data in 5045 report- SR*

Navigate to **Reimbursement > Reimbursement Closeout > Run 5045 Report**. Click the **Run Report** button for SR. The Run SR Report modal displays. Click the **Run Trial 5045 Report** button. The Reimbursement Detail Type drop down includes RFR when registration fee reversal records are present.

### *Verify Data in 5045 report- SR Plus*

Navigate to **Reimbursement > Reimbursement Closeout > Run 5045 Report**. Click the **Run Report** button for SR Plus. The Run SR Plus Report modal displays. Click the **Run Trial 5045 Report** button. The Reimbursement Detail Type drop down includes RFR when registration fee reversal records are present.

## Child Assessment

### Eligibility Criteria

In the Coalition Portal, Providers meet the following criteria:

- Provider has an SR 20 contract/amendment with child assessment for the program year
- Provider has a rate plan with the child assessment differential effective on the last day of the assessment period for the program year
- Children have enrollments for at least 60 days during the assessment period with the provider
- Children have parental consent for assessment
- At least one service period reimbursement record marked Paid within the assessment period and child assessment processing has not been submitted
- No pending adjustments can be created for a MTH record within the assessment period (status of the adjustment must be Updated or Paid)
- Has not already been processed for the assessment period

### Child Assessment Differentials

On the Provider Profile Administrative Review screen, click **Child Assessment**.



The children that meet the eligibility criteria will display on the Child Assessment screen.

The screenshot shows the 'Child Assessment' screen. At the top right, there is a 'Return to review' button. Below the header, there is a 'Provider Name' field with a blurred value. A text box contains the following conditions for work queue results:

- Provider has an SR 20 contract/amendment with child assessment for the program year.
- Provider has a rate plan with the child assessment differential effective on the last day of the assessment period for the program year.
- Children have enrollments for at least 60 days during the assessment period with the provider.
- Children have parental consent for assessment.
- At least one service period reimbursement record marked Paid within the assessment period and child assessment processing has not been submitted.
- No pending adjustments can be created for a MTH record within the assessment period.

Below the conditions is a 'Program Year - Child Assessment Period' dropdown menu set to '2019-1'. There are also 'Clear All Filters' and 'Search' buttons.

Select All	Child Name	Date of Birth	Parental Consent
<input type="checkbox"/>	[Filter]	[Filter]	[Filter]
<input type="checkbox"/>	[Blurred]	1/26/2016	Yes
<input type="checkbox"/>	[Blurred]	8/3/2015	Yes

Showing 1 to 2 of 2 entries

Submit for Reimbursement

There are three assessment periods:

Assessment Period	Service Period	Payment Period
1 (2019-01)	August, September, October	July, August, September, October
2 (2019-02)	November, December, January	November, December, January
3 (2019-03)	February, March, April	February, March, April, May, June

- The Service Period are the months in which assessments may occur
- The Payment Period are the months in which the child assessment differential can be paid, once the child assessment for the respective assessment period has been approved by the Coalition

**NOTE: The reimbursement will occur during the open Payment Period**

Select an assessment period from the dropdown menu.

Child Assessment Return to review

Provider Name: [Redacted]

Work queue results will display with the following conditions:

- Provider has an SR 20 contract/amendment with child assessment for the program year.
- Provider has a rate plan with the child assessment differential effective on the last day of the assessment period for the program year.
- Children have enrollments for at least 60 days during the assessment period with the provider.
- Children have parental consent for assessment.
- At least one service period reimbursement record marked Paid within the assessment period and child assessment processing has not been submitted.
- No pending adjustments can be created for a MTH record within the assessment period.

Program Year - Child Assessment Period: 2019-1

Clear All Filters Search: [ ]

Select All	Child Name	Date of Birth	Parental Consent
<input type="checkbox"/>	[Redacted]	1/26/2016	Yes
<input type="checkbox"/>	[Redacted]	8/3/2015	Yes

Showing 1 to 2 of 2 entries

Submit for Reimbursement

If the Service Period is in the past, then all months will be included in selecting the children.

- Example: Selecting one child for Assessment Period 1 (July – October) will create a child assessment reimbursement record for each month in the assessment period

If the Service Period is not yet complete, then only the completed months will be included for reimbursement.

- Example: Selecting one child for Assessment Period 3 (February – June) in the month of May will not pay for May or June. The child assessment reimbursement will only be for the completed months (February – April)

Coalition users will need to create the child assessment reimbursement records for May and June after the end of the month.

Select one or more children from the list and click **Submit for Reimbursement**.

Child Assessment Return to review

Provider Name: [REDACTED]

Work queue results will display with the following conditions:

- Provider has an SR 20 contract/amendment with child assessment for the program year.
- Provider has a rate plan with the child assessment differential effective on the last day of the assessment period for the program year.
- Children have enrollments for at least 60 days during the assessment period with the provider.
- Children have parental consent for assessment.
- At least one service period reimbursement record marked Paid within the assessment period and child assessment processing has not been submitted.
- No pending adjustments can be created for a MTH record within the assessment period.

➔ Program Year - Child Assessment Period: 2019-1

Clear All Filters Search:

Select All	Child Name	Date of Birth	Parental Consent
<input type="checkbox"/>	[REDACTED]	1/26/2016	Yes
<input type="checkbox"/>	[REDACTED]	8/3/2015	Yes

Showing 1 to 2 of 2 entries

Submit for Reimbursement

### Payment Verified Work Queue

The child assessment records can be seen in the Payment Verified Work Queue.

"Payment Verified" Work Queue Return to Search

Funder Type: 50 Plus Submit

Show: 10 entries Clear All Filters Search:

Select All	Child Name	Provider ID	Provider Name	Service Period	Care Level	Unit of Care	Sitting Group	Match Funder ID-Name	Match Funder Amount	VPK Class ID	Enrollment ID	% Adjustment	Record Type	Reimbursement ID	Days Paid	Net Payment Amount
<input type="checkbox"/>	Noan Eduardo	2898	JACK AND JILL CHILDRENS CENTER INC	Apr 2024	TOD	FT	SRPLS				3366251	Yes	CAR	38202271	-22	-1474.22
<input type="checkbox"/>	Noan Eduardo	2898	JACK AND JILL CHILDRENS CENTER INC	Apr 2024	TOD	FT	SRPLS				3366251	Yes	CAA	38202270	22	1527.46

Each child will have two rows for each month in the assessment period:

- Record Type: CAA (Child Assessment Adjustment) – This record creates a new reimbursement record to include the child assessment differential
- Record Type: CAR (Child Assessment Reversal) – This record reverses out the original reimbursement record, where child assessment differential was not included

No action can be taken on these records from the Payment Verified Work Queue.

### Reports

The child assessment reimbursements will be available on the 5045 with record types of CAA and CAR.

# Adjustment Processing

## Current Period Adjustments

Coalitions can create a Current Period Adjustment for any attendance records that have been submitted by a provider and approved by the coalition.

Go to **Reimbursement > Attendance Processing > Closed Attendance**. Select the Funder Type. Click **Submit**.

County: All | Funder Type: Select One | Submit

## Current Period Adjustments for SR

The search results will display all the providers with a status of Closed Attendance. Click the **Review** link for the Service Period.

Action	Provider ID	Provider Name	County	Service Period	Funder Type	VPK Class ID	Status
<a href="#">Review</a>				September 2019	SR		Closed Attendance

After clicking the Review link, the Reimbursement Record for the provider and service period display. Confirm that all children on the roster have a status. Click **Adjust** for the selected record.

Showing 1 to 51 of 51 search results.

Last Name	First Name	DOB	Billing Group	Eligibility Code	Care Level	Unit of Care	Days to be Paid	Total Payment Rate	Daily Parent CoPay Rate	Gross Payment Amount	Less Parent CoPay Amount	Net Payment Amount	Gold Seal Amount	QPI Amount	Child Assessment Amount	Local Q Amount	CS Amount	SPCR Amount	Status	Action
			BG8	ECON	SCH	FT	0	\$25.40	\$0.76	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	Verified ✓	<a href="#">Adjust</a> <a href="#">Back to 'Have'</a>
			BG8	ECON	SCH	FT	16	\$25.40	\$1.01	\$406.40	\$16.16	\$390.24	\$64.00	\$22.40	\$0.00	\$0.00	\$0.00	\$0.00	Verified ✓	<a href="#">Adjust</a> <a href="#">Back to 'Have'</a>
			BG8	ECON	SCH	PT	6	\$19.05	\$0.76	\$114.30	\$4.56	\$109.74	\$18.00	\$6.30	\$0.00	\$0.00	\$0.00	\$0.00	Verified ✓	<a href="#">Adjust</a> <a href="#">Back to 'Have'</a>

After clicking **Adjust** from the Reimbursement Record, the Current Payment Period Adjustment Needed Here pop-up displays. Review the Child Name, to ensure this is the correct record to adjust. Select one or more reasons for the adjustment. Enter in a comment. Click **Move to Have Adjustment**.

Current Payment Period Adjustment Needed Here ✕

---

Child Name: [REDACTED]

- Incorrect Care Level
- Incorrect Provider Rate
- Incorrect Parent Copay
- Child Did Not Attend But Paid
- Child Not on Attendance Sheet
- Parent Copay Not Deducted
- Incorrect Schedule
- Incorrect Provider
- Absences Not Recorded
- Other

Comments:

Test

◀ Cancel
Move to Have Adjustment ▶

The adjusted record now has a status of Adjust on the Reimbursement Record screen. When all the records have a status, the **Continue** button will display. Click **Continue**.

Last Name	First Name	DOB	Billing Group	Eligibility Code	Care Level	Unit of Care	Days to be Paid	Total Payment Rate	Daily Parent CoPay Rate	Gross Payment Amount	Less Parent CoPay Amount	Net Payment Amount	Gold Seal Amount	QPI Amount	Child Assessment Amount	Local QI Amount	CS Amount	SPCR Amount	Status	Action
Filter	Filter		Filter	Filter	Filter	Filter													Filter	
			BG8	ECON	SCH	FT	0	\$25.40	\$0.76	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	Adjust ✖	Verify Back to 'Have'
			BG8	ECON	SCH	FT	16	\$25.40	\$1.01	\$406.40	\$16.16	\$390.24	\$64.00	\$22.40	\$0.00	\$0.00	\$0.00	\$0.00	Verified ✔	Adjust Back to 'Have'
			BG8	ECON	SCH	PT	6	\$19.05	\$0.76	\$114.30	\$4.56	\$109.74	\$18.00	\$6.30	\$0.00	\$0.00	\$0.00	\$0.00	Verified ✔	Adjust Back to 'Have'
			BG8	ECON	SCH	PT	0	\$19.05	\$1.01	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	Verified ✔	Adjust Back to 'Have'
			BG8	ECON	2YR	FT	22	\$50.80	\$1.35	\$1,117.60	\$29.70	\$1,087.90	\$176.00	\$61.60	\$0.00	\$0.00	\$0.00	\$0.00	Verified ✔	Adjust Back to 'Have'
			BG8	ECON	TOD	FT	22	\$53.38	\$1.56	\$1,174.36	\$34.32	\$1,140.04	\$185.02	\$64.68	\$0.00	\$0.00	\$0.00	\$0.00	Verified ✔	Adjust Back to 'Have'
			BG8	ECON	TOD	PT	0	\$40.03	\$1.56	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	Verified ✔	Adjust Back to 'Have'
<b>Totals</b>										\$24493.98	\$1926.16	\$22567.82	\$3899.16	\$1364.65	\$0.00	\$0.00	\$0.00			

Showing 1 to 51 of 51 search results.

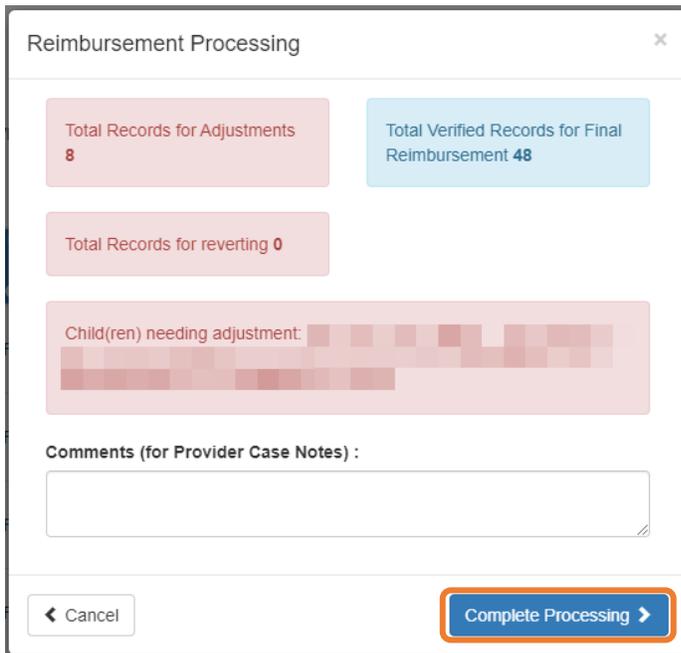
• Total Payment Rate is a daily average for VPK Wrap enrollments

Continue ▶

After clicking **Continue**, a Reimbursement Processing pop-up will display a summary:

- Records for Adjustments
- Records for Reverting
- Total Verified Record for Final Reimbursement
- Children needing adjustment

Review the Child(ren) needing adjustment listed for accuracy. Enter a comment for the provider case note. Click **Complete Processing**.



The screenshot shows a 'Reimbursement Processing' dialog box with a close button (X) in the top right corner. It contains the following elements:

- A red box on the left: 'Total Records for Adjustments' with the number '8' below it.
- A blue box on the right: 'Total Verified Records for Final Reimbursement' with the number '48' below it.
- A red box below the first one: 'Total Records for reverting' with the number '0' below it.
- A red box containing the text 'Child(ren) needing adjustment:' followed by a blurred area representing a list of children.
- A text input field labeled 'Comments (for Provider Case Notes) :'. The field is currently empty.
- At the bottom left, a 'Cancel' button with a left-pointing arrow.
- At the bottom right, a 'Complete Processing' button with a right-pointing arrow, which is highlighted with an orange border.

After clicking **Complete Processing**, the user returns to the Closed Attendance work queue.

Go to **Reimbursement > Adjustment Processing > Have Adjustment** to see records marked as needing an adjustment. To create a Current Period Adjustment, select a record from the Have Adjustment work queue. Click the **Create Adjustment** button.

"Have Adjustment" Work Queue

[Click Here For Filtering Tips](#)

Show top  adjustments results. Clear All Filters Search:

Child Name	Provider ID	Provider Name	County	Service Period	Report Period	Funder Type	VPK Class ID	Adjustment Type	Received
<input type="text" value="Filter"/>									
				September 2019	October 2019	SR		Payment Adjustment	10/14/2019
				September 2019	October 2019	SR		Payment Adjustment	10/14/2019
				September 2019	October 2019	SR		Payment Adjustment	10/14/2019
				September 2019	October 2019	SR		Payment Adjustment	10/14/2019
				September 2019	October 2019	SR		Payment Adjustment	10/14/2019
				September 2019	October 2019	SR		Payment Adjustment	10/14/2019
				September 2019	October 2019	SR		Payment Adjustment	10/14/2019
				September 2019	October 2019	SR		Payment Adjustment	10/14/2019
				October 2018	October 2019	SR		Payment Adjustment	8/9/2019
				October 2018	October 2019	SR		Payment Adjustment	8/9/2019

Showing 1 to 10 of 838 adjustments results. Previous 1 2 3 4 5 ... 84 Next

[Create Adjustment](#)

After clicking **Create Adjustment**, the Process Reimbursement Adjustment for [ELC Name] pop-up displays. The required fields are marked with an asterisk (\*). On the *Adjustment Information* section, it is pre-populated with the most recent information on the record. The user will need to select the Reason from the dropdown menu and enter a comment. User will click **Submit** to confirm the adjustment. After the adjustment is submitted, it will no longer display in the “Have Adjustment” Work Queue.

Process Reimbursement Adjustment for

---

**Provider (Payee) Information**

Principal: [Redacted] FEID/SSN: [Redacted] County of Service: Broward Provider Type: CNTR

Provider: [Redacted] ProviderID: [Redacted] Vendor ID: [Redacted]

---

**Parent & Child Information**

Parent: [Redacted] Child: [Redacted] Child ID: [Redacted] County: [Redacted]

Child Date of Birth: [Redacted] Billing Group: BG8 Eligibility: ECON - Economically Disadvantage Care Level: PRS - 60 < 72 Months

Unit Of Care: FTV Match Funder: BG8 MATCH Enrollment ID: [Redacted]

---

**Adjustment Information**

Service Period: April 2023 Funder Type:  SR  Local Unit Of Care: [Redacted] Reason: -- Select Reason --

Billing Group: BG8 Eligibility: ECON - Economically Disadvantage Care Level: 60 < 72 Months Match Funder: BG8 MATCH

	Days to be Paid	Total Payment Rate	Daily Parent CoPay Rate	Gross Payment Amount	Less Parent CoPay Amount	Net Payment Amount	Match Amount	Net Less Match	Gold Seal Amount	QPI Amount	Child Assessment Amount	Local QI Amount	CS Amount	Special Needs Amount	OCA Amount
Balance	4	\$25.87	\$1.56	\$103.48	\$6.24	\$97.24	\$0.00	\$97.24	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$97.24
Payment	4	\$25.87	1.56	\$103.48	\$6.24	\$97.24	0.00	\$97.24	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$97.24

Submit
Cancel

The Adjustments Grid has a Balance row with the current balance for the record and an Adjusted row with any adjustments made during this edit. In the Adjustments Grid, only the Days to be Paid and Daily Parent CoPay Rate are editable. Any changes made that will impact rate (Unit of Care, Care Level, or Daily Parent CoPay Rate) will display in the Adjusted row.

The column headers in the grid for years 2018-2019 and prior are:

- Days to be Paid
- Total Payment Rate
- Daily Parent CoPay Rate
- Gross Payment Amount = [Days to be Paid \* Total Payment Rate]
- Less Parent CoPay Amount = [Days to be Paid \* Daily Parent CoPay Rate]
- Net Payment Amount = [Gross Payment Amount – Less Parent CoPay Amount]
- Gold Seal Amount = [Days to be Paid \* Gold Seal Amount (from SR Rate Plan)]
- PFP Amount = [Days to be Paid \* PFP Amount (from SR Rate Plan)]
- PFP CA Amount = [Days to be Paid \* PFP CA Amount (from SR Rate Plan)]
- Local QI Amount = [Days to be Paid \* Local QI Amount (from SR Rate Plan)]
- CS Amount = [Days to be Paid \* CS Amount (from SR Rate Plan)]

The column headers in the grid for years 2019-2020 and forward are:

- Days to be Paid
- Total Payment Rate
- Daily Parent CoPay Rate
- Gross Payment Amount = [Days to be Paid \* Total Payment Rate]
- Less Parent CoPay Amount = [Days to be Paid \* Daily Parent CoPay Rate]
- Net Payment Amount = [Gross Payment Amount – Less Parent CoPay Amount]
- Gold Seal Amount = [Days to be Paid \* Gold Seal Amount (from SR Rate Plan)]
- QPI Amount = [Days to be Paid \* QPI Amount (from SR Rate Plan)]
- Child Assessment Amount = [Days to be Paid \* Child Assessment Amount (from SR Rate Plan)]
- Local QI Amount = [Days to be Paid \* Local QI Amount (from SR Rate Plan)]
- CS Amount = [Days to be Paid \* CS Amount (from SR Rate Plan)]
- Special Needs Amount = [Days to be Paid \* Special Needs Rate]

	Days to be Paid	Total Payment Rate	Daily Parent CoPay Rate	Gross Payment Amount	Less Parent CoPay Amount	Net Payment Amount	Match Amount	Net Less Match	Gold Seal Amount	QPI Amount	Child Assessment Amount	Local QI Amount	CS Amount	Special Needs Amount	OCA Amount	
Balance	2	\$58.08	\$0.00	\$116.16	\$0.00	\$116.16	\$0.00	\$116.16	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$19.36	\$96.80	<a href="#">View History</a>
Payment	<input type="text" value="2"/>	\$58.08	<input type="text" value="0.00"/>	\$116.16	\$0.00	\$116.16	<input type="text" value="0.00"/>	\$116.16	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$19.36	\$96.80	
Adjustment																

## Current Period Adjustments for SR Plus

The search results will display all the providers with a status of Closed Attendance. Click the **Review** link for the Service Period.

After clicking the Review link, the Reimbursement Record for the provider and service period display. Confirm that all children on the roster have a status. Click **Adjust** for the selected record.

After clicking **Adjust** from the Reimbursement Record, the Current Payment Period Adjustment Needed Here popup displays. Review the Child Name, to ensure this is the correct record to adjust. Select one or more reasons for the adjustment. Enter in a comment. Click Move to **Have Adjustment**.

Current Payment Period Adjustment Needed Here ✕

Child Name: DEL Abby

- Incorrect Care Level
- Incorrect Provider Rate
- Incorrect Parent Copay
- Child Did Not Attend But Paid
- Child Not on Attendance Sheet
- Parent Copay Not Deducted
- Incorrect Schedule
- Incorrect Provider
- Absences Not Recorded
- Other

Comments:

Fake Child

← Cancel
Move to Have Adjustment >

The adjusted record now has a status of Adjust on the Reimbursement Record screen. When all the records have a status, the **Continue** button will display. Click **Continue**.

\$ Provider Rates
Refresh Calculations
← Move All to 'Have'

Showing 1 to 4 of 4 search results

Clear All Filters

Last Name	First Name	DOB	Billing Group	Eligibility Code	Care Level	Unit of Care	Days to be Paid	Total Payment Rate	Daily Parent CoPay Rate	Gross Payment Amount	Less Parent CoPay Amount	Net Payment Amount	Gold Seal Amount	QPI Amount	Child Assessment Amount	Local QI Amount	CS Amount	SPCR Amount	Status	Action
Filter	Filter		Filter	Filter	Filter	Filter													Filter	
DEL	Abby	6/8/2017	SRPLS	SRPL	SCH	FT	1	\$26.84	\$17.09	\$26.84	\$17.09	\$9.75	\$4.47	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	Adjust	Verify Back to 'Have'
DEL	Abby	6/8/2017	SRPLS	SRPL	SCH	FTFT	1	\$53.68	\$17.09	\$53.68	\$17.09	\$36.59	\$8.94	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	Verified	Adjust Back to 'Have'
DEL	Abby	6/8/2017	SRPLS	SRPL	SCH	FTPT	1	\$45.45	\$17.09	\$45.45	\$17.09	\$28.36	\$7.57	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	Verified	Adjust Back to 'Have'
		11/3/2016	SRPLS	SRPL	SCH	FT	3	\$26.84	\$23.13	\$80.52	\$69.39	\$11.13	\$11.13	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	Verified	Adjust Back to 'Have'
<b>Totals</b>										\$206.49	\$120.66	\$85.83	\$32.11	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		

Showing 1 to 4 of 4 search results

Continue >

After clicking **Continue**, a Reimbursement Processing pop-up will display a summary:

- Records for Adjustments
- Records for Reverting
- Total Verified Record for Final Reimbursement
- Children needing adjustment Review the Child(ren) needing adjustment listed for accuracy.

Enter a comment for the provider case note. Click **Complete Processing**.

### Reimbursement Processing ✕

Total Records for Adjustments  
**1**

Total Verified Records for Final Reimbursement **3**

Total Records for reverting **0**

Child(ren) needing adjustment: **Abby Del**

Comments (for Provider Case Notes) :

◀ Cancel

Complete Processing ▶

After clicking **Complete Processing**, the user returns to the Closed Attendance work queue.

Go to **Reimbursement > Adjustment Processing > Have Adjustment** to see records marked as needing an adjustment. To create a Current Period Adjustment, select a record from the Have Adjustment work queue. Click the **Create Adjustment** button.

☰ "Have Adjustment" Work Queue

📌 Click Here For Filtering Tips

Show top 10 adjustments results. Clear All Filters Search:

Child Name	Provider ID	Provider Name	County	Service Period	Report Period	Funder Type	VPK Class ID	Adjustment Type	Received
Abby Del				August 2024	August 2024	SRPlus		Payment Adjustment	8/19/2024

Showing 1 to 1 of 1 adjustments results. Previous 1 Next

Create Adjustment

After clicking **Create Adjustment**, the Process Reimbursement Adjustment for [ELC Name] pop-up displays. The required fields are marked with an asterisk (\*). On the *Adjustment Information* section, it is pre-populated with the most recent information on the record. The user will need to select the Reason from the dropdown menu and enter a comment. User will click **Submit** to confirm the adjustment. After the adjustment is submitted, it will no longer display in the "Have Adjustment" Work Queue.

Process Reimbursement Adjustment for

**Provider (Payee) Information**

Principal	FEID/SSN	County of Service	Provider Type
Provider	ProviderID	Vendor ID	

**Parent & Child Information**

Parent	Child	Child ID	County
Parent 1	Abby Del		
Child Date of Birth	Billing Group	Eligibility	Care Level
06/08/2017	SRPLS	SRPL - School Readiness Plus Direct Services	SCH - In School
Unit Of Care	Match Funder	Enrollment ID	
FT			

**Adjustment Information**

Service Period August 2024	Funder Type * <input type="radio"/> SR <input type="radio"/> Local <input checked="" type="radio"/> SRPlus	Unit Of Care * FT	Reason * -- Select Reason --
Billing Group * SRPLS	Eligibility * SRPL - School Readiness Plus Dire	Care Level * In School	Match Funder -- No Match Funders --

	Days to be Paid	Total Payment Rate	Daily Parent CoPay Rate	Gross Payment Amount	Less Parent CoPay Amount	Net Payment Amount	Match Amount	Net Less Match	Gold Seal Amount	QPI Amount	Child Assessment Amount	Local QI Amount	CS Amount	Special Needs Amount	OCA Amount
Balance	1	\$26.84	\$17.09	\$26.84	\$17.09	\$9.75	\$0.00	\$9.75	\$4.47	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$5.28
Payment	1	\$26.84	17.09	\$26.84	\$17.09	\$9.75	0.00	\$9.75	\$4.47	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$5.28

Comments \*

Submit
Cancel

The Adjustments Grid has a Balance row with the current balance for the record and an Adjusted row with any adjustments made during this edit. In the Adjustments Grid, only the Days to be Paid and Daily Parent CoPay Rate are editable. Any changes made that will impact rate (Unit of Care, Care Level, or Daily Parent CoPay Rate) will display in the Adjusted row.

The column headers in the grid for years 2019-2020 and forward are:

- Days to be Paid
- Total Payment Rate
- Daily Parent CoPay Rate
- Gross Payment Amount = [Days to be Paid \* Total Payment Rate]
- Less Parent CoPay Amount = [Days to be Paid \* Daily Parent CoPay Rate]
- Net Payment Amount = [Gross Payment Amount – Less Parent CoPay Amount]

- Gold Seal Amount = [Days to be Paid \* Gold Seal Amount (from SR Rate Plan)]
- QPI Amount = [Days to be Paid \* QPI Amount (from SR Rate Plan)]
- Child Assessment Amount = [Days to be Paid \* Child Assessment Amount (from SR Rate Plan)]
- Local QI Amount = [Days to be Paid \* Local QI Amount (from SR Rate Plan)]
- CS Amount = [Days to be Paid \* CS Amount (from SR Rate Plan)]
- Special Needs Amount = [Days to be Paid \* Special Needs Rate]

	Days to be Paid	Total Payment Rate	Daily Parent CoPay Rate	Gross Payment Amount	Less Parent CoPay Amount	Net Payment Amount	Match Amount	Net Less Match	Gold Seal Amount	QPI Amount	Child Assessment Amount	Local QI Amount	CS Amount	Special Needs Amount	OCA Amount
Balance	1	\$26.84	\$17.09	\$26.84	\$17.09	\$9.75	\$0.00	\$9.75	\$4.47	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$5.28
Payment	1	\$26.84	17.09	\$26.84	\$17.09	\$9.75	0.00	\$9.75	\$4.47	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$5.28

## Current Period Adjustments for VPK

The search results will display all the providers with a status of Closed Attendance. Click the **Review** link for the Service Period.

"Closed Attendance" Work Queue ← Return to Search

Click Here For Filtering Tips

County: All | Funder Type: VPK | Submit

Show 10 search results. Clear All Filters Search: \_\_\_\_\_

Action	Provider ID	Provider Name	County	Service Period	Funder Type	VPK Class ID	Status
<a href="#">Review</a>				January 2020	VPK	DF19	Closed Attendance

After clicking the **Review** link, the Reimbursement Record for the provider and service period displays. Confirm that all children on the roster have a status. Click **Adjust** for the selected record.

Reimbursement Record for [Provider Name] 4 Total Records

Funder Type: VPK | Attendance Status: Closed Attendance | Provider Name: [Redacted] | Provider Address: [Redacted] | Classroom: [Redacted]

Payment Period: Oct - 2019 | Service Period: 08/13/2018 to 08/31/2018 | Advance Payment: No | Has Closures: No

Provider ID: [Redacted] | Vendor Number: [Redacted] | Provider County: [Redacted] | Provider Phone: [Redacted]

Class Start Date: 08/13/2018 | Class End Date: 05/30/2019

	Child Name	DOB	Billing Group	Care Level	Days Absent	Days Present	Total Instructional Hours	Hours Absent	Hours Attended	Hours Paid	Rate	Amount	Status	Action
1.	[Redacted]	11/12/2013	VPK	PR4	0	15	45.00	0.00	45.00	45.00	\$4.38	\$197.10		Verify <a href="#">Adjust</a> <a href="#">Back to 'Have'</a>
2.	[Redacted]	9/24/2013	VPK	PR4	0	4	12.00	0.00	12.00	12.00	\$4.38	\$52.56		Verify <a href="#">Adjust</a> <a href="#">Back to 'Have'</a>
3.	[Redacted]	2/27/2014	VPK	PR4	0	15	45.00	0.00	45.00	45.00	\$4.38	\$197.10		Verify <a href="#">Adjust</a> <a href="#">Back to 'Have'</a>
4.	[Redacted]	4/23/2014	VPK	PR4	0	15	45.00	0.00	45.00	45.00	\$4.38	\$197.10		Verify <a href="#">Adjust</a> <a href="#">Back to 'Have'</a>
<b>Total</b>					0	49	147.00	0.00	147.00	147.00		\$643.86		

After clicking **Adjust** from the Reimbursement Record, the Current Payment Period Adjustment Needed pop-up displays. Review the Child Name, to ensure this is the correct record to adjust. Select one or more reasons for the adjustment. Enter a comment. Click **Move to Have Adjustment**.

**Current Payment Period Adjustment Needed** ✕

---

**Child Name:** [REDACTED]

- Incorrect Care Level
- Incorrect Provider Rate
- Incorrect Parent Copay
- Child Did Not Attend But Paid
- Child Not on Attendance Sheet
- Parent Copay Not Deducted
- Incorrect Schedule
- Incorrect Provider
- Absences Not Recorded
- Other

**Comments:(max 250 chars)**

Test

← Cancel
Move to Have Adjustment →

The adjusted record now has a status of **Adjust**, on the Reimbursement Record screen. When all the records have a status, the **Continue** button will display. Click **Continue**.

