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New York State
Office for Children and Family Services

Child Care Time and Attendance System

Over Midnight Payment Rule Changes

Version 2.0

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Contents

New York State Office of Children and Family Services (OCFS)

Child Care Time and Attendance Project

Revision History

Name	Date	Reason for Changes	Version
Rob Hops	10/17/2014	Initial draft	1.0
Rob Hops	10/30/2014	Updates based on feedback	2.0

1   Over Midnight Payment Rule Changes

1.1   Background

The payment business rules for New York have parameters based on a "day". For the purpose of calculating a payment, OCFS defined a day as the 24 hour period beginning at Midnight. CCTA screens and the database also are based on this definition, and any times entered need to start and end within this 24 hour period.

The challenge comes when care is provided over midnight, for example from 9PM Monday until 7AM on Tuesday. In CCTA, the attendance is recorded as Monday 9PM – 12AM and Tuesday 12AM – 7AM. Per the rules, the payment would be calculated using the hours per day; 3 hours on Monday and 7 hours on Tuesday. The resulting payment for this 10 hours of continuous care would be different than if the 10 hours were within one day.

Based on analysis done in Phase III, OCFS agreed to change the payment business rules for care provided over midnight. If attendance is recorded as a continuous block of care that spans midnight, the system will apply the total number of hours to the day in which the care started. In the above example, the payment would be calculated using 10 hours for Monday. This would make payment amounts for over midnight care more consistent with those that do not span midnight.

No other payment rules have changed. For care that spans midnight at the end of a billing cycle, the system will calculate the payment based on actual attendance, and then adjust the next payment accordingly (the same way it handles split week calculations currently).

This document describes the changes made to the KinderTrack payment calculator for care provided over midnight. Also included are examples that demonstrate how the payments will be calculated.

1.2   Scope of Changes

Changes were made to the payment calculator, and to some of verbiage in the payment trace. The entering of time-in and time-out pairs for schedules and attendance remains the same.

1.3   References

NY CCTA Over Midnight Care – Analysis and Recommendations_V1_05232013.doc

2   Over Midnight Payment Rule Examples

2.1   Computing Daily Amounts

Monday 10/6/2014	Non-School Day Present	Family Fee $61.50	Scheduled Hours: Actual Hours:	09:00 PM	12:00 AM			Total Hours Scheduled: 00:00 Total Hours Attended: 03:00
Tuesday 10/7/2014	Non-School Day Present	Family Fee $0.00	Scheduled Hours: Actual Hours:	12:00 AM	03:00 AM	09:00 PM	12:00 AM	Total Hours Scheduled: 00:00 Total Hours Attended: 06:00
Wednesday 10/8/2014	Non-School Day Present	Family Fee $0.00	Scheduled Hours: Actual Hours:	12:00 AM	03:00 AM	09:00 PM	12:00 AM	Total Hours Scheduled: 00:00 Total Hours Attended: 06:00
Thursday 10/9/2014	Non-School Day Present	Family Fee $0.00	Scheduled Hours: Actual Hours:	12:00 AM	03:00 AM	09:00 PM	12:00 AM	Total Hours Scheduled: 00:00 Total Hours Attended: 06:00
Friday 10/10/2014	Non-School Day Present	Family Fee $0.00	Scheduled Hours: Actual Hours:	12:00 AM	03:00 AM			Total Hours Scheduled: 00:00 Total Hours Attended: 03:00
Saturday 10/11/2014	Non-School Day Not Scheduled	Family Fee $0.00	Scheduled Hours: Actual Hours:					Total Hours Scheduled: 00:00 Total Hours Attended: 00:00
Sunday 10/12/2014	Non-School Day Not Scheduled	Family Fee $0.00	Scheduled Hours: Actual Hours:					Total Hours Scheduled: 00:00 Total Hours Attended: 00:00

Total	Family Fee	Normal Hours	After Hours	Total Hours	Provider	RMR	Calculated	+Split Week
Week 2	$61.50		24:00	24:00	$138.00	$133.40	$133.40	$0.00

Start Date	End Date	Rate Type	Hours	RMR	Provider Rate	Applied Amount
10/6/2014	10/6/2014	RMR Rate-After Hours Rate - FULL-Time Daily (1 Day)	06:00	$33.35	$34.50	$33.35
10/7/2014	10/7/2014	RMR Rate-After Hours Rate - FULL-Time Daily (1 Day)	06:00	$33.35	$34.50	$33.35
10/8/2014	10/8/2014	RMR Rate-After Hours Rate - FULL-Time Daily (1 Day)	06:00	$33.35	$34.50	$33.35
10/9/2014	10/9/2014	RMR Rate-After Hours Rate - FULL-Time Daily (1 Day)	06:00	$33.35	$34.50	$33.35

In this example, there are four instances of 6 hours of contiguous (9:00 PM – 3:00 AM) care. Each of these 6 hours blocks of care calculate at the Daily rate.

