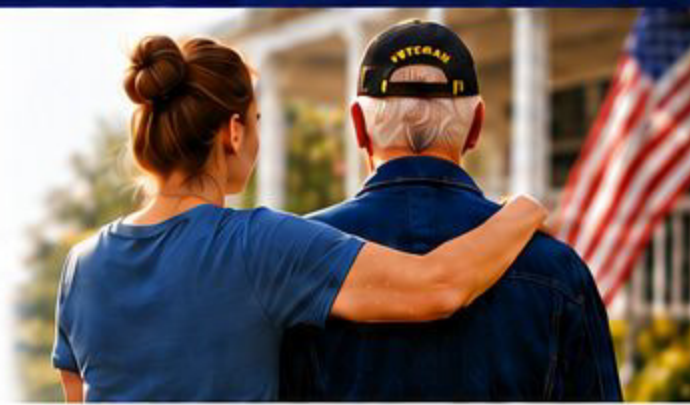


VETERANS

DIRECTED CARE PROGRAM

EMPOWERING VETERANS TO LIVE INDEPENDENTLY AT HOME



300 Hammond Drive
Hopkinsville, KY 42240

270-886-9484

www.peadd.org



ALL PAYMENT TYPES REQUIRE AN INVOICE OR RECEIPT

All (3) payment types require an invoice or receipt with all required information (listed below) and all other requirements before payment is issued.



PLEASE NOTE: At any time, the VAMC may request additional information before approving a specific item, purchase, or service.



1. INVOICE PAYMENT

(Provider has not been paid)

- ☐ Invoice attached
- ☐ Vendor/provider has not already been paid
- ☐ Payment should be made directly to the provider/vendor
- ☐ Invoice has ALL required information (see below)



2. RECEIPT REIMBURSEMENT

(Veteran or Representative has already paid)

- ☐ Original receipt attached
- ☐ Veteran and/or Representative has already paid for the approved item/service
- ☐ Reimbursement should be made to the Veteran
- ☐ Receipt has ALL required information (see below)



3. SERVICE PAYMENT

(For ongoing or scheduled services)

- ☐ Invoice attached
- ☐ Service dates are clearly listed
- ☐ Service provider information is included
- ☐ Invoice has ALL required information (see below)



REQUIRED INFORMATION ON INVOICE OR RECEIPT

The invoice or receipt must include:

- | | |
|--|--|
| ☐ Name of provider/vendor | ☐ Itemized list of charges |
| ☐ Date(s) of service or purchase | ☐ Total cost |
| ☐ Description of goods and/or services provided | ☐ Mailing address for payment (if applicable) |

If any of the above information is missing, your request may be returned for correction.



STOP BEFORE YOU SUBMIT – FINAL REVIEW CHECKLIST

- | | |
|--|---|
| ☐ Correct payment type has been selected | ☐ Proof of payment included (if Receipt Reimbursement) |
| ☐ Invoice/receipt includes ALL required information | ☐ Documentation is complete, legible, and accurate |
| ☐ Purchase/Payment Authorization & Reimbursement Form is completed and signed | |
| ☐ All required forms are attached | READY TO SUBMIT TO PENNYRILE STAFF VIA LASERFICHE |



2. PURCHASE/PAYMENT AUTHORIZATION & REIMBURSEMENT FORM

- ☐ Form is fully completed
- ☐ Form is signed by the Veteran or representative
- ☐ Requested item/service is approved by VAMC and within the Veteran's spending plan
- ☐ All information is legible



COMMON REASONS REQUESTS ARE RETURNED

- | | |
|--|--|
| Missing invoice or receipt | Proof of payment not included (for Receipt Reimbursement) |
| Missing required information on invoice/receipt | Item/service not approved in spending plan or not enough funds available |
| Unsigned Purchase/Payment Authorization & Reimbursement Form | |
| Illegible or unclear documentation | |



QUESTIONS? WE'RE HERE TO HELP.



If you have questions about your Goods & Services payment request or VDC budget, please contact your Case Manager.



(270) 886-9484



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