

EARLY LEARNING COALITION OF PINELLAS

PROVIDER / CLIENT RATE DIFFERENTIAL WORKSHEET



(CENTERS - SAMPLE) as of 1-1-2021

	A	B	C	D	E	F	G	H	I	J	K
	CARE LEVEL	COALITION APPROVED FULL TIME (FT) MAXIMUM DAILY RATE	ENTER YOUR FT DAILY RATE FROM YOUR CURRENT CONTRACT YEAR PROVIDER PROFILE	SUBTRACT COLUMN B FROM COLUMN C (IF IT IS HIGHER) THIS IS THE DAILY DIFFERENCE BETWEEN THE COALITION MAX RATE AND YOUR GENERAL PUBLIC/PRIVATE PAY RATE FROM YOUR PROVIDER PROFILE	ADD FT DAILY ASSIGNED CLIENT COPAY AMOUNT	DIFFERENCE CLIENT OWES PROVIDER DAILY (MULTIPLY AMOUNT BY 5 TO GET WEEKLY \$ AMOUNT)	COALITION APPROVED PART TIME (PT) MAXIMUM DAILY RATE	ENTER YOUR PT DAILY RATE FROM YOUR CURRENT CONTRACT YEAR PROVIDER PROFILE	SUBTRACT COLUMN G FROM COLUMN H (IF IT IS HIGHER) THIS IS THE DAILY DIFFERENCE BETWEEN THE COALITION MAX RATE AND YOUR GENERAL PUBLIC/PRIVATE PAY RATE FROM YOUR PROVIDER PROFILE	ADD PT DAILY ASSIGNED CLIENT COPAY AMOUNT	DIFFERENCE CLIENT OWES PROVIDER DAILY (MULTIPLY AMOUNT BY 5 TO GET WEEKLY \$ AMOUNT)
1											
2	INF	55.20					45.00				
3	TOD	37.40					33.15				
4	2YR	28.90					24.65				
5	PR3	24.80					17.36				
6	PR4	24.80					17.36				
7	PR5	24.80					17.36				
8	SCH	16.50					12.38				

- Instructions:**
- 1.COLUMN C & H - Enter your general public/private pay rate from your current year provider profile
 - 2.COLUMN D & I - **Subtract** the Coalition Approved Maximum Rate (FT/PT) from your private pay rate if it is higher than the Coalition Max Rate
 - 3.COLUMN E & I - Difference between your rate and ELC rate
 - 4.COLUMN F & K - **Add** the daily assigned client copayment amount
 - 5.COLUMN G & L - Balance the client owes the provider daily (includes assigned copayment and daily differential amount between Approved Coalition Max Rate and Provider's General Public/Private Pay Rate)

NOTE: If your child care site charges less than the Maximum Rate, you will be reimbursed the amount *you provided* on the rate section of your provider agreement. You **will not** be paid the higher ELC rate if you did not indicate this rate or a higher amount on your private pay rate screen in your provider profile in the Provider Profile.

								Child's Name			
								Parent's Signature			
								Date Signed			