2.2   Corrected Part Day Calculation

Monday 10/6/2014	Non-School Day Present	Family Fee $61.50	Scheduled Hours:					Total Hours Scheduled: 00:00
			Actual Hours:	09:00 PM	12:00 AM			Total Hours Attended: 03:00
Tuesday 10/7/2014	Non-School Day Not Scheduled	Family Fee $0.00	Scheduled Hours:					Total Hours Scheduled: 00:00
			Actual Hours:					Total Hours Attended: 00:00
Wednesday 10/8/2014	Non-School Day Present	Family Fee $0.00	Scheduled Hours:					Total Hours Scheduled: 00:00
			Actual Hours:	12:00 AM	03:00 AM	09:00 PM	12:00 AM	Total Hours Attended: 06:00
Thursday 10/9/2014	Non-School Day Present	Family Fee $0.00	Scheduled Hours:					Total Hours Scheduled: 00:00
			Actual Hours:	12:00 AM	03:00 AM	09:00 PM	12:00 AM	Total Hours Attended: 06:00
Friday 10/10/2014	Non-School Day Present	Family Fee $0.00	Scheduled Hours:					Total Hours Scheduled: 00:00
			Actual Hours:	12:00 AM	03:00 AM			Total Hours Attended: 03:00
Saturday 10/11/2014	Non-School Day Not Scheduled	Family Fee $0.00	Scheduled Hours:					Total Hours Scheduled: 00:00
			Actual Hours:					Total Hours Attended: 00:00
Sunday 10/12/2014	Non-School Day Not Scheduled	Family Fee $0.00	Scheduled Hours:					Total Hours Scheduled: 00:00
			Actual Hours:					Total Hours Attended: 00:00

Total Week 2	Family Fee $61.50	Normal Hours	After Hours 18:00	Total Hours 18:00	Provider $92.00	RMR $88.55	Calculated $88.55	+Split Week $0.00

Start Date	End Date	Rate Type	Hours	RMR	Provider Rate	Applied Amount
10/6/2014	10/6/2014	RMR Rate-After Hours Rate - Part-Time Daily (1 Day)	03:00	$21.85	$23.00	$21.85
10/8/2014	10/8/2014	RMR Rate-After Hours Rate - FULL-Time Daily (1 Day)	09:00	$33.35	$34.50	$33.35
10/9/2014	10/9/2014	RMR Rate-After Hours Rate - FULL-Time Daily (1 Day)	06:00	$33.35	$34.50	$33.35

The system now correctly calculates care where time-out is 12:00 AM. The care on 10/6 is 3 hours, therefore calculates a Part-Time Daily rate. Because the care on 10/8 is not contiguous, it calculates 12:00 AM – 3:00 AM as 3 hours. It then adds the care from 9:00 PM – 3:00 AM, for a total of 9 hours, and uses the FULL-Time Daily Rate. The care on 10/9 is contiguous from 9:00 PM – 3:00 AM and uses the FULL-Time Daily Rate.

