

# Employment Related Day Care Additional Provider Payment Form



ERDC will pay an additional 9% for an ERDC payment that is processed late. Please submit this form if you believe your payment meets the criteria below:

- **For Home Based Providers:** A payment is considered late when a legible and completed billing form is processed more than four business days after it was received by the Direct Pay Unit (DPU).
- **For Center-Based Providers:** A payment is considered late when a legible and completed billing form is processed more than seven business days after it was received by DPU.

DPU will review your submission and will issue an additional payment to the provider if the payment is determined to have been processed late.

**Note: Providers will need to request the additional payment fee within 30 days of receiving the payment.**

As of November 2024, there are three options for submitting the request, and an attestation has been added to the 9% Additional Payment request form to indicate who is completing the form.

## Options:

- Providers may request the additional payment for themselves
- Providers may request support from DPU to submit the additional payment request
  - » DPU: 1-800-699-9074 or [customerservice.dpu@delc.oregon.gov](mailto:customerservice.dpu@delc.oregon.gov)
- Licensed Family Child Care Providers (Certified Family or Registered Family Providers) may request support from their Union to submit the additional payment request.
  - » **If you are a licensed family child care Provider, and have questions about your Union rights related to the Additional 9% Payment, including the right to have the Union submit the claim on your behalf, to file a grievance, or your Union right to grieve if your claim for Additional 9% Payment is denied, you may contact your Union representatives at [oregonccpt132.stewards@gmail.com](mailto:oregonccpt132.stewards@gmail.com)**

More information about the additional payment process can be found in the Provider Guide Insert on the DELC website.

## Instructions for Submitting

Please submit one form for each voucher.

This form can be submitted to DPU via email, fax, or mail.

**Email:** [customerservice.DPU@delc.oregon.gov](mailto:customerservice.DPU@delc.oregon.gov)

**Fax:** 503-373-1580

**Mail:** Department of Early Learning and Care  
Direct Pay Unit  
P.O. Box 14850  
Salem, OR 97309

# Employment Related Day Care Additional Provider Payment Form



\* Indicates required field

## Attestation \*

This form is being completed by (Please choose one from the dropdown):

## ERDC Provider Number \*

This will be three letters followed by five numbers.  
Example: ABC00011

## Provider First and Last Name \*

First name then last

## Provider Type \*

Please select your provider license type from the dropdown.

## Provider Email \*

## Alternate Email

## Provider Phone Number \*

## Billing Form/Voucher Number

Please submit one form for each voucher.

## Billing Form/Voucher Benefit Month and Year \*

Example: January 2024

## Preferred Method of Contact

Please select preferred method of contact from the dropdown.

## Today's date \*

The date you are submitting this form.