

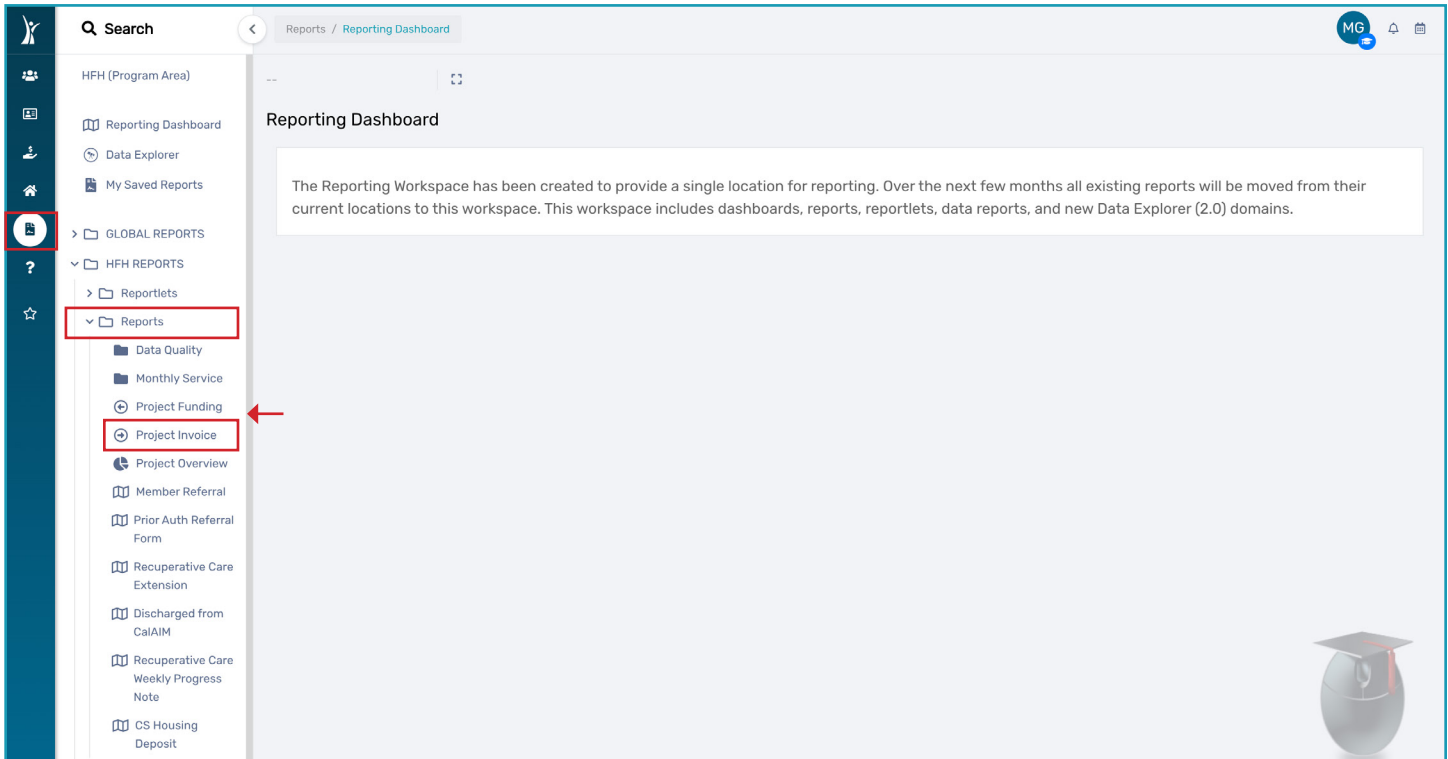
How to Generate, Export, and Interpret an ICMS Invoice

Permanent Supportive Housing Edition

Generating and Exporting Invoices

To access the Invoice Workflow in CHAMP:

Click **Reports** (workspace) -> Click **HFH Reports** (menu group) -> Click **Reports** (menu option) -> Click **Project Invoice** (menu option)



Generating an ICMS Invoice in CHAMP

The following data parameters are necessary to generate an Invoice Report:

- ▶ **Report Period:** Select the first day of the month (and year) of service in order to generate an Invoice Report for that month of service (e.g., select 07/01/2022 to run an Invoice Report for the July 2022 month of service).
- ▶ **Report Type:** Specifies how the report will be utilized.
 - ▶ **A Draft Invoice Report** should be selected and generated to verify information is correct for a service month prior to submission of a final Invoice.
 - ▶ **An Original Invoice Report** should be selected and generated to submit a final Invoice for a service month in order to be processed for reimbursement.
 - ▶ **A Supplemental Invoice Report** should be selected and generated to submit an updated


(corrected) Invoice for a prior month of service in which an invoice was already processed and approved. Supplemental invoices shall only be submitted as directed by DHS. Please see the Invoice submission section below for additional information about the submission of supplemental invoices.