2.3 Split Week Calculation

Monday 10/6/2014	Non-School Day Not Scheduled	Family Fee $61.50	Scheduled Hours: Actual Hours:					Total Hours Scheduled: 00:00 Total Hours Attended: 00:00
Tuesday 10/7/2014	Non-School Day Not Scheduled	Family Fee $0.00	Scheduled Hours: Actual Hours:					Total Hours Scheduled: 00:00 Total Hours Attended: 00:00
Wednesday 10/8/2014	Non-School Day Present	Family Fee $0.00	Scheduled Hours: Actual Hours:	09:00 PM	12:00 AM			Total Hours Scheduled: 00:00 Total Hours Attended: 03:00
Thursday 10/9/2014	Non-School Day Present	Family Fee $0.00	Scheduled Hours: Actual Hours:	12:00 AM	03:00 AM	09:00 PM	12:00 AM	Total Hours Scheduled: 00:00 Total Hours Attended: 06:00
Friday 10/10/2014	Non-School Day Present	Family Fee $0.00	Scheduled Hours: Actual Hours:	12:00 AM	03:00 AM	09:00 PM	12:00 AM	Total Hours Scheduled: 00:00 Total Hours Attended: 06:00
Saturday 10/11/2014	Non-School Day Present	Family Fee $0.00	Scheduled Hours: Actual Hours:	12:00 AM	03:00 AM	09:00 PM	12:00 AM	Total Hours Scheduled: 00:00 Total Hours Attended: 06:00
Sunday 10/12/2014	Non-School Day Present	Family Fee $0.00	Scheduled Hours: Actual Hours:	12:00 AM	03:00 AM	09:00 PM	12:00 AM	Total Hours Scheduled: 00:00 Total Hours Attended: 06:00
Monday 10/13/2014	Non-School Day Present	Family Fee $0.00	Scheduled Hours: Actual Hours:	12:00 AM	03:00 AM			Total Hours Scheduled: 00:00 Total Hours Attended: 03:00

Start Date	End Date	Rate Type	Hours	RMR	Provider Rate	Applied Amount
10/6/2014	10/12/2014	Provider Rate-After Hours Rate - FULL-TimeWeekly (5 Days)	30:00	$161.00	$161.00	$161.00

Since there is contiguous care from 9:00 PM Sunday until 3:00 AM Monday, the system uses 6 hours of care for Sunday. This results in a total of 30 hours in 5 days, and uses the FULL-Time Weekly rate for care provided the week ending 10/12.

2.4   Family Share Not Exceeded

Friday 10/10/2014	Non-School Day Not Scheduled	Family Fee $0.00		Scheduled Hours: **Actual Hours:**					Total Hours Scheduled: 00:00 Total Hours Attended: 00:00
Saturday 10/11/2014	Non-School Day Present	Family Fee $0.00		Scheduled Hours: **Actual Hours:**	09:00 PM	12:00 AM			Total Hours Scheduled: 00:00 Total Hours Attended: 03:00
Sunday 10/12/2014	Non-School Day Present	Family Fee $0.00		Scheduled Hours: **Actual Hours:**	12:00 AM	03:00 AM	09:00 PM	12:00 AM	Total Hours Scheduled: 00:00 Total Hours Attended: 06:00
	Total **Week 2**	Family Fee **$61.50**	Normal Hours	After Hours **09:00**	Total Hours **09:00**	Provider **$69.00**	RMR **$66.70**	Calculated **$66.70**	+Split Week **$0.00**
Monday 10/13/2014	Non-School Day Present	Family Fee $21.85		Scheduled Hours: **Actual Hours:**	12:00 AM	03:00 AM			Total Hours Scheduled: 00:00 Total Hours Attended: 03:00
Tuesday 10/14/2014	School Day Not Scheduled	Family Fee $0.00		Scheduled Hours: **Actual Hours:**					Total Hours Scheduled: 00:00 Total Hours Attended: 00:00
Wednesday 10/15/2014	School Day Present	Family Fee $0.00		Scheduled Hours: **Actual Hours:**	09:00 PM	12:00 AM			Total Hours Scheduled: 00:00 Total Hours Attended: 03:00

Summary	Total
Provider Amount	$92.00
Reimbursable Amount	$88.55
Calculated Amount	$88.55
Sibling Reduction	$0.00
Family Fee	$83.35
Provider Levy	$0.00
Payment Amount	**$5.20**

☑ ***Show Rates**

Weekly ⌄

Start Date	End Date	Rate Type	Hours	RMR	Provider Rate	Applied Amount
10/11/2014	10/11/2014	RMR Rate-After Hours Rate - FULL-Time Daily (1 Day)	06:00	$33.35	$34.50	$33.35
10/12/2014	10/12/2014	RMR Rate-After Hours Rate - FULL-Time Daily (1 Day)	06:00	$33.35	$34.50	$33.35
10/15/2014	10/15/2014	RMR Rate-After Hours Rate - Part-Time Daily (1 Day)	03:00	$21.85	$23.00	$21.85

Just like the split week example, since the care provided from 9:00 PM – 3:00 AM is contiguous, this 6 hours block of care is counted on Sunday. The family share of $61.50 is subtracted from the calculated amount of $66.70 for the week ending 10/12. With only one part-time day of care the next week, the amount of $21.85 is all that is assessed for the family share that week.