Reimbursement Record for 4 Total Records

Funder Type: VPK

Attendance Status: Closed Attendance

Provider Name: [REDACTED]

Provider Address: [REDACTED]

Classroom: [REDACTED]

Payment Period: Oct - 2019

Advance Payment: X No

Provider ID: [REDACTED]

Provider County: [REDACTED]

Class Start Date: 08/13/2018

Service Period: 08/13/2018 to 08/31/2018

Has Closures: X No

Vendor Number: [REDACTED]

Provider Phone: [REDACTED]

Class End Date: 05/30/2019

	Child Name	DOB	Billing Group	Care Level	Days Absent	Days Present	Total Instructional Hours	Hours Absent	Hours Attended	Hours Paid	Rate	Amount	Status	Action
1.	[REDACTED]	11/12/2013	VPK	PR4	0	15	45.00	0.00	45.00	45.00	\$4.38	\$197.10	X Adjust	Verify Back to 'Have'
2.	[REDACTED]	9/24/2013	VPK	PR4	0	4	12.00	0.00	12.00	12.00	\$4.38	\$52.56	✓ Verified	Adjust Back to 'Have'
3.	[REDACTED]	2/27/2014	VPK	PR4	0	15	45.00	0.00	45.00	45.00	\$4.38	\$197.10	✓ Verified	Adjust Back to 'Have'
4.	[REDACTED]	4/23/2014	VPK	PR4	0	15	45.00	0.00	45.00	45.00	\$4.38	\$197.10	X Adjust	Verify Back to 'Have'
<b>Total</b>					0	49	147.00	0.00	147.00	147.00		\$643.86		

Continue →

After clicking **Continue**, the Reimbursement Processing pop-up displays a summary:

- Records for Adjustments
- Records for Reverting
- Total Verified Record for Final Reimbursement
- Children needing adjustment

Review the Child(ren) needing adjustment listed for accuracy. Enter a comment for the provider case note. Click **Complete Reimbursement Processing**.

After clicking **Complete Reimbursement Processing**, the user returns to the Closed Attendance work queue.

After marking reimbursement records as “needing an adjustment”, they will display in the “Have Adjustment” Work Queue. To create a Current Period Adjustment, go to **Reimbursement > Adjustment Processing > Have Adjustment**. Select a record from the Have Adjustment Work Queue. Click **Create Adjustment**.

Child Name	Provider ID	Provider Name	County	Service Period	Report Period	Funder Type	VPK Class ID	Adjustment Type	Received
[Blurred]	[Blurred]	[Blurred]	[Blurred]	August 2018	October 2019	VPK	BF18	Payment Adjustment	10/14/2019
[Blurred]	[Blurred]	[Blurred]	[Blurred]	August 2018	October 2019	VPK	BF18	Payment Adjustment	10/14/2019
[Blurred]	[Blurred]	[Blurred]	[Blurred]	July 2018	October 2019	SR		Payment Adjustment	5/16/2019
[Blurred]	[Blurred]	[Blurred]	[Blurred]	July 2018	October 2019	SR		Payment Adjustment	5/16/2019
[Blurred]	[Blurred]	[Blurred]	[Blurred]	July 2018	October 2019	SR		Payment Adjustment	5/16/2019
[Blurred]	[Blurred]	[Blurred]	[Blurred]	July 2018	October 2019	SR		Payment Adjustment	5/16/2019
[Blurred]	[Blurred]	[Blurred]	[Blurred]	July 2019	October 2019	SR		Payment Adjustment	8/6/2019
[Blurred]	[Blurred]	[Blurred]	[Blurred]	July 2019	October 2019	SR		Payment Adjustment	8/6/2019
[Blurred]	[Blurred]	[Blurred]	[Blurred]	July 2019	October 2019	SR		Payment Adjustment	8/6/2019
[Blurred]	[Blurred]	[Blurred]	[Blurred]	July 2019	October 2019	SR		Payment Adjustment	8/6/2019

After clicking **Create Adjustment**, the Process Reimbursement Adjustment for [ELC Name] pop-up displays. The required fields are marked with an asterisk (\*). On the *Adjustment Information* section, it is pre-populated with the most recent information on the record. The user will need to select the Reason from the dropdown menu, and enter a comment. User will click **Submit** to confirm the adjustment. After the adjustment is submitted, it will no longer display in the “Have Adjustment” Work Queue.

**Provider (Payee) Information**

Principal: [Redacted] FEID/SSN: [Redacted] County of Service: [Redacted] Provider Type: CNTR  
 Provider: [Redacted] ProviderID: [Redacted] Vendor ID: [Redacted]

**Parent & Child Information**

Parent: [Redacted] Child: [Redacted] Child ID: [Redacted] County: [Redacted]  
 Child Date of Birth: 11/12/2013  
 Enrollment ID: [Redacted]

**Adjustment Information**

Service Period: August, 2018 Classroom: [Redacted] Classroom Name: Class B Reason\*: -- Select Reason --

	Days Absent	Days Present	Total Instructional Hours	Hours Attended	Paid Hours	Amount
Balance	0	15	45	45	45	\$197.10
Adjusted	<input type="text" value="0"/>	<input type="text" value="15"/>	<input type="text" value="45"/>	<input type="text" value="45"/>	<input type="text" value="45"/>	\$ <input type="text" value="197.10"/>

Comments\*:

You have characters remaining.

**Submit** **Cancel**

In the Adjustments Grid, the Balance row displays the summary of all adjustments for the record. The Adjusted row displays any adjustments made during this edit. In the Adjustments grid, the Days Absent, Days Present, Total Instructional Hours, Hours Attended fields are editable. The column headers in the grid are:

- Days Absent
- Days Present
- Total Instructional Hours
- Hours Attended
- Paid Hours = [(Hours Attended/.8) or Total Instructional Hours]
- Amount = [(Hours Attended/.8) or Total Instructional Hours] \* VPK Rate

	Days Absent	Days Present	Total Instructional Hours	Hours Attended	Paid Hours	Amount
Balance	0	15	45	45	45	\$197.10
Adjusted	<input type="text" value="0"/>	<input type="text" value="15"/>	<input type="text" value="45"/>	<input type="text" value="45"/>	<input type="text" value="45"/>	\$ <input type="text" value="197.10"/>

## Prior Period Adjustments (PPA)

Coalitions can create a Prior Period Adjustment (PPA) for any attendance records that have a PAID status. To create a PPA, go to **Reimbursement > Adjustment Processing > Create Prior Period Adjustment**.

### Create Prior Period Adjustment for SR/SRPlus/Local

On the *Create Period Adjustment for Reimbursement* screen, users will enter in criteria to search for paid records eligible for a PPA.

**Note-** SR Plus is a unique funder type. Prior period paid records for SR Plus will only display when SR Plus is selected as the Funder Type.

**\$ Create Period Adjustment For Reimbursement**

---

Find prior period paid records

**Funder Type**

SR ▼

**Service Period**

April 2019 ▼

**Provider ID**

8469

 Search

Only children that have a status of PAID will display in the search results. Click on a record then click **Create Adjustment**.

The columns can be filtered and sorted.

**NOTE:** Prior period adjustments cannot be created for wrap (PTV, FTV) reimbursement records.

Select Reimbursement Record for Adjustment ✕

---

**BEGINNING OUR FUTURE LEARNING AND OUTREACH CENTER**

Provider ID:  Service Period: 2019 Oct Funding: SR

---

Show top  reimbursement results. Search:

Reimbursement ID	Child	Care Level	Unit Care	VPK Class ID	Enrollment ID	Total Days Paid	Billing Group	Eligibility Code	Match Funder	Match Amount
Filter	Filter	Filter	Filter	Filter	Filter	Filter	Filter	Filter	Filter	Filter
6531038		2YR	FT		1140103	10	BG8	ECON	33	\$12.31
6531037		SCH	PT		1117170	4	BG8	ECON	33	\$2.87
6531036		SCH	PT		1117167	4	BG8	ECON	33	\$2.56
6531035		TOD	FT		1111071	19	BG1	14R		
6531034		PR3	FT		1110962	23	BG1	13		
6531033		PR3	FT		1110359	13	BG1	14R		
6531032		PR3	FT		1087377	23	BG8	ECON	33	\$22.63
6531031		TOD	FT		1079014	23	BG8	ECON	33	\$20.59
6531030		PR5	FTV	30651	1074890	17	BG8	ECON	33	\$10.84
6531029		PR5	FT		1074890	6	BG8	ECON	33	\$6.55

Showing 1 to 10 of 74 reimbursement records. 1 row selected

After clicking **Create Adjustment**, the Process Reimbursement Adjustment for [ELC Name] pop-up displays. Required fields are marked with an asterisk \*. On the *Adjustment Information* section, it is pre-populated with the most recent information on the record. The user will need to select the Reason from the dropdown menu, make the adjustment changes, and enter a comment. User will click **Submit** to confirm the adjustment.

If only the Adjustment Reason and Comment are entered, a PPA will not be saved because no changes were made.

Process Reimbursement Adjustment for

**Provider (Payee) Information**

Principal	FEID/SSN	County of Service	Provider Type
<input type="text"/>	<input type="text"/>	Broward	CNTR
Provider	ProviderID	Vendor ID	
<input type="text"/>	<input type="text"/>	<input type="text"/>	

**Parent & Child Information**

Parent	Child	Child ID	County
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Child Date of Birth	Billing Group	Eligibility	Care Level
<input type="text"/>	BGS	ECON - Economically Disadvantage	PRS - 60 < 72 Months
Unit Of Care	Match Funder	Enrollment ID	
FTV	BGS MATCH	<input type="text"/>	

**Adjustment Information**

Service Period	Funder Type *	Unit Of Care *	Reason *
April 2023	<input checked="" type="radio"/> SR <input type="radio"/> Local	<input type="text"/>	<input type="text" value="-- Select Reason --"/>
Billing Group *	Eligibility *	Care Level *	Match Funder
<input type="text" value="BGS"/>	<input type="text" value="ECON - Economically Disadvantage"/>	<input type="text" value="60 &lt; 72 Months"/>	<input type="text" value="BGS MATCH"/>

	Days to be Paid	Total Payment Rate	Daily Parent CoPay Rate	Gross Payment Amount	Less Parent CoPay Amount	Net Payment Amount	Match Amount	Net Less Match	Gold Seal Amount	QPI Amount	Child Assessment Amount	Local QI Amount	CS Amount	Special Needs Amount	OCA Amount
Balance	4	\$25.87	\$1.56	\$103.48	\$6.24	\$97.24	\$0.00	\$97.24	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$97.24
Payment	4	\$25.87	<input type="text" value="1.56"/>	\$103.48	\$6.24	\$97.24	<input type="text" value="0.00"/>	\$97.24	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$97.24

In the Adjustments Grid, the Balance row displays the summary of all adjustments/changes for the record. The Payment row displays any adjustments made during this edit. In the Adjustments grid, only the Days to be Paid, Daily Parent CoPay Rate, and Match Amount (for BG8 and CCEP only) are editable. For any changes made, the difference will show on the Net Payment row.

Any changes that will change the Total Payment Rate or OCA Code will create two rows:

- PPA (Prior Period Adjustment) – the newly adjusted amount.
- PPR (Prior Period Reversal) – the reversed amounts.

Click **View History** to see the full history of adjustments for the record.

	Days to be Paid	Total Payment Rate	Daily Parent CoPay Rate	Gross Payment Amount	Less Parent CoPay Amount	Net Payment Amount	Match Amount	Net Less Match	Gold Seal Amount	QPI Amount	Child Assessment Amount	Local QI Amount	CS Amount	Special Needs Amount	OCA Amount	
Balance	2	\$58.08	\$0.00	\$116.16	\$0.00	\$116.16	\$0.00	\$116.16	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$19.36	\$96.80	<a href="#">View History</a>
Payment	2	\$58.08	0.00	\$116.16	\$0.00	\$116.16	0.00	\$116.16	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$19.36	\$96.80	
Adjustment																

The column headers in the grid for years 2018-2019 and prior are:

- Days to be Paid
- Total Payment Rate
- Daily Parent CoPay Rate
- Gross Payment Amount = [Days to be Paid \* Total Payment Rate]
- Less Parent CoPay Amount = [Days to be Paid \* Daily Parent CoPay Rate]
- Net Payment Amount = [Gross Payment Amount – Less Parent CoPay Amount]
- Match Amount (only editable if the Billing Group is BG8 or CCEP)
- Net Less Match = [Net Payment Amount – Match Amount]
- Gold Seal Amount = [Days to be Paid \* Gold Seal Amount (from SR Rate Plan)]
- PFP Amount = [Days to be Paid \* PFP Amount (from SR Rate Plan)]
- PFP CA Amount = [Days to be Paid \* PFP CA Amount (from SR Rate Plan)]
- Local QI Amount = [Days to be Paid \* Local QI Amount (from SR Rate Plan)]
- CS Amount = [Days to be Paid \* CS Amount (from SR Rate Plan)]
- OCA Amount
  - CCEP Billing Group = [Net Less Match – (PFP Amount + PFP CA Amount + Local QI Amount + CS Amount)]
  - All other Billing Groups = [Net Less Match – (Gold Seal + PFP Amount + PFP CA Amount + Local QI Amount + CS Amount)]

The column headers in the grid for years 2019-2020 and forward are:

- Days to be Paid
- Total Payment Rate
- Daily Parent CoPay Rate
- Gross Payment Amount = [Days to be Paid \* Total Payment Rate]
- Less Parent CoPay Amount = [Days to be Paid \* Daily Parent CoPay Rate]
- Net Payment Amount = [Gross Payment Amount – Less Parent CoPay Amount]
- Match Amount (only editable if the Billing Group is BG8 or CCEP)
- Net Less Match = [Net Payment Amount – Match Amount]

- Gold Seal Amount = [Days to be Paid \* Gold Seal Amount (from SR Rate Plan)]
- QPI Amount = [Days to be Paid \* QPI Amount (from SR Rate Plan)]
- Child Assessment Amount = [Days to be Paid \* Child Assessment Amount (from SR Rate Plan)]
- Local QI Amount = [Days to be Paid \* Local QI Amount (from SR Rate Plan)]
- CS Amount = [Days to be Paid \* CS Amount (from SR Rate Plan)]
- Special Needs Amount = [Days to be Paid \* Special Needs Rate]
- OCA Amount
  - CCEP Billing Group = [Net Less Match – (QPI Amount + Child Assessment Amount + Local QI Amount + CS Amount + Special Needs Amount)]
  - All other Billing Groups = [Net Less Match – (Gold Seal + QPI Amount + Child Assessment Amount + Local QI Amount + CS Amount + Special Needs Amount)]

After clicking **View History**, in the below example, the Adjustments History grid shows that this record has had one adjustment saved. The PPA will display. If there was a change in OCA Code or Daily Payment Rate, the PPR row will show. The amounts deducted display in red text. The Adjustments History is sorted by Reimbursement Detail ID (oldest to newest). The Total row displays the calculated amounts based on all adjustments. The Total row information is also what displays in the Balance row on the Adjustments grid.

Adjustments History																						
	Days to be Paid	Total Payment Rate	Daily Parent CoPay Rate	Gross Payment Amount	Less Parent CoPay Amount	Net Payment Amount	Match Amount	Net Less Match	Gold Seal Amount	QPI Amount	Child Assessment Amount	Local QI Amount	CS Amount	Special Needs Amount	OCA Amount	Status	Type	Billing Group Code	Eligibility Code	Care Level Type Code	Unit Of Care	Match Funder ID
	2	\$58.08	\$0.00	\$116.16	\$0.00	\$116.16	\$0.00	\$116.16	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$19.36	\$96.80	PAID	MTH	BG1	13	SCH	FT	
	-1	\$58.08	\$0.00	-\$58.08	\$0.00	-\$58.08	\$0.00	-\$58.08	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	-\$9.68	-\$58.08	PENDING	PPA	BG1	13	SCH	FT	
Final	1	\$58.08	\$0.00	\$58.08	\$0.00	\$58.08	\$0.00	\$58.08	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$9.68	\$38.72							

Ok

After clicking **Create Adjustment**, in the above example, the confirmation modal displays. After the adjustment is saved, it is saved in a PENDING status and is available in the Pending Adjustment Work Queue.

## Create Prior Period Adjustment for VPK

After clicking the **Create Adjustment** button, the Process Reimbursement Adjustment for [ELC Name] pop-up displays. Required fields are marked with an asterisk \*. On the *Adjustment Information* section, it is pre-populated with the most recent information on the record. The user will need to select the Reason from the dropdown menu, and enter a comment. User will click the **Submit** button to confirm the adjustment.

Process Reimbursement Adjustment for ELC of the Big Bend Region

**Provider (Payee) Information**

Principal: Hughes Academy of Stars V      FEID/SSN: 8547777      County of Service: Leon      Provider Type: PUBS  
 Provider: Hughes Academy of Stars V      ProviderID: 8453      Vendor ID: 2-8453

**Parent & Child Information**

Parent: Andrea Latham      Child: Orion Latham      Child ID: 2071      County: Leon  
 Child Date of Birth: 06/09/2013  
 Enrollment ID: 2514

**Adjustment Information**

Service Period: July, 2019      Classroom: DF18      Classroom Name:      Reason\*  
 Omit from Transmittal File?:  Yes  No      -- Select Reason --

	Days Absent	Days Present	Total Instructional Hours	Hours Attended	Paid Hours	Amount	
Balance	0	13	60	60	60	264	<a href="#">View History</a>
Adjusted	<input type="text" value="0"/>	<input type="text" value="13"/>	<input type="text" value="60"/>	<input type="text" value="60"/>	<input type="text" value="60"/>	\$ <input type="text" value="264"/>	
Net Adjusted						\$0.00	

**Comments\***

You have characters remaining.

In the Adjustments Grid, the Balance row displays the summary of all adjustments for the record. The Adjusted row displays any adjustments made during this edit. In the Adjustments grid, the Days Absent, Days Present, Total Instructional Hours, Hours Attended fields are editable. Click **View History** to see the full history of adjustments for the record.

The column headers in the grid are:

- Days Absent
- Days Present
- Total Instructional Hours
- Hours Attended
- Paid Hours = [(Hours Attended/.8) or Total Instructional Hours]
- Amount = [(Hours Attended/.8) or Total Instructional Hours] \* VPK Rate

	Days Absent	Days Present	Total Instructional Hours	Hours Attended	Paid Hours	Amount	
Balance	0	13	60	60	60	264	<a href="#">View History</a>
Adjusted	<input type="text" value="0"/>	<input type="text" value="13"/>	<input type="text" value="60"/>	<input type="text" value="60"/>	<input type="text" value="60"/>	\$ <input type="text" value="264"/>	
Net Adjusted						\$0.00	

After clicking **View History**, in the below example, the Adjustments History grid shows that this record has had multiple adjustments saved. The Adjustments History is sorted by Reimbursement Detail ID (oldest to newest). The Total row displays the calculated amounts based on all adjustments. The Total row information is also what displays in the Balance row on the Adjustments grid.

The column headers in the Adjustments History grid are:

- Days Absent
- Days Present
- Total Instructional Hours
- Hours Attended
- Paid Hours = [(Hours Attended/.8) or Total Instructional Hours]
- Amount = [(Hours Attended/.8) or Total Instructional Hours] \* VPK Rate

**Adjustments History**

Days Absent	Days Present	Total Instructional Hours	Hours Attended	Paid Hours	Amount	Status
0	23	69	69	69	\$303.60	PAID
3	-3	0	-9	0	\$0.00	PAID
2	-5	-4	-6	-4	-\$17.60	PAID
-2	-5	-7	4	-7	-\$30.80	PAID
-3	3	2	2	2	\$8.80	PAID

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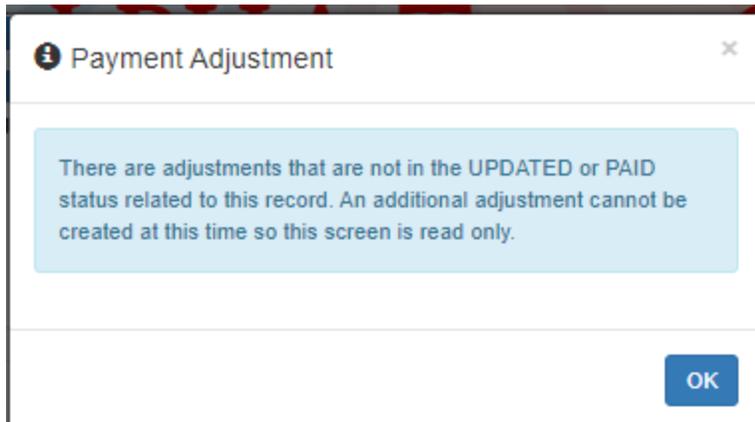
Service Period: July, 2019
Classroom: DF18
Classroom Name:
Reason: -- Select Reason --

Omit from Transmittal File?:  Yes  No

	Days Absent	Days Present	Total Instructional Hours	Hours Attended	Paid Hours	Amount	
Balance	0	13	60	60	60	264	<input type="button" value="View History"/>
Adjusted	<input type="text" value="0"/>	<input type="text" value="13"/>	<input type="text" value="55"/>	<input type="text" value="59"/>	<input type="text" value="55"/>	\$ 242.00	
Net Adjusted						-\$22.00	

## Pending Adjustments

If there are Adjustments pending approval and not in PAID status, then an additional adjustment cannot be created for the record. If a record with a Pending Adjustment is selected, then a pop-up opens notifying the user that there is a Pending Adjustment. A record is related by the Reimbursement Detail ID. For example: if the January attendance for a child is PAID, then a Prior Period Adjustment is created and saved; another Prior Period Adjustment for this record cannot be created until the first PPA is in PAID status.



## Pending Adjustment Work Queue

Any adjustments that are created will be in the Pending Adjustment Work Queue: **Reimbursement > Adjustment Processing > Adjustments Pending Approval**. The Pending Adjustment Work Queue allows the Coalition to review and approve any adjustments.

The different type of adjustments (MTH, PPA, LIA) all show in the Pending Adjustment Work Queue after they are created. The PPRs will not show on the Pending Adjustment Work Queue. The columns can be sorted and filtered using the column headers.

Click the **Approve** button to change the status from Pending to Payment Verified.

- After the adjustment is approved it will show in the Payment Verified Work Queue.

Click the **Void** button to delete the adjustment.

Click the **View Adjustment** button to see the details of the adjustment.

Child Name	Provider ID	Provider Name	Service Period	Funder Type	VPK Class ID	Adjustment Type	Adjusted Billing Group	Adjusted Unit of Care	Adjusted Days Paid	Adjusted Net Payment Amount	Action
Lyda Sherry	4338	FIRST UNITED METHODIST PRESCHOOL	Feb 2020	SR		PPA	BG1	FT	2	54.08	Approve Void View Adjustment

## Pending Adjustments – 5045 Review

Before approving the pending adjustments, the 5045 can be reviewed to confirm the changes.

Open Tableau: <https://oel-reports.floridaeearlylearning.com/#/home> and search for the Financial Report Generator.

ELC of Alachua  
4424 NW 13th Street Suite A-5  
Gainesville, FL 32609

Coalition Name	Run In Environment
ELC of Alachua	PROD
Funder	Report Type
SR	PENDING
Payment Period	Provider ID (For Provider Reimb. Rpt)
09/2020	0

Coalition Invoice →

Coalition Invoice ADV →

Run 5045 Report →

1. Select your Coalition
  - a. Select Funder
2. Set the Report Type to Pending to view the Pending Adjustments
3. Click the Run 5045 Report

View the Detail report to see adjustments and confirm the changes are as expected.

- The new detail type of PPR (Prior Period Reversal) will display if applicable with a related PPA.
- If the results are correct, then approve the adjustment in the Pending Adjustment Work Queue.
- If the adjustment is incorrect, then the adjustment can be voided and recreated correctly.

The approved adjustments will now display on the Payment Verified Work Queue. This can include attendance that is approved.

## Payment Verified Work Queue

The Payment Verified Work Queue shows all records with a status of Payment Verified: **Reimbursement > Attendance Processing > View Payment Verified.**

The Payment Verified Work Queue shows the following record types:

- MTH (approved from Closed Attendance)
- PPA
- LIA
- EOC/EOCR – VPK End of Class Records
- CAA/CAR – Child Assessment

Select All	Child Name	Provider ID	Provider Name	Service Period	Care Level	Unit of Care	Billing Group	Match Funder ID	Match Funder Amount	VPK Class ID	Enrollment ID	Is Adjustment	Record Type	Reimbursement ID	Days Paid	Net Payment Amount
<input type="checkbox"/>	[Redacted]	[Redacted]	[Redacted]	Jul 2018	SCH	PT	BG1	-			300440	No	MTH	10277920	0	0.00
<input type="checkbox"/>	[Redacted]	[Redacted]	[Redacted]	Jul 2018	SCH	PT	BG8	[Redacted]			300130	No	MTH	10277921	0	0.00
<input type="checkbox"/>	[Redacted]	[Redacted]	[Redacted]	Jul 2018	SCH	PT	BG1	-			300430	No	MTH	10277919	0	0.00

Records will only display in the Payment Verified Work Queue during the open payment period. The records can be Updated or when the payment period is closed.

**Note-** SR Plus is a unique funder type. SR Plus records with a status of Payment Verified will only display when SR Plus is selected as the Funder Type.

After selecting one or more records to remove from the Payment Verified work queue, clicking the **Run** button opens the confirmation pop-up window. The confirmation pop-up shows the number of records that are impacted and the action that will be taken:

- PPA records will be deleted
- LIA records will be deleted
- MTH records will be moved to closed attendance

### Confirm Processing Actions

Total PPA Records to be DELETED: 0

Total MTH Records to be moved to Closed Attendance: 1

Total LIA Records to be DELETED: 0

Are you sure you want to continue?

Yes

Cancel

## 5045 Review

The 5045 can be reviewed to confirm the changes.

Open Tableau: <https://oel-reports.floridaearlylearning.com/#/home> and search for the Financial Report Generator.

1. Select your Coalition
  - a. Select Funder
2. Set the Report Type to Trial to view the records in Payment Verified status
3. Click the Run 5045 Report

Review the Detail report to see records.

**ELC of Alachua**  
4424 NW 13th Street Suite A-5  
Gainesville, FL 32609

<b>Coalition Name</b>	<b>Run In Environment</b>
ELC of Alachua <b>1</b>	PROD
<b>Funder</b>	<b>Report Type</b>
SR	TRIAL <b>2</b>
<b>Payment Period</b>	<b>Provider ID (For Provider Reimb. Rpt)</b>
09/2020	0

Coalition Invoice	➔
Coalition Invoice ADV	➔
Run 5045 Report <b>3</b>	➔

The screen will be read-only until the Adjustment is in the Updated or Paid status.

The PPA screen will display as read-only, and the **Submit** button is deactivated if there is a Pending Adjustment.

Process Reimbursement Adjustment for

**Adjustment Information**

**Service Period**  
August 2024

**Funder Type** \*

 SR  Local  SRPlus

**Unit Of Care** \*

**Reason** \*

**Billing Group** \*

**Eligibility** \*

**Care Level** \*

**Match Funder**

	Days to be Paid	Total Payment Rate	Daily Parent CoPay Rate	Gross Payment Amount	Less Parent CoPay Amount	Net Payment Amount	Match Amount	Net Less Match	Gold Seal Amount	QPI Amount	Child Assessment Amount	Local QI Amount	CS Amount	Special Needs Amount	OCA Amount	
Balance	1	\$58.08	\$0.00	\$58.08	\$0.00	\$58.08	\$0.00	\$58.08	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$9.68	\$38.72	<a href="#">View History</a>
Payment	1	\$58.08	0.00	\$58.08	\$0.00	\$58.08	0.00	\$58.08	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$9.68	\$38.72	
Adjustment																

**Comments** \*

## Line Item Adjustments (LIA)

Coalitions can create Line Item Adjustments (LIA) for a reimbursement record. The LIA can add or create a new record, which may or may not be EFS Mod-generated records. Adjustments can add a new entry or reverse out an entry.

### SR, Local, or SR Plus Line Item Adjustments

To create a Line Item Adjustment, navigate to **Reimbursement > Adjustment Processing > Create Line Item Adjustment > SR/Local/SR Plus**. Any saved line item adjustments will be processed in the currently open payment period.

Required fields are marked with an asterisk \*. A record does not have to be in EFS Mod to create a line item adjustment. Clicking the **Submit** button opens the SR Line Item Adjustment modal.

SR or Local Line Item Adjustment

ELC Of The Big Bend Region

Search For Adjustments

- Enter an existing Reimbursement ID to retrieve information from an existing reimbursement
- Enter an existing Enrollment ID to retrieve information from an existing enrollment
- If Reimbursement ID or Enrollment ID are not known, enter in the Line Item Adjustment Information

Reimbursement Detail ID      Enrollment ID

Search      Search

Service Period Month\*      Service Period Year\*      Adjustment Reason\*

Provider (Payee) Information

### Search

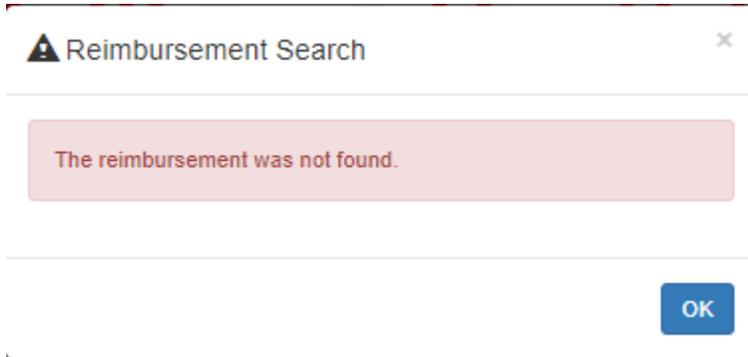
Before creating a Line Item Adjustment, search using the Reimbursement Detail ID or the Enrollment ID. Reimbursement Detail ID is available on the 5045 detail download.

Enter the Reimbursement Detail ID and click on the search icon  to populate the record with the available information:

- Service Period Month
- Service Period Year
- Provider ID
- Name of Provider
- Principal ID
- Name of Principal
- Vendor ID
- Provider Type
- Provider County
- Child ID
- Name of Child
- Name of Parent
- County of Parent
- Enrollment ID (dropdown selection of available enrollment dates)
- Purpose of Care
- Funding Type
- Unit of Care

- Billing Group
- Eligibility
- Care Level
- Days to be Paid
- Total Payment Rate
- Match Amount

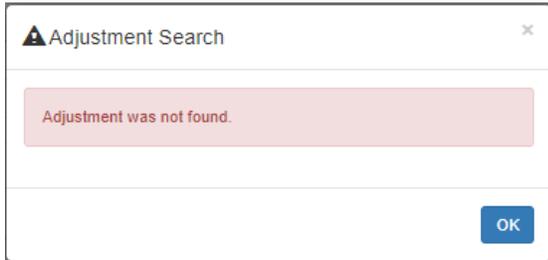
**NOTE:** If Reimbursement ID is used to search, and there is a Pending Adjustment, then a pop-up will display. Click the OK button and search again. A Line Item Adjustment cannot be created with through the Reimbursement ID search until the Pending Adjustment for the Reimbursement ID is in PAID status.



