Attorney Instructions - INFORMATION REGARDING BILLING

For payment inquiries, full regulations, CLE information and agency forms - see our website (www.sbids.org).

This form is to be used for payment for **felony** defense only. Be sure to attach your time sheet and any receipts.

Claims should be submitted to the board for payment no later than 60 days after termination of services. (K.A.R. 105-9-1 (a)). Claims submitted after the 60 days should include a written explanation for the delay in submission.

Claims are to be submitted after services are terminated, i.e. sentencing, dismissal of charges, diversion, withdrawal, acquittal or failure to appear. Interim billings are not allowed.

Please allow three weeks for processing. Claims that are submitted on the same day may not be processed at the same time. Vouchers that total >\$2,000 are held for additional review by the State of Kansas, Department of Administration, Accounts and Reports. Some claims may be held pending resolution of additional agency audit procedures.

FEIN/SSN - Please list your federal employer identification number or your social security number. The number you list is the number that your income taxes are filed under. The W-2 you receive in January will be listed under whatever number you put on the claim form. We will not change this number, so please be sure it is accurate.

ELECTRONIC DEPOSIT - Electronic deposit is a manual input option. Occasionally this may be overlooked in the payment process. Electronic deposited funds are usually received 1-2 days before a paper check would be received. You must notify us if you change banks to prevent payment delays.

FIRM - The name of the firm the attorney is employed by. NAME - The name of the attorney assigned to the case.

MAILING ADDRESS - The address where all checks and your W-2 should be mailed. If your mail goes to a PO Box, please be sure to list that address. If your address changes, please check the appropriate box at the bottom of the "Payee Information" block. Checks are mailed out directly by the Dept of Administration. If we do not have the correct address, your check will be mailed to the wrong address.

DAYTIME PHONE – Provide a phone number where we can reach someone regarding the claim. If a question can be answered by phone, we will call. Otherwise, we will return your voucher to you, which will delay your reimbursement.

PAYEE NUMBER – A 5-digit agency assigned number that is specific to the attorney.

OPEN/CLOSE DATES - Please record the beginning and ending dates from your time sheet for this particular service.

APPLICATION FEE - Specify if the judge ordered payment of the \$100 application fee.

ATTORNEY FEES & EXPENSES - Did the judge order the defendant to repay attorney fees and expenses? Specify the amount.

EXCEPTIONAL CLAIM: We will pay all claims up to the reasonable levels of compensation established for your county. If your claim falls within the guidelines for an exceptional case and has been deemed so by the judge, the claim will be further reviewed by S.B.I.D.S. to determine appropriate reimbursement. Please be sure that your order meets the requirements listed in the K.A.R.'s - listing all elements specific to your case that establish the claim as exceptional. For exceptional appeals, please submit a copy of the brief.

Specify the nature of the court appearance on the time sheet (K.A.R. 105-9-3 (c)). Denote preparation time from court time and also specify final status of the case on both the time sheet and claim form.

Separate travel time from preparation time and in-court time on the line provided on the voucher. Please itemize your

mileage and travel per day on your time sheet. We reimburse mileage at the state rate that was in effect at the time of travel.

RECEIPTS - Receipts must be sent with the claim form in order to be reimbursed. Cumulative telephone calls and faxes totaling more than \$10.00 must have a copy of the phone bill or a receipt from the vendor with the calls to be reimbursed highlighted. Photocopies done in house will be paid at a rate of .20 cents per copy. Please itemize **number of copies** on your time sheet. **If an outside copier is used, please attach the receipt.** Cumulative postage will be reimbursed up to \$10.00 without a receipt. Anything above this amount will require a receipt.

EXPERTS - Must be paid directly by S.B.I.D.S. for their services. An expert claim voucher form, court order and invoice are required. Out –of-state psychologists also need to provide a copy of their Kansas license. There may be an occasion when an expert requires immediate payment and we must reimburse the attorney for these services. In this event, an order for expert services and a billing from the expert are required when submitting the attorney voucher claim form and supporting documents. For further instructions, please refer to the instructions for the "Order Authorizing Investigative or other Expert Services" on our website.

