



# Office of Early Childhood & Out-of-School Learning

## Child Care and Development Fund Voucher Program

---

### Policy Manual

*Revised, Effective **October 14, 2024***

*Revised February 2, 2025*

## Contents

INTRODUCTION & PURPOSE .....	4
SECTION 1 PROCEDURES FOR PROCESSING CCDF ELIGIBILITY .....	5
1.1 Determining CCDF and OMW Regular Eligibility .....	5
1.2 CCDF Waitlist .....	6
1.3 Waitlist Prioritization Policy .....	6
1.4 Household Members .....	8
1.5 Residency .....	11
1.6 Child Eligibility .....	12
1.7 Service Need .....	15
Service Need—Employment .....	15
Service Need-Self Employment .....	18
Service Need-Education or Training Programs .....	19
Service Need-Incapacitation .....	21
Service Need-Child Protective Services .....	23
Change in Service Need/Transitional Care .....	24
1.8 Financial Eligibility - Countable Income .....	25
SECTION 2 CCDF AUTHORIZATION .....	32
2.1 Authorization .....	32
2.2 Absences .....	35
2.3 CCDF/OMW Provider Information Page and Roster Management .....	36
2.4 CCDF Provider Reimbursement Rates .....	37
2.5 Definition of Nanny Care .....	39
2.6 Child Care Subsidy & Copayments .....	39
2.7 Changes to Vouchers .....	40
2.8 Completing Authorization Process .....	42
2.9 CONSUMER EDUCATION SURVEY & DEVELOPMENTAL MILESTONES .....	43
SECTION 3 MAINTAINING CCDF ELIGIBILITY AND REAUTHORIZATION .....	44
3.1 Maintaining an Application .....	44
3.2 Household Size .....	46
3.3 Loss of Service Need .....	47

3.4 Extending Subsidy End Dates .....	47
3.5 Self-Employment.....	48
3.6 Temporary Fluctuation in Income (TFI).....	49
3.7 Reauthorization.....	50
SECTION 4 CCDF NONCOMPLIANCE.....	50
4.1 Notice of Adverse Action (NOA).....	50
4.2 Applicant Appeal Process.....	52
4.3 Determination of a Repayment Agreement.....	53
4.4 Program Abuse or Fraud.....	55
4.5 Eligibility Office Role .....	56
4.6 Intentional Program Violation (IPV).....	57
4.7 Provider Compliance / Noncompliance.....	57
SECTION 5 PERFORMANCE STANDARDS .....	58
5.1 Quality Assurance and Monitoring .....	58
5.2 Eligibility Specialist Audit of an Application.....	59
5.3 The Eligibility Software Quality Assurance Reports.....	60
SECTION 7 CCDF Forms & Resources .....	61
7.1 CCDF Forms.....	61
7.2 Resources .....	61

# INTRODUCTION & PURPOSE

## Policy and Procedure Manual for the Child Care and Development Fund (CCDF) and On My Way Pre-K Eligibility

### Purpose of this Manual

The purpose of this manual is to provide policies, procedures, and guidance to follow as the Eligibility Office facilitates eligibility determination and authorizes services to prospective CCDF Households.

### CCDF Introduction

The Child Care and Development Fund (CCDF) is a federal program that helps low-income families obtain child care so that they may work, attend training, continue their education, or job search may be used as a service need on initial application only. In Indiana, CCDF is managed by the Indiana Family and Social Services Administration (FSSA) in the Office of Early Childhood and Out-of-School Learning (OECOSL).

### The overall purpose of CCDF is to:

- protect the health and safety of children in child care,
- to promote parental choice and empower families searching to make their own decisions regarding the child care services that best suits their family's needs,
- to increase the number of low-income children in high quality settings,
- to improve child care and development of participating children.

### On My Way Pre-K (OMW) Introduction

- On My Way Pre-K was signed into state law on March 27, 2014.
- On My Way Pre-K provides assistance to low-income families with a 4-year-old so they can access a high-quality pre-K program the year before they begin kindergarten.
- On My Way Families may select an approved On My Way Pre-K program.

# SECTION 1 PROCEDURES FOR PROCESSING CCDF ELIGIBILITY

To apply for services applicants can apply through Early Ed Connect (EEC) to pre-qualify. Please direct the Applicant to [Early Ed Connect \(EEC\)](#) to complete the application process.

## 1.1 Determining CCDF and OMW Regular Eligibility

- All families must meet the service need, financial eligibility of 150% or less of the [federal poverty level](#), residency, and age requirements as well as choose a certified provider to access CCDF.
- Eligibility requirements for CCDF and On My Way Pre-K are aligned, and policies should be considered applicable to both unless otherwise noted.
- Eligibility requirements for On My Way Pre-K Limited Eligibility are not aligned and are addressed separately.

### **Definition of Applicant**

A person who is applying for services on behalf of the child(ren) for which they have physical custody. The Applicant must be a person related to the eligible child by blood, law, or is their foster parent or other person standing in place of the parent. The Applicant and Co-Applicant must be at least age eighteen (18) unless the individual is married, an emancipated minor, or a minor parent.

### **Definition of New Applicant**

A New Applicant is an individual applying for services who has not received CCDF services for the previous ninety (90) days.

### **Definition of Initial Applicant**

An Initial Applicant is an applicant that has never been authorized for CCDF services.

## 1.2 CCDF Waitlist

### Definition of Waitlist

A list of children who preliminarily meet financial eligibility guidelines, but final eligibility has yet to be determined.

#### **PLEASE NOTE:**

The Eligibility Office must select the appropriate priority for an Applicant by choosing the category for the highest eligible priority which could be “none.”

## 1.3 Waitlist Prioritization Policy

Families shall be placed on the waitlist and prioritized by the eligibility software in the following order:

1. OMW families enrolling during the OMW year
2. Families under 100% of Federal Poverty in CCDF waitlist is sorted in descending order by CCDF waitlist date and slots are assigned until funds have been exhausted.
3. Child Care Workers are sorted in descending order by CCDF waitlist date
4. Families financially eligible: The remaining state-wide CCDF waitlist is sorted in descending order by CCDF waitlist date and slots are assigned until funds have been exhausted.

### On My Way Pre-K Requirements for Eligibility

A child who is at least four (4) years old and not yet five (5) years old by August 1 of the year they are applying for services and residing in a CCDF defined household. The application for On-My-Way Pre-K is aligned with the CCDF process. An Applicant or Co-Applicant may provide a completed EEC application to determine pre-eligibility status for the OMW program, including a valid service need, income, and age eligible child. This information can be in written or in verbal form. Enrollment periods for On My Way Pre-k are determined by OECOSL.

## Benefits of OMW

- Family co-pays are waived for all vouchers issued during the authorization period.
- Extension of current benefits for all children receiving services to first Saturday in June of On Way Pre-K year (to align reauthorization dates).
- OMW Providers must be a high-quality program and approved by OECOSL to serve OMW children. OMW programs are required to conduct kindergarten readiness assessments.
- Families have support through their OMW Pre-K Project Manager.

## On My Way Pre-K (OMW) Regular

Applicants receiving OMW vouchers are receiving a CCDF Voucher which may entitle them to:

- Vouchers before the start of the pre-k year,
- Vouchers for before and after school care (wrap around care),
- Vouchers for break care, and
- Vouchers after the pre-k year.
- Families enrolling in OMW. These applications are not priority enrollment, OMW is done during specific enrollment dates determined by OECOSL.

## ON MY WAY Pre-K Limited Eligibility (OMW LE)

Applicants with income up to 185% of the federal poverty level may be eligible for OMW Pre-K LE services for a maximum of 46 weeks if:

- A parent or guardian living in the household is working, going to school, attending a job training program, or searching for a job on initial application; **or**
- A parent or guardian living in the household receives Social Security Disability Insurance or Supplemental Security Income (also known as SSDI or SSI) benefits for themselves.