- ▶ **Agency:** Select the Contractor organization for which the Invoice Report is to be generated. A CHAMP User generating an Invoice Report will only be able to select and generate Invoice Reports for the Contractor organization under which their CHAMP User account is assigned.
- ▶ **Work Order:** Select the Contractor's DHS Work Order for which the Invoice Report is being generated. An Invoice Report can only be generated for one DHS Work Order at a time, and only DHS Work Orders that are active during the Report Period selected will be available.
- ▶ **Housing Project(s):** Select all the ICMS projects which should be included in the Invoice Report to be generated. Only ICMS projects active under the selected DHS Work Order within the Report Period specified will be available.
- ▶ **Comments:** A space to be populated on the Invoice Cover Page which is used to highlight specific details connected to the generated Invoice Report.

The Saved Report Settings feature can be used to save desired data parameters for generating a future Invoice Report. If this feature is used, the data parameter that would likely have to be edited before generating a future Invoice Report would be the Report Period to ensure the Invoice Report is generated for the appropriate service month. Another important note to consider with this feature is that the saved data parameters would have to be updated each time new ICMS projects are created under your organization's DHS Work Order in CHAMP to ensure the appropriate data are included in future Invoice Reports. To save the parameters for use in generating a future Invoice Report, select Save Settings, then in the Save As field, provide a title for the set of data parameters, and then click the Report button at the bottom of the Invoice Report page. The set of data parameters which you previously titled and saved will then appear in the Saved Report Settings drop down list the next time you access the Project Invoice Report workflow.

Once the desired data parameters are selected in the Project Invoice Report workflow, click the Report button at the bottom of the page to generate the Invoice.

Exporting an ICMS Invoice in CHAMP

The final Invoice Report for an ICMS service month can be exported by clicking the **Save button**  at the top of the generated Invoice Report workflow window and then selecting the specific file format for the exported Invoice Report. The final Invoice Report that will be submitted to HFH H+S for processing and reimbursement should **ALWAYS** be in PDF format and include all sections in the Invoice Report expanded out.

AGENCY NAME: Alcott Center	AGENCY INVOICE NO.: 06 2020 WO#080
AGENCY ADDRESS: 1433 South Robertson Blvd, Los Angeles, CA 90035	MASTER AGREEMENT NO.: H-706452 (ICMS)
SUBMISSION TYPE: ORIGINAL	WORK ORDER NO.: 080-HFH-ICMS
	BUDGET PERIOD: FY 19-20
	CLAIM PERIOD: 06 / 2020
	AMOUNT REQUESTED: \$4,550.00

Interpreting an ICMS Invoice

Cover Page

This page displays agency information (name, address, etc.), invoice-related information (invoice number, work order, budget period, invoice amount, etc.), a section for signatures, report comments, and a section for HFH H+S Program Managers to document invoice processing notes. An abbreviated Cover Page is generated if the Report Type selected is Draft. A full Cover Page is generated if an Original or Supplemental Report Type is selected, as displayed below.

County of Los Angeles - Department of Health Services Housing for Health Division

<p>AGENCY NAME: Alcott Center</p> <p>AGENCY ADDRESS: 1433 South Robertson Blvd, Los Angeles, CA 90035</p> <p>SUBMISSION TYPE: ORIGINAL</p>	<p>AGENCY INVOICE NO.: 06 2020 WO#080</p> <p>MASTER AGREEMENT NO.: H-706452 (ICMS)</p> <p>WORK ORDER NO. 080-HFH-ICMS</p> <p>BUDGET PERIOD: FY 19-20</p> <p>CLAIM PERIOD: 06 / 2020</p> <p>AMOUNT REQUESTED: \$4,550.00</p>
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DATE SUBMITTED: _____

PREPARED BY (PRINT NAME)	TITLE	EMAIL ADDRESS	TELEPHONE NO.
<p>I CERTIFY TO THE BEST OF MY KNOWLEDGE THAT THE AMOUNTS SPECIFIED ARE TRUE AND CORRECT FOR THE SERVICES PROVIDED UNDER THIS CONTRACT WORK ORDER. I UNDERSTAND THAT PAYMENT MAY BE DELAYED OR WITHHELD IF THIS REQUEST FOR REIMBURSEMENT CONTAINS ANY ERRORS OR OMISSIONS.</p>			
PRINTED NAME	TITLE	AUTHORIZED SIGNATURE	DATE

PLEASE NOTE THE FOLLOWING:
Documentation for all expenditures charged against this work order must be made available for review upon request by DHS and during a program review, if needed.