The Enrollment ID can be found on the Eligibility screen. Enter the Enrollment ID and click on the search icon  to populate the record with the available information:

- Service Period Month
- Service Period Year
- Provider ID
- Name of Provider
- Principal ID
- Name of Principal
- Vendor ID
- Provider Type
- Provider County
- Child ID
- Name of Child
- Name of Parent
- County of Parent
- Enrollment ID
- Purpose of Care

If a search result is not found, then the Adjustment Search pop up message opens. Clicking **OK** will close the Adjustment Search message.

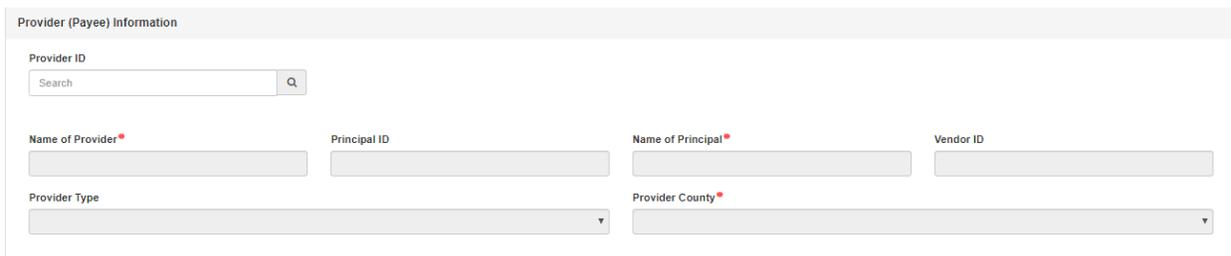


If the Reimbursement Detail ID or Enrollment ID are not known, then enter the Service Period Month and Service Period Year. The Service Period Year must be between 1990 and the current year. Select the Adjustment Reason from the dropdown menu. Select Restitution if the LIA will have a Service Period prior to 7/1/2018.

#### *Provider (Payee) Information*

##### *Service Period After 7/1/2018*

Required fields are marked with an asterisk \*. If the Service Period is 7/1/2018 or after, then the Provider ID search will be available, see the screen below. If the Service Period is prior to 7/1/2018, then the Provider ID will not be required. If the Reimbursement Detail ID or Enrollment ID are entered in the search at the top of the screen, then Provider Information will pre-populate.



##### *Service Period Prior to 7/1/2018*

Required fields are marked with an asterisk \*. If the Service Period is prior to 7/1/2018, then the Provider ID search will not be available, see the screen below. If the Service Period is prior to 7/1/2018 and the Adjustment Reason is Restitution, then the Provider ID will not be required.

- The Name of Provider is a text field. If a Provider ID is entered, it must match a current Provider ID in EFS Mod. If the Provider ID does not match a current Provider ID in EFS Mod, then the LIA will not save.
- The Name of Principal is a text field. If a Principal ID is entered, it must match a current Principal ID in EFS Mod. If the Principal ID does not match a current Principal ID in EFS Mod, then the LIA will not save.
- The Vendor ID is an alphanumeric field. The Vendor ID is the Taxpayer ID Number, which can be found on the Provider's Business Info screen.
- The Provider Type dropdown field displays the available Provider Types.
- The Provider County dropdown displays all Florida counties.

**Provider (Payee) Information**

Provider ID

Name of Provider\*  Principal ID  Name of Principal\*  Vendor ID

Provider Type  Provider County\*

*Parent & Child Information*

Service Period After 7/1/2018

Required fields are marked with an asterisk \*. If the Service Period is 7/1/2018 or after, then the Child ID search will be available, see the screen below. If the Service Period is prior to 7/1/2018, then the Child ID will not be required. If the Reimbursement Detail ID or Enrollment ID are entered in the search at the top of the screen, then Parent & Child Information will pre-populate. The Enrollment ID will be a dropdown menu and display any enrollment dates the child was enrolled.

**Parent & Child Information**

Child ID

Name of Child\*  Name of Parent\*  County of Parent\*  Enrollment ID

Purpose Of Care\*

Service Period Prior to 7/1/2018

Required fields are marked with an asterisk \*. If the Service Period is prior to 7/1/2018, then the Child ID search will not be available, see the screen below. If the Service Period is prior to 7/1/2018 and the Adjustment Reason is Restitution, then the Child ID will not be required.

- The Name of Child is a text field.
- The Name of Parent is a text field.
- The County of Parent dropdown displays all Florida counties.
- If an Enrollment ID is entered, it must match a current Enrollment ID in EFS Mod. If the Enrollment ID does not match a current Enrollment ID in EFS Mod, then the LIA will not save.
- The Purpose of Care dropdown field displays the available Purposes of Care.

**Parent & Child Information**

Child ID

Name of Child\*  Name of Parent\*  County of Parent\*  Enrollment ID

Purpose Of Care\*

*Adjustment Information*

Service Period After 7/1/2018

Required fields are marked with an asterisk \*. If the Reimbursement Detail ID or Enrollment ID are entered in the search at the top of the screen, then Adjustment Information will pre-populate.

- The Funding Type dropdown field displays the available Funding Types (SR or Local).
- The Service Period Month dropdown field displays the available Months.
- The Service Period Year is a numeric field. Users can save entries between 1990 and the current year.
- The Unit of Care dropdown field displays the available Units of Care.
- The Billing Group dropdown field displays the available Billing Groups.
- The Eligibility dropdown field displays the available Eligibility.
- The Care Level dropdown field displays the available Care Levels.
- The Match Funder dropdown field displays available Match Funders.
- The Days to be Paid can be a positive or negative number. The Days to be Paid cannot be 0.
- The Total Payment Rate is the daily payment rate. The Total Payment Rate must be between \$0.00 and \$100.00.
- The Daily Parent CoPay Rate must be greater than or equal to \$0.00.
- The Gross Payment Amount is a calculated field. [Total Payment Rate \* Days to be Paid]
- The Less Parent CoPay Amount is a calculated field. [Daily Parent CoPay Rate \* Days to be Paid]
- The Net Payment Amount is a calculated field. [Gross Payment Amount – Less Parent CoPay Amount]
- The Match Amount is the amount paid by a Match.
- The Net Less Match is a calculated field. [Net Payment Amount – Match Amount]
- OCA Amount is a calculated field.
  - CCEP Billing Group = [Net Less Match – (QPI Amount + Child Assessment Amount + Local QI Amount + CS Amount)]
  - All other Billing Groups = [Net Less Match – (Gold Seal + QPI Amount + Child Assessment Amount + Local QI Amount + CS Amount)]

The differentials grid will allow the entry of any adjustments for the following:

- a. 2018-2019 and Prior Years
  - i. Gold Seal Amount
  - ii. PFP Amount
  - iii. PFP CA Amount
  - iv. QI Amount
  - v. CS Amount
- b. 2019-2020 and Future Years
  - i. Gold Seal Amount
  - ii. QPI Amount
  - iii. Child Assessment Amount
  - iv. Local QI Amount
  - v. CS Amount
  - vi. Special Needs Amount

For 2019-2020 and future years, the differentials have under and over fields.

The Comments field is a text field.

Process Reimbursement Adjustment for ELC of Broward

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**Parent & Child Information**

Parent Parent 1	Child Abby Del	Child ID [REDACTED]	County [REDACTED]
Child Date of Birth 06/09/2017	Billing Group SRPLS	Eligibility SRPL - School Readiness Plus Direct Services	Care Level [REDACTED]
Unit Of Care FT	Match Funder [REDACTED]	Enrollment ID [REDACTED]	

---

**Adjustment Information**

Service Period: August 2024  
 Billing Group: SRPLS  
 Funder Type:  SR  Local  SRPlus  
 Eligibility: SRPL - School Readiness Plus Direct Services  
 Unit Of Care: FT  
 Care Level: In School  
 Reason: -- Select Reason --  
 Match Funder: -- No Match Funders --

	Days to be Paid	Total Payment Rate	Daily Parent CoPay Rate	Gross Payment Amount	Less Parent CoPay Amount	Net Payment Amount	Match Amount	Net Less Match	Gold Seal Amount	QPI Amount	Child Assessment Amount	Local QI Amount	CS Amount	Special Needs Amount	OCA Amount
Balance	1	\$26.04	\$17.09	\$26.04	\$17.09	\$9.75	\$0.00	\$9.75	\$4.47	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$5.28
Payment	1	\$26.04	\$17.09	\$26.04	\$17.09	\$9.75	\$0.00	\$9.75	\$4.47	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$5.28

Comments: [REDACTED]

Service Period prior to 7/1/2018

Required fields are marked with an asterisk \*.

- The Omit from Transmittal File will default to Yes for legacy LIA records.
- The Funding Type dropdown field displays the available Funding Types (SR or Local).
- The Service Period Month dropdown field displays the available Months.
- The Service Period Year is a numeric field. Users can save entries between 1990 and the current year.
- The Unit of Care dropdown field displays the available Units of Care.
- The Billing Group dropdown field displays the available Billing Groups.
- The Eligibility dropdown field displays the available Eligibility.
- The Care Level dropdown field displays the available Care Levels.
- The Match Funder dropdown field displays available Match Funders.
- The Days to be Paid can be a positive or negative number. The Days to be Paid cannot be 0.
- The Total Payment Rate is the daily payment rate. The Total Payment Rate must be between \$0.00 and \$100.00.
- The Daily Parent CoPay Rate must be greater than or equal to \$0.00.
- The Gross Payment Amount is a calculated field. [Total Payment Rate \* Days to be Paid]
- The Less Parent CoPay Amount is a calculated field. [Daily Parent CoPay Rate \* Days to be Paid]
- The Net Payment Amount is a calculated field. [Gross Payment Amount – Less Parent CoPay Amount]
- The Match Amount is the amount paid by a Match.
  - The Match Amount is only editable if the Billing Group is BG8 or CCEP
- The Net Less Match is a calculated field. [Net Payment Amount – Match Amount]
- OCA Amount is a calculated field.
  - CCEP Billing Group = [Net Less Match – (QPI Amount + Child Assessment Amount + Local QI Amount + CS Amount)]
  - All other Billing Groups = [Net Less Match – (Gold Seal + QPI Amount + Child Assessment Amount + Local QI Amount + CS Amount)]

The differentials grid will allow the entry of any adjustments for

- a. 2018-2019 and Prior Years
  - i. Gold Seal Amount
    1. Direct (Under)
  - ii. PFP Amount

- 1. Direct (Under)
    - 2. Quality (Over)
  - iii. Child Assessment Amount
    - 1. Direct (Under)
    - 2. Quality (Over)
  - iv. Local QI Amount
    - 1. Quality (Over)
  - v. Contracted Slots Amount
    - 1. Direct (Under)
    - 2. Quality (Over)
- b. 2019-2020 and Future Years
  - i. Gold Seal Amount
    - 1. Direct (Under)
    - 2. Quality (Over)
  - ii. QPI Amount
    - 1. Direct (Under)
    - 2. Quality (Over)
  - iii. Child Assessment Amount
    - 1. Direct (Under)
    - 2. Quality (Over)
  - iv. Local QI Amount
    - 1. Direct (Under)
    - 2. Quality (Over)
  - v. Contracted Slots Amount
    - 1. Direct (Under)
    - 2. Quality (Over)
  - vi. Special Needs Amount

For 2019-2020 and future years, the differentials have under and over fields.

The Comments field is a text field.

**Adjustment Information**

Omit from Transmittal File?  Yes  No

Funding Type\*  Unit Of Care\*  Billing Group\*

Eligibility\*  Care Level\*  Match Funder  Reimbursement ID

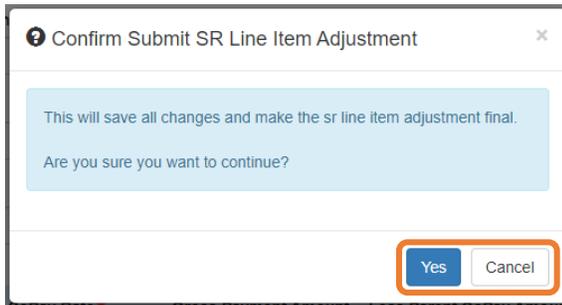
Days to be Paid*	Total Payment Rate*	Daily Parent CoPay Rate*	Gross Payment Amount	Less Parent CoPay Amount	Net Payment Amount	Match Amount*	Net Less Amount	OCA Payment Amount
<input type="text" value="19"/>	\$ <input type="text" value="45.60"/>	\$ <input type="text" value="0.00"/>	\$866.40	\$0.00	\$866.40	\$ <input type="text" value="0.00"/>	\$866.40	\$722.00

Enter how much of the total payment amount is associated to each of the differentials below

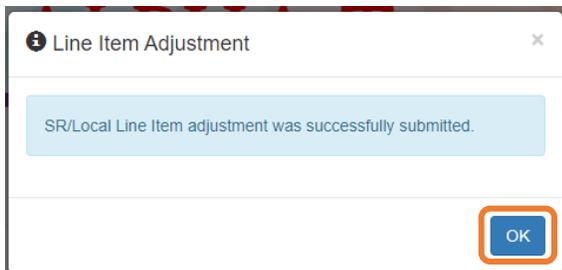
	Gold Seal Amount*	QPI Amount*	Child Assessment Amount*	Local QI Amount*	Contracted Slots Amount*	Special Needs Amount*
Direct	\$ <input type="text" value="0.00"/>					
Quality	\$ <input type="text" value="0.00"/>	\$ <input type="text" value="144.40"/>				
<b>Total</b>	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$144.40

### Confirmation Modal

Clicking the **Yes** button will save the adjustment and open the Line Item Adjustment modal. Clicking the **Cancel** button will discard any changes and close the modal.



Clicking the **OK** button will close the Line Item Adjustment modal.



## VPK Line Item Adjustments

To create a Line Item Adjustment, navigate to **Reimbursement > Adjustment Processing > Create Line Item Adjustment > VPK**

Any saved line item adjustments will be processed in the currently open payment period. Required fields are marked with an asterisk \*. A record does not have to be in EFS Mod to create a line item adjustment. Clicking **Submit** opens the Confirm Submit VPK Line Item Adjustment modal.

The screenshot shows the 'VPK Line Item Adjustment' form. At the top, there is a header 'ELC Of The Big Bend Region'. Below it is a section titled 'Search For Adjustments' with instructions: 'Enter an existing Reimbursement ID to retrieve information from an existing reimbursement.', 'Enter an existing Enrollment ID to retrieve information from an existing enrollment.', and 'If Reimbursement ID or Enrollment ID are not known, enter in the Line Item Adjustment information.' There are two search boxes: 'Reimbursement Detail ID' and 'Enrollment ID', each with a search icon. Below this is a row of three dropdown menus: 'Service Period Month\*', 'Service Period Year\*', and 'Adjustment Reason\*'. The 'Provider (Payee) Information' section contains a 'Provider ID' search box, and several text input fields: 'Name of Provider\*', 'Principal ID', 'Name of Principal\*', and 'Vendor ID'. At the bottom of this section are two dropdown menus: 'Provider Type' and 'Provider County\*'. The form is styled with a light blue header and a white background with light gray borders.

### Search

Before creating a Line Item Adjustment, search using the Reimbursement Detail ID or the Enrollment ID. Reimbursement Detail ID is available on the 5045 detail download.

Enter the Reimbursement Detail ID and click on the search icon  to populate the record with the available information:

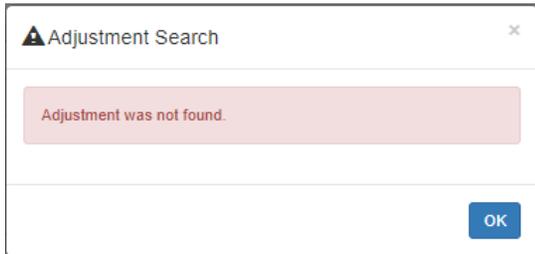
- Service Period Month
- Service Period Year
- Provider ID
- Name of Provider
- Principal ID
- Name of Principal
- Vendor ID
- Provider Type
- Provider County
- Child ID
- Name of Child
- Name of Parent
- County of Parent
- Class Name
- Billing Group
- Hourly Payment Rate

- Total Instructional Hours
- Hours Attended

The Enrollment ID can be found on the Eligibility screen. Enter the Enrollment ID and click on the search icon  to populate the record with the available information:

- Service Period Month
- Service Period Year
- Provider ID
- Name of Provider
- Principal ID
- Name of Principal
- Vendor ID
- Provider Type
- Provider County
- Child ID
- Name of Child
- Name of Parent
- County of Parent
- Class Name

If a search result is not found, then the Adjustment Search modal opens. Clicking on the **OK** button will close the Adjustment Search modal.



If the Reimbursement Detail ID or Enrollment ID are not known, then enter the Service Period Month and Service Period Year. The Service Period Year must be between 1990 and the current year.

Select the Adjustment Reason from the dropdown menu. Select Restitution if the LIA will have a Service Period prior to 7/1/2018.

*Provider (Payee) Information*

Service Period After 7/1/2018

Required fields are marked with an asterisk \*. If the Service Period is 7/1/2018 or later, then the Provider ID search will be available, see the screen below. If the Service Period is prior to 7/1/2018, then the Provider ID will not be required. If the Reimbursement Detail ID or Enrollment ID are entered in the search at the top of the screen, then Provider Information will pre-populate.

The screenshot shows a form titled "Provider (Payee) Information". At the top, there is a "Provider ID" section with a search box containing the word "Search" and a magnifying glass icon. Below this, there are four text input fields: "Name of Provider\*", "Principal ID", "Name of Principal\*", and "Vendor ID". At the bottom, there are two dropdown menus: "Provider Type" and "Provider County\*", both with downward-pointing arrows.

Service Period Prior to 7/1/2018

Required fields are marked with an asterisk \*.

- The Name of Provider is a text field.
- The Name of Principal is a text field. If a Principal ID is entered, it must match a current Principal ID in EFS Mod. If the Principal ID does not match a current Principal ID in EFS Mod, then the LIA will not save.
- The Vendor ID is an alphanumeric field. The Vendor ID is the Taxpayer ID Number, which can be found on the Provider's Business Info screen.
- The Provider Type dropdown field displays the available Provider Types.
- The Provider County dropdown displays all Florida counties.

This screenshot is identical to the one above, showing the "Provider (Payee) Information" form. The search box for "Provider ID" is present but empty. The form fields for "Name of Provider\*", "Principal ID", "Name of Principal\*", "Vendor ID", "Provider Type", and "Provider County\*" are all visible and ready for input.

### Parent & Child Information

#### Service Period After 7/1/2018

Required fields are marked with an asterisk \*. If the Service Period is 7/1/2018 or after, then the Child ID search will be available, see the screen below. If the Service Period is prior to 7/1/2018, then the Child ID will not be required.

- If the Reimbursement Detail ID or Enrollment ID are entered in the search at the top of the screen, then Parent & Child Information will pre-populate.
- If a Child ID is entered, it must match a current Child ID in EFS Mod. If the Child ID does not match a current Child ID in EFS Mod, then the LIA will not save.
- The Class Name is limited to 4 characters (e.g. AF17).

The screenshot shows a form titled "Parent & Child Information". At the top, there is a "Child ID" search field with a magnifying glass icon. Below this, there are four input fields: "Name of Child\*" (text), "Name of Parent\*" (text), "County of Parent\*" (dropdown menu), and "Class Name" (text). The asterisks indicate that the first three fields are required.

#### Service Period Prior to 7/1/2018

Required fields are marked with an asterisk \*.

- The Name of Child is a text field.
- The Name of Parent is a text field.
- The Class Name is limited to 4 characters (e.g. AF17).

The screenshot shows a form titled "Parent & Child Information". The "Child ID" search field is present but disabled. Below it, there are four input fields: "Name of Child\*" (text), "Name of Parent\*" (text), "County of Parent\*" (dropdown menu), and "Class Name" (text). The asterisks indicate that the first three fields are required.

### Adjustment Information

Required fields are marked with an asterisk \*.

- The Adjustment Reason dropdown field displays the available Adjustment Reasons.
- The Billing Group dropdown field displays the available Billing Groups.
- The Hourly Payment Rate is the reimbursement hourly rate.
- The Days Absent is an optional field.
- The Days Present is an optional field.
- The Total Instructional Hours is the total hours available for the month.
- The Hours Attended is the amount of hours the child attended class. If there are closure days, then include those hours to the Hours Attended. The Hours Attended cannot be 0. The Hours Attended can be a positive or negative number.
- The Paid Hours is a calculated field, which includes 80/20.
- The Amount is a calculated field, which includes 80/20.
- The Comments field is a text field.

**Adjustment Information**

Omit from Transmittal File?  Yes  No

Billing Group\*

Hourly Payment Rate*	Days Absent	Days Present	Total Instructional Hours*	Hours Attended*	Paid Hours	Amount
\$ 0.00	0	0	0.00	0.00	0	\$ 0

Comments\*

You have characters remaining.

*Confirmation Modal*

Clicking **Yes** will save the adjustment and open the Line Item Adjustment modal. Clicking the **Cancel** button will discard any changes and close the modal.

**Confirm Submit VPK Line Item Adjustment** ✕

This will save all changes and make the vpk line item adjustment final.  
Are you sure you want to continue?

**Yes** **Cancel**

Clicking **OK** will close the Line Item Adjustment modal.

**Line Item Adjustment** ✕

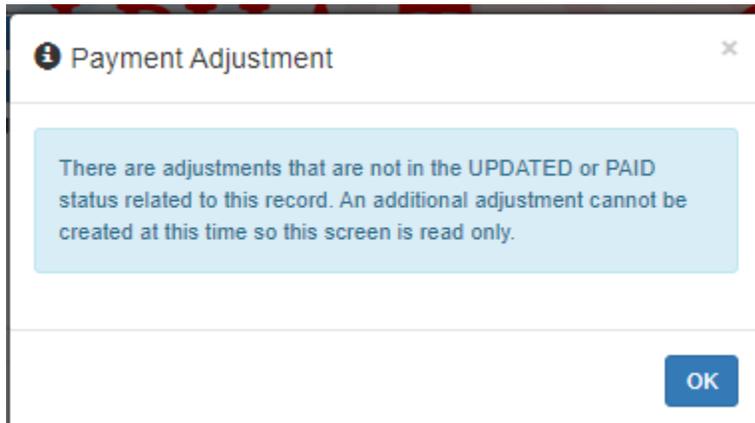
VPK Line Item adjustment was successfully submitted.

**OK**

## Pending Adjustments

If there are Adjustments pending approval and not in PAID status, then an additional adjustment cannot be created for the record. If a record with a Pending Adjustment is selected, then a pop-up opens notifying the user that there is a Pending Adjustment. A record is related by the Reimbursement Detail ID. For example: if the January attendance for a child is PAID, then a Prior Period Adjustment is created and saved; another Prior Period Adjustment for this record cannot be created until the first PPA is in PAID status.

The screen will be read-only until the Adjustment is in the Updated or Paid status.



The PPA screen will display as read-only, and the **Submit** button is deactivated if there is a Pending Adjustment.

Process Reimbursement Adjustment for [REDACTED]

---

**Adjustment Information**

Service Period: August 2024

Funder Type:  SR  Local  SRPlus

Unit Of Care: -- Select --

Reason: -- Select Reason --

Billing Group: [REDACTED]

Eligibility: [REDACTED]

Care Level: In School

Match Funder: -- No Match Funders --

	Days to be Paid	Total Payment Rate	Daily Parent CoPay Rate	Gross Payment Amount	Less Parent CoPay Amount	Net Payment Amount	Match Amount	Net Less Match	Gold Seal Amount	QPI Amount	Child Assessment Amount	Local QI Amount	CS Amount	Special Needs Amount	OCA Amount	
Balance	1	\$58.08	\$0.00	\$58.08	\$0.00	\$58.08	\$0.00	\$58.08	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$9.68	\$38.72	<a href="#">View History</a>
Payment	1	\$58.08	0.00	\$58.08	\$0.00	\$58.08	0.00	\$58.08	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$9.68	\$38.72	
Adjustment																

Comments:

[Submit](#) [Cancel](#)

## Scenarios - Adjustment Fixes Needed

Below are some scenarios that a Coalition may encounter.

	MTH (not Paid yet)	PPA (Paid in MOD)	LIA
Calculations are incorrect (i.e. Net Less Match, days x rate, etc.)		-- <sup>1</sup>	
Total Payment Rate paid is incorrect		-- <sup>2</sup>	
Over/underpaid provider because rate plan differential settings (i.e. Gold Seal, PFP, PFP Assessment, etc.)		-- <sup>2</sup>	
Wrap rate paid is double			X
<b>Duplicate payment</b>	X	X	
<b>Parent copay fee incorrect</b>	X	X	
<b>Over/under paid days</b>	X	X	
<b>Split UOC or Care Level</b>		X <sup>3</sup>	X <sup>3</sup>

<sup>1</sup>Covered by OEL data fix phase 1

<sup>2</sup>Covered by OEL data fix phase 2 (requires ELCs to review rate plans)

<sup>3</sup>Requires both PPA and LIA

#### *Wrap rate paid is double*

If a duplicate record was paid, and days of the payment need to be reversed for a service period.

#### *SR, Local, or SR Plus*

Create a LIA, by entering all the required fields and enter a negative number for the Days to be Paid, enter the Total Payment Rate, and enter the Daily Parent CoPay Rate, if applicable. If there are differentials that were included, then include those details in the LIA.

#### *VPK*

Create a LIA, by entering all the required fields and enter the Hourly Payment Rate, applicable for the year to be adjusted, enter the Total Instructional Hours for the service period month, and enter a negative number in the Hours Attended.

#### *Split Unit of Care or Care Level*

A child was paid for all of August 2018 (23 days) at the PR5/FT rate but should have been SCH once school began. The child needs reimbursement for 8 days at the PR5/FT rate. The child needs reimbursement for 15 days at the SCH/PT rate.

#### *SR, Local, or SR Plus*

Create a prior period adjustment on the paid August 2018 record to reduce the 23 PR5/FT days to 8 PR5/FT days (net – 15 PR5/FT days). Create a LIA for the remaining 15 days at the SCH/PT rate. Enter all the required fields – enter in the related child and provider information, select “PT” for the Unit of Care, select “In School” for the Care Level, enter 15 for Days to be Paid, and enter the Total Payment Rate for the daily payment rate.

## Pending Adjustments Work Queue

When an adjustment is created (current period adjustment, PPA, LIA) it is available for review in the Pending Adjustment Work Queue. To access the Pending Adjustments Work Queue, navigate to **Reimbursement > Adjustment Processing > Adjustments Pending Approval**.

The Pending Adjustment work queue displays all adjustments created that have not been approved and are currently in PENDING status. The Child Name, Provider ID, Provider Name, Service Period, Funder Type, VPK Class ID, Adjustment Type, Adjusted Billing Group, Adjusted Unit of Care, Adjusted Days Paid, Adjusted Net Payment Amount display along with the action buttons. The columns may be sorted by clicking on the column header. Each column may be filtered by typing criteria in the column's filter field.

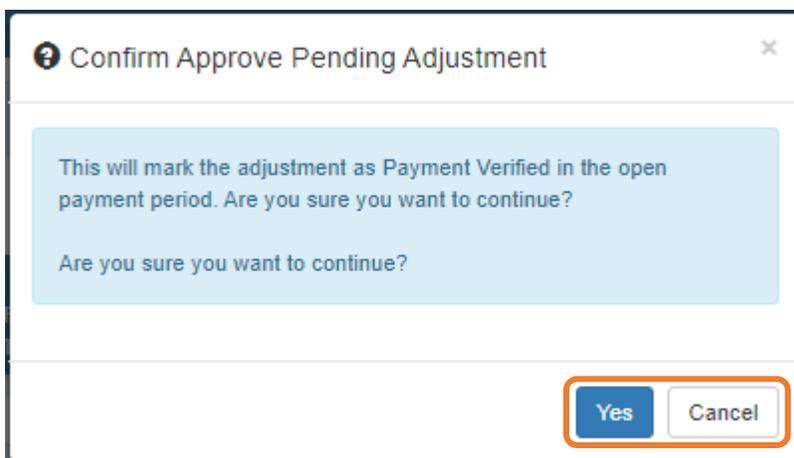
## Approve

Clicking **Approve** opens the Confirm Approve Pending Adjustment pop-up.

Child Name	Provider ID	Provider Name	Service Period	Funder Type	VPK Class ID	Adjustment Type	Adjusted Billing Group	Adjusted Unit of Care	Adjusted Days Paid	Adjusted Net Payment Amount	Action
Gianna Kennedy	8487	OUR CHILDREN'S WORKSHOP INC	Apr 2024	VPK	AF23	PPA				-183.81	Approve Void
Gianna Kennedy	8487	OUR CHILDREN'S WORKSHOP INC	May 2024	VPK	AF23	PPA				-367.62	Approve Void
Imogen Javidat	16896	CORAL RIDGE CHRISTIAN ACADEMY	Dec 2023	VPK	BF23	PPA				-58.48	Approve Void
Hiedi Fabrica	23754	DAVIE CHRISTIAN SCHOOL	May 2024	VPK	DF23	PPA				0.00	Approve Void
Hesee Niki	16896	CORAL RIDGE CHRISTIAN ACADEMY	Dec 2023	VPK	BF23	PPA				0.00	Approve Void
Abby Del	18755	CharLee Preschool & Childcare of Oakland Park	Aug 2024	SRPlus		MTH	SRPLS	FT	1	9.75	Approve Void
Mayam Mangle	10000	Mickey Mini Miracles Academy LLC	Jan 2024	SR		LIA	BGS	FT	-23	-64.40	Approve Void
Sakar Wynona	10000	Mickey Mini Miracles Academy LLC	Jan 2024	SR		LIA	BGS	FT	-23	-62.79	Approve Void

Clicking **Yes** will remove the adjustment from the Pending Adjustment Work Queue and move it to the Payment Verified Work Queue.

Clicking **Cancel** will close the pop-up window and display the Pending Adjustment Work Queue.



## Void

Clicking **Void** opens the Confirm Void Pending Adjustment pop-up.

Click Here For Filtering Tips

Show top 10 adjustments results

Clear All Filters Search

Child Name	Provider ID	Provider Name	Service Period	Funder Type	VPK Class ID	Adjustment Type	Adjusted Billing Group	Adjusted Unit of Care	Adjusted Days Paid	Adjusted Net Payment Amount	Action
Gianna Kennedy	5487	OUR CHILDREN'S WORKSHOP INC	Apr 2024	VPK	AF23	PPA				-183.81	Approve Void View Adjustment
Gianna Kennedy	5487	OUR CHILDREN'S WORKSHOP INC	May 2024	VPK	AF23	PPA				-387.62	Approve Void View Adjustment
Imogen Javdat	18096	CORAL RIDGE CHRISTIAN ACADEMY	Dec 2023	VPK	BF23	PPA				-58.48	Approve Void View Adjustment
Hedi Fabrice	23754	DAVE CHRISTIAN SCHOOL	May 2024	VPK	DF23	PPA				0.00	Approve Void View Adjustment
Heaven Niki	18096	CORAL RIDGE CHRISTIAN ACADEMY	Dec 2023	VPK	BF23	PPA				0.00	Approve Void View Adjustment
Abby Dal	18755	CharLee Preschool & Childcare of Oakland Park	Aug 2024	SRPlus		MTH	SRPLS	FT	1	9.75	Approve Void View Adjustment
Maryam Marge	18006	Mickey Mini Miracles Academy LLC	Jan 2024	SR		LIA	808	FT	-23	-64.40	Approve Void View Adjustment
Sakar Wynona	18006	Mickey Mini Miracles Academy LLC	Jan 2024	SR		LIA	808	FT	-23	-62.79	Approve Void View Adjustment

Clicking **Yes** will:

1. Move the current period adjustment (MTH) back to Closed Attendance.
2. Delete the prior period adjustment (PPA).
3. Delete the line item adjustment (LIA).
4. Remove the selected adjustment from the Pending Adjustment work queue.

