



Monthly Invoicing

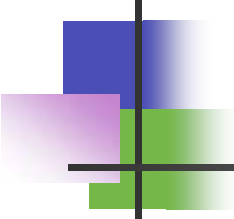
Instructions

2/5/2018



Monthly Processing of Invoices

- Invoices are to be received before the 10th of each month. (For example, January's invoices are to be received by February 10th)



Vendors are required to submit the following each month:

- Part A (summarization of the services – no client names listed on Part A)
- Part B (each client with services listed)
- Monthly Treatment Report for each client
- Daily Treatment Log containing services received, time in/out, client and vendor initials
- Receipts (Copayments/bus passes, etc.)
- Any Reports completed (evaluations/reports)
- Urinalysis Log/Breathalyzer (BA) Log
- Sweatpatch Log



Program Plan

- Bill for only those services and quantities authorized on Program Plan (Form 45)
- Pay special attention to Effective Dates on the Program Plans
- If you have both substance abuse and mental health BPA, pay special attention to the procurement number of termination program plans.



Daily Log

- Transfer services provided on the Daily Log to Part B of the invoice. The counselor will also pull the services from the Daily Log and list on the Monthly Treatment Report (MTR).
- Daily Logs may be handwritten

Daily Log (Example)

John Doe
June 2018

Date of Service	Client's Signature/ Initials	Time In	Purpose of Visit	Co-pay Collected	Time Out	Client Initial	Vendor Initials
06/01/18		1:00 pm	UA – 1010		1:10 pm	JD	lmg
06/03/18		2:15 pm	1010		2:18 pm	JD	lmg
06/03/18		2:30 pm	2010		3:30 pm	JD	lmg
06/10/18		7:00 pm	Group – 2020		9:00 pm	JD	gml



Part B (Example)


Client Name	Client Number	Date of Service	Project Code	Quantity (Units)	Unit Price	Cost
John Doe	15555	06/01/18	1010	1	10.00	10.00
		06/03/18	1010	1	10.00	10.00
		06/03/18	2010	2	10.00	20.00
		06/10/18	2020	4	10.00	40.00
		06/10/18	Copay			20.00
		06/10/18	1501			1.00
			TOTAL			61.00
Jane Doe	15561	06/05/18	1010	1	10.00	10.00
			TOTAL			10.00

Part A (Example)

(PART A)

- 1. Judicial District: Kansas
- 2. Vendor: Your Vendor Name
- Address: Vendor Address
- Telephone: Phone Number
- 3. P.O./BPA #: Contract Number Here
- 4. Service Delivery
- From: 06/01/18 To: 06/30/18
- 5. Total # of Individuals Served: 2

■ Vendor's Certification: I certify that all expenditures and requests for reimbursement in this voucher are accurate and correct to the best of my knowledge and include only charges for services actually rendered to clients under the terms of the agreement and for which no other compensation has been received from sources other than the United States District Court.

■ _____  Original Signature

■ Authorized Administrator

6. PROJECT CODE	7. QUANTITY(Units)	8. UNIT PRICE	9. TOTAL PRICE
1010	3	10.00	30.00
2010	2	10.00	20.00
2020	4	10.00	40.00
Total Copayment (insert minus sign before total)			-20.00
1501 Admin. Fee (5% of total copay)			1.00
TOTAL FOR REIMBURSEMENT			71.00



Monthly Treatment Report

- Make sure all services are listed from the Daily Log.
- We prefer the MTR to be typed (at least legible) and signed by the counselor.
- Available in Word and Adobe on our website
- Remarks by counselor should include client's adjustment, responsiveness, and significant problems. Comments should not only note attendance and participation.



Common Errors

- Charging for “no shows”
- Charging for “no tests” (stalls or insufficient quantities on UAs)
- Charging for both application and removal of the sweatpatch (only bill upon removal)
- Not charging correct unit amounts (1 unit = ½ hour; 2 units = 1 hour)
- Putting Pretrial clients on the Probation invoice
- No original signature on invoice
- Not providing all documentation with invoice
- Charging the incorrect unit price (See Order for Supplies or Services for correct prices)
- Multiplication errors
- Charging for services not authorized on Program Plan



Submitting an Electronic Invoice

- The U.S. Probation Office will provide a billing template at the beginning of each fiscal year. (Excel spreadsheet)
- This is similar to the Part B example earlier. However, the unit prices will pre-populate as you enter data. (Sample on next slide)



Sample Template (Prob. Summary)

- The detail added to the Prob. Detail will transfer over to the Prob. Summary tab.
- Print “Detail” and “Summary” documents. Sign the “Summary” (aka Part A of the invoice). **Upload all supporting documents and submit by email to Linda_Grissom@ksp.uscourts.gov.** ALSO, you must do the following step.
- **Log onto <http://ers.uscourts.gov> to submit your electronic invoice.** (You will need your BPA agreement number and my email address to continue.)

Sample Template (Prob. Summary)

ATTACHMENT J.8			
DATE	10/3/2007	PAGE 1 OF 2	
ADMINISTRATIVE OFFICE OF THE UNITED STATES COURTS			
TREATMENT SERVICES INVOICE			
BOC: 2527			
(PART #)			
1. Judicial District		3. B.P.A.#	
2. Vendor		4. Service Delivery:	
a. Address:		5. Total \$	
b. Telephone:		Individuals Served:	
<p><small>Vendor Certification: I certify that all expenditures and requests for reimbursement in this invoice are accurate and correct to the best of my knowledge and include only charges for services actually rendered to clients under the terms of the agreement and for which no other compensation has been received from either the client or the United States District Court.</small></p>			
<small>Authorized Administrator</small>			
6. PROJECT CODE	7. QUANTITY	UNIT PRICE	TOTAL PRICE
1010			
1012			
1201			
1202			
1501			
1504			
2010			
2011			
2020			
2030			
Total:			0.00
Co-Pay Received:			0.00
SC 1501/Administrative Fee:(5%):			0.00
Balance Due:			0.00



Contact Person

Linda Grissom

Data Quality Analyst

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Electronic Reporting Website:

<https://ers.uscourts.gov>