



## PRACTICE SESSION - LICENSED HOME PROVIDER

Illinois Department of Human Services  
Child Care Telephone Billing Line  
1-800-787-9316 Voice  
1-800-787-9318 TTY  
Available: 24 hours a day, 7 days a week  
English or Spanish

**Completing the practice session is not required in order to get a password.**

Practice ID and Password:      Licensed Home Provider  
Provider Number: 601-12-1234  
Password: 12345

You may answer the questions in one of two ways:

- You may speak your answer into the phone. Some hints for using this method.
  - Speak in a slow, clear voice.
  - The system works best if you call from a quiet room.
  - Use the phone handset instead of a speakerphone or hands-free headset.
  - Use a landline phone instead of a cell phone.
  - Speak only the requested information.
- You may answer by touching keys on your telephone keypad. If you are calling from a noisy location or you don't have a good connection, use the touch-tone keys on the phone.

- When the system asks if the address on your certificate is correct, say **"YES"** or press **"1"**.
- When the system asks if you are still providing care for this family, say **"YES"** or press **"1"**.
- You will be entering information for the month of **January**.

### Billing information:

<b>Client Name:</b>	THERESA CAMPBELL	<u>Days Open</u>	<u>Days Attended</u>
<b>Child Name:</b>	DESHAWN KNIGHT	0 Full time	0 Full time
		22 Part time	22 Part time
<b>Client Name:</b>	SANDRA WALKER	<u>Days Open</u>	<u>Days Attended</u>
<b>Child Name:</b>	MALIK WALKER	10 Full time	10 Full time
		12 Part time	12 Part time

You may complete the practice session as many times as you would like. If you have questions or need help, please contact your Child Care Resource and Referral Agency (CCR&R).