If the PPA or LIA is deleted, and an adjustment is still needed, then a new one must be created.

Clicking **Cancel** will close the pop-up window and display the Pending Adjustment Work Queue.

**Confirm Void Pending Adjustment**

For Current Adjustments (MTH) the attendance record is returned to Closed. For Prior Period Adjustments and Line Item Adjustments the record will be deleted. Are you sure you want to continue?

## View Adjustment

Clicking **View Adjustment** opens the Adjustments History pop-up.

“Pending Adjustment” Work Queue

Click Here For Filtering Tips

Show top 10 adjustments results. Clear All Filters Search

Child Name	Provider ID	Provider Name	Service Period	Funder Type	VPK Class ID	Adjustment Type	Adjusted Billing Group	Adjusted Unit of Care	Adjusted Days Paid	Adjusted Net Payment Amount	Action
Gianna Kennedy	8487	OUR CHILDREN'S WORKSHOP INC	Apr 2024	VPK	AF23	PPA				-183.91	Approve View View Adjustment
Gianna Kennedy	8487	OUR CHILDREN'S WORKSHOP INC	May 2024	VPK	AF23	PPA				-367.82	Approve View View Adjustment
Imogen Javidat	16986	CORAL RIDGE CHRISTIAN ACADEMY	Dec 2023	VPK	BF23	PPA				-55.48	Approve View View Adjustment
Hedi Fabricce	23754	DAVIE CHRISTIAN SCHOOL	May 2024	VPK	DF23	PPA				0.00	Approve View View Adjustment
Hsien-Nhi	16986	CORAL RIDGE CHRISTIAN ACADEMY	Dec 2023	VPK	BF23	PPA				0.00	Approve View View Adjustment
Abby Del	13755	ChaLee Preschool & Childcare of Oakland Park	Aug 2024	SRPlus		MTH	SRPLS	PT	1	9.75	Approve View View Adjustment
Mayram Mangle	10006	Mickey Mini Miracles Academy LLC	Jan 2024	SR		LIA	BSG	FT	-23	-64.40	Approve View View Adjustment
Sekar Wynona	10006	Mickey Mini Miracles Academy LLC	Jan 2024	SR		LIA	BSG	FT	-23	-62.79	Approve View View Adjustment

Adjustments History

	Days to be Paid	Total Payment Rate	Daily Parent CoPay Rate	Gross Payment Amount	Less Parent CoPay Amount	Net Payment Amount	Gold Seal Amount	QPI Amount	Child Assessment Amount	Local QI Amount	CS Amount	Status
	13	\$13.60	\$1.60	\$176.80	\$20.80	\$156.00	\$0.00	\$9.36	\$0.00	\$0.00	\$0.00	PAID
	-9	\$13.60	\$1.60	-\$122.40	-\$14.40	-\$108.00	\$0.00	-\$6.48	\$0.00	\$0.00	\$0.00	Pending
Final	4	\$13.60	\$1.60	\$54.40	\$6.40	\$48.00	\$0.00	\$2.88	\$0.00	\$0.00	\$0.00	

Ok

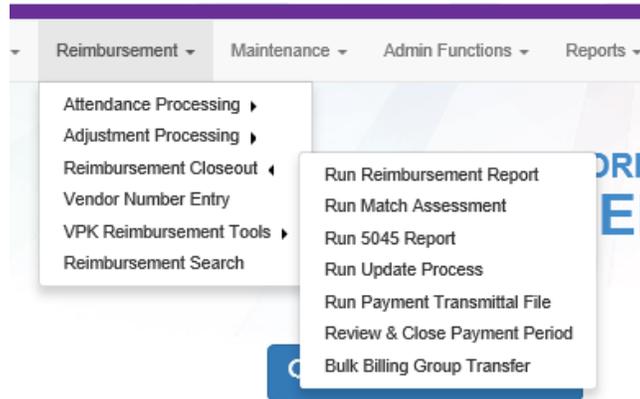
The Adjustments History pop-up displays the original record at the top and then the adjustment(s) display in the row(s) below.

The Status for the Adjustment is Pending. An additional adjustment (PPA or LIA) cannot be created for the Reimbursement ID record, until it has a status of PAID.

## Reimbursement Closeout Process

The Reimbursement Closeout features are available under the Reimbursement menu item. The features included in Reimbursement Closeout are Run Reimbursement Report, Run Match Assessment, Run 5045 Report, Run Update Process, Run Payment Transmittal File, Review & Close Payment Period, and Bulk Billing Group Transfer.

**Note:** The Run Match Assessment process is not applicable to SR Plus.

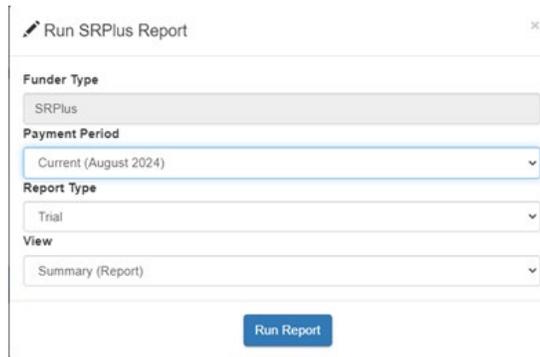


## Run Reimbursement Report

Navigate to the **Reimbursement Closeout > Run Reimbursement Report** page. Click the **Run Reimbursement Report** button from the appropriate funder type row.

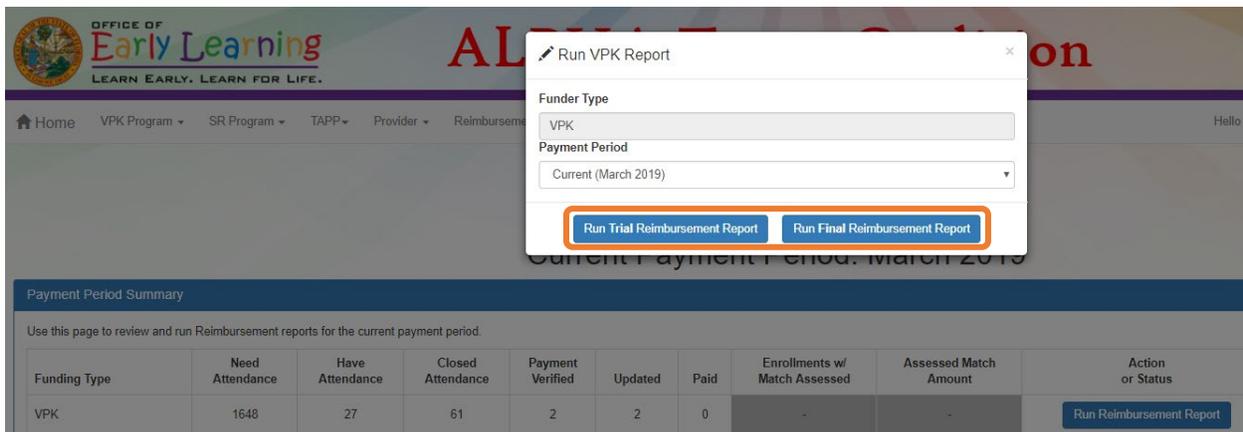
Run Reimbursement Report										
Payment Period Summary										
Use this page to review and run Reimbursement reports										
Funding Type	Payment Period	Have Attendance	Closed Attendance	Pending Adjustment	Payment Verified	Updated	Paid	Enrollments w/ Match Assessed	Assessed Match Amount	Action or Status
VPK	August 2024	2423	1788	5	135	0	0	-	-	Run Reimbursement Report
SR	August 2024	2587	264	221	38	71	0	20	0.00	Run Reimbursement Report
Local	August 2024	-	6	14	0	0	0	-	-	Run Reimbursement Report
SR Plus	August 2024	-	0	0	10	0	0	-	-	Run Reimbursement Report
VPK Advance-VPK	August 2024	-	-	-	0	0	0	-	-	Run Reimbursement Report
VPK Advance-VPKS	August 2024	-	-	-	0	0	0	-	-	Run Reimbursement Report
VPK SIS	August 2024	-	-	-	0	0	0	-	-	Run Reimbursement Report

A pop-up message appears to collect the report parameters.



A pop-up window titled "Run SRPlus Report" with a close button (X) in the top right corner. It contains four dropdown menus: "Funder Type" (selected: SRPlus), "Payment Period" (selected: Current (August 2024)), "Report Type" (selected: Trial), and "View" (selected: Summary (Report)). A blue "Run Report" button is located at the bottom center.

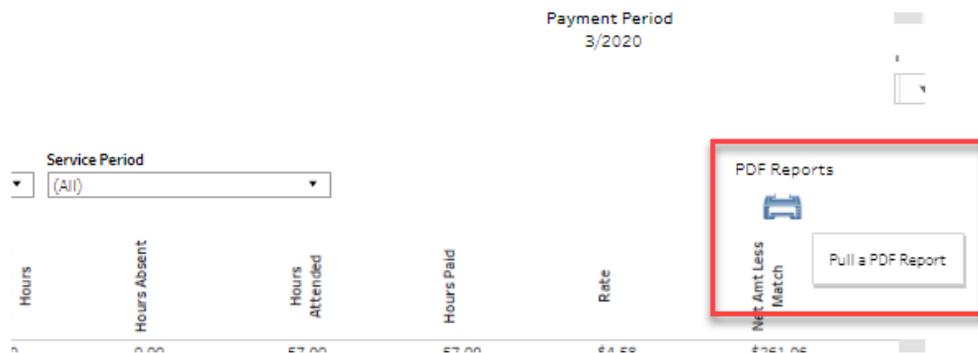
The Trial Reimbursement Report includes records in all statuses for the payment period and funder type selected. The Final Reimbursement Report includes records that are in Updated and Paid statuses for the payment period and funder type selected.



The background shows the "OFFICE OF Early Learning" website with a navigation menu. A "Run VPK Report" pop-up is centered, with "Funder Type" set to VPK and "Payment Period" set to Current (March 2019). Two buttons, "Run Trial Reimbursement Report" and "Run Final Reimbursement Report", are highlighted with a red box. Below the pop-up is a "Payment Period Summary" table.

Funding Type	Need Attendance	Have Attendance	Closed Attendance	Payment Verified	Updated	Paid	Enrollments w/ Match Assessed	Assessed Match Amount	Action or Status
VPK	1648	27	61	2	2	0	-	-	Run Reimbursement Report

To print a PDF of the report, click on the **PDF Reports** icon. Allow the print menu to display. Hover over the **Get Provider Reimbursement PDF** link and click on it. The PDF report opens.

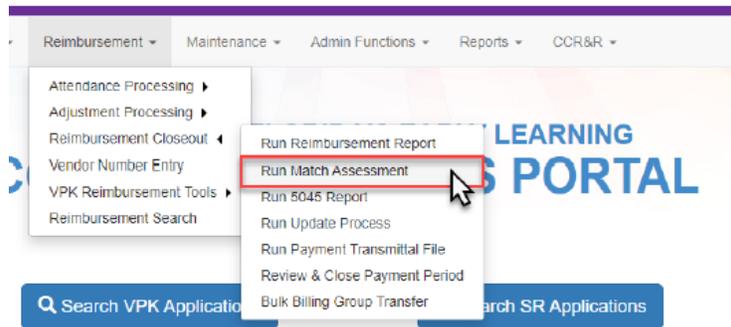


The background shows a table with columns: "Hours", "Hours Absent", "Hours Attended", "Hours Paid", and "Rate". A "PDF Reports" icon (a printer) is highlighted with a red box. A tooltip menu is visible over the icon, containing a "Pull a PDF Report" button. Above the table, "Payment Period 3/2020" is displayed. A "Service Period" dropdown menu is set to "(All)".

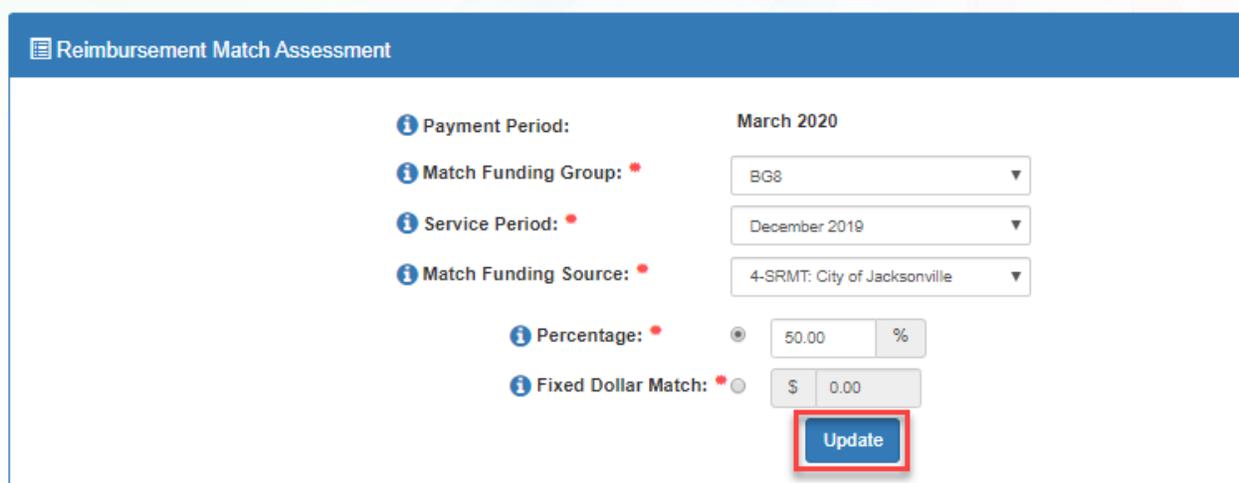
## Run Match Assessment

Prior to July 1, 2019 the state required 6% local match participation for BG8 families and a 50% local match for participants in the Child Care Executive Partnership (CCEP) program. The significant change in match for 2019-2020 is that now there is no requirement for local match at the coalition level for BG8 eligible families and the CCEP program no longer exists.

The match assessment process must be run when all service period records are in Payment Verified status. Go to **Reimbursement > Reimbursement Closeout > Run Match Assessment**.

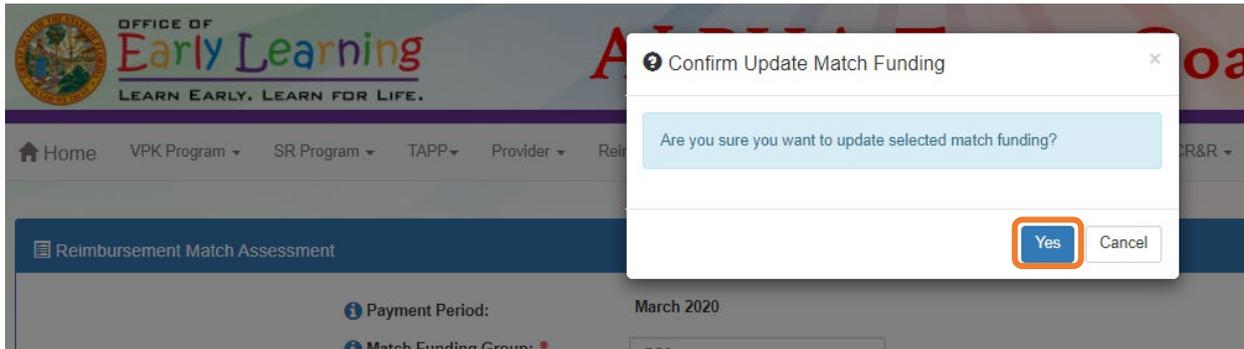


Select the required fields and click **Update**.



<b>Payment Period:</b>	March 2020
<b>Match Funding Group:</b>	BG8
<b>Service Period:</b>	December 2019
<b>Match Funding Source:</b>	4-SRMT: City of Jacksonville
<b>Percentage:</b>	<input checked="" type="radio"/> 50.00 %
<b>Fixed Dollar Match:</b>	<input type="radio"/> \$ 0.00
	<b>Update</b>

After clicking **Update**, a Confirm Update Match Funding pop-up displays. Click the **Yes** button to confirm.



The page refreshes with the assessed match amount. Match will only be run on monthly (MTH) records. The Run Match process will not be applied to adjustments.

The expanded grid displays the number of records and amounts for the different Reimbursement Statuses. The bottom row provides a total of all the columns. The percentage applies to the MTH records in Reimbursement Status of Verified, Updated, and Paid. In the example below, 50% match was applied to the records in Verified.

**Reimbursement Match Assessment**

**Payment Period:**  
 **Match Funding Group:**  
 **Service Period:**  
 **Match Funding Source:**  
  % **Percentage:**  
  \$ **Fixed Dollar Match:**

**Update**

Reimbursement Status	Enrollment with Match Assessment Funds	Payment Amount on which Match was Assessed	Total Assessed Match Amount
Closed	2	\$487.32	0
Pending Approval	0	0	0
Verified	6	\$1011.8	\$505.92
Updated	0	0	0
Paid	0	0	0
<b>Total</b>	<b>8</b>	<b>\$1499.12</b>	<b>\$505.92</b>

This can be run again. This time, try a dollar amount.

**Reimbursement Match Assessment**

Payment Period: **March 2020**  
 Match Funding Group: **BG8**  
 Service Period: **July 2019**  
 Match Funding Source: **14-MATCH: The Children Trust- BG8 Matcl**  
 Percentage: **0.00 %**  
**Fixed Dollar Match: \$ 1000.00**

[Update](#)

Reimbursement Status	Enrollment with Match Assessment Funds	Payment Amount on which Match was Assessed	Total Assessed Match Amount
Closed	4	\$350.76	\$21.04
Pending Approval	0	0	0
Verified	2	\$281.95	\$281.95
Updated	0	0	0
Paid	0	0	0
<b>Total</b>	<b>6</b>	<b>\$632.71</b>	<b>\$302.99</b>

### Run 5045 Report

Current Payment Period: March 2019

**Payment Period Summary**

Use this page to review and run 5045 reports for the current payment period.

Funding Type	Need Attendance	Have Attendance	Closed Attendance	Payment Verified	Updated	Paid	Enrollments w/ Match Assessed	Assessed Match Amount	Action or Status
VPK	1648	27	61	2	2	0	-	-	<a href="#">Run 5045 Report</a>
SR	1953	58	32	15	0	0	17	1729.21	<a href="#">Run 5045 Report</a>
Local	-	-	5	0	0	0	-	-	<a href="#">Run 5045 Report</a>
VPK Advance-VPK	-	-	-	0	0	0	-	-	<a href="#">Run 5045 Report</a>
VPK Advance-VPKS	-	-	-	0	0	0	-	-	<a href="#">Run 5045 Report</a>
VPK SIS	-	-	-	0	0	0	-	-	<a href="#">Run 5045 Report</a>

**NOTE:** All match assessment runs must be complete prior to initiating the Run Update process. The Run Update process will change the record status to Updated, locking in the payment amounts. Match assessment can only be run on records in the Payment Verified status. The amounts in place when the Run Update process runs is the final match assessment. The Match Funder Report is available in Tableau.

## Run Update

To begin the process, go to the **Reimbursement** menu item. Select **Reimbursement Closeout > Run Update Process**. Click **Run Update** for the appropriate funder type. The Run Update process completes and the total number of records move from the Payment Verified column to the Updated column.

### Run Update Process

Payment Period Summary										
Use this page to run the update process for records that have had the payment verified in the open payment period.										
Funding Type	Payment Period	Have Attendance	Closed Attendance	Pending Adjustment ⓘ	Payment Verified	Updated	Paid	Enrollments w/ Match Assessed	Assessed Match Amount	Action or Status
VPK	August 2024	2423	1788	5	135	0	0	-	-	Run Update
SR	August 2024	2587	264	221	38	71	0	20	0.00	Run Update
Local	August 2024	-	6	14	0	0	0	-	-	Run Update
SR Plus	August 2024	-	0	0	10	0	0	-	-	Run Update
VPK Advance-VPK	August 2024	-	-	-	0	0	0	-	-	Run Update
VPK Advance-VPKS	August 2024	-	-	-	0	0	0	-	-	Run Update
VPK SIS	August 2024	-	-	-	0	0	0	-	-	Run Update

## Run Payment Transmittal File

Go to the **Reimbursement** menu item. Select **Reimbursement Closeout > Run Payment Transmittal File**. Click **Run File** for the appropriate funder type.

### Run Payment Transmittal File

Payment Period Summary										
Use this page to review and close										
Funding Type	Payment Period	Have Attendance	Closed Attendance	Pending Adjustment ⓘ	Payment Verified	Updated	Paid	Enrollments w/ Match Assessed	Assessed Match Amount	Action or Status
VPK	August 2024	2423	1788	5	135	0	0	-	-	Run File
SR	August 2024	2587	264	221	38	71	0	20	0.00	Run File
Local	August 2024	-	6	14	0	0	0	-	-	Run File
SR Plus	August 2024	-	0	0	10	0	0	-	-	Run File
VPK Advance-VPK	August 2024	-	-	-	0	0	0	-	-	Run File
VPK Advance-VPKS	August 2024	-	-	-	0	0	0	-	-	Run File
VPK SIS	August 2024	-	-	-	0	0	0	-	-	Run File

A pop-up message appears. The Payment Transmittal File default criteria is set:

- Payment Period is the current payment period
- Summarization Option of Group by Billing Group
- Included Records Option is Updated Records Only

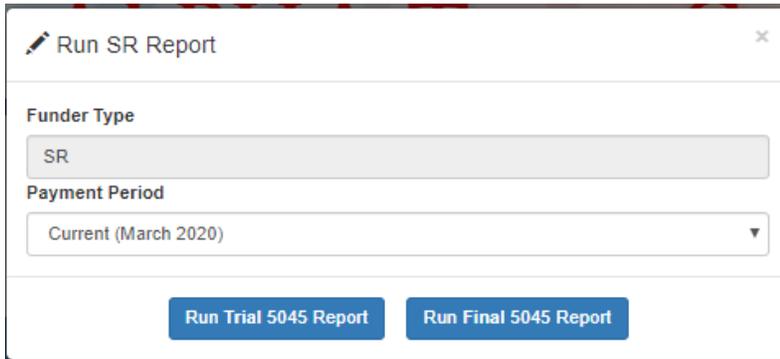
An Excel file downloads and the total number of records move from the Updated column to the Paid column. Click **Run Transmittal file**. The file downloads and the total number of records display in the Paid column.

### Run 5045 Report

Navigate to the **Reimbursement Closeout > Run 5045 Report** page. Click the **Run 5045 Report** button from the appropriate funder type row.

Run 5045 Report										
Payment Period Summary										
Use this page to review and run 5045 reports										
Funding Type	Payment Period	Have Attendance	Closed Attendance	Pending Adjustment	Payment Verified	Updated	Paid	Enrollments w/ Match Assessed	Assessed Match Amount	Action or Status
VPK	August 2024	2423	1788	5	135	0	0	-	-	Run 5045 Report
SR	August 2024	2587	264	221	38	71	0	20	0.00	Run 5045 Report
Local	August 2024	-	6	14	0	0	0	-	-	Run 5045 Report
SR Plus	August 2024	-	0	0	10	0	0	-	-	Run 5045 Report
VPK Advance-VPK	August 2024	-	-	-	0	0	0	-	-	Run 5045 Report
VPK Advance-VPKS	August 2024	-	-	-	0	0	0	-	-	Run 5045 Report
VPK SIS	August 2024	-	-	-	0	0	0	-	-	Run 5045 Report

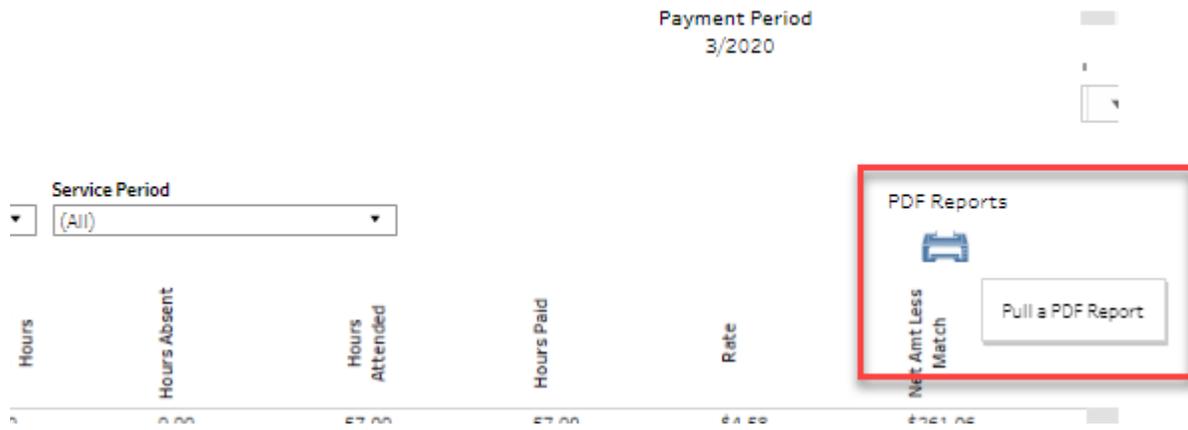
A pop-up message appears to collect the report parameters.



The image shows a dialog box titled "Run SR Report" with a close button (X) in the top right corner. It contains two input fields: "Funder Type" with the value "SR" and "Payment Period" with the value "Current (March 2020)". At the bottom, there are two blue buttons: "Run Trial 5045 Report" and "Run Final 5045 Report".

The Trial Reimbursement Report includes records in all statuses for the payment period and funder type selected. The Final Reimbursement Report includes records that are in Updated and Paid statuses for the payment period and funder type selected.

To print a PDF of the report, click on the **PDF Reports** icon. Allow the print menu to display. Hover over the **Get Provider Reimbursement PDF** link and click on it. The PDF report opens.



The image shows a report interface. At the top right, it says "Payment Period 3/2020". Below that is a "Service Period" dropdown menu with "(All)" selected. The main area contains a table with columns: "Hours", "Hours Absent", "Hours Attended", "Hours Paid", and "Rate". A "PDF Reports" menu is open, showing a printer icon and a button labeled "Pull a PDF Report". The menu also includes the text "Net Amt Less Match".

## VPK Advance Payment Process

VPK providers that indicate participation in advance payment in the VPK contract are included in the VPK Advance Payment process.

### Run Update (Part 1 - Trial)

To begin the process, go to the **Reimbursement** menu item. Select **Reimbursement Closeout > Run Update Process**. Go to the *VPK Advance – VPK* row and click **Run Update**.

**Run Update Process**  
Current Payment Period: December 2018

Payment Period Summary										
Use this page to run the update process for records that have had the payment verified in the open payment period.										
Funding Type	Need Attendance	Have Attendance	Closed Attendance	Payment Verified	Updated	Paid	Match Total	Match Applied	Action or Status	
VPK	59	2	8	31	0	0	-	-	Run Update	
SR	233	17	0	0	0	0	0.00	0.00	Run Update	
Local	-	-	0	0	0	0	0.00	0.00	Run Update	
VPK Advance-VPK	-	-	-	0	0	0	-	-	Run Update	
VPK Advance-VPKS	-	-	-	0	0	0	-	-	Run Update	
VPK SIS	-	-	-	0	0	3	-	-	Run Update	

A pop-up message appears. The service period displays at the top and payment information for each VPK provider class (with advance payment) displays below.

**Accept Payments for Update Process: VPK Advance-VPK**

Payment Period: December 2018  
Service Period: January 2019

Provider Name	Class	Number of Enrolled Children	Total Hours Paid	Total Payment
Growing Up Strong	AF18	11	561	2333.76

Accept Cancel

Payment Period Summary										
Use this page to run the update process for records that have had the payment verified in the open payment period.										
Funding Type	Need Attendance	Have Attendance	Closed Attendance	Payment Verified	Updated	Paid	Match Total	Match Applied	Action or Status	
VPK	59	2	8	31	0	0	-	-	Run Update	
SR	233	17	0	0	0	0	0.00	0.00	Run Update	
Local	-	-	0	0	0	0	0.00	0.00	Run Update	
VPK Advance-VPK	-	-	-	0	0	0	-	-	Run Update	
VPK Advance-VPKS	-	-	-	0	0	0	-	-	Run Update	
VPK SIS	-	-	-	0	0	3	-	-	Run Update	

- Total Payment = VPK Hourly Rate x .95 (rounded to the penny) x Total Hours Paid.
- The service period for advance payment is set one month ahead of the current payment period. For example, if the current payment period is August, the service period is October.
- The provider's class calendar and each child's enrollment record is used to calculate the Total Hours Paid for the service period.
- Providers with fewer than four child enrollments cannot start a class so they are excluded from advance payment. When the condition is met, the class is included. **NOTE:** After the initial requirement to start the class is met, the enrollment number may be lower and still be included in the reimbursement process.

**STOP!** Click **Cancel**. (Clicking *Accept* completes the Run Update and locks the payment. To see a Trial 5045 and Detail Report BEFORE completing the Update process, click **Cancel**.)

Click the refresh button on your browser or CTRL + F5. The total number of records display in the Payment Verified column.

**Run Update Process**  
Current Payment Period: December 2018

Payment Period Summary									
Use this page to run the update process for records that have had the payment verified in the open payment period.									
Funding Type	Need Attendance	Have Attendance	Closed Attendance	Payment Verified	Updated	Paid	Match Total	Match Applied	Action or Status
VPK	59	2	8	31	0	0	-	-	<a href="#">Run Update</a>
SR	233	17	0	0	0	0	0.00	0.00	<a href="#">Run Update</a>
Local	-	-	0	0	0	0	0.00	0.00	<a href="#">Run Update</a>
VPK Advance-VPK	-	-	-	11	0	0	-	-	<a href="#">Run Update</a>
VPK Advance-VPKS	-	-	-	0	0	0	-	-	<a href="#">Run Update</a>
VPK SIS	-	-	-	0	0	3	-	-	<a href="#">Run Update</a>

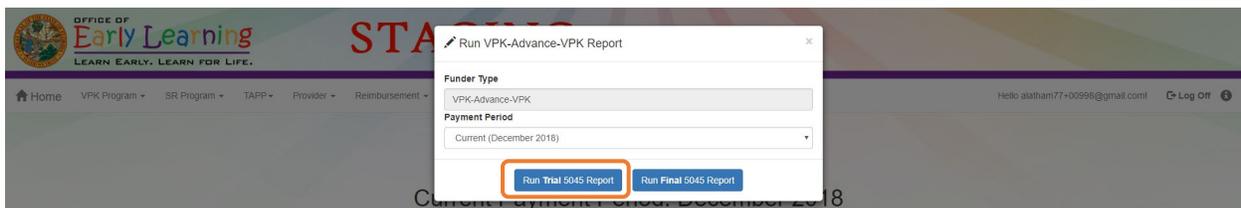
### Run Trial 5045 Report

Next, go to the **Reimbursement** menu item. Select **Reimbursement Closeout > Run 5045 Report**. Go to the *VPK Advance – VPK* row and click **Run 5045 Report**.