OMW LE families are placed on a separate wait list in the order they applied because the enrollment date cannot be before June 1 of each year.

OMW LE is 100% State funded and provides services ONLY for the OMW Pre-K child during the OMW school year. Children receiving OMW LE vouchers are not eligible for wrap around care or break care. The market rate for LE is set at \$147.82/week. This rate differs from OMW Regular vouchers due to legislative guidelines.

## **1.4 Household Members**

### **Definition of CCDF Family**

Includes Applicant, Co-Applicant, and children, who are living in the same household and who are related by blood or by law or standing in place of a parent.

### **Definition of Standing in Place of a Parent**

An individual with physical custody of a child(ren) when a biological parent is not present in the household.

- Using the definition of CCDF Family, the Eligibility Office must determine which individuals shall be included on the application.
- It is possible for an Applicant to have more than one application based on the relationship of the child or children to the other adults in the household; however, a child may not be on multiple applications with the same adult Applicant.
- Once a child(ren) turns eighteen (18) years of age, the child is no longer considered a family member for purposes of eligibility regardless of school enrollment status.
- In the case of foster families, only foster children who are biological siblings should be listed on the same application.

### **Definition of Single Applicant**

There are no other adults declared on the application.

### **Documented Identity Policy:**

The Applicant must submit appropriate documentation of identity for all household members to establish family size.

### **Applicant/Co-Applicant Identity**

Only one verification document is required. When entering the Applicant or Co-Applicant's name into the eligibility software, the first and last name must be entered as recorded on the form of identification. A middle initial is optional. An Applicant or Co-Applicant may declare their date of birth.

### **Name Affirmation**

When an Applicant or Co-Applicant's name as displayed on their ID document does not match all verification documents, the individual must complete a Name Affirmation form.

## ACCEPTABLE DOCUMENTS

**PLEASE NOTE: Photo ID is not the only source of acceptable documents.** The documentation criteria have been expanded to minimize Applicant burden. Any of the following are acceptable:

- Government Issued ID
- State Issue ID
- School ID
- Employer Issued ID
- Photo ID
- Form I-551 Valid Green Card (lawful permanent resident card)
- Valid Visa
- Valid Form I-94 (Arrival / Departure Document)
- Form I-797C (Notice of Action) this is acceptable to establish legal status if it states granted or approved.
- I-571 Refugee Travel Document
- Social Security Card (with the first five digits redacted)

### **PLEASE NOTE:**

Acceptable documents may be issued by a governing body outside of the United States. Expired identity documents may be used to verify identity, only.

## Definition of a Minor Parent

Minor parents are Applicants under the age of eighteen (18) and must be the legal parent of a child(ren) applying for services. A minor parent is the Applicant and must meet all relevant eligibility criteria.

## Minor Parent Primary Caregiver Policy:

When a minor parent is in the Household and is NOT the primary caregiver, the following documentation is required to allow the grandparent of the child to be the Applicant:

- Signed and dated statement from the grandparent indicating the minor parent is not the primary caregiver; **or**
- Signed and dated statement from the minor parent indicating they are not the primary caregiver.

### **PLEASE NOTE:**

Either statement must be provided with each application sequence until the minor parent becomes eighteen (18) years of age. The minor parent will be listed as a child in the CCDF household until the minor parent becomes eighteen (18) years of age or moves out of the household.

## Change in Physical Custody Policy:

When the physical custody of a child receiving CCDF benefits changes, the child may be entitled to continued benefits should the new individual with physical custody meet eligibility guidelines. This includes an eligible service need and income below 85% of state median income (SMI).

## Foster Parent Adopts Child

When a foster parent adopts their foster child(ren), it is considered a change in custody and must meet the eligibility guidelines including an eligible service need and income below 85% of state median income (SMI).

## Parents in the Military

The person with physical custody of the child(ren) is considered the Applicant(s) for services. Their service need and financial eligibility would be considered for eligibility.

### Two Custodial Adult Household:

- A married couple's application will include the parent stationed away from home in the household size and their income shall also be counted toward eligibility.
- An unmarried couple's application will not include the parent stationed away from home nor will their income be counted toward eligibility unless support is being provided directly to the custodial parent and this income will be treated as Child Support.
- If the military family is ineligible for CCDF, they should be referred to Child Care Aware (800) 424-2246.

## 1.5 Residency

There is no minimum length of time an Applicant or Co-Applicant must reside in Indiana to obtain assistance. This can include a person who is homeless or temporarily residing in a domestic violence or homeless shelter in Indiana. Should an active Applicant or Co-Applicant move from their current Indiana County of residence, they may transfer their CCDF benefits to another Indiana county.

## ACCEPTABLE DOCUMENTS

- Proof of address from a third party which includes:
  - Applicant or Co-Applicant name
  - Street address, city and/or zip code
- Must be dated within 60 days before or after the Applicant's signature date on the Applicant Worksheet.
- This can include a utility bill with the billing/statement date or service period end date. Using the Due Date is not acceptable.

### **PLEASE NOTE:**

Window envelopes and expired IDs are not acceptable verification for residency.

## **1.6 Child Eligibility**

Eligible children must be under the age of thirteen (13) at the time of application or reapplication, however children turning thirteen (13) may continue to participate through the end of the subsidy period including any extension of time.

A child over the age of thirteen (13) at the time of application or reapplication with appropriately documented special needs or court ordered supervision and is under the age of eighteen (18) may participate until the Sunday following their nineteenth (19th) birthday.

When entering the child's name into the eligibility software, a child's first and last name should be entered as recorded on the child's form of identification. A middle initial is optional.

### **ACCEPTABLE DOCUMENTS TO VERIFY IDENTITY AND AGE**

- Verification of birth from any government entity.
- Any document originating from the hospital of birth.
- Any documentation verified by the Division of Family Resources (DFR).
- Any documentation verified by the Indiana State Department of Health (ISDH).
- School Enrollment Record or Identification Card if date of birth is on the document.
- Medical Immunization Record if the date of birth is on the document.
- Other documents as approved by the CCDF Policy Consultant.

### **Eligible Child's Citizenship**

For purposes of the Program, an eligible child must be a citizen of the United States or a qualified legal alien. Only the citizenship or immigration status of the eligible child is relevant for eligibility purposes.

### **ACCEPTABLE DOCUMENTS**

It is the responsibility of the Eligibility Office to obtain documentation to verify a child requesting services is a citizen of the United States or a qualified (legal) alien.

- Any appropriate documentation issued by the United States
- Form I-551 Valid Green Card (lawful permanent resident card)
- Valid Visa
- Valid Form I-94 (Arrival / Departure Document)
- Form I-797C (Notice of Action) this is acceptable to establish legal status if it states granted or approved.
- I-571 Refugee Travel Document

- Social Security Card (with the first five digits redacted) marked “valid for work only with DHS authorization” does verify legal resident alien status.
- Other documents as approved by the CCDF Policy Consultant

**PLEASE NOTE:** Form I-589 is the application for asylum that provides a court date but is not acceptable to establish legal status.

**PLEASE NOTE:** For DCS, Foster and CPS cases presumptive eligibility will be used in place of the documentation above. When authorizing a case using presumptive eligibility, a case note must be entered in the eligibility software that states “presumptive eligibility used for citizenship”.

## Presumptive Eligibility of Child’s Citizenship for DCS, Foster and CPS cases:

A child must be a U.S. citizen or qualified legal alien to be eligible for CCDF. OECOSL will assume that DCS has verified, or is in the process of verifying, the child’s citizenship status:

- DCS will verify eligibility for citizenship.
- DCS will collect and maintain verification documents.
- DCS will notify OECOSL if birth documentation is not received within 90 days and notify the OECOSL In-House Policy Consultant.
- DCS will provide access to any birth or citizenship records if needed for auditing purposes.