2.5 Split Week Spanning Two Payments

First Half – Payment 1

Monday 9/29/2014	Non-School Day Present	Family Fee $55.20	Scheduled Hours: Actual Hours:	09:00 PM	12:00 AM		Total Hours Scheduled: 00:00 Total Hours Attended: 03:00
Tuesday 9/30/2014	Non-School Day Present	Family Fee $0.00	Scheduled Hours: Actual Hours:	12:00 AM 03:00 AM	09:00 PM 12:00 AM		Total Hours Scheduled: 00:00 Total Hours Attended: 06:00

Summary	Total
Provider Amount	$57.50
Reimbursable Amount	$55.20
Calculated Amount	$55.20
Sibling Reduction	$0.00
Family Fee	$55.20
Provider Levy	$0.00
Payment Amount	**$0.00**

Start Date	End Date	Rate Type	Hours	RMR	Provider Rate	Applied Amount
9/29/2014	9/29/2014	RMR Rate-After Hours Rate - FULL-Time Daily (1 Day)	06:00	$33.35	$34.50	$33.35
9/30/2014	9/30/2014	RMR Rate-After Hours Rate - Part-Time Daily (1 Day)	03:00	$21.85	$23.00	$21.85

Second Half – Payment 2

Attendance			☑ Show Scheduled Hours	☐ Show Scheduled Days Only	☑ Show Weekly Totals		
Monday 9/29/2014	Calculated 2233651 Present	Family Fee $0.00	Scheduled Hours: Actual Hours:	09:00 PM	12:00 AM		Total Hours Scheduled: 00:00 Total Hours Attended: 03:00
Tuesday 9/30/2014	Calculated 2233651 Present	Family Fee $0.00	Scheduled Hours: Actual Hours:	12:00 AM 03:00 AM	09:00 PM 12:00 AM		Total Hours Scheduled: 00:00 Total Hours Attended: 06:00
Wednesday 10/1/2014	Non-School Day Present	Family Fee $6.30	Scheduled Hours: Actual Hours:	12:00 AM 03:00 AM	09:00 PM 12:00 AM		Total Hours Scheduled: 00:00 Total Hours Attended: 06:00
Thursday 10/2/2014	Non-School Day Present	Family Fee $0.00	Scheduled Hours: Actual Hours:	12:00 AM 03:00 AM	09:00 PM 12:00 AM		Total Hours Scheduled: 00:00 Total Hours Attended: 06:00
Friday 10/3/2014	Non-School Day Present	Family Fee $0.00	Scheduled Hours: Actual Hours:	12:00 AM 03:00 AM	09:00 PM 12:00 AM		Total Hours Scheduled: 00:00 Total Hours Attended: 06:00
Saturday 10/4/2014	Non-School Day Present	Family Fee $0.00	Scheduled Hours: Actual Hours:	12:00 AM 03:00 AM			Total Hours Scheduled: 00:00 Total Hours Attended: 03:00
Sunday 10/5/2014	Non-School Day Not Scheduled	Family Fee $0.00	Scheduled Hours: Actual Hours:				Total Hours Scheduled: 00:00 Total Hours Attended: 00:00

	Total Week 1	Family Fee $6.30	Normal Hours	After Hours 21:00	Total Hours 21:00	Provider $105.80	RMR $105.80	Calculated $105.80	+Split Week $55.20

Summary	Total
Provider Amount	$105.80
Reimbursable Amount	$105.80
Calculated Amount	$105.80
Sibling Reduction	$0.00
Family Fee	$6.30
Provider Levy	$0.00
Payment Amount	**$99.50**

Start Date	End Date	Rate Type	Hours	RMR	Provider Rate	Applied Amount
10/1/2014	10/5/2014	Provider Rate-After Hours Rate - FULL-TimeWeekly (3 Days)	18:00	$105.80	$105.80	$105.80

For this example, the family share is $61.50 per week, and both the Provider and Market rate are both $161 per week.

In the first payment, the actual attendance was 6 hours and 3 hours, so the system used a daily and a part day rate in the calculation. The family share was not exceeded, so the payment amount is zero.

In the second payment, the care for the week totaled 30 hours, so the weekly rate applied. The system took the weekly rate, subtracted the remaining family share, and what was calculated in the previous payment, which resulted in the payment amount.

$161 − ($6.30 + $55.20) = $99.50