**Run 5045 Report**  
Current Payment Period: December 2018

Payment Period Summary									
Use this page to review and run 5045 reports for the current payment period.									
Funding Type	Need Attendance	Have Attendance	Closed Attendance	Payment Verified	Updated	Paid	Match Total	Match Applied	Action or Status
VPK	59	2	8	31	0	0	-	-	<a href="#">Run 5045 Report</a>
SR	233	17	0	0	0	0	0.00	0.00	<a href="#">Run 5045 Report</a>
Local	-	-	0	0	0	0	0.00	0.00	<a href="#">Run 5045 Report</a>
VPK Advance-VPK	-	-	-	11	0	0	-	-	<a href="#">Run 5045 Report</a>
VPK Advance-VPKS	-	-	-	0	0	0	-	-	<a href="#">Run 5045 Report</a>
VPK SIS	-	-	-	0	0	3	-	-	<a href="#">Run 5045 Report</a>

A pop-up message appears. Click **Run Trial 5045 Report**.



The Trial Advance Payment Summary Report opens.

- A detail report (with child information) is available by selecting **Detail Report**.
- To print, click the **Download** button on the bottom right corner of the screen. A download pop-up message displays. Select **PDF**, change the paper orientation to **Landscape**, and click **Create PDF**. When the PDF file is generated, click **Download**. The file may be saved locally.

## Run Update (Part 2 - Commit)

Go to the **Reimbursement** menu item. Select **Reimbursement Closeout > Run Update Process**. Go to the **VPK Advance – VPK** row and click **Run Update**.

**Run Update Process**  
Current Payment Period: December 2018

Payment Period Summary									
Use this page to run the update process for records that have had the payment verified in the open payment period.									
Funding Type	Need Attendance	Have Attendance	Closed Attendance	Payment Verified	Updated	Paid	Match Total	Match Applied	Action or Status
VPK	59	2	8	31	0	0	-	-	<a href="#">Run Update</a>
SR	233	17	0	0	0	0	0.00	0.00	<a href="#">Run Update</a>
Local	-	-	0	0	0	0	0.00	0.00	<a href="#">Run Update</a>
VPK Advance-VPK	-	-	-	11	0	0	-	-	<a href="#">Run Update</a>
VPK Advance-VPKS	-	-	-	0	0	0	-	-	<a href="#">Run Update</a>
VPK SIS	-	-	-	0	0	3	-	-	<a href="#">Run Update</a>

A pop-up message appears. Click **Accept**. The Run Update process completes and the total number of records display in the Updated column.

**Run Update Process**  
Current Payment Period: December 2018

Payment Period Summary									
Use this page to run the update process for records that have had the payment verified in the open payment period.									
Funding Type	Need Attendance	Have Attendance	Closed Attendance	Payment Verified	Updated	Paid	Match Total	Match Applied	Action or Status
VPK	59	2	8	31	0	0	-	-	<a href="#">Run Update</a>
SR	233	17	0	0	0	0	0.00	0.00	<a href="#">Run Update</a>
Local	-	-	0	0	0	0	0.00	0.00	<a href="#">Run Update</a>
VPK Advance-VPK	-	-	-	0	11	0	-	-	<a href="#">Run Update</a>
VPK Advance-VPKS	-	-	-	0	0	0	-	-	<a href="#">Run Update</a>
VPK SIS	-	-	-	0	0	3	-	-	<a href="#">Run Update</a>

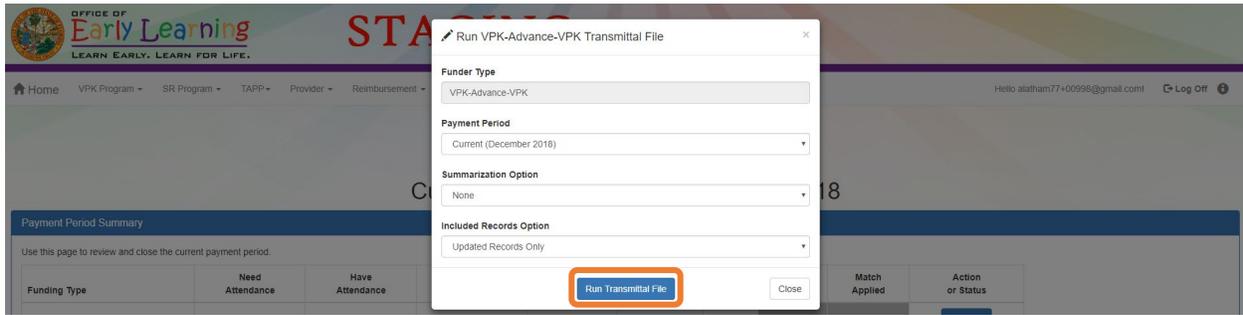
## Run Payment Transmittal File

Go to the **Reimbursement** menu item. Select **Reimbursement Closeout > Run Payment Transmittal File**. Go to the **VPK Advance – VPK** row and click **Run File**.

**Run Payment Transmittal File**  
Current Payment Period: December 2018

Payment Period Summary									
Use this page to review and close the current payment period.									
Funding Type	Need Attendance	Have Attendance	Closed Attendance	Payment Verified	Updated	Paid	Match Total	Match Applied	Action or Status
VPK	59	2	8	31	0	0	-	-	<a href="#">Run File</a>
SR	233	17	0	0	0	0	0.00	0.00	<a href="#">Run File</a>
Local	-	-	0	0	0	0	0.00	0.00	<a href="#">Run File</a>
VPK Advance-VPK	-	-	-	0	11	0	-	-	<a href="#">Run File</a>
VPK Advance-VPKS	-	-	-	0	0	0	-	-	<a href="#">Run File</a>
VPK SIS	-	-	-	0	0	3	-	-	<a href="#">Run File</a>

A pop-up message appears. The Payment Transmittal File default criteria is set. Click **Run Transmittal File**.



The file downloads and the total number of records display in the Paid column.

### Run Payment Transmittal File

Current Payment Period: December 2018

Payment Period Summary										
Use this page to review and close the current payment period.										
Funding Type	Need Attendance	Have Attendance	Closed Attendance	Payment Verified	Updated	Paid	Match Total	Match Applied	Action or Status	
VPK	48	13	8	31	0	0	-	-	Run File	
SR	233	17	0	0	0	0	0.00	0.00	Run File	
Local	-	-	0	0	0	0	0.00	0.00	Run File	
VPK Advance-VPK	-	-	-	0	0	11	-	-	Run File	
VPK Advance-VPKS	-	-	-	0	0	0	-	-	Run File	
VPK SIS	-	-	-	0	0	3	-	-	Run File	

Save the downloaded file locally. See *Payment Transmittal File Layout* below.

### Run Final 5045 Report

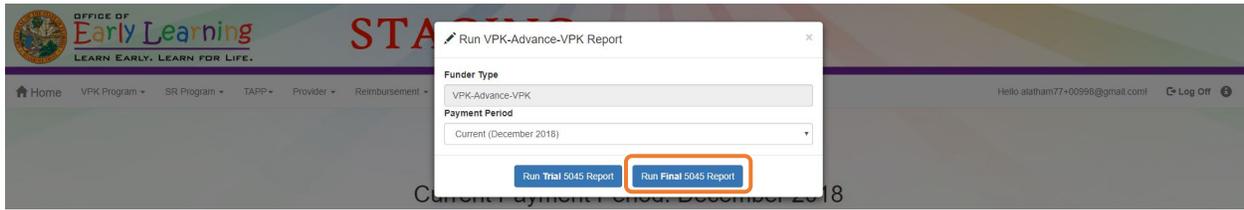
Go to the **Reimbursement** menu item. Select **Reimbursement Closeout > Run 5045 Report**. Go to the **VPK Advance – VPK** row and click **Run 5045 Report**.

### Run 5045 Report

Current Payment Period: December 2018

Payment Period Summary										
Use this page to review and run 5045 reports for the current payment period.										
Funding Type	Need Attendance	Have Attendance	Closed Attendance	Payment Verified	Updated	Paid	Match Total	Match Applied	Action or Status	
VPK	48	13	8	31	0	0	-	-	Run 5045 Report	
SR	233	17	0	0	0	0	0.00	0.00	Run 5045 Report	
Local	-	-	0	0	0	0	0.00	0.00	Run 5045 Report	
VPK Advance-VPK	-	-	-	0	0	11	-	-	Run 5045 Report	
VPK Advance-VPKS	-	-	-	0	0	0	-	-	Run 5045 Report	
VPK SIS	-	-	-	0	0	3	-	-	Run 5045 Report	

A pop-up message appears. Click **Run Final 5045 Report**.



The Final Advance Payment Summary Report opens.

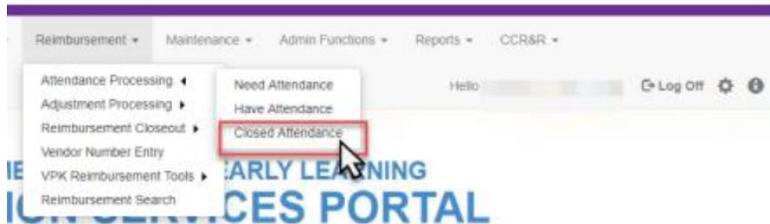
- a. A detail report (with child information) is available by selecting **Detail Report**
- b. To print, click the **Download** button on the bottom right corner of the screen. A download pop-up message displays. Select **PDF**, change the paper orientation to **Landscape**, and click **Create PDF**. When the PDF file is generated, click **Download**. The file may be saved locally.

## Bulk Billing Group Transfer

**NOTE:** See Bulk Billing Group Transfer in Family Processes for CCEP and SR Match changes.

## Closed Attendance Check

Once the new funder and funding allocations are created (see Bulk Billing Group Transfer in the Family section), at the end of the payment period, go to **Reimbursement > Attendance Processing > Closed Attendance**.



Select the Funder Type (SR) from the funder type drop down menu and click **Submit**. Then, click on the Review link to open a provider's Closed Attendance records for a service period.

"Closed Attendance" Work Queue Return to Search

Click Here For Filtering Tips

County: All Funder Type: SR

Show 10 search results Clear All Filters Search:

Action	Provider ID	Provider Name	County	Service Period	Funder Type	VPK Class ID	Status
	<input type="text" value="Filter"/>						
<a href="#">Review</a>	16	SUNCOAST CHRISTIAN ACADEMY, INC.	Palm Beach	October 2019	SR		Closed Attendance
<a href="#">Review</a>	20	PROCHILD EARLY LEARNING CENTER INC	Palm Beach	October 2019	SR		Closed Attendance
<a href="#">Review</a>	21	PLANET KIDS AT WELLINGTON	Palm Beach	October 2019	SR		Closed Attendance
<a href="#">Review</a>	23	Salem Child Learning Center	Palm Beach	October 2019	SR		Closed Attendance

Review the records. Are there are CCEP records? If so, STOP!

**PLANET KIDS AT WELLINGTON - Nov - 2019**

Reimbursement Record for PLANET KIDS AT WELLINGTON 103 Total Records

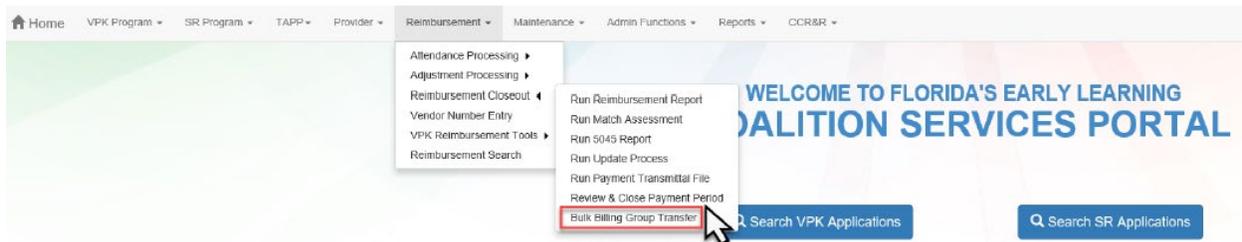
Funder Type: SR      Payment Period: Nov - 2019      Service Period: 10/01/2019 to 10/31/2019  
 Status: Closed Attendance      Provider Type: Center      Provider ID: 21  
 Vendor Number:      Provider Name: PLANET KIDS AT WELLINGTON      Phone: (661) 434-9098  
 Site Address: 9135 LAKE WORTH RD LAKE WORTH, FL 33467      County: Palm Beach

[Provider Rates](#)    [Refresh Calculations](#)    [Move All to 'Invo'](#)

Child Name	DOB	Billing Group	Eligibility Code	Care Level	Unit of Care	Days to be Paid	Total Payment Rate	Net Amount	Gold Seal Amount	PPF Amount	PPF CA Amount	QI Amount	CS Amount	Status	Action
1	3/27/2019	CCEP	P1	INF	FT	23	\$3	38.92	\$27.83	\$0.00	\$0.00	\$0.00	Verified	Adjust Back to 'Invo'	
2	12/10/2018	CCEP	P1	INF	FT	23	\$3	38.92	\$27.83	\$0.00	\$0.00	\$0.00	Verified	Adjust Back to 'Invo'	
3	4/19/2019	BGB	ECON	INF	FT	4	\$3	24.16	\$4.04	\$0.00	\$0.00	\$0.00	Verified	Adjust Back to 'Invo'	
<b>INF TOTALS</b>									\$302.00	\$60.50	\$0.00	\$0.00	\$0.00		
4	3/17/2018	CCEP	P1	TOD	FT	4	\$32.87	121.64	\$21.20	\$4.24	\$0.00	\$0.00		Verify Adjust Back to 'Invo'	

The CCEP records must be changed with the bulk billing group transfer process before verifying.

Go to the Reimbursement menu and select **Reimbursement Closeout > Bulk Billing Group Transfer**.



The Bulk Billing Group Transfer Search screen displays. Select the *Funder Type*, *Billing Group*, *Eligibility Code*, and *Service Period* that need to be updated and click the Search button.

**Note:** Each selection is a filter that must be selected (in order) before the search can be initiated.

- 1. The **Billing Group** dropdown menu displays all of the billing group codes that are associated with the selected funder type.
- 2. The **Eligibility Code** dropdown menu displays all of the eligibility codes that are associated with the selected funder type and billing group code.

The **Service Period** dropdown menu displays all service periods that are associated with the selected funder type, billing group, and eligibility code AND are in the **Closed Attendance** status.

**Bulk Billing Group Transfer Search**

Bulk Billing Group Transfer Search

Funder Type: SR

Billing Group: CCEP

Eligibility Code: P1

Service Period: 10/1/2019

[Search](#)

The results display all records in Closed Attendance that have the funder type, billing group, and eligibility combination for the service period selected. Use the Search feature and column filters to narrow results. Scroll to the right to see more.

### Bulk Billing Group Transfer Search

Service Period October 2019

Search Results

Show 10 entries

Child Name	Child ID	Provider ID	Provider Name	Billing Group Code	Eligibility Code	Eligibility Start Date	Eligibility End Date	Assessed Fee	Unit of Care	Days Attended
		21	PLANET KIDS AT WELLINGTON	CCEP	P1	01/22/2019	01/22/2020	2.76	FT	23
		21	PLANET KIDS AT WELLINGTON	CCEP	P1	05/13/2019	05/13/2020	6.20	PT	23
		21	PLANET KIDS AT WELLINGTON	CCEP	P1	06/22/2019	03/30/2020	0.00	FT	23
		21	PLANET KIDS AT WELLINGTON	CCEP	P1	07/02/2019	07/02/2020	2.76	FT	23
		21	PLANET KIDS AT WELLINGTON	CCEP	P1	07/02/2019	07/02/2020	2.76	FT	23
		21	PLANET KIDS AT WELLINGTON	CCEP	P1	04/10/2019	04/10/2020	7.40	FT	2
		21	PLANET KIDS AT WELLINGTON	CCEP	P1	04/10/2019	04/10/2020	7.40	FTV	21
		21	PLANET KIDS AT WELLINGTON	CCEP	P1	10/28/2018	10/28/2019	2.45	FT	2
		21	PLANET KIDS AT WELLINGTON	CCEP	P1	10/28/2018	10/28/2019	2.45	PT	17
		21	PLANET KIDS AT WELLINGTON	CCEP	P1	10/28/2018	10/28/2019	2.45	FT	2

Showing 1 to 10 of 31 entries (filtered from 2,730 total entries)

Previous 1 2 3 4 Next

The Update button is disabled until records are selected.

Update Cancel

Select each row that needs to be updated by clicking the row. The row becomes highlighted blue and the total number of rows selected display at the bottom of the screen. Click the **Update** button.

		21	PLANET KIDS AT WELLINGTON	CCEP	P1	06/03/2019	06/03/2020	6.20	FT	2
		21	PLANET KIDS AT WELLINGTON	CCEP	P1	09/05/2019	09/05/2020	2.45	FT	23
		21	PLANET KIDS AT WELLINGTON	CCEP	P1	09/05/2019	09/05/2020	2.45	FT	2
		21	PLANET KIDS AT WELLINGTON	CCEP	P1	09/05/2019	09/05/2020	2.45	PT	21
		21	PLANET KIDS AT WELLINGTON	CCEP	P1	09/13/2019	03/21/2020	2.45	FT	2
		21	PLANET KIDS AT WELLINGTON	CCEP	P1	09/13/2019	03/21/2020	2.45	PT	21
		21	PLANET KIDS AT WELLINGTON	CCEP	P1	09/09/2019	09/09/2020	2.60	FT	4
		21	PLANET KIDS AT WELLINGTON	CCEP	P1	10/28/2019	10/28/2020	2.20	PT	4
		21	PLANET KIDS AT WELLINGTON	CCEP	P1	10/28/2019	10/28/2020	2.20	PT	2
		21	PLANET KIDS AT WELLINGTON	CCEP	P1	10/28/2019	10/28/2020	2.20	PT	1

Showing 1 to 31 of 31 entries (filtered from 2,730 total entries) 31 rows selected

Previous 1 Next

The Update button is now enabled.

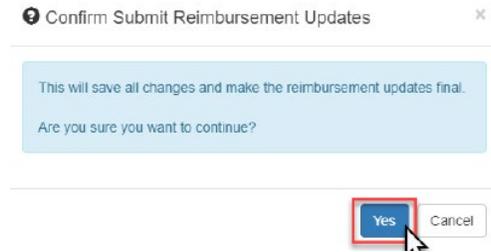
Update Cancel

The Update Billing Group Assignments pop-up displays. The Current Information area displays the current funder type, billing group, eligibility code and match funder name. Coalition users input the changes needed in the New Information area. Then, click the **Run** button.

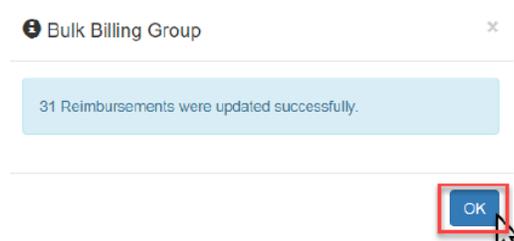
The Results window displays a preview of the updated reimbursement records. Notice the changed billing group, eligibility code. If correct, click the **Save** button. Otherwise, click the **Cancel** button to abandon the changes.

Child Name	Child ID	Provider ID	Provider Name	Billing Group Code	Eligibility Code	Eligibility Start Date	Eligibility End Date	Assessed Fee	Unit of Care	Days Attended	Rate
[Filtered]	[Filtered]	21	PLANET KIDS AT WELLINGTON	BG8	SRMT - SR Match Program	05/22/2019	03/30/2020	0.00	FT	23	0
[Filtered]	[Filtered]	21	PLANET KIDS AT WELLINGTON	BG8	SRMT - SR Match Program	10/26/2018	10/28/2019	2.45	FT	2	0
[Filtered]	[Filtered]	21	PLANET KIDS AT WELLINGTON	BG8	SRMT - SR Match Program	10/26/2018	10/28/2019	2.45	PT	17	0
[Filtered]	[Filtered]	21	PLANET KIDS AT WELLINGTON	BG8	SRMT - SR Match Program	10/28/20			PT	17	0
[Filtered]	[Filtered]	21	PLANET KIDS AT WELLINGTON	BG8	SRMT - SR Match Program	10/28/20			FT	2	0
[Filtered]	[Filtered]	21	PLANET KIDS AT WELLINGTON	BG8	SRMT - SR Match Program	09/13/2019	03/21/2020	2.45	FT	2	0
[Filtered]	[Filtered]	21	PLANET KIDS AT WELLINGTON	BG8	SRMT - SR Match Program	09/13/2019	03/21/2020	2.45	PT	21	0
[Filtered]	[Filtered]	21	PLANET KIDS AT WELLINGTON	BG8	SRMT - SR Match Program	01/22/2019	01/22/2020	2.76	FT	23	0
[Filtered]	[Filtered]	21	PLANET KIDS AT WELLINGTON	BG8	SRMT - SR Match Program	10/26/2019	10/28/2020	2.20	PT	1	0
[Filtered]	[Filtered]	21	PLANET KIDS AT WELLINGTON	BG8	SRMT - SR Match Program	10/26/2019	10/28/2020	2.20	PT	2	0
[Filtered]	[Filtered]	21	PLANET KIDS AT WELLINGTON	BG8	SRMT - SR Match Program	10/26/2019	10/28/2020	2.20	PT	4	0

Next, a confirmation message displays. Click the **Yes** button to commit the changes. Otherwise, click the **Cancel** button to abandon the changes.



Then, a success message displays with the total number of records that were updated. Click the **OK** button.



When the message is closed, the screen returns to the Bulk Billing Group Transfer search page. The changes can now be verified in Closed Attendance.

Review the records. Now that there are no CCEP records, continue to verify records as usual. Repeat for all service period rosters.

Reimbursement Record for PLANET KIDS AT WELLINGTON 103 Total Records

Funder Type: SR      Payment Period: Nov - 2019      Service Period: 10/01/2019 to 10/31/2019  
 Status: Closed Attendance      Provider Type: Center      Provider ID: 21  
 Vendor Number:      Provider Name: PLANET KIDS AT WELLINGTON      Phone: (1) 434-9098  
 Site Address: 9135 LAKE WORTH RD LAKE WORTH, FL 33467      County: Palm Beach

Refresh Calculations      More All to 'Have'

	Child Name	DOB	Billing Group	Eligibility Code	Care Level	Unit of Care	Days to be Paid	Total Payment Rate	Daily Parent CoPay Rate	Gross Payment Amount	Less Parent CoPay Amount	Net Payment Amount	CA Amount	PPF CA Amount	QI Amount	CS Amount	Status	Action
1.		3/27/2019	BG8	SRMT	INF	FT	23	\$37.45	\$4.91	\$861.35	\$112.93	\$748.42	\$27.83	\$0.00	\$0.00	\$0.00	✓ Verified	Adjust Back to 'Have'
2.		12/10/2016	BG8	SRMT	INF	FT				\$851.95	\$126.95	\$725.00	\$27.83	\$0.00	\$0.00	\$0.00	✓ Verified	Adjust Back to 'Have'
3.		4/19/2019	BG8	ECON	INF	FT				\$27.72	\$24.16	\$4.84	\$0.00	\$0.00	\$0.00	\$0.00	✓ Verified	Adjust Back to 'Have'
										\$1,872.00		\$1,610.63	\$302.00	\$60.60	\$0.00	\$0.00		
4.		3/17/2018	BG8	SRMT	TOD	FT	4	\$32.87	\$2.45	\$131.48	\$9.84	\$121.64	\$21.20	\$4.24	\$0.00	\$0.00		Verify Adjust Back to 'Have'

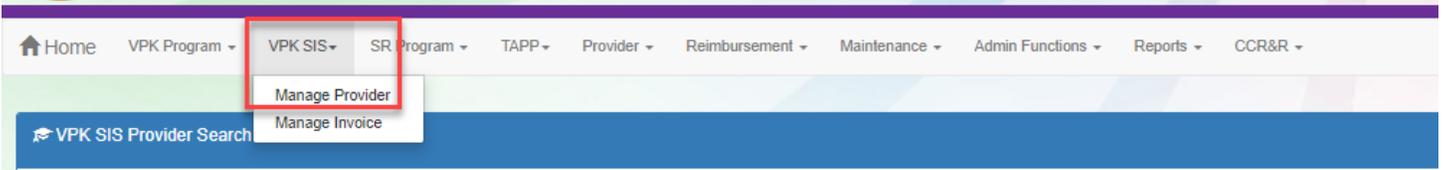
The CCEP records have been changed to BG8 - SRMT.

## VPK Specialized Instructional Service (SIS) Process

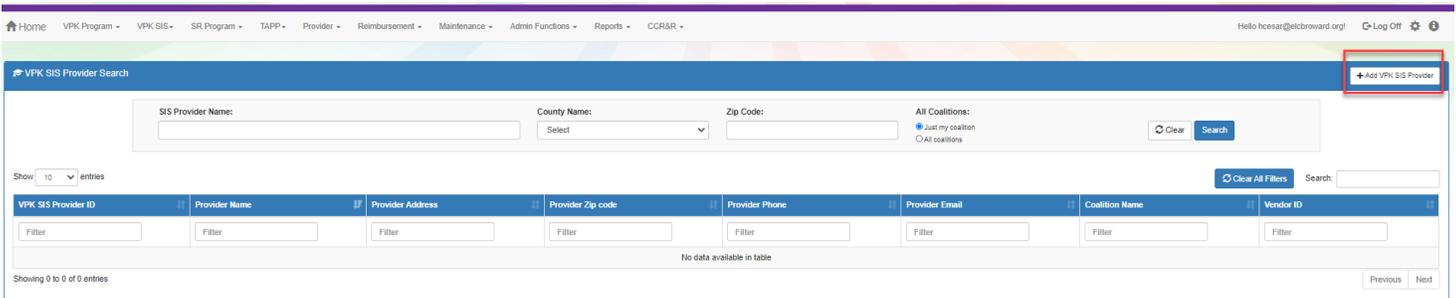
VPK SIS providers are paid through the Coalition Services Portal by enrolling and building a schedule of services for a child. To use this feature, users must be VPK Contract Manager. In addition, VPK SIS Providers for each coalition must be created and the VPK child application must be approved with a SIS session type.

### Add VPK SIS Provider

VPK SIS providers do not require a traditional provider profile or document submission; however, Coalition staff enter abbreviated profile information to create VPK SIS providers. To add a VPK SIS provider, navigate to **VPK SIS > Manage Provider**.



Click the **+Add VPK SIS Provider** button in VPK Search Provider Search Page.



The Add VPK SIS Provider page displays.

**Add VPK SIS Provider**

Name of Person / Organization\*

Street Address\*

City\*

State\* Florida

Zip Code\*

Phone Number\*

Fax Number

Email Address\*

Website

Counties Served\*  
*(select all that apply)* All Counties

Hours of Operation\*  
*(days and time)* Monday - Friday, 8:00 AM - 5:00 PM

Vendor Number\*

Organization Type\*  
*(select one)*

- Community-based/Faith-based organization
- For Profit Company
- Institution of Higher Education
- Individual Provider
- Non-Profit Organization
- Private School
- Other Organization Type *(please specify)*

Delivery Model\*  
*(select all that apply)*

- Individual
- Small Group *(two to five students)*
- Large Group *(six to ten students)*

Languages Spoken\*  
*(select all that apply)*

- English
- Spanish
- Haitian Creole

Save Close

Fill in the information and press **Save**. A confirmation message displays.

**Add / Edit VPK SIS Provider**

VPK SIS Provider successfully added.

OK

## Search VPK SIS Provider

To search for a VPK SIS provider, navigate to **VPK SIS > Manage Provider**.

VPK SIS Providers can be searched for by SIS Provider Name, County Name, Zip Code, All Coalition / Just my Coalition.

To search providers only in the logged in user's coalition, click the 'Just my coalition' radio button from the search criteria. Only VPK SIS providers who are registered in the Coalition user's service area are displayed. To search all VPK SIS providers, click the 'All coalitions' radio button.

VPK SIS Provider Search

SIS Provider Name:  County Name:  Zip Code:   All Coalitions  Just my coalition

Show 10 entries

VPK SIS Provider ID	Provider Name	Provider Address	Provider Zip code	Provider Phone	Provider Email	Coalition Name	Vendor ID
207	Test1 academy	234234	32312	(333) 333-3333	abc@gmail.com	ELC of Broward	6935
205	Test SIS3	123 Main Street #4	33328	(850) 321-5286	alatham77@gmail.com	ELC of Broward	103963
204	Test SIS2	123 Main Street	33328	(850) 321-5286	alatham77@gmail.com	ELC of Broward	103963
203	Test SIS	123 Main Street	33328	(850) 321-5286	alatham77@gmail.com	ELC of Broward	T12345
96	Talk to Me Therapy, LLC	1470 SW 96th Terr.	33324	(406) 650-4324	talktometherapy@gmail.com	ELC of Broward	69300
124	Talk to Me Therapy, LLC	1470 SW 96th Terr.	33324	(268) 566-8665	talktometherapy@gmail.com	ELC of Broward	69300
154	Sandra Savinelli, Inc	5400 S. University Drive	33328	(308) 400-4325	sandra@socialmindcenter.com	ELC of Broward	E69447
142	Optimum Behavioral Services, LLC	14201 West Sunrise Blvd.	33323	(517) 690-1466	info@optimumbehavioralservices.com	ELC of Broward	E69408
185	Little Therapy Central	4545 smith street	32303	(888) 888-8888	emma-jones@gmail.com	ELC of Broward	5767646
95	Konfetti Kidz Therapy LLC.	17901 NW 5th Street	33029	(401) 908-1365	info@konfettikidz.com	ELC of Broward	E69346

Showing 1 to 10 of 23 entries

To edit the VPK SIS provider Information, click the VPK SIS provider id link.