**PLEASE NOTE:** Presumptive eligibility may be used for citizenship or legal alien status for cases that are NOT DCS, foster or CPS, but the applicant and/or co-applicant will be required to provide the appropriate verification within 16 weeks to remain eligible. The AIS case note is still required for Monitors.

## Foster Children Placed in a Licensed Foster Home

### ACCEPTABLE DOCUMENTS

It is the responsibility of the Eligibility Office to collect documentation **before** exempting a foster parent’s income.

- Copy of the foster parent’s valid Foster Family Home License, State Form 45562, which matches the foster parent’s residency verification; or
- Documentation from approving authority indicating the Foster Family Home License has been renewed or address has been changed; and
- Verification the child is a ward of the State – Medical Authorization Card, placement letter. These documents may be used to verify the child’s identity and age.

## Child with Special Needs

### Definition of a Child with Special Needs

A child who requires educational need or care resulting from learning difficulties, a physical disability, or emotional or behavioral difficulties.

### Policy for a Child with Special Needs

Documentation for children with special needs under the age of thirteen (13) is required at initial application only. For children ages thirteen (13) or over, the required special needs documentation must be an IEP (Individualized Education Plan) or a statement from a health care professional updated at every reauthorization.

### ACCEPTABLE DOCUMENTS

To identify a child under the age of thirteen (13), with special needs, any of the following are appropriate documents.

- Proof of enrollment with Children with Special Health Care Services as provided by the State of Indiana; or
- Proof of enrollment in First Steps Early Intervention System; or
- A copy of the child's Individualized Education Plan or IEP; or
- Verification of Supplemental Security Income (SSI); or
- Proof of enrollment in Head Start for a child professionally diagnosed with disabilities; or
- Statement from a health care professional which includes the child's diagnosis.

### **PLEASE NOTE:**

If documentation of enrollment in at least one of the above indicated programs cannot be obtained, the child will not be considered a child with special needs until the documentation can be provided. A Provider and/or Applicant or Co-Applicant cannot self-declare a child has special needs.

## **1.7 Service Need**

An Applicant and Co-Applicant must demonstrate a valid service need to establish eligibility. An employment service need must begin within sixteen (16) weeks of the subsidy begin date. An education service need may start thirteen (13) weeks from the subsidy begin date. Vouchers may be authorized prior to the service need start date.

### **Service Need—Employment**

#### **Employment (Working)**

Any of the following may be appropriate employment activity/service needs:

- Employment/New Employment (Working)
- Self-Employment
- On-the-Job Training
- Job Search (At initial application only)

#### **Definition of Employment (Working)**

A person receiving wages or salary, including cash, for performing services for another person or organization or receiving compensation for a service or product. These activities may be conducted through an employer or be considered self-employment and are documented by proof of income. **There is no minimum number of working hours required.**

#### **REQUIRED DOCUMENTATION**

- Applicant or Co-Applicant name or identifying information (employee ID or SSN)
- Gross wages
- Date paid (may be declared)

#### **Appropriate Documentation to Verify Employment Service Need**

Earned income is verified by financial documentation dated within sixty (60) days before or after the Applicant signature on the Applicant Worksheet, which may include The Work Number verification to help families obtain missing documentation. This should include permission from the Applicant and Co-Applicant.

**PLEASE NOTE:**

It is not appropriate to request a social security number to run the Work Number query.

For cash paid Applicants or Co-Applicants, the **Request for Cash Earnings Form** must be completed to verify income and service need. Applicants being paid in cash and receiving tips are not required to complete the Tipped Worksheet

**APPLICANT/CO-APPLICANT WORKS FOR THE THEIR CHILD CARE PROVIDER**

An Applicant and/or Co-Applicant may work for their child care provider with a completed Parent/Provider Statement and who meet the following criteria:

If the Eligible Provider is a:

- Licensed center, the Applicant/Co-Applicant must document they will not be the **primary caregiver for their child during the daycare day**.
- Legally license exempt facility, including a registered childcare ministry, the Applicant/Co-Applicant must document they will not be **primary caregiver for their child during the daycare day**
- Licensed childcare home, the Applicant/Co-Applicant must not work at the same home their child attends
- Legally license exempt home, the Applicant/Co-Applicant must not work at the same home their child attends.

**New Employment**

**Definition of New Employment**

A person receiving wages or salary, including cash, for performing services for another person or organization or receiving compensation for a service or product. These activities may be conducted through an employer or be considered self-employment and are documented by a New Hire form or letter from an employer. There is no minimum number of working hours required.

## Appropriate Documentation to Verify New Employment

- New Hire Form-completed. EIN is not required, OR
- Employer Statement on letterhead, which must include:
  1. Applicant or Co-Applicant name
  2. Start date of employment
  3. Rate of pay – if less than minimum wage is reflected, use the minimum wage rate multiplied by the anticipated hours to project income.
  4. Anticipated hours (if an average is provided use the lesser of the hours to project income)
  5. Contact information for the employer

### Commissioned Employees

Commissioned employees who do not have any income in the last 60 days should be marked as having incomplete income with vouchers pended after thirteen (13) weeks and an income update must be completed to establish poverty level. Income may not be projected in these situations.

### Tipped Employees

Tipped employees with an hourly wage less than minimum wage should be calculated using the current minimum wage multiplied by the anticipated hours worked to project income.

### **PLEASE NOTE:**

It is the responsibility of the Applicant or Co-Applicant to report if they are not participating in their service need. Eligibility should not request another paystub once projected income has been calculated. An income update is not required. It is important for Eligibility to communicate to the Applicant or Co-Applicant that they need to report all updates/changes within ten (10) days, as it may effect eligibility.

## Service Need-Self Employment

### Definition of Self-Employment (Working)

Revenue earned directly from their own business, trade or profession which may take place in or out of the home and is subject to self-employment tax.

#### APPROPRIATE DOCUMENTATION

- Applicants should complete the Statement of Self Employment Profit and Loss verifying any thirty (30) day period within sixty (60) days before or after the Applicant's signature on the Applicant Worksheet **and**
- The most recently completed IRS Tax Transcript with a Schedule C if the business is old enough to file taxes **or**
  - Schedule E is acceptable if the business is a partnership or S corporation **OR**
  - Schedule K-1 is acceptable if the business is partnership or S Corp. Shareholder **OR**
- Documentation that reasonably establishes employment. This can include documentation of employment or income through independent contracts, gig work, or other non-traditional work arrangements.

#### **PLEASE NOTE:**

Applicants/Co-Applicants who are self-employed and unable to exhibit income within sixty (60) days before or after the Applicant's signature on the Applicant Worksheet, may be authorized at the initial enrollment or as a new service need for fifty-three (53) weeks with zero (0) income. At reauthorization, an Applicant/Co-Applicant must be able to exhibit income within the previous one-hundred and eighty (180) days, with a Statement of Self-Employment Profit and Loss.

#### **PLEASE NOTE:**

For individuals driving for ride share or similar businesses, a current agreement or other verification which demonstrates they are actively working (screen shots) is acceptable.

They may choose to do a Profit and Loss to claim expenses, but it is not required.

## **CHILD CARE SELF-EMPLOYMENT (OWNER/LICENSEE) POLICY:**

In situations where the Applicant and/or Co-Applicant is also a child care owner/licensee, and child care is requested outside of their facility or home, the Applicant/Co-Applicant's child care program must be licensed, regulated, or a legally operating child care serving five (5) or fewer unrelated children.

### **PLEASE NOTE:**

An Applicant or Co-Applicant cannot be paid to watch their own children. This is inclusive of Licensed Foster Parents.

