

## **INVOICE SUBMISSION GUIDELINES**

### **REGION 1**

#### **Bridgeport/Norwalk/Stamford**

The Region 1 WAF mailbox system designed to better manage the DCF billing and payment process. Invoices are forwarded directly to a dedicated mailbox at DCF REGION 1 WAF INVOICE [DCFREGION1.WAFINVOICE@ct.gov](mailto:DCFREGION1.WAFINVOICE@ct.gov).

It is important that you type BRIDGEPORT or NORWALK in the email subject line and identify the SOCIAL WORKER (by last & first name).

Please do not email or fax the invoice directly to the Office Assistant, DCF Social Worker or Supervisor, or forward copies as this will contribute to duplication leading to delays and errors in processing payments.

If you do not have scanning capability, forward invoices through the Region 1 **Right Fax number at 860-920-3119** which converts to an electronic attachment that is linked to the WAF MAILBOX.

If you have any questions, please contact Cynthia Maignan, Grants & contracts Specialist at (203) 384-5372 or via email at [cynthia.maignan@ct.gov](mailto:cynthia.maignan@ct.gov). You may also contact Stacey Vertula in Bridgeport at (203) 384-5427 or [Stacey.Vertula@ct.gov](mailto:Stacey.Vertula@ct.gov) and Evelyn Ayala in Norwalk at (203) 899-1444 or [Evelyn.Ayala@ct.gov](mailto:Evelyn.Ayala@ct.gov)

#### ***DCF AREA OFFICE GRANTS & CONTRACTS SPECIALIST***

***Cynthia Maignan, MS***

Phone: 203-384-5372

Fax: 203-384-5305

Email: [cynthia.maignan@ct.gov](mailto:cynthia.maignan@ct.gov)

## **INVOICE SUBMISSION GUIDELINES**

### **REGION 2**

#### **Milford/New Haven**

Please email invoices to: [DCFREGION2.WAFINVOICE@ct.gov](mailto:DCFREGION2.WAFINVOICE@ct.gov). When submitting by email please type office location "New Haven" or "Milford" and name of Social Worker in the subject line of the email. This will avoid delays in processing.

If faxing invoices please submit to Right fax number 860-920-3120. Indicate the office location and name of Social Worker on the subject line of the fax cover sheet.

#### ***DCF AREA OFFICE GRANTS & CONTRACTS SPECIALIST***

***Gail Franklin***

Phone: 203-786-2597

Fax: 203-786-2536

Email: [Gail.franklin@ct.gov](mailto:Gail.franklin@ct.gov)

## INVOICE SUBMISSION GUIDELINES

### REGION 3

#### Middletown/Norwich/Willimantic

- Only **pre-approved services** will be reimbursed. You **must** receive an approved Wrap Service proposal prior to services commencing and services extending. If you do not receive the approved proposal **do not** initiate the service, this also applies to **reauthorizations** to continue services.
- All invoices must either be **mailed or email** to **Accounts Payable** to the serviced offices: **(email is preferred method)**

**DCF Middletown Office:** [Middletown.invoicemailbox@ct.gov](mailto:Middletown.invoicemailbox@ct.gov)  
2081 South Main Street; Suite A., Middletown, CT 06457

**DCF Norwich Office:** [Norwich.invoicemailbox@ct.gov](mailto:Norwich.invoicemailbox@ct.gov)  
2 Courthouse Square, Norwich, CT 06360

**DCF Willimantic Office:** [Willimantic.invoicemailbox@ct.gov](mailto:Willimantic.invoicemailbox@ct.gov)  
322 Main Street, Willimantic, CT 06226

- Do not send any invoices to social workers, they will not be processed.
- Each invoice submitted should include the following information:
  - Provider name and ID number
  - Name of your employee who provided the service
  - DCF Social Worker name
  - LINK Case ID number
  - Name and LINK ID number of child receiving service
  - Specific service provided
  - Specific dates of service
  - Attach required monthly progress/status reports.
- For Transportation Providers, please be sure to include ALL required information from the DCF Credentialed Provider Transportation Invoice form which is located on the Advanced Behavioral Health website.
- For Daycare Providers, if you are receiving any payments from Care-4-Kids, please note on invoice.
- Invoices should be billed by the 10th of the following month for services that were provided.
- ***Any incorrect invoice submitted will be returned for revision; we will no longer correct and pay.***
- Failure to adhere to our invoice submission requirements will delay payment processing.