**NOTE:** Only the coalition that created the VPK SIS provider can manage it.

VPK SIS Provider Search

SIS Provider Name:  County Name:  Zip Code:   All Coalitions  Just my coalition

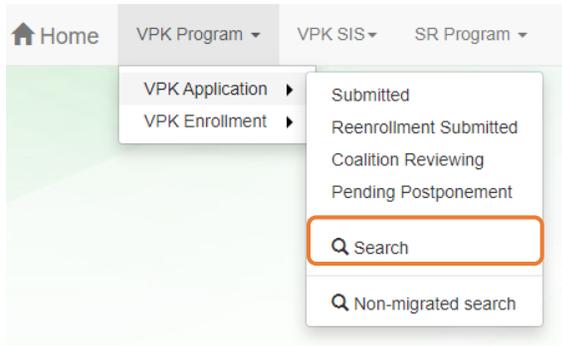
Show 10 entries

VPK SIS Provider ID	Provider Name	Provider Address	Provider Zip code	Provider Phone	Provider Email	Coalition Name	Vendor ID
207	Test1 academy	234234	32312	(333) 333-3333	abc@gmail.com	ELC of Broward	6935
205	Test SIS3	123 Main Street #4	33328	(850) 321-5286	alatham77@gmail.com	ELC of Broward	103963
204	Test SIS2	123 Main Street	33328	(850) 321-5286	alatham77@gmail.com	ELC of Broward	103963
203	Test SIS	123 Main Street	33328	(850) 321-5286	alatham77@gmail.com	ELC of Broward	T12345
96	Talk to Me Therapy, LLC	1470 SW 96th Terr.	33324	(406) 650-4324	talktometherapy@gmail.com	ELC of Broward	69300
124	Talk to Me Therapy, LLC	1470 SW 96th Terr.	33324	(268) 566-8665	talktometherapy@gmail.com	ELC of Broward	69300
154	Sandra Savinelli, Inc	5400 S. University Drive	33328	(308) 400-4325	sandra@socialmindcenter.com	ELC of Broward	E69447
142	Optimum Behavioral Services, LLC	14201 West Sunrise Blvd.	33323	(517) 690-1466	info@optimumbehavioralservices.com	ELC of Broward	E69408
185	Little Therapy Central	4545 smith street	32303	(888) 888-8888	emma-jones@gmail.com	ELC of Broward	5767646
95	Konfetti Kidz Therapy LLC.	17901 NW 5th Street	33029	(401) 908-1365	info@konfettikidz.com	ELC of Broward	E69346

Showing 1 to 10 of 23 entries

## Locate VPK Child Application with SIS Session Type

To begin, locate the VPK child application in need of enrollment. Navigate to **VPK Program > VPK Application > Search**.



VPK Application Search page displays. Select Program Year and VPK Session > School-year Specialized Instructional Service (SIS) or Summer Specialized Instructional Service (SIS). Click the **Search** button. Results display. The child's COE number, first name, last name, and date of birth are needed for enrollment.

- a. If a child's application has the incorrect session type, it may be re-opened to have the session type changed.

VPK Application Search

**By Person Info**

Person Type  Child  Primary Parent

First Name

Last Name

Date of Birth

**By Application Info**

Certificate Number

County for Services

Program Year

VPK Session

Record Phase  VPK Application  VPK Reenrollment

Application Status

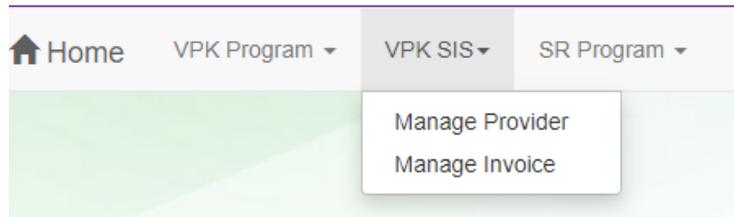
Show 10 entries  Search:

COE Number	Child First Name	Child Last Name	Child DOB	Parent First Name	Parent Last Name	County	Program Year	VPK Status
Filter	Filter	Filter	Filter	Filter	Filter	Filter	Filter	Filter
VPK1169112-2018	Candy	Latham	4/4/2013	Andrea	Latham	Leon	2018 - 2019	Approved

Showing 1 to 1 of 1 entries Previous **1** Next

## Enroll VPK SIS Child/Build Schedule of Services

Navigate to **VPK SIS > Manage Invoice**.



The Invoice page displays. Enter the Certificate Number (VPK#####-YYYY), Child First Name, Child Last Name, and Child Date of Birth. Click the **Search** button.

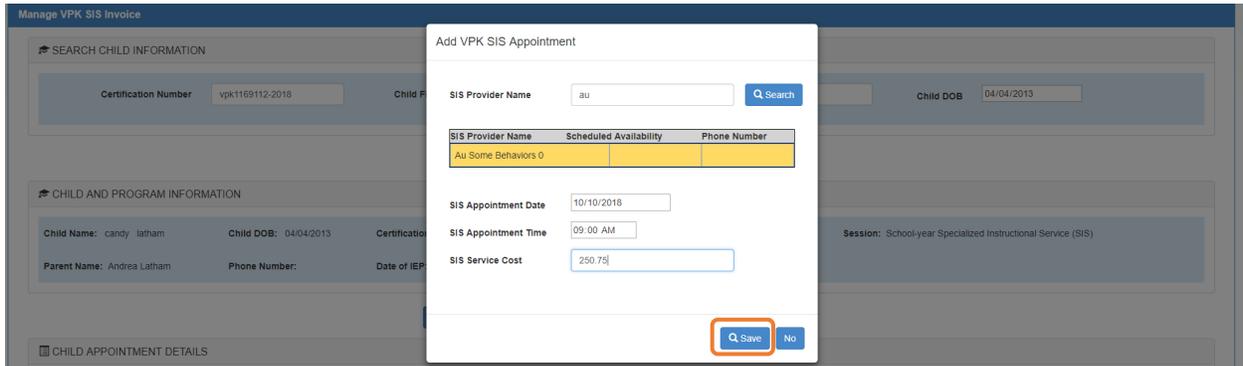
- Message "Child not found." = Re-enter the information because no matching child information was located.
- Message "Child is not eligible to receive VPK SIS services. Please review the application." = Child's VPK application was not approved for a VPK SIS session.
- Message "Child is not enrolled in VPK SIS. Please enroll the child." = Continue to enroll the child.

Click the **Enroll Child** button. The child and program information displays. The VPK SIS Appointment button becomes enabled.

**NOTE:** The date of the IEP will not be populated until a future enhancement. Total available funding reflects the maximum provider payment for the county on VPK Max Rates. Click the **VPK SIS Appointment** button.

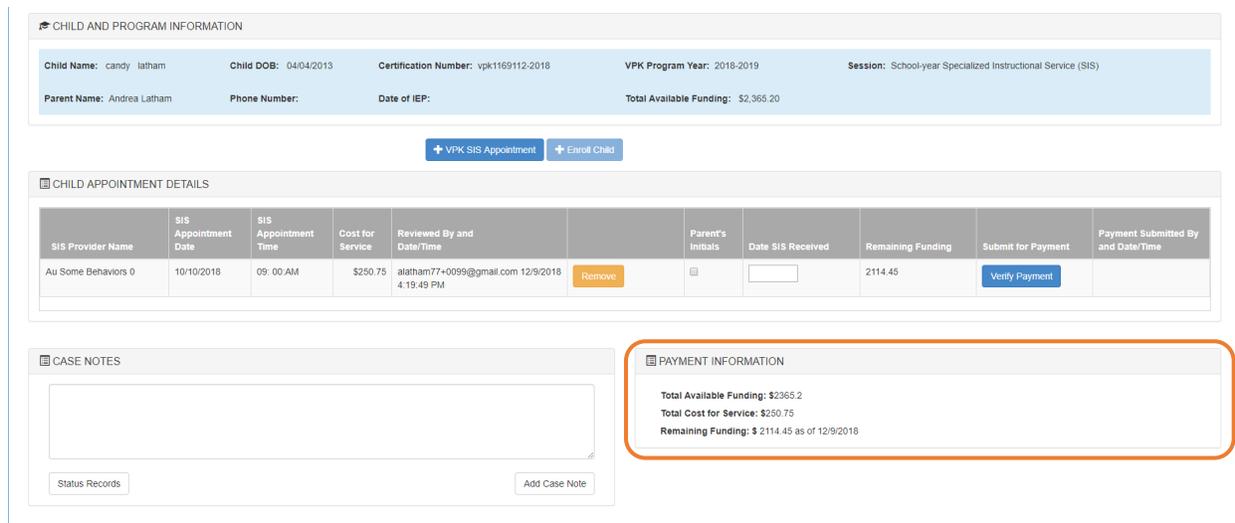
SIS Provider Name	SIS Appointment Date	SIS Appointment Time	Cost for Service	Reviewed By and Date/Time	Parent's Initials	Date SIS Received	Remaining Funding	Submit for Payment	Payment Submitted By and Date/Time

A pop-up message displays to add the VPK SIS appointment.



- Type SIS provider name in field and click **Search**.
- Click on the SIS provider name so that it is highlighted.
- Enter SIS appointment date, time, and cost. Click the **Save** button.

Pop-up message closes. Appointment details display. Cost for service is deducted from the total available funding. Reviewed By information displays. Remove and Verify Payment buttons are enabled. Remaining Funding is updated.



- Saved appointments with incorrect information may be removed and re-added with corrections. **NOTE:** Once a payment is verified, the appointment cannot be removed.
- Repeat as needed to save more appointments. Cost for services cannot exceed the remaining funding.

## Manage VPK SIS Invoice and Verify Payment

Navigate to **VPK SIS > Manage Invoice**.



The Invoice page displays. Enter the Certificate Number (VPK#####-YYYY), Child First Name, Child Last Name, and Child Date of Birth. Click the **Search** button. The saved child enrollment and Schedule of Services display.

To initiate payment, check off the **Parent's Initials** box. The SIS appointment date populates in the Date SIS Received field; however, it may be edited if the appointment date changed.

**CHILD AND PROGRAM INFORMATION**

<b>Child Name:</b> candy latham	<b>Child DOB:</b> 04/04/2013	<b>Certification Number:</b> vpk1169112-2018	<b>VPK Program Year:</b> 2018-2019	<b>Session:</b> School-year Specialized Instructional Service (SIS)
<b>Parent Name:</b> Andrea Latham	<b>Phone Number:</b>	<b>Date of IEP:</b>	<b>Total Available Funding:</b> \$2,365.20	

[+ VPK SIS Appointment](#)   [+ Enroll Child](#)

**CHILD APPOINTMENT DETAILS**

SIS Provider Name	SIS Appointment Date	SIS Appointment Time	Cost for Service	Reviewed By and Date/Time	Remove	Parent's Initials	Date SIS Received	Remaining Funding	Submit for Payment	Payment Submitted By and Date/Time
Au Some Behaviors 0	10/10/2018	09:00:AM	\$250.75	alatham77+0099@gmail.com 12/9/2018 4:19:49 PM	Remove	<input checked="" type="checkbox"/>	10/10/2018	2114.45	Verify Payment	
Au Some Behaviors 0	10/20/2018	09:00:AM	\$250.75	alatham77+0099@gmail.com 12/9/2018 4:43:32 PM	Remove	<input type="checkbox"/>		1863.70	Verify Payment	
Au Some Behaviors 0	11/2/2018	02:00:PM	\$390.25	alatham77+0099@gmail.com 12/9/2018 4:44:04 PM	Remove	<input type="checkbox"/>		1473.45	Verify Payment	
Au Some Behaviors 0	11/16/2018	10:00:AM	\$250.75	alatham77+0099@gmail.com 12/9/2018 4:44:40 PM	Remove	<input type="checkbox"/>		1222.70	Verify Payment	

**CASE NOTES**

**PAYMENT INFORMATION**

**Total Available Funding:** \$2365.2  
**Total Cost for Service:** \$1142.50  
**Remaining Funding:** \$ 1222.70 as of 12/9/2018

- a. Checking the Parent's Initials box is required. A payment cannot be verified without this check box.
- b. **NOTE:** This is the last opportunity to remove the appointment if corrections are needed. Once a payment is verified, the appointment cannot be removed.

Click the **Verify Payment** button. Payment submitted by and date/time displays. This record now appears in the Payment Period Summary in the Payment Verified column.

CHILD AND PROGRAM INFORMATION

Child Name: candy latham    Child DOB: 04/04/2013    Certification Number: vpk1169112-2018    VPK Program Year: 2018-2019    Session: School-year Specialized Instructional Service (SIS)  
 Parent Name: Andrea Latham    Phone Number:    Date of IEP:    Total Available Funding: \$2,365.20

+ VPK SIS Appointment    + Enroll Child

CHILD APPOINTMENT DETAILS

SIS Provider Name	SIS Appointment Date	SIS Appointment Time	Cost for Service	Reviewed By and Date/Time		Parent's Initials	Date SIS Received	Remaining Funding	Submit for Payment	Payment Submitted By and Date/Time
Au Some Behaviors 0	10/10/2018	09:00:AM	\$250.75	alatham77+0099@gmail.com 12/9/2018 4:19:49 PM	Remove	<input checked="" type="checkbox"/>	10/10/2018	2114.45	Verify Payment	alatham77+0099@gmail.com By 12/9/2018 4:45:35 PM
Au Some Behaviors 0	10/20/2018	09:00:AM	\$250.75	alatham77+0099@gmail.com 12/9/2018 4:43:32 PM	Remove	<input type="checkbox"/>		1863.70	Verify Payment	
Au Some Behaviors 0	11/2/2018	02:00:PM	\$390.25	alatham77+0099@gmail.com 12/9/2018 4:44:04 PM	Remove	<input type="checkbox"/>		1473.45	Verify Payment	
Au Some Behaviors 0	11/16/2018	10:00:AM	\$250.75	alatham77+0099@gmail.com 12/9/2018 4:44:40 PM	Remove	<input type="checkbox"/>		1222.70	Verify Payment	

CASE NOTES

PAYMENT INFORMATION

Total Available Funding: \$2365.2  
 Total Cost for Service: \$1142.50  
 Remaining Funding: \$ 1222.70 as of 12/9/2018

## Run Update

Go to the **Reimbursement** menu item. Select **Reimbursement Closeout > Run Update Process**. Go to the **VPK SIS** row and click the **Run Update** button. The total number of records display in the Payment Cycle Summary **Updated** column.

## Run Payment Transmittal File

Go to the **Reimbursement** menu item. Select **Reimbursement Closeout > Run Payment Transmittal File**. Go to the **VPK SIS** row and click the **Run File** button. A pop-up message appears. The Payment Transmittal File default criteria is set. Click **Run Transmittal File**. The file downloads and the total number of records display in the Payment Cycle Summary **Paid** column. Save the downloaded file locally.

## Run Trial/Final Reimbursement Report

Go to the **Reimbursement** menu item. Select **Reimbursement Closeout > Run Reimbursement Report**. Go to the **VPK SIS** row and click the **Run Reimbursement Report** button. A pop-up message appears. Click the **Run Trial Reimbursement Report** button or **Run Final Reimbursement Report** button. The Provider Reimbursement Report opens.

- a. A detail report (with child information) is available by selecting **Detail Report**
- b. To print, click the **Download** button on the bottom right corner of the screen. A download pop-up message displays. Select **PDF**, change the paper orientation to **Landscape**, and click **Create PDF**. When the PDF file is generated, click **Download**. The file may be saved locally.

## Run Trial/Final 5045 Report

Go to the **Reimbursement** menu item. Select **Reimbursement Closeout > Run 5045 Report**. Go to the **VPK SIS** row and click the **Run 5045 Report** button. A pop-up message appears. Click the **Run Trial 5045 Report** button or **Run Final 5045 Report** button. The 5045 Report opens.

- a. A detail report (with child information) is available by selecting **Detail Report**
- b. To print, click the **Download** button on the bottom right corner of the screen. A download pop-up message displays. Select **PDF**, change the paper orientation to **Landscape**, and click **Create PDF**. When the PDF file is generated, click **Download**. The file may be saved locally.

## Financial Reports

Financial Reports are available in EFS Mod. These reports display the same information as the same reports in Tableau. Navigate to **Reports > Financial Reports**.

**NOTE:** The reports will also remain in Tableau until all functionality is available in EFS Mod.



Report Name	Action
5045 Report	Run Report
Coalition Invoice	Run Report

### 5045 Report

The 5045 Report is available in EFS Mod. Navigate to **Reports > Financial Reports**. After clicking the **Run Report** button for 5045 Report, the Run 5045 Report pop-up window opens.

Select the Report Parameters from the dropdown. Each dropdown is required.

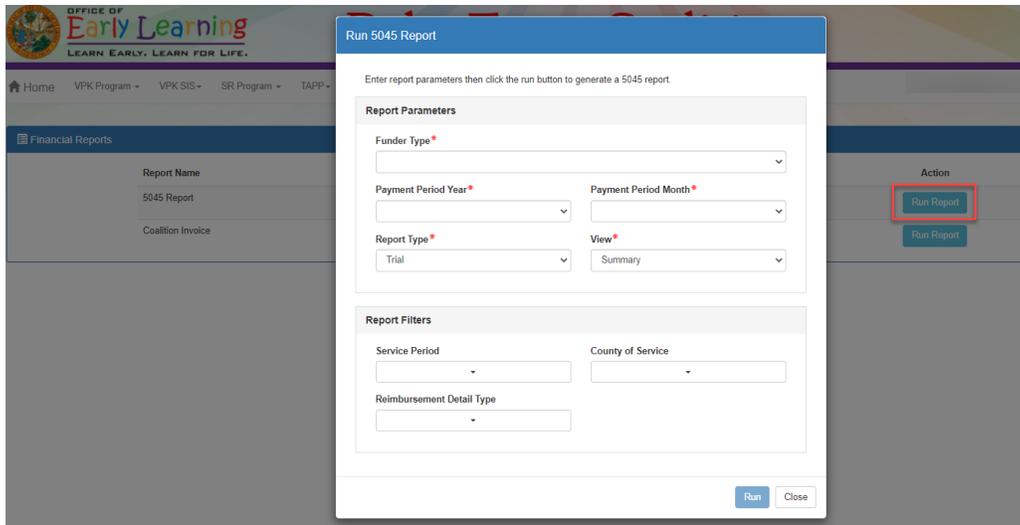
1. Funder Type (SR, VPK, Local or SR Plus)
2. Payment Period Year
3. Payment Period Month
4. Report Type (Pending, Closed, Trial, or Final)
5. View (Summary or Detail)

Additional filters can be selected when the Summary view is selected. If no option is selected, then all records that meet the Report Parameters will display.

1. Service Period
2. County of Service
3. Reimbursement Detail Type

Additional filters can be selected when the Detail view is selected. If no option is selected, then all records that meet the Report Parameters will display.

1. Service Period
2. County of Service
3. Provider ID
4. Child ID
5. Reimbursement Detail Type
6. Obscure Child Name



The 5045 Report opens in a new browser tab and displays the information based on the criteria selected.

- A. Use the arrows to navigate pages.
- B. Click the  icon and save the report to Excel or PDF.

Fiscal Year	Report Type	Payment Period	Service Period	County	Reimb Detail Type	Billing Group	Payment Period Status
All	FINAL	2/2023	All	All	All	All	CLOSED

5045 SR FINAL Detail Test Alpha  
Report Run Date: 8/7/2023 1:33:48 PM

County	Service Period	Child Name	Date Of Birth	Billing Group	Elig	Unit Of	Care Level	Adj	Reimb Type	Reimb Detail ID	Match Funder	Days to be Paid	Total Paymt Rate	Daily Parent CoPay Rate	Gross Payment Amt	Less Parent CoPay Amt	Net Amount	Less Match	Net Less Match Amount	Gold Seal Total	Local QI Total	Ontrod Blots Total	QPI Total	Child Assmnt Total	Special Needs Quality Total	OCA Payment Amount
	1/2023			BG1	HOME	FT	PR3	No	MTH			22	\$41.73	\$0.00	\$918.06	\$0.00	\$918.06	\$0.00	\$918.06	\$0.00	\$0.00	\$0.00	\$60.06	\$0.00	\$0.00	\$858.00
				BGB	ECON	FT	SCH	No	MTH		BGB MATCH Match ID: 147	5	\$61.47	\$1.17	\$307.35	\$5.85	\$301.50	\$0.00	\$301.50	\$0.00	\$0.00	\$0.00	\$16.95	\$0.00	\$48.40	\$236.15
				BGB	ECON	PT	SCH	No	MTH		BGB MATCH Match ID: 147	17	\$48.26	\$1.17	\$820.42	\$19.89	\$800.53	\$0.00	\$800.53	\$0.00	\$0.00	\$0.00	\$45.22	\$0.00	\$129.20	\$626.11

## Coalition Invoice Report

The Coalition Invoice Report is available in EFS Mod. Navigate to **Reports > Financial Reports**. After clicking the **Run Report** button for Coalition Invoice, the Run Coalition Invoice Report pop-up window opens.

Run Coalition Invoice Report

Funder Type

Payment Period Year

Payment Period Month

Run Report

Report Name	Action
5045 Report	Run Report
Coalition Invoice	Run Report

Select the items from the dropdowns, then click the **Run Report** button.

1. Funder Type (SR, VPK, Local or SR Plus)
2. Payment Period Year
3. Payment Period Month

The Coalition Invoice Report opens in a new browser tab and displays the information based on the criteria selected.

- C. Use the arrows to navigate pages.
- D. Click the  icon and save the report to Excel or PDF.

Test Delta

Invoice Period: 2/2021

Funder: SR

Coalition Invoice Report

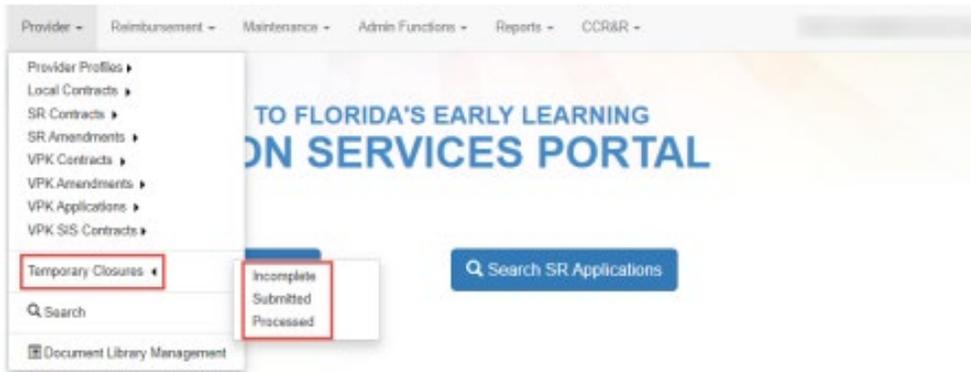
Payment Period Status: CLOSED

Report Run Date: 7/20/2021 10:27:51 AM

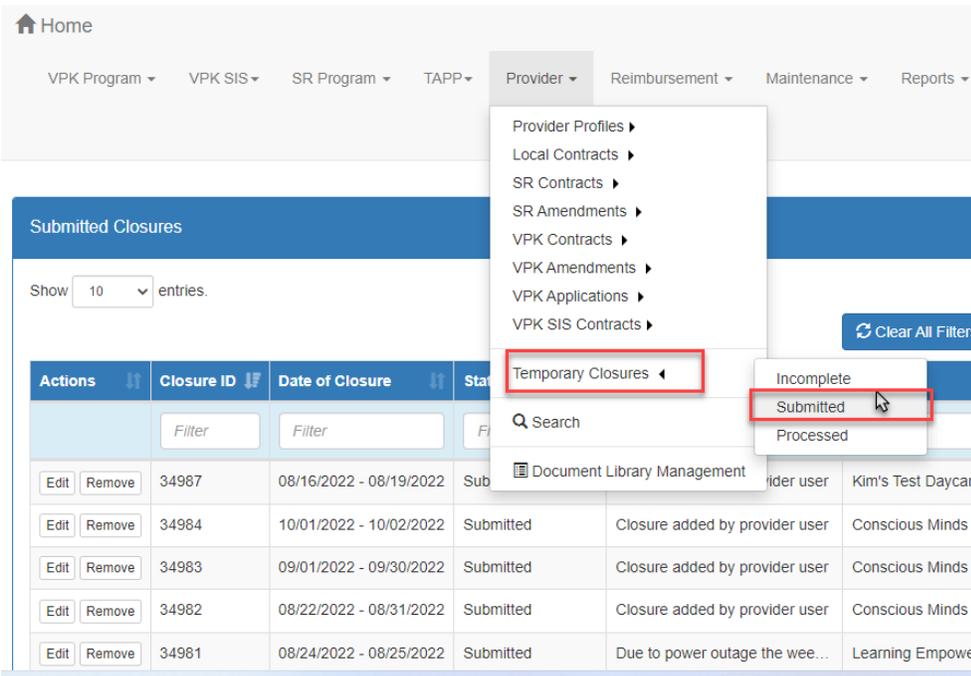
Fiscal Year	Service Period	OCA Code	Brevard	Broward	Miami-Dade	OCA Total
19-20	7/2019	97GSD	\$0.00	\$0.00	\$0.00	\$0.00
		97R00	\$0.00	-\$323.00	\$0.00	-\$323.00
		97CSS	\$0.00	\$0.00	\$0.00	\$0.00
		97LQI	\$0.00	\$0.00	\$0.00	\$0.00
		QPIPQ	\$0.00	\$0.00	\$0.00	\$0.00
		QPICA	\$0.00	\$0.00	\$0.00	\$0.00
		97GSD	\$0.00	\$0.00	\$0.00	\$0.00
		97CSQ	\$0.00	\$0.00	\$0.00	\$0.00
		97LQQ	\$0.00	\$0.00	\$0.00	\$0.00
		QPIPQ	\$0.00	\$0.00	\$0.00	\$0.00
		QPICQ	\$0.00	\$0.00	\$0.00	\$0.00

## Temporary Closures

Coalition Portal users can edit, view, remove and process temporary closure records created by Providers. There are Incomplete, Submitted and Processed queues to view, edit, process and remove the records.



## Submitted Closures Queue



The Submitted Closures queue lists closures submitted by providers and the closures that are in **Coalition Reviewing** or **Submitted** status. From the Submitted queue, Coalition users can:

- Edit temporary closures
- Remove temporary closures
- Change the “Possible Days to be Paid”
- Approve temporary closures

Clicking the **Edit** button will open the Edit Temporary Closure pop-up window.

Clicking the **Remove** button will remove the temporary closure.

**NOTE:** A temporary closure cannot be removed if at least one provider has a submitted attendance for the service period with the closure.

Submitted Closures								+ Add Temporary Closure
Actions	Closure ID	Date of Closure	Status	Comments	Providers	Last Modified Date	Last Modified By	
<input type="button" value="Edit"/> <input type="button" value="Remove"/>	34987	08/16/2022 - 08/19/2022	Submitted	Closure added by provider user	<input type="button" value="more"/>	8/25/2022 7:44:17 PM		
<input type="button" value="Edit"/> <input type="button" value="Remove"/>	34984	10/01/2022 - 10/02/2022	Submitted	Closure added by provider user		8/25/2022 4:55:43 PM		

### Processing Whole Site Temporary Closures

Clicking the **Edit** button from the Submitted Closures queue for a Whole Site Closure opens the Edit Temporary Closure pop-up window.

Coalition users can click on CR and change it to CN and vice versa. Upon clicking the Approve button the closure gets a "Processed" status.

Click the **Approve** button to approve the closure. **NOTE:** The closure status is updated to 'Processed'. The CR or CN days will now display on the provider's attendance roster for the month of the closure.

Edit Temporary Closure

Closed Provider Site(s)

Select Providers \*

Closure Details

Closed From \*  Closed To \*

Reimbursement Requests \*

For each provider, indicate whether all services were stopped, and then select one or more classes and care levels involved in the closure, along with the corresponding reimbursement request per closure day. If VPK classes were involved in the closure, please review the corresponding VPK provider applications.

Providers	VPK Classes (1 of 1)	SR Care Levels (6 of 6)	CS21 July 2022																																																						
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>No Services</th> <th>Provider</th> </tr> </thead> <tbody> <tr> <td><input checked="" type="checkbox"/></td> <td></td> </tr> </tbody> </table>	No Services	Provider	<input checked="" type="checkbox"/>		<table border="1" style="width: 100%; border-collapse: collapse;"> <tbody> <tr> <td style="background-color: #0056b3; color: white;">CS21 - VPK Summer 2022</td> </tr> </tbody> </table>	CS21 - VPK Summer 2022		<table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <thead> <tr> <th>Sun</th> <th>Mon</th> <th>Tue</th> <th>Wed</th> <th>Thu</th> <th>Fri</th> <th>Sat</th> </tr> </thead> <tbody> <tr> <td>26</td> <td>27</td> <td>28</td> <td>29</td> <td>30</td> <td>1</td> <td>2</td> </tr> <tr> <td>3</td> <td>4</td> <td>5</td> <td>6</td> <td>7</td> <td>8</td> <td>9</td> </tr> <tr> <td>10</td> <td>11</td> <td>12</td> <td>13</td> <td>14</td> <td>15</td> <td>16</td> </tr> <tr> <td>17</td> <td>18</td> <td>19</td> <td>20</td> <td>21</td> <td>22</td> <td>23</td> </tr> <tr> <td>24</td> <td style="background-color: #808080;">25 CR</td> <td style="background-color: #808080;">26 CR</td> <td>27</td> <td>28</td> <td>29</td> <td>30</td> </tr> <tr> <td>31</td> <td>1</td> <td>2</td> <td>3</td> <td>4</td> <td>5</td> <td>6</td> </tr> </tbody> </table>	Sun	Mon	Tue	Wed	Thu	Fri	Sat	26	27	28	29	30	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25 CR	26 CR	27	28	29	30	31	1	2	3	4	5	6
No Services	Provider																																																								
<input checked="" type="checkbox"/>																																																									
CS21 - VPK Summer 2022																																																									
Sun	Mon	Tue	Wed	Thu	Fri	Sat																																																			
26	27	28	29	30	1	2																																																			
3	4	5	6	7	8	9																																																			
10	11	12	13	14	15	16																																																			
17	18	19	20	21	22	23																																																			
24	25 CR	26 CR	27	28	29	30																																																			
31	1	2	3	4	5	6																																																			

Clicking the No Services checkbox will select multiple providers with whole site closures and a pop-up will indicate that all classes and care levels are selected for all providers

The screenshot shows the 'Edit Temporary Closure' interface. A blue pop-up message at the top center reads: "All Classes and Care Levels Were Selected. By selecting 'No Services' for all providers, all classes and care levels have been automatically selected for the closure." Below the pop-up, the 'Providers' section has the 'No Services' checkbox checked. The 'VPK Classes' section shows 'CS21 - VPK Summer 2022' selected. A calendar for 'CS21 July 2022' is visible on the right. At the bottom right, there are 'Save', 'Cancel', and 'Approve' buttons.

Unchecking the No Services checkbox will deselect all providers, but all classes and care levels for each provider are still selected. The user will need to deselect classes and care levels for each provider that should not be included in the closure.

The screenshot shows the 'Edit Temporary Closure' interface. A blue pop-up message at the top center reads: "Class and Care Levels Selections Need Review. Although the 'No Services' checkbox has been deselected for all providers, existing class and care level selections were not modified. Please deselect the classes and care levels that should not be included in the closure." Below the pop-up, the 'Providers' section has the 'No Services' checkbox unchecked. The 'VPK Classes' section shows 'CS21 - VPK Summer 2022' selected. A calendar for 'CS21 July 2022' is visible on the right. At the bottom right, there are 'Save', 'Cancel', and 'Approve' buttons.

## Processing Partial Closure

Clicking the **Edit** button from the Submitted Closures queue for a Partial Closure (VPK or SR) opens the Edit Temporary Closure pop-up window.

Coalition users can click on CR and change it to CN and vice versa. Upon clicking the **Approve** button the closure gets a "Processed" status.