## **Service Need-Education or Training Programs**

### **Type of Education or Training Programs**

Any of the following may be appropriate training and education activities:

- Secondary Education (High School) including distance learning.
  - ✓ Secondary School Enrollment Verification form (56896)
- Accredited Post Secondary Education or Training Program
  - ✓ Associate degree
  - ✓ Bachelor's degree
- Applicant or Co-Applicant who has received one 4-year degree or 2 associate degrees and who is working towards a master's degree.
- Adult Basic Education or GED
- Clinical, Internship, Externship or Practicum
- English as a Second Language (ESL)
- Vocational Training

Documentation must include the Applicant or Co-Applicants name, the name of the program, and enrollment start date, which must be within 13 weeks of authorization for child care services.

### **PLEASE NOTE:**

No limitations on education or the number of degrees, and no limit to the amount of time used to attain an educational goal, up to earning a master's degree. Anything beyond the master's degree would not be acceptable unless there was another service need.

**PLEASE NOTE:**

It is the responsibility of the Applicant or Co-Applicant to report if they are not participating in their service need. Eligibility should not request another school schedule. It is important for Eligibility to communicate to Applicant or Co-Applicant that they need to report all updates/changes within ten (10) days, as it may affect eligibility.

**APPROPRIATE DOCUMENTATION**

- School or Education Schedule
- School or Education Transcripts
- School or Education Registration Document
- A letter or written statement, including signature and dated within sixty (60) days before or after the Applicant’s signature on the Applicant Worksheet, on institution letterhead verifying participation in the vocational/training program.
- Workforce Certificate/Apprentice Program State Form 53107

**EDUCATION PROGRAM INCOME EXEMPTION POLICY:**

An active **or reauthorizing** case when the Applicant and/or Co-Applicant with the earned income is a student participating in or pursuing their first:

- Post-Secondary degree
- Pre-apprenticeship
- Apprenticeship
- Workforce certificate

Clarification: To receive the exemption, the individual with the service need of education must also have a service need of employment (wages).

When indicated, the system will automatically deduct \$1,250.00 per month from the earned income in an ongoing case.

# Service Need–Incapacitation

## *Definition of Temporary Incapacitation at Initial Enrollment*

Temporary incapacitation is defined as a medical condition which prevents an Applicant and/or Co-Applicant from participating in their service need, verified in writing. A valid service need must be provided within 16 weeks of authorization to continue services.

### **APPROPRIATE DOCUMENTATION**

- A written statement from the Applicant or Co-Applicant or a medical professional, including signature and date within the last sixteen (16) weeks, indicating:
  - An Applicant or Co-Applicant is unable to participate in a service need due to their incapacitation; **and**
  - The duration of the incapacitation does not exceed sixteen (16) weeks.

### **TEMPORARY INCAPACITATION POLICY:**

If an Applicant or Co-Applicant applying to the program **can provide** a service need and income verification, and eligibility can be determined, vouchers can be set, and no update is required.

If an Applicant or Co-Applicant applying to the program **cannot provide** a service need, and income verification and eligibility cannot be determined, vouchers will be placed in pending status for up to sixteen (16) weeks until the service need and income can be verified.

## *Definition of Permanent Incapacitation*

Permanent incapacitation is defined as a medical condition which prevents an Applicant or Co-Applicant from participating in their service need, as verified by a physician's statement. This condition will exceed sixteen (16) weeks.

## **PERMANENT INCAPACITATION POLICY:**

### ***Single Applicant Household***

- An Applicant is not eligible for services with a permanent incapacitation.

### ***Applicant and Co-Applicant Household***

Any of the following may be appropriate for incapacitation:

- One adult with a service need and one adult incapacitated (either temporarily or permanently).
- One adult temporarily incapacitated, and one adult permanently incapacitated.
- Both adults temporarily incapacitated.
- One adult on transitional care, and one adult incapacitated (either temporarily or permanently).

### **PLEASE NOTE:**

An adult who is permanently incapacitated will have the same Service Need Code as the other adult.

### **APPROPRIATE DOCUMENTATION**

- A written statement, including signature and date, from a medical professional indicating:
  - An Applicant or Co-Applicant is unable to participate in a service need due to their incapacitation; and
  - The duration of the incapacitation exceeds sixteen (16) weeks, is indefinite or permanent.

# Service Need-Child Protective Services

## Definition of Child Protection Services

Children who are living with their biological or adoptive parents who receive or need to receive child care outside the child's home as determined by a Child Protective Services (CPS) caseworker.

## CPS SERVICE NEED POLICY:

A service need of CPS is established when an Applicant or Co-Applicant provides verification from the CPS caseworker indicating the children need child care outside of their home. The service and financial eligibility requirements are waived for the Applicant and Co-Applicant who have been referred by the CPS caseworker as needing care outside the home as part of the CPS case plan.

## APPROPRIATE DOCUMENTATION

- A written statement from the CPS caseworker dated within sixty (60) days before or after the Applicant's signature on the Applicant Worksheet indicating:
  - The child(ren) is living with or returning to their biological, step or adoptive parent.
  - The child(ren) need care outside of the home.
  - CPS caseworker's contact information.
  
- A complete CPS referral is adequate proof of:
  - Service need;
  - A child's identity, date of birth; citizenship; and
  - Residency.

## Child Protective Services Clarifications

An Applicant or Co-Applicant who has physical custody of a child with a CPS case plan who is not their biological child or stepchild is not eligible for CCDF benefits with a service need type of Child Protective Services but may apply through the normal process.

## Change in Service Need/Transitional Care

When the established service need at the time of authorization or reauthorization is no longer valid, the Applicant or Co-Applicant reports this loss to Eligibility. If the loss of service need is temporary the change in service need policy applies. If it is a permanent loss in service need the transitional care policy applies.

### Definition of Change in Service Need

A change in service need is defined as a temporary period when an Applicant or Co-Applicant is not participating in their service need, including but not limited to, absence from employment due to maternity, extended medical leave, changes in seasonal work schedule, or temporarily not attending an education program.

### CHANGE IN SERVICE NEED POLICY:

A change in service need can extend to the end of the subsidy period. An Applicant or Co-Applicant in a change of service need status at the time of reauthorization is eligible for up to sixteen (16) weeks of transitional care.

#### **PLEASE NOTE:**

A break in attending an education program may not exceed thirteen (13) weeks.

### Definition of Transitional Care

Transitional Care is a period not to exceed sixteen (16) weeks, to be used when a service need is no longer valid.

### TRANSITIONAL CARE POLICY:

An active Applicant or Co-Applicant is eligible for sixteen (16) weeks of transitional care. The service need must start the following week after transitional care ends. If a valid service need is not obtained, CCDF benefits will be terminated after sixteen (16) weeks of transitional care. If properly reported, multiple periods of transitional care may occur in a subsidy period. If the Applicant and Co-Applicant obtains a valid service need prior to the end of the transitional care, they can continue with services. If the transitional care period crosses over the subsidy end date, an extension of the subsidy end date would be appropriate to accommodate the transitional care period. If an extension is not available, the case should be reauthorized, and vouchers placed in pending status at the end of the transitional care period until the service need can be verified.

**PLEASE NOTE:**

A Co-Applicant is eligible for transitional care upon entering the household if they do not have a valid service need.

**TRANSITIONAL CARE INELIGIBLE**

- When income exceeds 85% of state median income (SMI) or household assets exceed one (1) million dollars; **or**
- The Applicant and/or Co-Applicant, if any, has requested their case be terminated; **or**
- The eligible child has experienced excessive absences at the CCDF provider’s program; **or**
- The Applicant and/or Co-Applicant no longer has physical custody of the eligible child; **or**
- The Applicant and Co-Applicant have moved outside of the State of Indiana; **or**
- The Applicant and/or Co-Applicant have reported false facts or information, provided false documentation or omitted facts (Intentional Program Violations-IPV).

**1.8 Financial Eligibility - Countable Income**

**Definition of Countable Gross Household Income:**

Total income from all countable sources prior to taxes and after income exclusions and adjustments received by each identified household member.

