

Hamilton County Department of Job and Family Services
Child Care Provider Delinquent Co-payment Instructions

Child Care providers must collect the identified caretaker co-payment amount. HCJFS Child Care can assist centers and family child care (FCC) providers with collecting delinquent (unpaid) child care co-payments when providers meet the guidelines below.

Reporting Delinquent Co-payments

Providers must report delinquent caretaker co-payments within three weeks to HCJFS. The caretaker is responsible for any delinquent copayments reported by the provider for the previous three weeks from the date reported to HCJFS. Providers may not bill for fees/costs included in the ODJFS reimbursement.

Penalty for Non-payment of Delinquent Co-payments

Caretakers must pay the delinquent co-payment or make satisfactory repayment plans with providers. If they fail to do so, HCJFS staff can stop caretakers from receiving publicly funded child care benefits. The delinquent co-payment issues must be resolved before future child care applications will be approved.

Fees Paid by Caretakers/Private Arrangement

Providers **may bill** caretakers for fees **not** included in the ODJFS reimbursement, however this form **must not be completed** for those outstanding fees. Example of fees that are not included in ODJFS reimbursement and are considered private arrangements include:

- Fees for services provided when a caretaker was not eligible for ODJFS reimbursement
- Delinquent pick-up fees
- Private arrangements for hours other than those approved by HCJFS Child Care
- Absent days not paid by ODJFS
- Field trip costs
- Transportation costs

Child Care Provider Delinquent Co-payment Form Instructions

Providers must complete the back of this page and return it as indicated. Attach a copy of the provider's records of caretaker payments made and the resulting outstanding balance. Be sure to include the following information:

- Caretaker's name and case number (if known)
- Child's name
- Service week dates
- Amount past due

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Instructions for completing this form:

1. Complete all information requested. An incomplete form will delay the processing of your request.
2. Make and retain a copy for your records.
3. Return form by e-mail to: HamiltonCountyChildCare@jfs.ohio.gov, by fax to (513) 946-1830 or by mail to:

HCJFS Child Care
222 East Central Parkway
 Cincinnati, OH 45202 – 1225

Caretaker Name:		Case # (if known):	
Child's Name	Authorization #	Service Week Dates	Amount not paid
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
Total Amount Owed			\$

Reason for delinquent reporting: _____

The caretaker identified above owes delinquent (unpaid) child care co-payment for services provided. The fees listed on this form are only caretaker co-payment owed covering the last three service weeks.

Signature:	Date:
Print Name:	Position:
Center Name (if applicable):	Provider Phone #: