Some services require that a provider submit an invoice (DPHHS AD-057X) in order for payment to be made. CAPS will generate a pre-printed invoice after the service is approved. The invoice will be mailed from the central office to the provider. The provider should complete and sign the invoice, tear off the yellow copy, and mail the original invoice to:

Child and Family Services Division  
Foster Care Payments  
P.O. Box 8005  
Helena, MT  59604-8005

Subsequent invoices will be mailed to the provider if the service to be provided is open and the total amount of funds approved has not been expended.

Invoices are processed in the order in which they are received. With the exception of the first week of the month, payments are mailed out the first business day after payment is approved. Payment of invoices processed on the first three working days of the month are mailed on the fourth working day of the month.

A sample invoice is on the last page of this section.

**NOTE:** If the provider loses a pre-printed invoice, another pre-printed invoice can be obtained by contacting the Operations and Fiscal Services Bureau at 444-5900.

Invoices are used by the provider (foster parent, counselor, day care worker, etc.), to bill Child and Family Services for services provided. The services are authorized in advance by child protection specialists.

For example, the sample invoice shows two services authorized for foster parents John and Jane Doe, to provide for foster child Sammy Smith. The first service is transportation, which the worker authorized beginning January 1, 2001, for an indefinite period. The “99/99/99” under the word TRANSPORTATION indicates that the worker has left the service open. The worker will close the service later. The second service is respite (child care during evening hours or vacation days). The worker knew that respite had been taken February 8 and 9, so she authorized this service to reimburse the provider.
The AUTHORIZED SERVICE DATES are the dates the provider may bill for services using this invoice. If these dates are “01/01/01-99/99/99,” as in the transportation example attached, then the provider may bill any dates from January 1, 2001, through the current month. If the AUTHORIZED SERVICE DATES are “2/8/01-2/9/01,” as in the respite example attached, then the provider may bill only February 8th and 9th, 2001.

Notice that the number of units authorized by the worker in the respite example is 16; i.e., the maximum number of hours the provider can bill is 16. When the worker enters the number of units and sets a maximum, the invoice shows the balance remaining. No respite has been used from this service, so the balance remaining is $64.00.

The 'balance remaining' is a useful feature of the CAPS invoice in those cases where a large number of units are authorized; it helps the provider keep track of how many units are left in the service.

NOTE: When the worker is entering the service on the SERP screen of CAPS, she should take care that the open and close dates on the SERP screen correspond to the actual dates the service is rendered. A common error, especially with court costs or counseling services, is to enter the current date for the open and close dates; this causes confusion and delays the payment.

If the provider does not agree with the dates of service or amount authorized as shown on the invoice, then the provider should contact the worker.

CAPS will not allow a payment to be entered until the latest SERVICE END DATE which the provider writes on the invoice. For example, on the sample invoice, the latest end date is “2/28/01,” so the invoice cannot be entered before that date.

The provider should complete the portion on the right side of the invoice headed PROVIDER COMPLETE THIS SECTION, and should sign the invoice.

NOTE: IF THE PROVIDER FORGETS TO SIGN THE INVOICE, OR DOES NOT FILL IT OUT, THE INVOICE WILL BE RETURNED TO THE PROVIDER FOR COMPLETION.

After the invoice is received by the Child and Family Services
Division of the Department of Public Health and Human Services, it is entered into CAPS. Department staff will complete the DEPARTMENT APPROVAL section. After the payment is approved, a warrant is mailed to the provider.