To determine a household’s gross monthly income, all income received by the Applicant and/or Co-Applicant must be evaluated to determine eligibility.

**PLEASE NOTE:**

If verification of an income source is submitted, but is not listed on the Applicant Worksheet, Eligibility should reach out to the applicant to confirm the income is accurate. With confirmation, you may write the income on the Applicant Worksheet and initial to “verify & document”. A case note should be entered. If the applicant states the income is no longer being received, then write zero on the Applicant Worksheet and initial to “verify & document”. Mark the income verification as “File Retention” and enter a case note for Monitors.

**POVERTY GUIDELINE POLICY:**

Eligibility poverty guidelines are established based on the number in the household and income from all countable sources.

## Household Income Exclusions

### **HOUSEHOLD MEMBER UNDER 18 INCOME POLICY:**

Any earned income of a household member under the age of eighteen (18) excluding emancipated minors and minor parents, is exempt.

### **FOSTER FAMILY INCOME POLICY:**

The income of a valid licensed foster family is exempt.

### **CHILD PROTECTIVE SERVICE INCOME POLICY:**

The income of a documented Child Protective Services family is exempt.

## Countable Income

### **Child Support / Spousal Maintenance**

Child Support is money received on a regular basis by a custodial parent for the benefit of his or her child, which includes direct payments and payments via the clerk of the circuit courts and/or the Division of Family Resources, Child Support Bureau. Spousal Maintenance is money paid to one spouse/partner by the other for support. Spousal Maintenance should be recorded as "Other Income Counted." Child support and Spousal maintenance are declared by the Applicant or Co-Applicant on the Applicant Worksheet.

### **Child Support Adjustments**

- If the child for whom child support is received is not listed on the application, the child support would not be counted.
- If the paying non-custodial adult is listed on the application, the child support would not be counted.

## Earned Income (Wages or Salary)

### **APPROPRIATE DOCUMENTATION TO VERIFY EARNED INCOME**

- At least one pay verification, dated within sixty (60) days before or after the Applicant's signature on the Applicant Worksheet
- Request for Cash Earnings Form
- Wage detail form (required with canceled check or when additional details are needed)

## Earned Income Adjustments

The following types of income should be deducted from gross wages:

- Advance Pay is counted when received and not when deducted including salary, commissions, sick or vacation pay.
- Health/Dental/Vision Insurance Benefits which are considered part of gross income are not counted when there is an opposing deduction.
- Employment reimbursements are monies paid for out-of-pocket expenses related to employment and reimbursed on an Applicant or Co-Applicant's pay stub. These payments could include reimbursement for mileage, per diem, meals, supplies, etc.
- Housing and Food Allowance when included in Gross Wages.
- Employer contribution to retirement accounts such as 401K, deferred compensation, or pension accounts.

## APPROPRIATE SOURCES TO VERIFY EMPLOYMENT REIMBURSEMENTS

- Documented on the Applicant or Co-Applicant's pay stub.
- Written declaration from the Applicant or Co-Applicant for line items that are uncategorized on the pay stub.

## Earned Income (Tipped Employees)

### STEPS TO DETERMINE COUNTABLE TIPPED INCOME

- When determining wages for employees with documented tips on their pay stub or self-declared tips, the Applicant and/or Co-Applicant must complete a CCDF Tipped Employee Worksheet for the pay stub used for income determination during the current period. Cash paid individuals receiving tips are not required to complete the CCDF Tipped Employee Worksheet.
- The total wages on the CCDF Tipped Employee Worksheet for the current period **must be** equal to or greater than the total hours worked (based on pay stubs) multiplied by minimum wage. If total wages are less than minimum wage, then income is figured by using the following formula: **Wages = Total Hours Worked X Minimum Wage.**

## Earned Income (Self-Employment)

Self-employed earned income is revenue received directly from an Applicant or Co-

Applicant's own business, trade or profession less business expenses declared by the Applicant or Co-Applicant. An operating loss may be incurred and is reported as zero on the Statement of Profit and Loss Form.

### **APPROPRIATE DOCUMENTATION**

- Applicants should complete the Statement of Self Employment Profit and Loss verifying a thirty (30) day period within sixty (60) days before or after the Applicant's signature on the Applicant Worksheet or
- Applicants/Co-Applicants who are self-employed and unable to exhibit income within sixty (60) days before or after the Applicant's signature on the Applicant Worksheet, may be authorized at initial enrollment or as a new service need for fifty-three (53) weeks with zero (0) income.
- At reauthorization, the Applicant/Co-Applicant must be able to exhibit income within the previous one-hundred and eighty (180) days with a Statement of Self-Employment Profit and Loss.

### **PLEASE NOTE:**

- In situations where the Applicant and/or Co-Applicant is also a child care owner/licensee, and child care is requested outside of their facility or home, the Applicant/Co-Applicant's child care program must be licensed, regulated or a legally operating child care serving five (5) or fewer unrelated children.
- If self-employed as a private nanny a statement of profit and loss dated within 60 days before or after the Applicant's signature on the Applicant Worksheet is acceptable.

### **Earned Income** (Uber, Lyft, Door Dash, Instacart, or other gig type employment)

Applicants or Co-Applicants employed by Uber, Lyft, Door Dash, Instacart, or similar companies, must provide a screen shot or copy from the company app or website for a week's income. The screen shot or copy should include wages, pay dates and the Applicant or Co-Applicant's name. They may also provide a copy of their company contract with their name on it, along with the income. While they do not have to submit a Profit and Loss form it may be beneficial for them to claim deductions, and this would be acceptable.

### **New Applicant or Co-Applicant with Fluctuating Income Policy**

If a new Applicant or Co-Applicant is unable to demonstrate financial eligibility due to a temporary fluctuation in income, their application may remain incomplete and in a partial

status for a maximum of thirteen (13) weeks. This will allow the new Applicant or Co-Applicant to complete their application when they are able to demonstrate financial eligibility. If financial eligibility is not demonstrated within thirteen (13) weeks, the partial application will be terminated (swept).

## Definition of Temporary Fluctuating Income (TFI):

A temporary fluctuation in income is earnings which are not representative of the Applicant/Co-Applicant's income over the course of a year when fluctuations are not expected to last more than eight (8) weeks.

## Rental Income

Income received from property owned by the Applicant and/or Co-Applicant is considered countable income. Monthly rental income less the applicable mortgage payment, which may include escrow payment, is entered as "Other Income Counted."

### APPROPRIATE SOURCES TO VERIFY RENTAL INCOME

- Valid rental agreement; and
- Most recent mortgage statement, if applicable

#### **PLEASE NOTE:**

If no mortgage statement is available, then rental income will be counted in full.

## Social Security Income (All Types)

Income received from the Social Services Administration. This includes SSI, SSDI, and Survivor Benefits.

### APPROPRIATE DOCUMENTS TO VERIFY SOCIAL SECURITY INCOME

- Documentation from the issuing authority dated within the last twelve (12) months which verifies current monthly benefits received; or
- Documentation from the Division of Family Resources which verifies the benefit amount.

#### **PLEASE NOTE:**

- Overpayments are counted when received not when withheld from benefits. Lump Sum Social Security Income payments are not counted. **Enter in dollars and cents, before the rounding is done by the Social Security Administration.**

## **Temporary Assistance for Needy Families (TANF)**

TANF is money paid as cash assistance to an adult in the assistance group.

### **APPROPRIATE DOCUMENTS TO VERIFY TANF**

TANF benefits can be declared on the Applicant Worksheet.

## **Unemployment Benefits**

Unemployment Insurance benefits provide temporary payments to eligible workers who lose their job.

### **APPROPRIATE DOCUMENTS TO VERIFY UNEMPLOYMENT**

Unemployment benefits can be declared on the Applicant Worksheet.