AGENCY COMMENTS:

THE ORIGINAL INVOICE AND SIGNED COVER PAGE SHALL BE SUBMITTED VIA EMAIL NO LATER THAN FIFTEEN (15) DAYS AFTER THE END OF EACH MONTH. INVOICES MUST BE SENT TO THE FOLLOWING CONTACT: Daniel Tirado, HFHInvoices@dhs.lacounty.gov, (213) 833-5350.

HFH PROGRAM MANAGEMENT

DATE INVOICE RECEIVED: _____

APPROVAL SIGNATURE: _____

PRINTED NAME OF REVIEWER: _____

FINANCE

AMOUNT PAID: _____


DATE PROCESSED: _____

PROCESSED BY: _____

Staffing

This section displays the roster of case managers (name, job title, phone, and email), along with each participant assigned to their caseload during the Report Period. Participants with no case manager assigned are labeled with “No Case Manager” for their case manager assignment. The Contractor must expand out each case manager’s assigned roster in this section so that, at the time of Invoice processing, HFH H+S Program Managers can view and confirm participant-level information (ID, name, and start date) within each case manager’s caseload.

This section of the invoice is for informational purposes only at the time of processing and is not used to specifically calculate the total billing amount for the month of service. However, incorrect case manager assignments should be corrected prior to submission of the final Invoice. Case manager assignments can be updated using the Permanent Housing Status Update workflow.

STAFFING							
Case Manager	Job Title	Phone	Email	#	ID	Client	Start Date
 Claudia Betancourt		111-111-1111	CBetancourt@dhs.lacounty.gov	4			
TOTAL				4			



For each Permanent Housing Status Update the Case Manager completes, one unit of the “Homeless System of Care Linkage/Coordination” Service should be recorded in the case notes.

Invalid Slots

This section displays information for slots that were not set up properly in CHAMP by HFH H+S. Contractors can expand the section to see slot details that include ICMS project names, slot counts, slot IDs, slot activation dates, slot funding sources, and default billing rates.

A slot is flagged as invalid if it is missing any of the following data that were required at the time the slot was set-up in CHAMP:

- ▶ Default Funding Stream (funding stream blank and slot ID in red text); **OR**
- ▶ Default Billing Rate (no billing rate indicators and slot ID in red text); **OR**
- ▶ Newly activated eligible slots that were not assigned an activation stipend (start date in red text).

Invalid slots should be repaired prior to submission of the final Invoice to prevent processing delays. Contact your HFH H+S Program Manager to repair invalid slots.

INVALID SLOTS										
Project	#	Slot	Start Date	Fund	Single Adult Low Acuity	Single Adult High Acuity	Family Low Acuity	Family High Acuity	ODR All	Cost
<input type="checkbox"/> Alcott Center Scattered 2 (HACLA CoC Conversion)	1				0	0	1	0	0	\$300.00
		05	06/01/20	D7			1			\$300.00
TOTAL	1				0	0	1	0	0	\$300.00

New Slots

This section displays slots newly activated within any of the Contractor’s ICMS projects in CHAMP during the Report Period. Contractors can expand the section to see slot details that include ICMS project names, slot counts, slot IDs, slot activation dates, slot funding sources, and default billing rates. Total cost in this section is calculated by adding activation stipends for each eligible slot activated under the Contractor’s DHS Work Order during the Report Period.

NEW SLOTS										
Project	#	Slot	Start Date	Fund	Single Adult Low Acuity	Single Adult High Acuity	Family Low Acuity	Family High Acuity	ODR All	Cost
<input checked="" type="checkbox"/> Alcott Center Scattered 1	2				1	1	0	0	0	\$200.00
		07	06/01/20	D7		1				\$100.00
		08	06/01/20	D7	1					\$100.00
<input checked="" type="checkbox"/> Alcott Center Scattered 2 (HACLA CoC Conversion)	1				0	0	1	0	0	
		05	06/01/20	D7			1			
TOTAL	3				1	1	1	0	0	\$200.00

Reserved Slots

This section displays all participants who have been referred but not yet checked in to the slots of the Contractor’s ICMS projects. Contractors can expand the section to see slot details that include ICMS project name, slot counts, slot IDs, slot activation dates, slot funding sources, and default billing rates. Please notify your HFH H+S Program Manager if any slots are displayed in this section so that this data can be reconciled before you generate and submit the final Invoice.