**NOTE:** If there are Closure Non-Reimbursable days in the closure, the closure days are written in the calendar.

### VPK

#### Edit Temporary Closure

Closed Provider Site(s)

Select Providers \*

Closure Details

Closed From \* 03/31/2022

Closed To \* 03/31/2022

Reimbursement Requests \*

For each provider, indicate whether all services were stopped, and then select one or more classes and care levels involved in the closure, along with the corresponding reimbursement request per closure day. If VPK classes were involved in the closure, please review the corresponding VPK provider applications. ⓘ

No ⓘ Services	Provider
<input type="checkbox"/>	
<input checked="" type="checkbox"/>	

Providers

VPK Classes (3 of 5) SR Care Levels (0 of 0)

- AF21 - A
- BF21 - B
- CF21 - C
- DF21 - D
- EF21 - E

AF21 March 2022

Sun	Mon	Tue	Wed	Thu	Fri	Sat
27	28	1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31 CR	1	2

Total Processed Closure Reimbursable (CR) Days in Class: 0 ⓘ

CR = Closure Reimbursable CN = Closure Non-Reimbursable.

Save Cancel Approve

**Edit Temporary Closure**

Closed Provider Site(s)

Select Providers\*

Closure Details

Closed From\* 07/29/2022

Closed To\* 07/29/2022

Reimbursement Requests\*

For each provider, indicate whether all services were stopped, and then select one or more classes and care levels involved in the closure, along with the corresponding reimbursement request per closure day. If VPK classes were involved in the closure, please review the corresponding VPK provider applications.

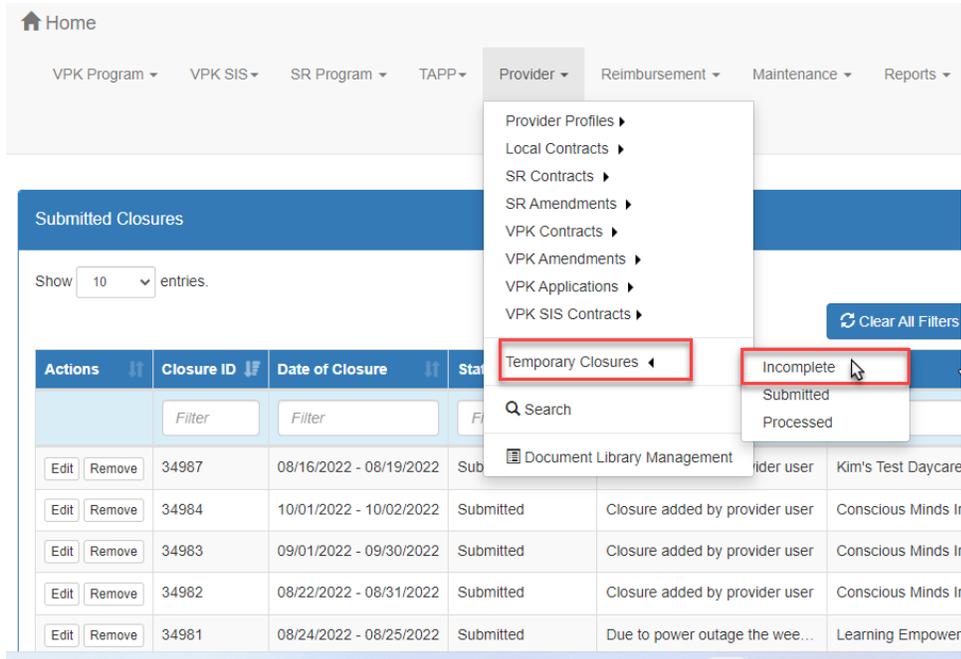
Providers		SR Care Levels (4 of 7)		SCH July 2022						
No Services	Provider	VPK Classes (0 of 0)		Sun	Mon	Tue	Wed	Thu	Fri	Sat
<input type="checkbox"/>		<input checked="" type="checkbox"/> INF - < 12 Months		26	27	28	29	30	1	2
<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/> TOD - 12 < 24 Months		3	4	5	6	7	8	9
<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/> 2YR - 24 < 36 Months		10	11	12	13	14	15	16
<input type="checkbox"/>		<input type="checkbox"/> PR3 - 36 < 48 Months		17	18	19	20	21	22	23
<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/> PR4 - 48 < 60 Months		24	25	26	27	28	29	30
<input type="checkbox"/>		<input type="checkbox"/> PR5 - 60 < 72 Months		31	1	2	3	4	5	6
<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/> SCH - In School							CR	

Save Cancel Approve

**NOTE:** Individual students, not affected by a temporary closure, may be edited by the provider in attendance. For example, a 2 Year Old class has 6 children showing a CR for the temporary closure, but 3 of them were present on the CR days. The provider can change the CR days to an X to mark the 3 children present.

## Incomplete Closures Queue

The Incomplete closures queue displays all the temporary closures created by providers within the coalition that have not been submitted. Coalition users can view and assist providers with questions before the temporary closure is submitted for approval.

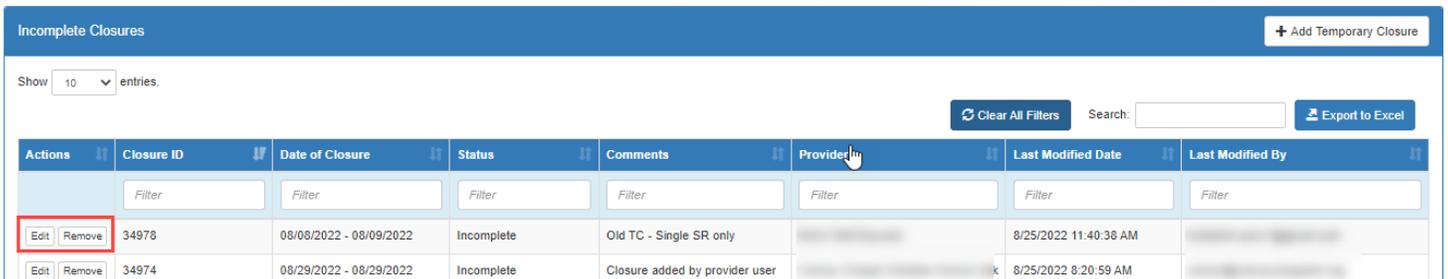


The screenshot shows the 'Submitted Closures' interface. A dropdown menu is open over the 'Temporary Closures' filter, showing options: 'Incomplete', 'Submitted', and 'Processed'. The 'Incomplete' option is highlighted. Below the menu is a table with columns: Actions, Closure ID, Date of Closure, Status, Comments, Provider, and Last Modified. The table contains several rows of closure data.

Actions	Closure ID	Date of Closure	Status	Comments	Provider	Last Modified
<a href="#">Edit</a> <a href="#">Remove</a>	34987	08/16/2022 - 08/19/2022	Submitted		Provider user	Kim's Test Daycare
<a href="#">Edit</a> <a href="#">Remove</a>	34984	10/01/2022 - 10/02/2022	Submitted	Closure added by provider user		Conscious Minds Ir
<a href="#">Edit</a> <a href="#">Remove</a>	34983	09/01/2022 - 09/30/2022	Submitted	Closure added by provider user		Conscious Minds Ir
<a href="#">Edit</a> <a href="#">Remove</a>	34982	08/22/2022 - 08/31/2022	Submitted	Closure added by provider user		Conscious Minds Ir
<a href="#">Edit</a> <a href="#">Remove</a>	34981	08/24/2022 - 08/25/2022	Submitted	Due to power outage the wee...		Learning Empower

Clicking the **Edit** button will open the Edit Temporary Closure pop-up window. The coalition can make edits and save changes made to the temporary closure. The provider will need to submit the closure for approval.

Clicking the **Remove** button will remove the temporary closure.



The screenshot shows the 'Incomplete Closures' interface. It features a table with columns: Actions, Closure ID, Date of Closure, Status, Comments, Provider, Last Modified Date, and Last Modified By. The 'Edit' and 'Remove' buttons for the first row are highlighted with a red box. The table contains two rows of closure data.

Actions	Closure ID	Date of Closure	Status	Comments	Provider	Last Modified Date	Last Modified By
<a href="#">Edit</a> <a href="#">Remove</a>	34978	08/08/2022 - 08/09/2022	Incomplete	Old TC - Single SR only		8/25/2022 11:40:38 AM	
<a href="#">Edit</a> <a href="#">Remove</a>	34974	08/29/2022 - 08/29/2022	Incomplete	Closure added by provider user		8/25/2022 8:20:59 AM	

## Processed Closures Queue

The approved temporary closures display in the Processed Closures queue.

Submitted Closures

Show 10 entries.

Actions	Closure ID	Date of Closure	Status	Comments	Providers	Last Modified Date	Last Modified By
<a href="#">Edit</a> <a href="#">Remove</a>	34987	08/16/2022 - 08/19/2022	Submitted		Provider user		Kim's Test Daycare
<a href="#">Edit</a> <a href="#">Remove</a>	34984	10/01/2022 - 10/02/2022	Submitted	Closure added by provider user			Conscious Minds Ir
<a href="#">Edit</a> <a href="#">Remove</a>	34983	09/01/2022 - 09/30/2022	Submitted	Closure added by provider user			Conscious Minds Ir
<a href="#">Edit</a> <a href="#">Remove</a>	34982	08/22/2022 - 08/31/2022	Submitted	Closure added by provider user			Conscious Minds Ir
<a href="#">Edit</a> <a href="#">Remove</a>	34981	08/24/2022 - 08/25/2022	Submitted	Due to power outage the wee...			Learning Empower

Clicking the **View** button will open the Temporary Closure pop-up window in read-only.

Clicking the **Remove** button will remove the temporary closure.

**NOTE:** A processed closure cannot be removed if at least one provider has submitted attendance for the service period with the closure.

Processed Closures								<a href="#">+ Add Temporary Closure</a>
Actions	Closure ID	Date of Closure	Status	Comments	Providers	Last Modified Date	Last Modified By	
<a href="#">View</a> <a href="#">Remove</a>	1	11/30/2018 - 11/30/2018	Processed	Smoke test		5/29/2019 8:53:36 PM		
<a href="#">View</a> <a href="#">Remove</a>	2	09/04/2018 - 09/04/2018	Processed	Tropical Storm Gordon		12/9/2018 8:59:49 PM		

## Closure Reimbursable (CR) or Closure Non-reimbursable (CN) Days in Have Attendance

On the provider portal Manage SR Attendance or VPK Attendance pages, temporary closures that were processed by the coalition are displayed as a **CR** or **CN** on the attendance calendar.

**SR Attendance Roster**

Program Type: SR  
 Service Period: January 2022  
 Coalition: ELC of [REDACTED]

School Readiness (SR)  
 Due Date: 2/3/2022

Roster was verified at ELC of [REDACTED] on 2/10/2022 by [REDACTED].org

Care Level: INF, TOD, 2YR, PR3, PR4, PR5, SCH  
 Hours Of Operation: M-F 6:30am-6:00pm  
 SR/Local Funding Students: 19  
 Paid Holidays: 01/17/2022  
 Temporary Closures: 01/03/2022-01/04/2022, 01/07/2022-01/14/2022

Child Name	DOB	Care	Age	BG	Status
1. [REDACTED]	8/15/2017	PR4	5y	BG8	✓APP
2. [REDACTED]	2/11/2018	PR3	4y	BG8	✓APP
3. [REDACTED]	6/9/2018	PR3	4y	BG8	✓APP
4. [REDACTED]	7/10/2017	PR4	5y	BG8	✓APP
5. [REDACTED]	11/6/2016	PR5	5y	BG8	✓APP
6. [REDACTED]	12/20/2018	PR3	3y	BG8	✓APP
7. [REDACTED]	5/12/2017	PR4	5y	BG8	✓APP
8. [REDACTED]	2/13/2017	PR4	5y	BG8	✓APP
9. [REDACTED]	1/29/2017	PR4	5y	BG8	✓APP
10. [REDACTED]	1/14/2021	INF	1y	BG8	✓APP
11. [REDACTED]	1/14/2021	TOD	1y	BG8	✓APP
12. [REDACTED]	3/20/2018	PR3	4y	BG8	✓APP
13. [REDACTED]	3/29/2020	TOD	2y	BG1	✓APP
14. [REDACTED]	5/23/2021	INF	1y	BG8	✓APP
15. [REDACTED]	11/1/2018	PR3	3y	BG8	✓APP
16. [REDACTED]	11/11/2018	PR3	3y	BG8	✓APP
17. [REDACTED]	6/14/2017	PR4	5y	BG8	✓APP
18. [REDACTED]	4/17/2019	2YR	3y	BG1	✓APP
19. [REDACTED]	10/28/2017	PR4	4y	BG8	✓APP
20. [REDACTED]					

**Attendance Calendar**

January 2022

Sun	Mon	Tue	Wed	Thu	Fri	Sat
26	27	28	29	30	31	1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29

**Child's Current Information**

Name: [REDACTED]  
 DOB: 8/15/2017 Age: 5  
 Copyay: \$1.00 BGrp: BG8  
 Status: Enrolled  
 Has Special Needs: No  
 Monthly Attendance Summary  
 Anticipated Start Date: 10/1/2021  
 Days Absent: 5  
 Days Present: 15  
 Reimbursed Holidays: 1  
 Non-Reimbursable Days: 0  
 RWA: No

**NOTE:** The red circle with a slash next to the child's care level indicates it was impacted by a temporary closure.

When the provider submits attendance with temporary closures during the service period, navigate to **Reimbursement > Attendance Processing > Have Attendance**

Select Funder Type VPK or SR & Local & SR Plus then **Submit**. The submitted attendance record appears in the Have Attendance queue. Click on the **Review** link to view the roster with temporary closure days.

**"Have Attendance" Work Queue**

Registration Fees  
 Attendance Processing  
 Adjustment Processing  
 Reimbursement Closeout  
 Vendor Number Entry  
 VPK Reimbursement Tools  
 Reimbursement Search

Need Attendance  
 Have Attendance  
 Closed Attendance  
 View Payment Verified

County: All  
 Funder Type: SR & Local  
 Submit

Show 10 search results

Action	Provider ID	Provider Name	County	Service Period	Funder Type	VPK Class ID	Status	Received Date	Last Modified Date	Last Modified By
<a href="#">Review</a>	5454	[REDACTED]	[REDACTED]	September 2021	SR	[REDACTED]	Have Attendance	10/22/2021	10/22/2021	[REDACTED]

Showing 1 to 1 of 1 search results. (filtered from 4 total entries)

For SR and SR Plus, all closure days marked CR (closure reimbursable) are included in the Days Paid column.

- 09/01/2021 to 09/30/2021

Attendance Record for 31 Total Records

Fundr Type: SR      Payment Period: Oct - 2021      Service Period: 09/01/2021 to 09/30/2021  
 Status: Have Attendance      Due Date: 10/05/2021      Submitted Date: 10/22/2021  
 Provider Name:      Provider ID:      Submitted By: @hotmail.com  
 Site Address:      County:      Phone: (555) 555-5555

[Clear All Filters](#)    Search:

Last Name	First Name	DOB	Age	Billing Group	W	Tu	W	Th	F	Sa	Su	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Days Paid	Status	Action	
		8/20/2020	1y	BG8	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	22	Approve	Reject
		5/8/2015	6y	BG1	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	22	Approve	Reject
		5/4/2010	11y	BG8	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	22	Approve	Reject
		5/4/2021	0y	BG3W	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	3	Approve	Reject
		5/4/2021	0y	BG3W																													19	Approve	Reject	

For VPK, all closure days marked CR (closure reimbursable) are included in the CR Days column.

AF21 - VPK A - Sep-2021

Attendance Record for 11 Total Records

Fundr Type: VPK      Payment Period: Oct - 2021      Service Period: 09/01/2021 to 09/30/2021  
 Status: Have Attendance      Due Date: 10/05/2021      Submitted Date: 10/14/2021  
 Provider Name:      Provider ID:      Submitted By: [K. Wu](#)  
 Site Address:      County:      Advance Payment: [K. Wu](#)  
 Classroom: AF21 - VPK A      Class Start: 09/23/2021      Class End: 06/09/2022

[Clear All Filters](#)    Search:

Last Name	First Name	DOB	Age	Billing Group	W	Tu	W	Th	F	Sa	Su	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Days Present	Days Absent	CR Days	Status	Action
			5y	VPK	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	17	0	1	Approve	Reject
			5y	VPK	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	17	0	1	Approve	Reject
			5y	VPK	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	17	0	1	Approve	Reject
			4y	VPK	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	17	0	1	Approve	Reject
			4y	VPK	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	17	0	1	Approve	Reject
			4y	VPK	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	17	0	1	Approve	Reject
			5y	VPK	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	17	0	1	Approve	Reject
			4y	VPK	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	17	0	1	Approve	Reject
			4y	VPK	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	17	0	1	Approve	Reject

Showing 1 to 11 of 11 search results

[Legend](#)      [Continue](#)

Click **Approve Roster**.

			5y	BG8	X	T	T	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	1	Approve	Reject	
			11y	BG8	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	22	Approve	Reject

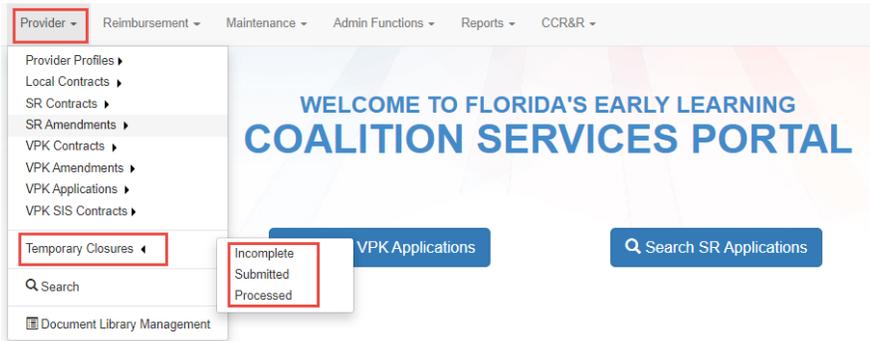
Showing 1 to 20 of 20 search results. (filtered from 91 total entries)

[Legend](#)      [Approve Roster](#)

**NOTE:** Temporary closures that go through the end of the month will not automatically be included in hours paid. If the closure days should be paid, an adjustment can be done. While processing attendance for a service period where the temporary closure goes to the end of the month, a current period adjustment (CPA) can be done if the coalition knows for certain that the child returned to the program following the closure. Otherwise, a prior period adjustment (PPA) can be done to reimburse for those closure days if the child attends after the closure.

## Creating a Temporary Closure On Behalf of the Provider

Navigate to any **Temporary Closures** queue.



Click the **Add Temporary Closure** button. The temporary closure form appears.

Submitted Closures + Add Temporary Closure

Show  entries.

[Clear All Filters](#) Search:  [Export to Excel](#)

Actions	Closure ID	Date of Closure	Status	Comments	Providers	Last Modified Date
	<input type="text" value="Filter"/>					
<a href="#">Edit</a> <a href="#">Remove</a>	34987	08/16/2022 - 08/19/2022	Submitted	Closure added by provider user	[Redacted]	8/25/2022 7:44:17 P
<a href="#">Edit</a> <a href="#">Remove</a>	34984	10/01/2022 - 10/02/2022	Submitted	Closure added by provider user	[Redacted]	8/25/2022 4:55:43 P
<a href="#">Edit</a> <a href="#">Remove</a>	34983	09/01/2022 - 09/30/2022	Submitted	Closure added by provider user	[Redacted]	8/25/2022 4:55:21 P
<a href="#">Edit</a> <a href="#">Remove</a>	34982	08/22/2022 - 08/31/2022	Submitted	Closure added by provider user	[Redacted]	8/25/2022 4:54:56 P
<a href="#">Edit</a> <a href="#">Remove</a>	34981	08/24/2022 - 08/25/2022	Submitted	Due to power outage the wee...	[Redacted]	8/25/2022 2:04:16 P
<a href="#">Edit</a> <a href="#">Remove</a>	34980	09/19/2022 - 09/20/2022	Submitted	Closure added by provider user	[Redacted]	8/25/2022 1:03:35 P

Add the closure details in the fields. The **Possible Days to be Paid** is populated when the closure dates are entered. Click **Save** to save the details and close the form, **Approve** to process the closure, or **Cancel** to close the form without saving.

**NOTE:** If the provider submitted an attendance roster for the period with the closure days, the closure cannot be created.

- Closed Provider Site(s) – Select the site(s) that were completely temporarily closed due to emergency circumstances. Only active providers with contract statuses ‘Certified’ and ‘Terminated’ i.e. Providers who are currently under contract or was up to a certain date are listed. Provider Name is listed in alphabetical order with provider id. **NOTE:** If providers were closed for different dates, they should be unchecked and have separate closure events created.
- Closure Details – Enter the closure date range. The “From” date is the first day of the closure and the “To” date is the last day of the closure. A single day closure would have the same “From” and “To” date. No services are rendered on dates included in the closure date range. **NOTE:** The closure date range is limited to a single month. If the closure crosses into the next month, you will need to create an additional closure to cover that time period.
- Closure Reasons – Select the applicable reasons. If the ‘Other’ option is checked, enter comments.
- Documentation – Click the **Upload Document** button to upload necessary documents (not mandatory).
- Comments – Enter comments (not mandatory).

Report Temporary Closure

**Closed Provider Site(s)**

Select Providers\*

**Closure Details**

Closed From\*  Closed To\*

**Reimbursement Requests\***

For each provider, indicate whether all services were stopped, and then select one or more classes and care levels involved in the closure, along with the corresponding reimbursement request per closure day. If VPK classes were involved in the closure, please review the corresponding VPK provider applications. ⓘ

Providers		VPK Classes (0 of 0)		SR Care Levels (2 of 6)		PR3 August 2022						
No Services	Provider					Sun	Mon	Tue	Wed	Thu	Fri	Sat
<input type="checkbox"/>						31	1	2	3	4	5	6
<input checked="" type="checkbox"/>						7	8	9	10	11	12	13
						14	15	16	17	18	19	20
						21	22	23	24	25	26	27
						28	29	30	31	1	2	3

Total Processed Closure Reimbursable (CR) Days in Program Year: 0 ⓘ

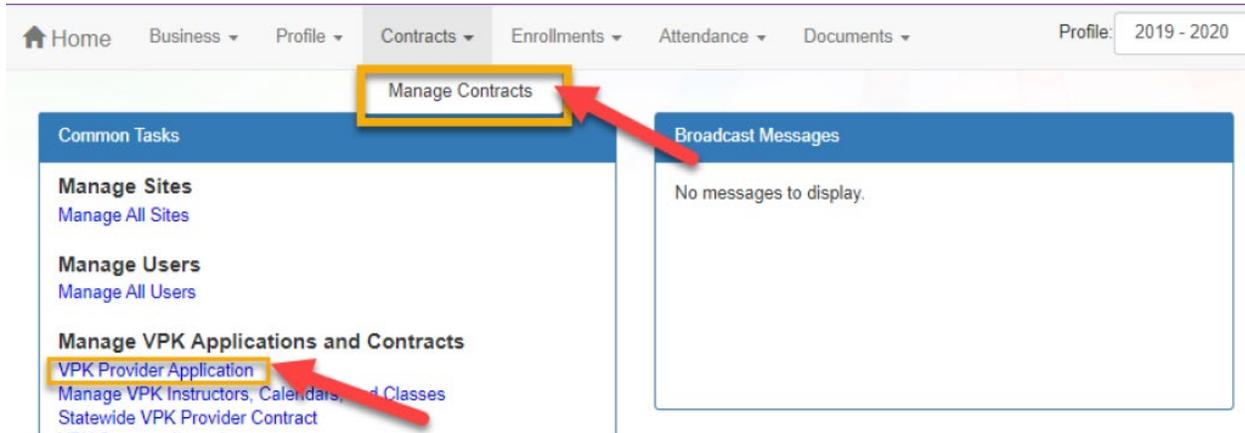
CR = Closure Reimbursable. CR = Closure Non-Reimbursable.

When **Approve** is selected, the closure is processed and the record is moved to the **Processed** queue.

Add Closure							
Actions	Closure ID	Type	Date of Closure	Payable	Status	Comments	
<input type="button" value="View"/> <input type="button" value="Remove"/>	<input type="text" value="12544"/>	Whole Site	07/14/2020 - 07/15/2020	Yes	Processed		

## Updating VPK Class Calendar

Providers must revise their VPK class calendar(s) in their VPK-APP to make up the hours for the non-instructional day(s) due to temporary closure (CN days). In the Provider Portal, navigate to the **Contracts > Manage Contracts**. Or, on the home page Common Tasks section, click the VPK Provider Application link.



On the Manage Contracts page, click the **Edit** button for the incomplete VPK-APP.

The screenshot shows the 'Manage Contracts' page with a table of contract entries. The table has columns for Contract ID, Type of Contract, Contract Name, Coalition, Status, Last Updated, Action, View Contract, Effective Date, Termination Date, and Program Year. The first entry, with Contract ID 29683 and Status 'Incomplete', has its 'Edit' button highlighted with a yellow box. The table also includes filter buttons for each column and a search bar. The page shows 1 to 5 of 5 entries (filtered from 17 total entries).

Contract ID	Type of Contract	Contract Name	Coalition	Status	Last Updated	Action	View Contract	Effective Date	Termination Date	Program Year
29683	VPK-APP	VPK 10,11A,11B		Incomplete	8/29/2021	<a href="#">Edit</a>				2021 - 2022
24341	VPK-APP	VPK 10,11A,11B		Certified	6/30/2021	<a href="#">Edit</a>	<a href="#">Download</a>	8/10/2020		2020 - 2021
16030	VPK-APP	VPK 10,11A,11B		Certified	6/24/2020	<a href="#">Edit</a>	<a href="#">Download</a>	8/12/2019		2019 - 2020
7313	VPK-APP	VPK 10,11A,11B		Certified	7/11/2019	<a href="#">Edit</a>	<a href="#">Download</a>	8/13/2018		2018 - 2019
7110	VPK-APP	VPK 10,11A,11B		Certified	7/11/2019	<a href="#">Edit</a>	<a href="#">Download</a>	5/29/2018		2017 - 2018

Click the **VPK Calendars** tab to open the calendars page.

2021 - 2022 (Incomplete)

Attendance Policy VPK Director VPK Instructors **VPK Calendars** VPK Class(es) Review Certify and Submit

### Attendance Policy Submission

A VPK Provider must

- ✓ Adopt an attendance policy that aligns with VPK rules and statutes and requires parents to verify the child's attendance each month on forms required by Rule 6M-8.305, F.A.C.
- ✓ Provide a copy of its attendance policy to the early learning coalition before executing a contract by uploading to the portal (below)
- ✓ Provide a copy of this policy to parents of each VPK child admitted into the provider's VPK program (at the time of enrollment)
- ✓ Not amend its attendance policy for its VPK program duration of the VPK contract

Identify the calendar(s) with the non-instructional temporary closure days. Click the **Edit** button to make changes to a calendar. The system defaults to the first calendar month of the class. Click the forward arrow if needed to view the month with the closure.

**Edit** Remove

Non-Instructional, Site Closures and Exceptional Instructional Days: August 2021

Calendar Name: 3hr AM  
 Program Type: School Year (540 hours)  
 Calendar Start Date: 08/10/2021  
 Calendar End Date: 05/27/2022

Day	Start Time	End Time	Total Hours
Monday	08:15 AM	11:15 AM	3
Tuesday	08:15	11:15	3

Sun	Mon	Tue	Wed	Thu	Fri	Sat
	1	2	3	4	5	6
	8	9	10	11	12	13

The Totaled Calculated Hours will be reduced for each non-instructional day based on the hours defined for the day.

Calendar Name: 3hr AM  
 Program Type: School-Year (540 hours)  
 Calendar Start Date: 08/10/2021  
 Calendar End Date: 05/27/2022

Day	Start Time	End Time	Total Hours
<input checked="" type="checkbox"/> Monday	08:15 AM	11:15 AM	3
<input checked="" type="checkbox"/> Tuesday	08:15 AM	11:15 AM	3
<input checked="" type="checkbox"/> Wednesday	08:15 AM	11:15 AM	3
<input checked="" type="checkbox"/> Thursday	08:15 AM	11:15 AM	3
<input checked="" type="checkbox"/> Friday	08:15 AM	11:15 AM	3
<input type="checkbox"/> Saturday			0
<input type="checkbox"/> Sunday			0

Click a date to modify instructional hours. Multiple days may be selected by clicking and dragging days.

August 2021

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31	1	2	3	4

Noninstructional: Ten

Total Calculated Hours are reduced by the Noninstructional Day(s) due to the temporary closure.

Total Calculated Hours: 537.00

The Total Calculated Hours are less than the hours allotted for the VPK Program Type selected. Please correct if needed.

Total VPK Instructional Days: 179

Make adjustments to the calendar to restore the hours to 540. This can be accomplished in a variety of ways such as:

- Canceling previously identified future non-instructional days
- Extending the class end date
- Extending the time on instructional days by creating Instructional Day Exceptions with different class hours

When the changes are done and the calculated hours are restored, click the **Save** button.

**NOTE:** These steps must be completed for each impacted calendar.

When all impacted calendars are updated, click on the **Certify and Submit** tab. Complete the signature information, then click the **Submit VPK Provider Application** button.

Attendance Policy VPK Director VPK Instructors VPK Calendars VPK Class(es) Review Certify and Submit

**Certify and Submit**

By signing this form I certify that:

- To the best of my knowledge and belief, the information provided is true and correct.
- If any information changes, I (PROVIDER) will notify the COALITION within 14 days of the change.
- I understand that if changes implemented prior to receipt of COALITION approval may result in noncompliance with VPK requirements.
- Each VPK instructor listed has submitted an attestation of good moral character, has provided documentation to be maintained in the files of the PROVIDER/DISTRICT and the COALITION documenting that the individual has undergone a Level 2 background screening within the previous five (5) years in accordance with section 435.04, F.S., which demonstrates that the individual is not ineligible to act as a VPK instructor; and is not ineligible to teach in a public school because the instructor's educator certificate has been suspended or revoked.
- Each credentialed VPK instructor listed has the credentials required for the VPK program.
- I understand that my information will be shared with the Department of Children and Families, Office of Child Care Regulation, for inclusion in the CARES system.

Provider Signature

Signer's Name \*

Day Time Phone Number \*

Electronic Signature \*

Check this box to certify by electronic signature

Application Completion Date \*

08/29/2021

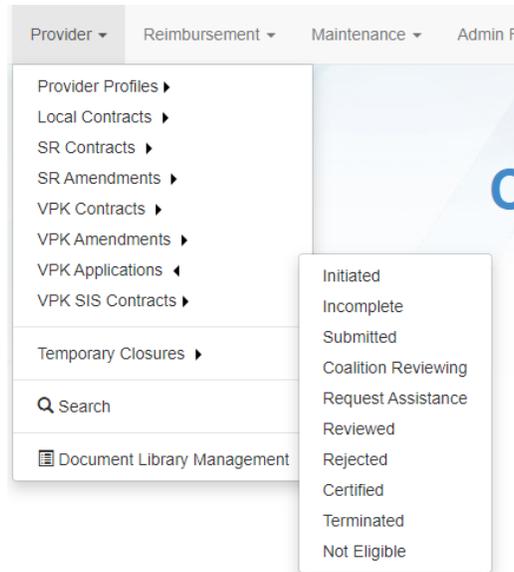
Submit VPK Provider Application

After clicking **Submit VPK Provider Application**, the VPK-APP status changes to “Submitted” and the application is available for the coalition to review.

**NOTE:** Since reimbursable temporary closure (CR) days do not reduce the total class hours, they will not be added to the VPK calendar.