## **Veteran's Benefits**

Veteran's benefits are money paid by the Veteran's Administration to disabled or retired members of the Armed Forces or to survivors of deceased veterans.

### **APPROPRIATE SOURCES TO VERIFY VETERAN'S BENEFITS**

- Documentation from the Veteran's Administration which verifies the benefit amount.
- Benefit Amount may be obtained by contacting the Veteran Administration's resource number (800) 827-1000.

## **Worker's Compensation**

Worker's compensation is money paid periodically from public or private insurance companies for injuries incurred at work.

### **APPROPRIATE DOCUMENTS TO VERIFY WORKERS COMPENSATION**

- Documentation from issuing authority for the current benefit.

**PLEASE NOTE:**

Lump sum payments should be annualized and may include:

- Life Insurance
- Inheritances
- Lawsuit Settlement
- Gambling/Lottery Winnings
- Severance Payments
- Retention Bonuses
- Annual Employment Bonuses

**Assets Greater Than One Million Dollars**

Household assets are the value of all the Household's cash, retirement, investments, and real property. When an Applicant or Co-Applicant's assets exceed one (1) million dollars, the household is considered ineligible for services. This applies to Licensed Foster Applicants as well.

**PLEASE NOTE:** Real Property is defined as property that can be sold. This does not include the home where the Applicant resides, or the main vehicle used for daily transportation.

# SECTION 2 CCDF AUTHORIZATION

## 2.1 Authorization

Documentation which verifies the information required for application authorization should be maintained in the Applicant's file at the Eligibility Office and within the eligibility system according to the State's record retention policy.

Prior to completing an application, the Eligibility Office must determine if all necessary documentation is available to complete the application. If the Applicant or Co-Applicant is missing information, the application must be stopped, and the Applicant or Co-Applicant given written notice indicating the additional documentation required.

### **Authorization Period Policy:**

An application whose funding is provided by the Child Care and Development Fund (CCDF) must have a subsidy period for a minimum of fifty-three (53) consecutive weeks with child care assistance available.

### **Requirements for an Applicant and Co-Applicant Case**

1. Application Worksheet with all eligibility criteria complete, signed and dated by Applicant or Co-Applicant (which may be original or electronic); and
2. All required supporting verification; and
3. Signed Provider Information Page completed by the child care provider (electronic signatures are acceptable); and
4. Complete Referral, if applicable; and
5. Application For Child Care Services signed and dated by Eligibility; and
6. A copy of the Pre-Voucher.

## **Voucher Dates**

### **Definition of Voucher Begin Date:**

The date a voucher is considered valid for reimbursement to a CCDF Eligible Provider. The Voucher begin date may be the same as the subsidy begin date unless the Applicant or Co-Applicant has requested an alternate begin date, the service need starts later, the case is placed in TFI, or the provider is unavailable.

## **Definition of Voucher End Date:**

The voucher end date will be the same as the subsidy end date, unless the need for care has changed, the provider has changed, or the Applicant or Co-Applicant are no longer eligible.

## **Authorizing Hours of Care**

Vouchers should be established with a full-time weekly rate unless part-time care is requested for an OECOSL approved part-time OMW program. At least one (1) week of care must be utilized during the subsidy period.

## **Authorizations**

### **Full Time Authorizations**

#### ***NON-SCHOOL AGE OR SCHOOL AGE OTHER***

- Vouchers are created as ten (10) hours per day, five (5) days a week.

#### ***SCHOOL AGE***

- Vouchers are created as two (2) hours per day, five (5) days per week.

### **Part-Time Authorizations**

#### ***NON-SCHOOL AGE OR SCHOOL AGE OTHER***

- CCDF part-time vouchers are not being issued at this time.

#### ***SCHOOL AGE***

- CCDF part-time vouchers are not being issued at this time.

### **OMW Part-Time Vouchers**

- Part-time vouchers should be created for OMW children attending an OECOSL approved part-time OMW program.

The part-time vouchers will pay the program a part-time rate and also allow for a 3/4/5-year-old CCDF wrap around voucher to be authorized.

## Shift Care

Utilizing information obtained from the Applicant or Co-Applicant during authorization or from the Applicant Worksheet, the Eligibility Office should assign children to the appropriate shift or shifts which accommodate the need for care, including earliest drop-off and latest pick-up times.

### **APPROVED SHIFTS ARE:**

#### ***SHIFT ONE***

6:00 AM – 6:00 PM

#### ***SHIFT TWO***

6:00 PM – 6:00 AM

### **PLEASE NOTE:**

Alternate Eligible Provider shifts may be approved by OECOSL.

A child who needs care overlapping these shifts shall be assigned to both shifts. For example: a child who needs childcare from 3:00 PM – 11:00 PM should be assigned to both shift one and shift two and will be counted in the provider's capacity for both shifts.

### **PLEASE NOTE:**

A legally licensed exempt child care home provider is eligible to care for five (5) children, inclusive of both shifts.

## 2.2 Absences

### **ABSENCE DEFINITION:**

Forty (40) occasional Absence days are allowed for children authorized for a CCDF and/or OMW voucher across all providers a child has vouchers assigned to within the enrollment year. Absences apply across all vouchers and are replenished on the anniversary date of the child.

### **ABSENCE POLICY**

Absence days should be used when children are scheduled to attend but are absent due to an illness, vacation, emergency, or choose not to attend for the day.

- The expectation is that children with full time authorizations attend the program full time.
- The Applicant of a child who will not be using care for two (2) weeks or more may notify the eligibility office to set a gap in the voucher or utilize absences. A gap in the voucher will result in non-payment to the program.

### **EXCESSIVE ABSENCE POLICY**

Excessive absence occurs when a child reaches forty (40) occasional absence days (or twenty (20) consecutive days) across all voucher types and programs within the enrollment year.

### **Terminating Child Care for Excessive Absence**

When a child reaches forty (40) occasional absence days across all voucher types and programs within the enrollment year, all current and future vouchers in the sequence will be terminated.

If a child has twenty (20) consecutive absences the Eligibility Office will place both the current voucher for the upcoming week and any future vouchers in pending provider, reach out to the applicant to see if any changes need to be made or if services are needed.

- If only one (1) child is receiving services or if ALL children on the case have reached the excessive absence limit, then the termination will be at the case level.
- If only one (1) child on the case reaches the excessive absence limit, the voucher for that child will be terminated.
- The child(ren) will not be eligible to reapply for the waiting list for ninety (90) days from the termination date.

## NOTIFICATION OF ABSENCES TO APPLICANT AND PROVIDER

The Eligibility System will generate automated letters to be sent to both the Applicant and Provider when a child reaches absences of 10, 20, 30 and 35 days. When the child(ren) reach the excessive absence limit, the voucher and/or case will be terminated by the Eligibility software on the following Saturday.

The Eligibility Office is responsible for mailing the termination letters and should pull the letters weekly.

### **PLEASE NOTE:**

A medically fragile child (i.e., prolonged illness or injury) may have their absences paused to account for the treatment or recovery.

- The Applicant must submit a statement from the physician or medical professional documenting the child's need for treatment and/or recuperation.
- The Eligibility Office will submit documentation to the CCDF Policy Consultant for approval before marking the child as medically fragile in the eligibility system.
- A Report of Change would be required if the child's situation changes, otherwise, the absence count will resume at reauthorization and require another statement, if applicable.

The Eligibility Office will be responsible for sending the notice of absence pause to the Applicant and provider.

## **2.3 CCDF/OMW Provider Information Page and Roster Management**

To complete the application process, the Applicant or Co-Applicant must submit a Provider Information Page which has been completed and signed by the child care provider.

An Eligibility Office may not establish part-time charges for a CCDF eligible provider who only specifies a full-time charge.