#### **DCF AREA OFFICE GRANTS & CONTRACTS SPECIALIST**

**Monique Provencher**

Mobile Phone: 860.922.4847

Email: [monique.provencher@ct.gov](mailto:monique.provencher@ct.gov)

## INVOICE SUBMISSION GUIDELINES

### REGION 4

#### Hartford & Manchester

- Only **pre-approved services** will be reimbursed. You **must** receive an approved Wrap Service proposal prior to services commencing and services extending. If you do not receive the approved proposal do not initiate the service, this also applies to **reauthorizations** to continue services.
- All invoices must either be **emailed or mailed** to **Accounts Payable** to the serviced office:
  - DCF Hartford Office:** [Hartfordinvoicemailbox@ct.gov](mailto:Hartfordinvoicemailbox@ct.gov)  
250 Hamilton Street, Hartford, CT 06106
  - DCF Manchester Office:** [Manchesterinvoicemailbox@ct.gov](mailto:Manchesterinvoicemailbox@ct.gov)  
364 Middle Turnpike West, Manchester, CT 06040
- Do not send any invoices to social workers, they will not be processed.
- Each invoice submitted **must** include the following information:
  - Provider name and Provider ID number
  - Name of your employee who provided the service
  - Unique invoice number
  - DCF Social Worker name
  - LINK Case ID number
  - Name and LINK ID number of child receiving service (if parent is receiving service, the child's name and ID should be listed)
  - Specific service provided
  - Specific dates of service
  - Attach required monthly progress/status reports
  - For Daycare Providers, if you are receiving any payments from Care 4 Kids, please note the amount on the invoice
  - Invoices should be billed by the 10<sup>th</sup> of the following month for services that were provided
  - **Any incorrect invoice submitted will be returned for revision; we will not correct and pay. any invoice missing the above required information will be returned for revision**
  - Failure to adhere to our invoice submission requirements will delay payment processing

#### **DCF AREA OFFICE GRANTS & CONTRACTS SPECIALIST**

**Pam Burney**

Phone: 860-418-8315 (Hartford) **PLEASE NOTE NEW NUMBER**

Phone: 860-533-3676 (Manchester) **PLEASE NOTE NEW NUMBER**

Fax: 860-418-8267

Email: [Pam.Burney@ct.gov](mailto:Pam.Burney@ct.gov)

## **INVOICE SUBMISSION GUIDELINES**

### **REGION 5**

#### **Danbury/Torrington/Waterbury**

Upon entering into a contract with the Department, the Social Workers will provide you with the approved proposal and send to you. A proposal must always be completed and approved BEFORE services begin. Services provided prior to approval will not be funded by the Department.

Please email your invoices directly to:

**DCF Danbury Office:** [DCFREGION5.WAFINVOICE@ct.gov](mailto:DCFREGION5.WAFINVOICE@ct.gov)

**DCF Torrington Office:** [DCFTORRINGTONWAF@ct.gov](mailto:DCFTORRINGTONWAF@ct.gov)

**DCF Waterbury Office:** [DCFWATERBURYOFFICE@ct.gov](mailto:DCFWATERBURYOFFICE@ct.gov)

When emailing please ***do not*** cc: the DCF social worker or supervisor to the email in order to avoid duplication and delays in processing.

The RightFax will be used in the cases where paper invoices are presented or where a provider may not have email capabilities. RightFAX: [860 920-3123](tel:8609203123)

**For ease of use/sorting please add the office location and social worker's name in the subject line of your email. For example: A. Smith, Waterbury office.**

#### **DCF AREA OFFICE GRANTS & CONTRACTS SPECIALIST**

**Holly DeFloria**

Phone: 203-721-8708

Email: [holly.defloria@ct.gov](mailto:holly.defloria@ct.gov)

## **INVOICE SUBMISSION GUIDELINES**

### **REGION 6**

#### **Meriden/New Britain**

Upon entering into a contract with the Department, the Social Workers will provide you with the approved proposal and send to you. A proposal must always be completed and approved BEFORE services begin. Services provided prior to approval will not be funded by the Department.

Please email your invoices directly to [Dcfregion6.wafinvoice@ct.gov](mailto:Dcfregion6.wafinvoice@ct.gov).

When emailing please **do not** cc: the DCF social worker or supervisor to the email in order to avoid duplication and delays in processing.

The RightFax will be used in the cases where paper invoices are presented or where a provider may not have email capabilities. RightFAX: [860 920-3124](tel:8609203124)

**For ease of use/sorting please add the office location and social worker's name in the subject line of your email. For example: A. Smith, New Britain office/Meriden office.**

#### ***DCF AREA OFFICE GRANTS & CONTRACTS SPECIALIST***

***Victoria Green***

Phone: 860-832-5321

Fax: 860-832-5354

Email: [victoria.green@ct.gov](mailto:victoria.green@ct.gov)