## Verifying VPK Class Calendar

Coalition users should monitor the **Provider > VPK Applications > Submitted** work queue for Submitted VPK provider applications. Click on the contract ID to review changes.



New or changed items requiring verification, such as calendars, classes, and documents, display a **Verify** button. Each tab should be reviewed for changes. For closure specific changes, go to the VPK Calendars tab to review calendar changes. Click **Verify** to accept the changes. When all tabs have been reviewed, click the **Change Status** button to change the contract status back to Certified. Remember, calendars and classes must be verified and have a Certified VPK provider application status in order for providers to process enrollments or attendance.

The screenshot shows the VPK application interface. At the top, there is a '2019 - 2020 (Submitted)' dropdown and a 'Change Status' button highlighted with a red box and arrow. Below this is a navigation bar with tabs: Attendance Policy, VPK Director, VPK Instructors, VPK Calendars, VPK Class(es), Review, and Verify and Submit. The 'Verify and Submit' tab is active. On the left, there is a 'Verify' button highlighted with a red box and arrow. Below the navigation bar, there is a section for 'Non-Instructional, Site Closures and Exceptional Instructional Days' for 'September 2019'. A calendar grid shows days 1 through 14. Days 2, 3, and 4 are highlighted with green boxes and labeled '9a Exception: (3 hrs) Clo'. Day 1 is labeled 'Noninstructional: Labor Day'. Below the calendar is a table for 'Instructional Days'.

Day	Start Time	End Time	Total Hours
Monday	09:00 AM	12:00 PM	3
Tuesday	09:00 AM	12:00 PM	3

## Manage External Service Users – Authorized Renaissance VPK FAST Users

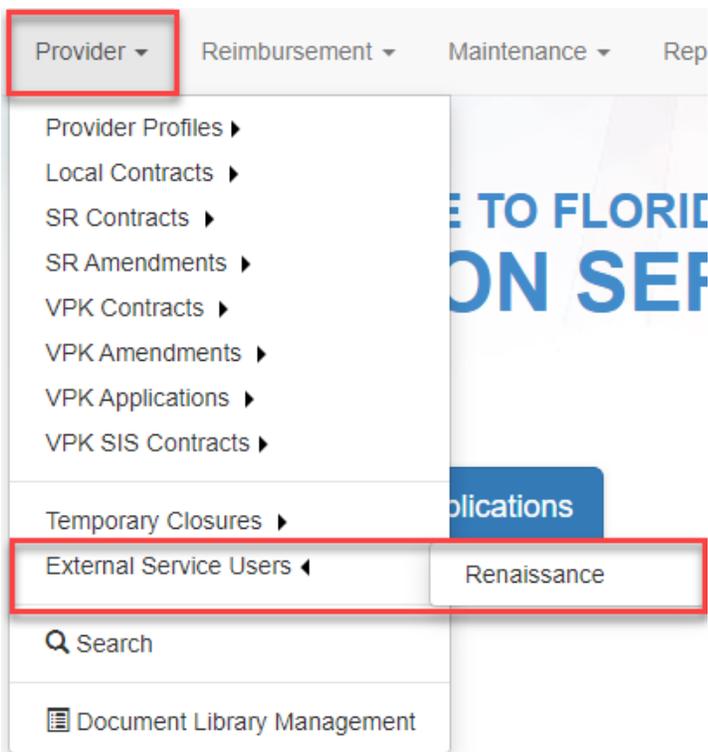
The Manage External Service Users page in the Coalition Portal is a way to assign unique Service User IDs to authorized coalition, provider, and DEL users of the Renaissance VPK Florida Assessment of Student Thinking (FAST) Star Early Literacy system. This will allow Renaissance to easily create accounts and login credentials for users of their system.

Coalition authorized users are ELC FAST contacts that are responsible for the administrative tasks for FAST Star Early Literacy implementation and compliance.

Provider authorized users are VPK Program owners, directors, or VPK directors that are responsible for the administrative tasks for FAST Star Early Literacy implementation.

### Managing External Service Users at the Coalition Level

To access the Manage External Service Users page at the coalition level, a CP VPK FAST Manager navigates to **Provider > External Service Users > Renaissance**.



Coalition, provider, and DEL users who are authorized to have access to the Renaissance VPK FAST system are listed.

Manage External Service Users for ELC of [redacted] 982 Total Records Add User

The users listed below are authorized to have access to the Renaissance system.

Show 10 entries. Clear All Filters Search:  Export to Excel

Actions	Service User ID	First Name	Last Name	Email	Service Name
<a href="#">Edit</a> <a href="#">Delete</a>	7	David	David	ddavid@delaware.com	Renaissance
<a href="#">Edit</a> <a href="#">Delete</a>	11	James	Barlow	jjames@delaware.com	Renaissance
<a href="#">Edit</a> <a href="#">Delete</a>	12	Thomas	Waller	twaller@delaware.com	Renaissance
<a href="#">Edit</a> <a href="#">Delete</a>	24	Michael	Waller	mwall@delaware.com	Renaissance
<a href="#">Edit</a> <a href="#">Delete</a>	40	William	Carroll	wcarroll@delaware.com	Renaissance
<a href="#">Edit</a> <a href="#">Delete</a>	49	John	Carroll	jcarroll@delaware.com	Renaissance
<a href="#">Edit</a> <a href="#">Delete</a>	50	...	...	...	Renaissance

DEL users may select a coalition to filter the results per coalition.

Manage External Service Users for all Coalitions 9768 Total Records Add User

The users listed below are authorized to have access to the Renaissance system.

Show 10 entries. Clear All Filters Search:  Export to Excel

Select Coalition\* -- All Coalitions --

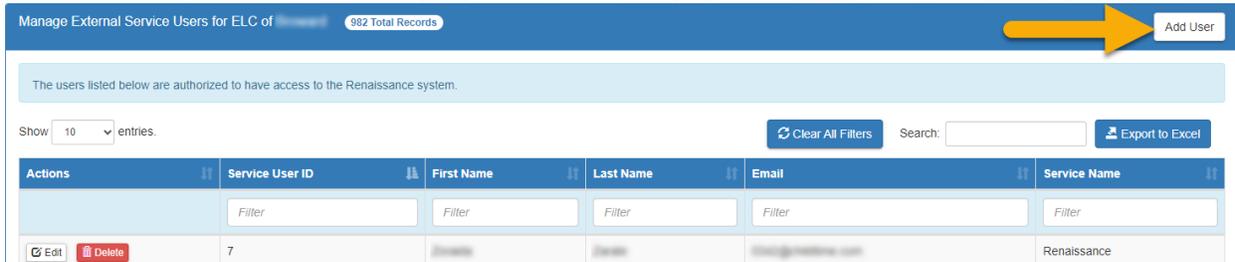
- All Coalitions --
- 1 - ELC of Alachua
- 2 - ELC of Brevard
- 3 - ELC of Broward
- 4 - ELC of Duval
- 5 - ELC of Escambia
- 6 - ELC of Flagler and Volusia
- 7 - ELC of Florida's Gateway
- 8 - ELC of Florida's Heartland
- 9 - ELC of Hillsborough
- 10 - ELC of Indian River, Martin, Okeechobee
- 11 - ELC of Lake
- 12 - ELC of Manatee
- 13 - ELC of Marion
- 14 - ELC of Miami-Dade/Monroe
- 16 - ELC of North Florida/Episcopal Children's Services
- 19 - ELC of Northwest Florida
- 20 - ELC of the Emerald Coast
- 21 - ELC of Orange
- 22 - ELC of Osceola County

Actions	Last Name	Email	Service Name
<a href="#">Edit</a> <a href="#">Delete</a>	David	ddavid@delaware.com	Renaissance
<a href="#">Edit</a> <a href="#">Delete</a>	James	jjames@delaware.com	Renaissance
<a href="#">Edit</a> <a href="#">Delete</a>	Thomas	twaller@delaware.com	Renaissance
<a href="#">Edit</a> <a href="#">Delete</a>	Michael	mwall@delaware.com	Renaissance
<a href="#">Edit</a> <a href="#">Delete</a>	William	wcarroll@delaware.com	Renaissance
<a href="#">Edit</a> <a href="#">Delete</a>	John	jcarroll@delaware.com	Renaissance
<a href="#">Edit</a> <a href="#">Delete</a>	...	...	Renaissance

Showing 1 to 10 of 9,768 entries. Previous 1 2 3 4 5 ... 977 Next

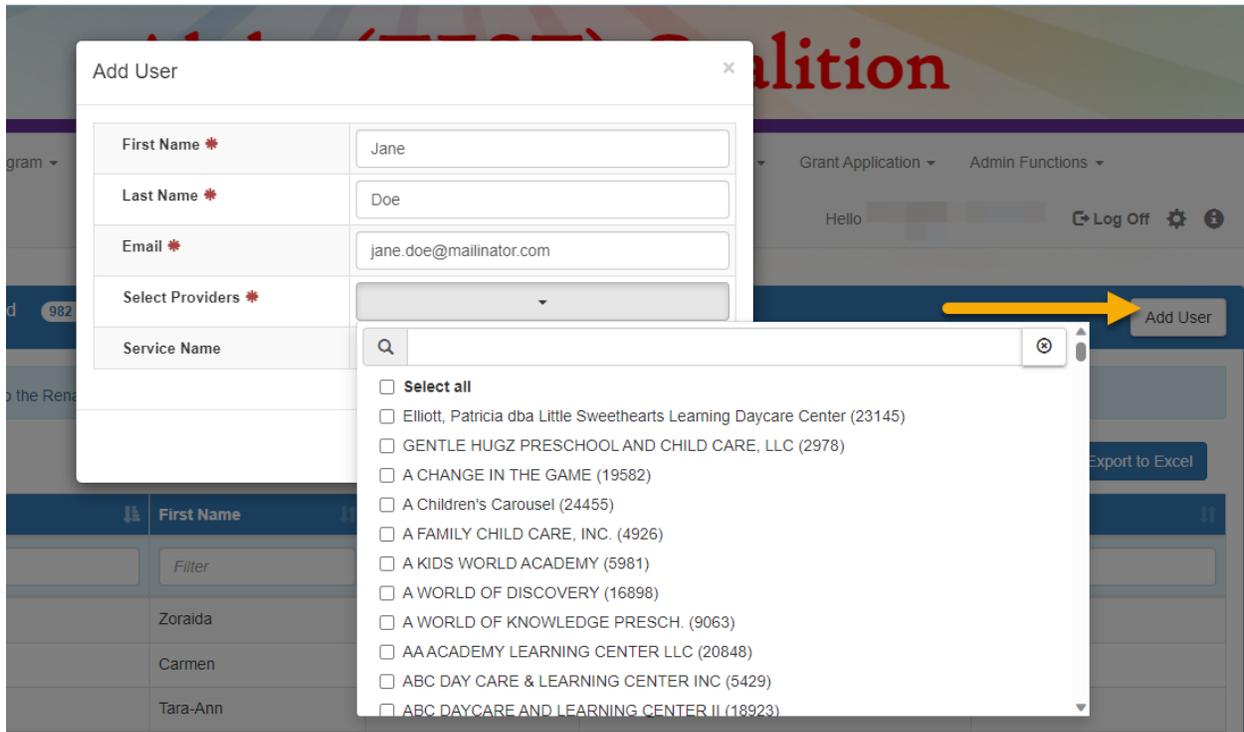
## Adding an Authorized Service User

To add a user, Click the **Add User** button.

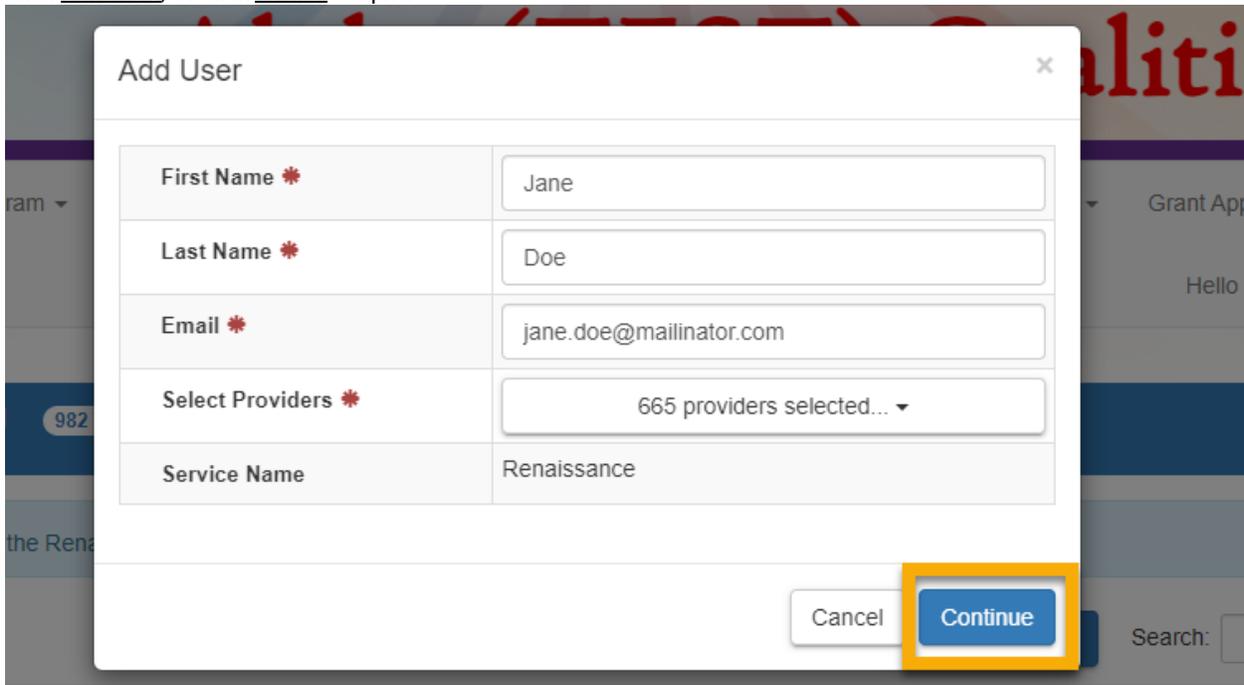


The same user can be authorized to access multiple providers on Renaissance. In the pop-up window:

- Enter the user's first name, last name, and email address.
- Then, select providers for which the user should have access to in the FAST system. For convenience, there is a provider search bar and a "Select all" option.
  - The added user will have the same Service User ID across all providers for which they are an authorized user.



Click **Continue**, or click **Cancel** to quit.



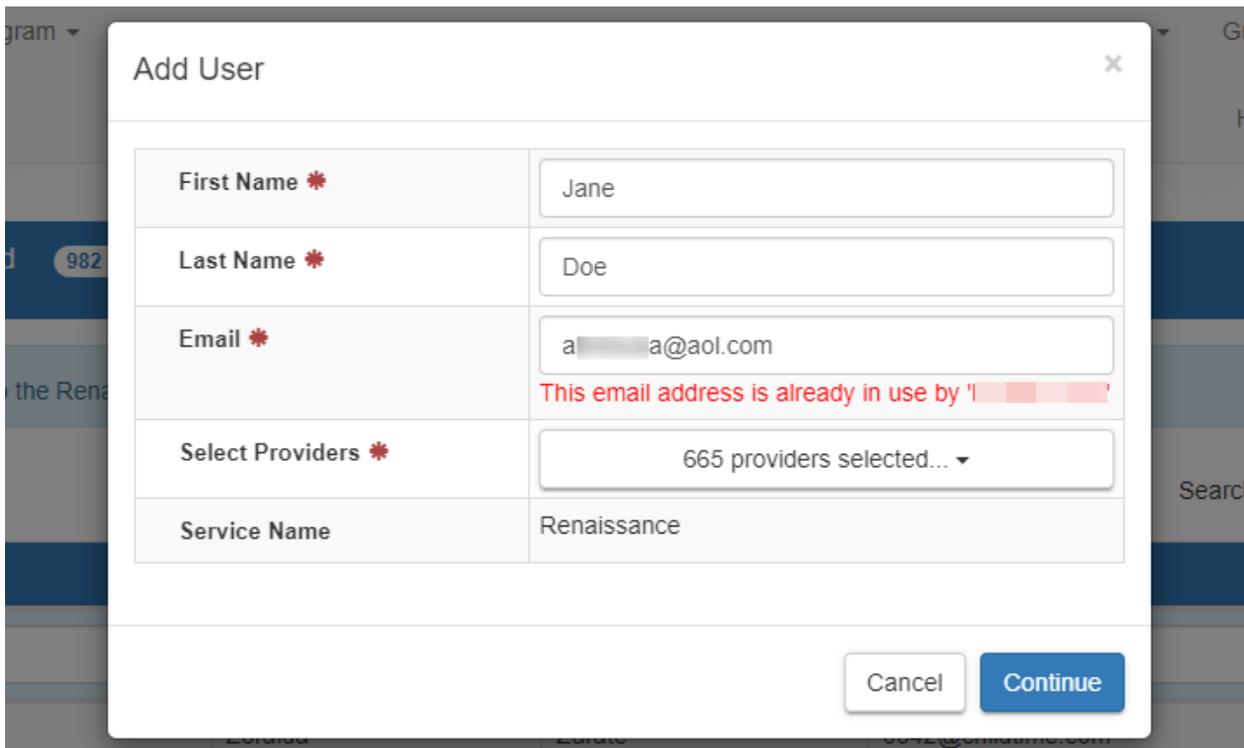
The screenshot shows a modal dialog titled "Add User" with a close button (X) in the top right corner. The dialog contains five input fields:

First Name *	Jane
Last Name *	Doe
Email *	jane.doe@mailinator.com
Select Providers *	665 providers selected... ▼
Service Name	Renaissance

At the bottom right of the dialog, there are two buttons: "Cancel" and "Continue". The "Continue" button is highlighted with a yellow border.

**NOTE:** If an email address is attempted to be used for a new account but it belongs to an already created account, a message will display. For example, "This email address is already in use by 'John Smith'." The administrator will need to:

- Enter a different email address, or
- Assign the existing user account to the center(s), or
- **Cancel** to quit

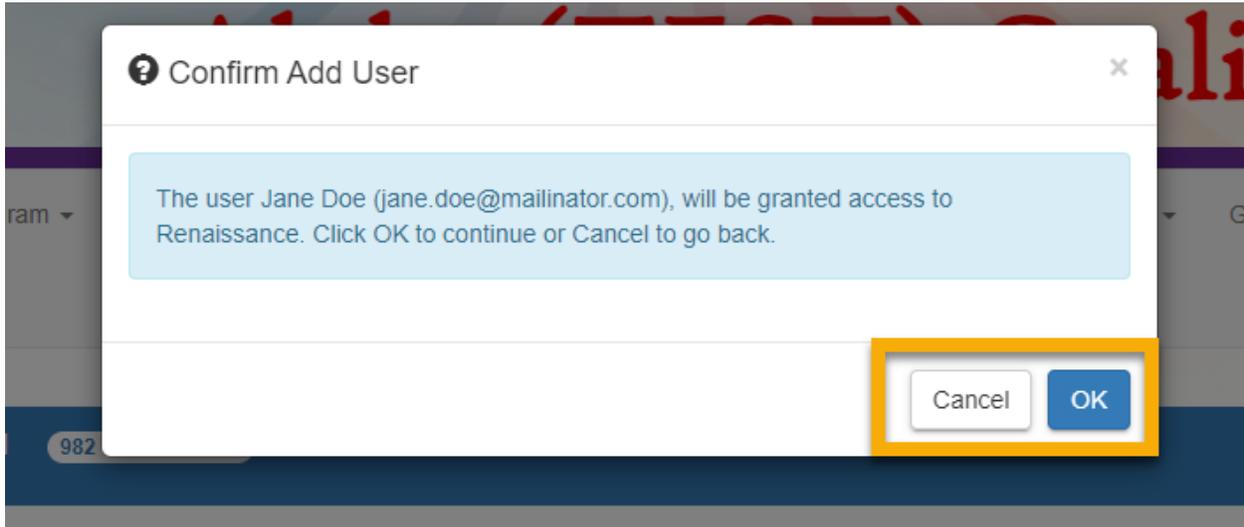


The screenshot shows the same "Add User" dialog box, but with an error message displayed below the email field:

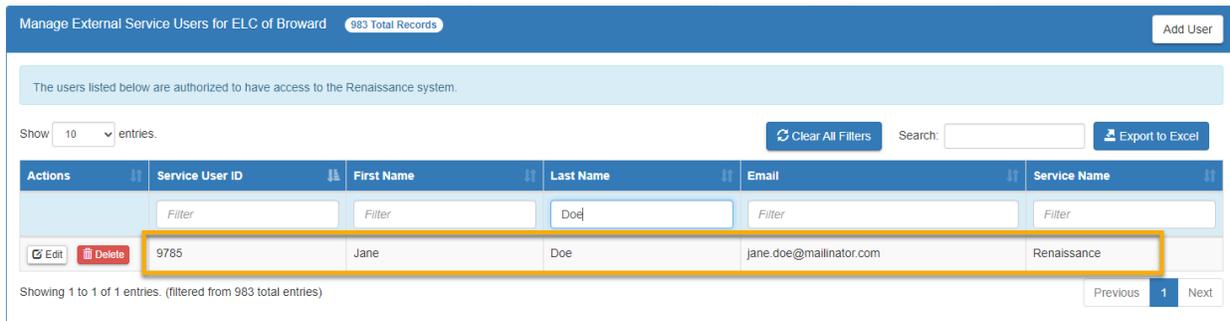
First Name *	Jane
Last Name *	Doe
Email *	a[redacted]a@aol.com This email address is already in use by 'l[redacted]'
Select Providers *	665 providers selected... ▼
Service Name	Renaissance

At the bottom right of the dialog, there are two buttons: "Cancel" and "Continue".

When **Continue** is selected, the Confirm Add User pop-up displays. Click **OK** to add the user or **Cancel** to quit.



The added user displays on the external service users list and can be edited or deleted. The user now has a unique "Service User ID."

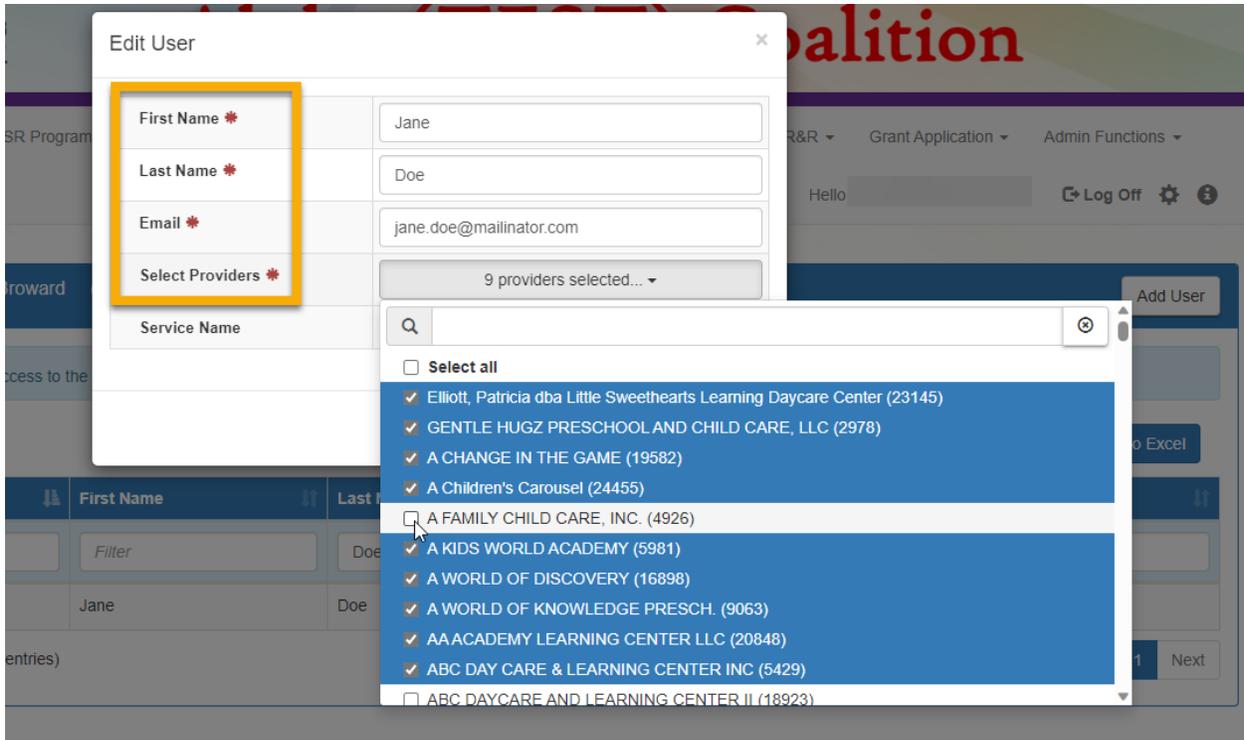


### Editing a Service User

Click the **Edit** button under the Actions column to edit an existing user's name, address, email, or provider selection.



In the pop-up window, modify the user information or provider selections, then click **Continue** to save the changes or **Cancel** to quit.



### Deleting a Service User's Access

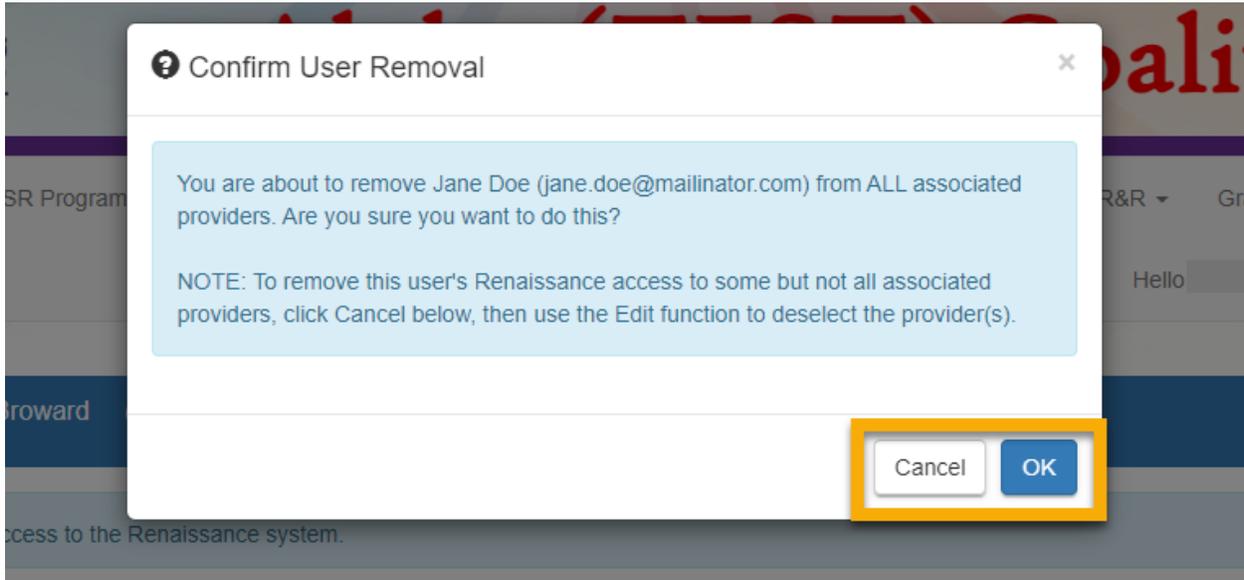
To remove a user's Renaissance FAST access (from ALL the providers they have access to), click the **Delete** button under the Actions column.

Actions	Service User ID	First Name	Last Name	Email	Service Name
<a href="#">Edit</a> <a href="#">Delete</a>	9785	Jane	Doe	jane.doe@mailinator.com	Renaissance

Showing 1 to 1 of 1 entries. (filtered from 983 total entries)

Previous 1 Next

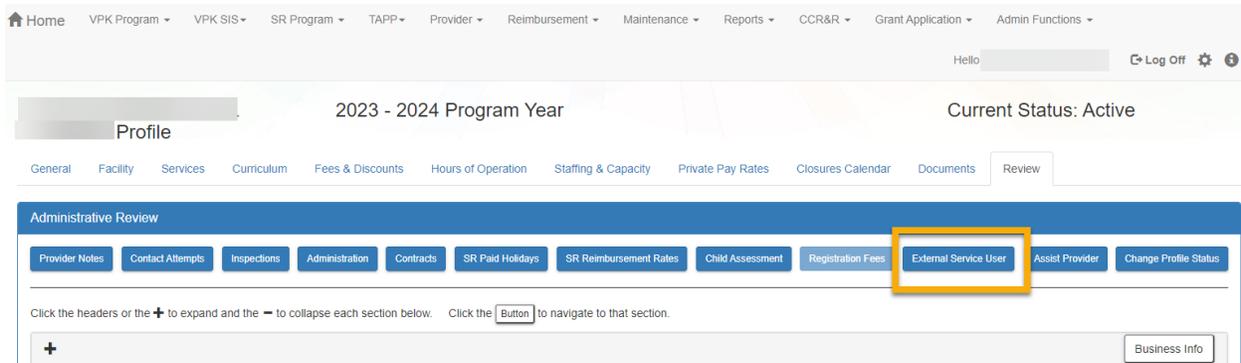
The Confirm User Removal pop-up displays. Click **OK** to remove the user from ALL associated providers or **Cancel** to quit.



**NOTE:** To remove this user's Renaissance access to some but not all associated providers, click **Cancel**, then use the **Edit** function to deselect the provider(s).

## Managing External Service Users at the Provider Site Level

External service users can also be managed at the provider site level. To access the Manage External Service Users page for a specific provider, click the **External Service User** button on the provider's **Administrative Review** page. This button is only available to Coalition or DEL Administrators.



Users who are authorized to access this provider in the Renaissance VPK FAST system are listed.

Manage External Service Users for [Coalition Name] 5 Total Records Add User

The users listed below are authorized to have access to the Renaissance system.

Show 10 entries. Clear All Filters Search: [ ] Export to Excel

Actions	Service User ID	First Name	Last Name	Email	Provider ID	Accountability ID	Service Name
	Filter	Filter	Filter	Filter	Filter	Filter	Filter
	608	[Redacted]	[Redacted]	[Redacted]	9	A713741	Renaissance
	642	[Redacted]	[Redacted]	[Redacted]	9	A713741	Renaissance
	896	[Redacted]	[Redacted]	[Redacted]	9	A713741	Renaissance
	4595	[Redacted]	[Redacted]	[Redacted]	9	A713741	Renaissance
	6896	[Redacted]	[Redacted]	[Redacted]	9	A713741	Renaissance

Showing 1 to 5 of 5 entries. Previous 1 Next

### AT THE PROVIDER LEVEL:

- When adding a user at the provider level, it will only add the user to this one site.
  - If the user should have access to multiple sites in Renaissance, the most efficient way to accomplish this is at the Coalition level: **Provider > External Service Users > Renaissance**. The added user will have the same Service User ID across all providers for which they are an authorized user.
- When deleting a user's Renaissance access at the provider level, it will only be removed from this one site.
  - To remove the user's access from additional sites, the most efficient way to accomplish this is at the Coalition level: **Provider > External Service Users > Renaissance**.
- When editing a user's first name, last name, or email address, the changes will be applied for that user across ALL sites they have access to.