### **Provider Changes**

A provider change must be requested, by submitting a new provider page no later than noon on the day prior to the last business day of the week, to be effective the following week. These may be submitted in advance with a future start date indicated.

## Roster Management

When it is reported that a child is no longer attending, has never attended, attending only on breaks or is starting on an alternate date, removal of the child from the program roster is essential. Eligibility should pend the vouchers for future weeks and this may require data changes to remove vouchers for past dates that have not been processed for payment to avoid unnecessary use of absences or improper payment to the program. This change could be reported by the Applicant or provider. If payment has already been made, a notice must be sent to [paymentquestions@fssa.in.gov](mailto:paymentquestions@fssa.in.gov).

Providers are required to report disenrolling a child within 5 business days, eligibility should be pending vouchers the next available week.

## Provider Rates

A provider must document their rates through completion of the Provider Information Page. If rates are not completed, the Eligibility Office will contact the provider to verify the rate and document it on the Provider Information Page.

## Child Care Charge Errors on CCDF Voucher

An Eligibility Office will utilize the charges documented to complete an Applicant or Co-Applicant's authorization for child care and issue a voucher accordingly. If the provider reports an Eligibility Office error on the voucher within thirty (30) days of issuance, the subsidy may be adjusted. If the provider, Applicant or Co-Applicant fails to notify the Eligibility Office of an error timely, the voucher will remain unchanged.

## 2.4 CCDF Provider Reimbursement Rates

### Definition of CCDF Reimbursement Rates

CCDF Reimbursement Rates are determined using an alternative rate methodology based on reported provider costs. Rates are provided by geography, age, provider type, and quality level.

### **CHILD WITH SPECIAL NEEDS REIMBURSEMENT RATE:**

Subsidy may exceed the Reimbursement Rate by 10% in cases of children with documented special needs.

## CCDF Reimbursement Rate Age Categories

The Eligibility Office must select the appropriate age group based on date of birth and school participation.

- **Infant** – a child zero (0) to eleven (11) months of age
- **Toddler** – a child twelve (12) to thirty-five (35) months of age
- **Three (3), Four (4) or Five (5)** – children thirty-six (36) months to five (5) years of age
- **Kindergarten** – a child enrolled in half-day kindergarten or a child six (6) years of age regardless of whether they are attending kindergarten.
- **School-Age** – A school-age child attending before or after school (wrap around care).

### **PLEASE NOTE:**

Children participating in the OMW program through a Public, Private, or Charter school will be assigned school-age voucher for CCDF wrap around care if needed.

School-Age Other – A school-age child enrolled during non-traditional hours if their participation will exceed ten (10) hours per week or a child attending care during a break in school.

### **PLEASE NOTE:**

A child's voucher should be assigned a new age category the Sunday following their birthday, unless their birthday falls on a Sunday in which case the new voucher shall be assigned on the child's birthday.

## School-Age Child Care Reimbursement Exceptions

In accordance with Direct Service Funds federal restrictions, funds may not be used for children enrolled in grades one (1) through twelve (12) for:

- Any service for which such students receive academic credit toward graduation; **or**
- Any services duplicating an academic program of any public or private school.

### ***Clarification When Care is Requested:***

The use of CCDF for child care services for school age children during times when schools are open, and children can attend safely in person, is restricted.

When a School-Age Other (age 7 years and older) voucher is requested during the normal school day, care is not allowed to teach or provide instruction in place of academic credit. If providing care while instruction is provided virtually, this may be allowable with verification of enrollment in virtual K-12 education program and must be approved by the CCDF Policy Consultant.

## 2.5 Definition of Nanny Care

Nanny Care is defined as child care services provided by an individual over eighteen (18) years of age who comes into the child's own home and does not reside at the child's address and is not the parent, stepparent, guardian, or in place of a parent.

### **Nanny Care Requirements**

An Applicant or Co-Applicant may be eligible for Nanny Care if the Applicant, Co-Applicant, and Nanny Care Provider all meet CCDF Eligibility Standards.

### **NANNY CARE REIMBURSEMENT RATE**

Reimbursement is calculated per eligible Household at an hourly rate consistent with the current federal minimum wage and cannot exceed forty (40) hours per week. Therefore, there is one (1) rate for all eligible children. The Reimbursement Rate does not apply in this situation.

When the child care authorization has been established, the Eligibility Office must use the following formula to determine the subsidy.

$$\frac{\text{Current Minimum Wage}}{\text{Number of Children}} = \text{The Hourly Rate of Child Care}$$

## 2.6 Child Care Subsidy & Copayments

### **Definition of Child Care Subsidy**

The established child care reimbursement rate less any applicable copayment paid to CCDF eligible programs. After the Eligibility Office has authorized services and recorded the eligible child care provider's charges, the eligibility software will calculate the subsidy.

### **Definition of Copayment**

A copayment is defined as a weekly fee for child care based on the household's income, size, and the number of years on the program. The fee is determined using a sliding fee scale and applies to all families with household income over 100% of Federal Poverty Level (FPL).

## **COPAYMENT POLICY:**

The Applicant and Co-Applicant are responsible for the weekly copayment amount determined at the time of authorization regardless of the child(ren)'s attendance and is paid directly to the provider. The co-payment may not be waived and must be collected from the Applicant and Co-Applicant on a regular basis.

## **OMW COPAYMENTS POLICY:**

Applicants participating in the OMW Pre-K Regular program will not be charged a copayment during the entire subsidy period.

## **PROVIDER CHARGES MORE THAN REIMBURSEMENT RATES (Overage):**

When the child care provider's charges are greater than the Reimbursement Rate, the Applicant and Co-Applicant must assume responsibility for the additional cost of care also called an "overage."

The Applicant will pay this fee directly to the provider. This includes OMW Pre-K providers.

## **2.7 Changes to Vouchers**

### **When a Provider Change is Required Due to Exceeding Capacity**

When a provider appears on the "Provider Exceeding Capacity" report the Eligibility Office will be required to make the necessary changes to reduce their enrollment to within the eligibility software stated capacity.

## **STEPS FOR PROVIDER EXCEEDING CAPACITY**

### **STEP 1**

- Within three (3) days of appearing on the over-capacity report, contact the provider by phone or email to determine which child or children will be removed from their care by the following Saturday.
- An OMW child should not be removed until all other CCDF only children have been removed and the provider still exceeds capacity. (If you leave the provider a voicemail, allow one (1) business day for them to return your call.)
- If you have made three (3) attempts at different times of the day and are unable to reach the provider or leave a message, remove all CCDF only children unless the provider still exceeds capacity as stated below. DO NOT wait more than three (3) days to take the appropriate action.

## STEP 2

- The Eligibility Office will remove the identified child or children by placing their voucher in a pending status the following Sunday. **OR**
- If the provider fails to identify the child or children to be removed, the Eligibility Office will remove all CCDF children by placing their vouchers in a pending status as of the following Sunday unless the provider still exceeds capacity.

## STEP 3

- The Eligibility Office will send the Applicant and Co-Applicant an Adverse Action notification requesting a new Eligible Provider be chosen.

## STEP 4

- If an Applicant or Co-Applicant selects an eligible provider within the notice period, the provider change shall be completed. However, if an Applicant or Co-Applicant has not selected an Eligible Provider or the ineligible provider has not been reinstated, prior to the notification date, the services shall be terminated.

### **PLEASE NOTE:**

An Applicant or Co-Applicant may make a written request for an extended provider search. See Steps for Provider Search Extension Policy Section 4.7

### **PLEASE NOTE:**

An Applicant or Co-Applicant's questions regarding a provider's ineligibility should be referred to the provider.

## **INCREASE IN PROVIDER CHARGES POLICY:**

If an eligible provider increases their rates, the changes may only take place at reauthorization.