RESERVED SLOTS												
Project	#	Slot	Fund	ID	Client	Date	Single Adult Low Acuity	Single Adult High Acuity	Family Low Acuity	Family High Acuity	ODR All	Cost
<input checked="" type="checkbox"/> Alcott Center Scattered 2 (HACLA CoC Conversion)	1						0	0	0	1	0	\$600.00
		02	D7	7941	Ross, Randy	06/15/20				1		\$600.00
TOTAL	1						0	0	0	1	0	\$600.00

Vacant Slots

This section displays slots that were vacant on the last day of the month of the Report Period. Any participants checked out from a project slot within a service month will not be listed in the final Invoice for that service month. The billing amount for the vacant slot will be based on the agreed upon default billing rate assigned by an HFH H+S Program Manager at the time of project and slot setup in CHAMP. Contractors can expand the section to see slot details that include ICMS project names, slot counts, slot IDs, slot activation dates, slot funding sources, and default billing rates.

VACANT SLOTS										
Project	#	Slot	Start Date	Fund	Single Adult Low Acuity	Single Adult High Acuity	Family Low Acuity	Family High Acuity	ODR All	Cost
<input checked="" type="checkbox"/> Alcott Center Scattered 1	5				4	1	0	0	0	\$1,350.00
		04	11/01/12	D7	1					\$225.00
		05	11/01/12	D7	1					\$225.00
		06	11/01/12	D7	1					\$225.00
		07	06/01/20	D7		1				\$450.00
		08	06/01/20	D7	1					\$225.00
<input checked="" type="checkbox"/> Alcott Center Scattered 2 (HACLA CoC Conversion)	4				0	0	3	1	0	\$1,500.00
		02	11/01/12	D7				1		\$600.00
		03	11/01/12	D7			1			\$300.00
		04	11/01/12	D7			1			\$300.00
		05	06/01/20	D7			1			\$300.00
TOTAL	9				4	1	3	1	0	\$2,850.00

Occupied Slots

This section displays slots with a participant checked in as of the last day of the month of service, and a corresponding billing service recorded in CHAMP for that Report Period. Contractors can expand the section to see slot details that include ICMS project names, slot counts, slot IDs, slot activation dates, slot funding sources, and default billing rates. The billing amount for the slot occupied by a participant will be based on the billing rate the HFH H+S Program Manager assigned to the participant’s ICMS Enrollment in CHAMP.

OCCUPIED SLOTS												
Project	#	Slot	Fund	ID	Client	Date	Single Adult Low Acuity	Single Adult High Acuity	Family Low Acuity	Family High Acuity	ODR All	Cost
<input checked="" type="checkbox"/> Alcott Center Scattered 1	3						2	0	0	1	0	\$1,050.00
		01	DHS	7945	Morris, Mary	06/05/20				1		\$600.00
		02	D7	7940	Kennedy, Kathy	06/15/20	1					\$225.00
		03	DHS	7942	Dawson, Derek	06/15/20	1					\$225.00
<input checked="" type="checkbox"/> Alcott Center Scattered 2 (HACLA CoC Conversion)	1						0	1	0	0	0	\$450.00
		01	DMH FSP (ODR)	7943	Ortega, Owen	06/25/20		1				\$450.00
TOTAL	4						2	1	0	1	0	\$1,500.00

Billing Summary

This section displays slot totals, billing rate totals, slot activation costs, vacant slot costs, occupied slot costs, and total costs by funding stream for the Report Period. The grand total across all funding streams is displayed at the bottom right corner of the **Billing Summary**, and should match the amount requested on the **Cover Page** of the final Invoice.

BILLING SUMMARY											
Fund	#	Single Adult Low Acuity	Single Adult High Acuity	Family Low Acuity	Family High Acuity	ODR All	New Slot Cost	Vacant Slot Cost	Occupied Slot Cost	Total Cost	
DHS	2	1	0	0	1	0	\$0.00	\$0.00	\$825.00	\$825.00	
D7	10	5	1	3	1	0	\$200.00	\$2,850.00	\$225.00	\$3,275.00	
DMH FSP (ODR)	1	0	1	0	0	0	\$0.00	\$0.00	\$450.00	\$450.00	
TOTAL	13	6	2	3	2	0	\$200.00	\$2,850.00	\$1,500.00	\$4,550.00	

If you have any questions about the content in this Guide, please reach out to hfhinvoices@dhs.lacounty.gov.