All other boxes on the claim form are self-explanatory. Please be sure to fill in all boxes. If information is missing from a voucher or time sheet, we will return your unprocessed claim form.

Tips on Completing Your Claim Form and Time Sheet

Do not fax claims. Claims must be submitted with original signature of attorney and judge. **Staple** time sheet and receipts behind the claim. Include a copy of the order appointing counsel with claim.

List each entry on your time sheet in tenths of hours (K.A.R. 105-9-3 (d)). Example: Should read 1.2 not 1.25. We round down.

Time should be split between multiple case numbers for the same defendant, and should be billed on separate vouchers. Bill only one felony case number, per voucher. Separate claims are to be submitted for each post-sentencing service.

No compensation shall be made for secretarial time including but not limited to opening files, calendaring, copying, faxing and preparing claim forms.

SBIDS POLICY STATEMENT - The following maximum amounts of time allowed for the following services will go into effect on vouchers received July 1, 1993, and after.

<u>ACTIVITY</u>	MAX TIME ALLOWED
Trial Setting	.5 Hour
Arraignment	.5 Hour
Bond Reduction	.5 Hour
First Appearance	.5 Hour
Continuance	.5 Hour
Docket Call/Status	.5 Hour
Prelim Waiver	.5 Hour

REASONABLE LEVELS OF COMPENSATION

		Reasonab	Reasonable Levels of Compensation at \$75 per Hour							
*	REAS	ONABLE LEVELS OF CO	MPENSATION K.A	A.R. 105	5-5-3, 105-	-5-6, 105	-5-7 AS AME	NDED 4/26/2019		
NONTRIED FELONY CASES		TRIED F	TRIED FELONY CASES			SBIDS POLICY STATEMENT				
* \$1700		Off Grid	* \$2400	32 hrs Non-Drug offenses of severity		The following maximum amounts of time				
					level 5 - 10			allowed for the following services will go		
* \$1500	20 hrs	Non-Drug offenses of sever						into effect on vouchers received		
		level 1 - 5 and drug offenses		40 hrs	ns Non-Drug offenses of severity			July 1, 1993, and after.		
		with 6 or more hours in cour	t		level 4 and		enses of			
					severity le	evel 2 -4				
* \$1125	15 hrs	Non-drug offenses of severi						ACTIVITY ALLOWED	MAX TIME	
		level 6 - 10 and drug offense	es * \$7500	100 hrs		0	of severity	Trial Setting	.5 Hour	
		with 6 or less hours in court			level 1 - 3 and drug offenses		goffenses	Arraignment	.5 Hour	
				of severity level 1			Bond Reduction	.5 Hour		
		Non-Grid is level 10						First Appearance	.5 Hour	
		Off-Grid is level 00	* \$7500		Off Grid			Continuance	.5 Hour	
<u>OTHER</u>								Docket Call	.5 Hour	
				These REASONABLE LEVELS OF			F	Prelim Waiver	.5 Hour	
* \$750	10 hrs	Habeas Corpus/60-1507/		COMPENSATION MAY BE			(Waiting for Verdict 1.0 Hour)			
		Civil Cases		EXCEEDED PER K.A.R. 105-5-8.			(Rescinded 12/96)			
			See parag	See paragraphs (4) and (b).						
* \$400		Probation revocation;								
		representation of indigent								
		material witness or indigent								
		grand jury witness; motions						NO COMPENSATION SHALL BE		
		modify sentence pursuant	THE REASONABLE LEVELS OF			MADE FOR SECRETARIAL TIME				
		to K.S.A. 21-4603		COMPENSATION ARE NOT THE			INCLUDING BUT NOT LIMITED			
				SAME AS THE REIMBURSEMENT				TO OPENING FILES,		
* \$1800	24 hrs	Appeals		TABLES WHICH ARE USED FOR			CALENDARING, COPYING AND			
	_		DEFE	DEFENDANT REPAYMENT.			PREPARING VOUCHERS.			
5/17/201	9									