## 2.8 Completing Authorization Process

### RESOURCE INFORMATION

When completing the authorization and reauthorization process, the Eligibility Office must provide the Applicant or Co-Applicant with resource information to address the Applicant's other needs. Prior to completing enrollment, the Eligibility Offices are required to provide the following:

- Child Care Resource and Referral, including help with finding child care; **and**
- Information on Quality Child Care / Paths to QUALITY™; **and**
- Complaint Policies/Process; **and**
- Subsidy Information; **and**
- Rights and Obligations; **and**
- Information on accessing the Parent Portal at [https://indianaspark.com/wp-content/uploads/2024/07/New-Parent-Portal-Quick-Reference-Guide\\_compressed.pdf](https://indianaspark.com/wp-content/uploads/2024/07/New-Parent-Portal-Quick-Reference-Guide_compressed.pdf) **and**
- Information on accessing developmental resources at <https://brighterfuturesindiana.org/local-help-for-finding-child-care>; **and**
- Information on accessing [FSSA's Child Care Finder](#) which can provide the following information:
  - License and regulatory information met by their provider; **and**
  - Inspection, violation, and complaint information about their provider; **and**
  - Paths to QUALITY™ level and basic information about each level, if participating.
- When a case is determined eligible, the Eligibility Office must share the Pre-Voucher report with the Applicant and provide an explanation on the subsidy dates, copay, overages and the Parent Key to allow the Applicant to access the Parent Portal through Access Indiana. Once the Applicant links their case, the Parent Key will no longer populate on the report.

***Written material based on the Applicant or Co-Applicant's expressed need which must, at a minimum, include:***

1. TANF Information
2. Head Start / Early Head Start
3. CHIP Information
4. Low Income Home Energy Assistance Program (LIHEAP)
5. SNAP (formerly Food Stamps) information
6. CACFP information
7. Medicaid information
8. Indiana Department of Health information
9. WIC information
10. First Steps information
11. Local Public-School information
12. Healthy Families information
13. Mom's Helpline
14. Locally obtained resource information and materials

## **2.9 CONSUMER EDUCATION SURVEY & DEVELOPMENTAL MILESTONES**

OECOSL is federally required to provide a consumer education survey to Applicants and/or Co-Applicants at the time of authorization and reauthorization.

As part of the consumer education process, Applicants and/or Co-Applicants will also be asked to review the CDC's child developmental milestones checklist(s) for their children five (5) years of age or younger. If provided, answers to the consumer education survey and milestone checklist(s) will be recorded in the eligibility software for statistical reporting.

The FSSA Resource Guide is dedicated to helping families live productive, safe, and healthy lives and includes information about other community organizations providing services to those in need. [http://www.in.gov/fssa/files/FSSA\\_Resource\\_Guide.pdf](http://www.in.gov/fssa/files/FSSA_Resource_Guide.pdf).

An additional referral can be made to the statewide referral service 211. The Eligibility Office must familiarize themselves with other resources located within the communities they serve.

# SECTION 3 MAINTAINING CCDF ELIGIBILITY AND REAUTHORIZATION

## 3.1 Maintaining an Application

### CHANGE IN CIRCUMSTANCES

When the Applicant or Co-Applicant reports a change in their circumstances, the Eligibility Office should update the reported information in the eligibility software, print the application, State Form 805, note the change, and scan all applicable documents relating to the change. All changes should be noted in the eligibility software.

### Verified Information Policy

An update of verified information would include collection of documentation. Unverified information such as phone and email can be declared.

#### **PLEASE NOTE:**

The Eligibility Office should verify with the Applicant and/or Co-Applicant if they have permission to text them.

### Change in Household Circumstances

#### CHANGES REQUIRED TO REPORT

The following changes must be reported within ten (10) calendar days of the event, requiring the Eligibility Office to take the appropriate action.

- Change in residency
- Change in name
- Change in household size
- Loss of service need
- Change in income which exceeds 85% of State Median Income
- Change in total assets to one (1) million dollars or more.

#### **PLEASE NOTE:**

The Eligibility office should remind the Applicant or Co-Applicant to notify the DFR, if necessary, of any relevant change.

# STEPS FOR AN ACTIVE APPLICANT OR CO-APPLICANT TRANSFERRING TO ANOTHER COUNTY

When an active Applicant and/or Co-Applicant moves to another Indiana County, they may transfer their services to their new county of residence.

When an active Applicant or Co-Applicant notifies the Eligibility Office in their prior or new county of residence they are moving or have moved, the following actions should be taken:

## STEP 1

The Eligibility Office will update the Applicant's new mailing address. No written verification is required.

## STEP 2

The Eligibility Office initiates the transfer by using the county transfer option in the eligibility software, select the new county of residence from the drop down and specify the date the transfer is to occur. This date must be a future date. If the move date is in the past, the first available date should be selected.

## STEP 3

If requested, the prior or new county's Eligibility Office shall complete a provider change using the provider information page provided by the Applicant.

## STEP 4

If the Applicant or Co-Applicant does not have a service need, transitional care will be made available.

### **PLEASE NOTE:**

- If the notification is received with the reauthorization information, the documents will be scanned into the eligibility software for the new Eligibility Office to process, unless the packet is received the week of the subsidy ending, then the prior Eligibility Office should process the reauthorization and transfer.
- If the notification is received and the case is in a partial status, the Eligibility Office in the prior county will terminate the case and notify the new Eligibility Office, if applicable. The Eligibility Office in the new county will create a new case and move to active.

## **3.2 Household Size**

When the Applicant or Co-Applicant reports a change in household size, the Eligibility Office shall identify the appropriate situation below and follow the procedure provided.

### **STEPS FOR BLENDING HOUSEHOLDS**

#### **STEP 1**

Identify the cases involved. Utilizing the sliding fee scale, determine if the “new household” will be income eligible.

#### **STEP 2**

Select the case with the largest household size and update the most recent application sequence in the eligibility software using existing income, if applicable.

#### **STEP 3**

Terminate the other application in the eligibility software and add Co-Applicant and eligible child(ren) to the “new household”.

#### **STEP 4**

Complete the authorization for the eligible child(ren) and assure authorizations do not overlap.

### **STEPS FOR ADDITION OF HOUSEHOLD MEMBER**

#### **STEP 1**

Obtain appropriate proof of identity for the new household member.

#### **STEP 2**

Obtain appropriate proof of service need and add income from Co-Applicant if applicable. Note: A new Co-Applicant is eligible with a service need of Transitional Care for a maximum of sixteen (16) weeks.

## **STEPS FOR LOSS OF A HOUSEHOLD MEMBER**

### **STEP 1**

Obtain a statement from the Applicant indicating the household member is no longer in the residence. In the case of a child turning age eighteen (18), the member will be removed without a statement.

### **STEP 2**

Update the most recent subsidy period in the eligibility software, including removal of any income associated with the household member being removed. Child support should only be removed if the Applicant has confirmed the support is received for the child being removed.

### **3.3 Loss of Service Need**

The Applicant or Co-Applicant is required to report a loss of service need within ten (10) calendar days. The Applicant and/or Co-Applicant is eligible for sixteen (16) weeks of transitional care beginning the Sunday after loss of service need.

An Applicant or Co-Applicant who fails to report a loss of service need may be responsible for repayment of all or part of the subsidy paid on their behalf after transitional care has been applied.

### **3.4 Extending Subsidy End Dates**

When evaluating the Applicant and/or Co-Applicant's service need at reauthorization, it may be necessary to extend their subsidy end date to allow for the complete evaluation of their financial and service needs. Additionally, when extending the subsidy end date is not appropriate, the Eligibility Office may utilize the creation of vouchers assigned to Pending Provider to assure the child care subsidy is not paid before the service need and income eligibility is appropriately verified. The maximum extension available in the system is 16 weeks.

# Steps for Subsidy Extension Due to Adding a Child to Receive Services

## Step 1

Add a child to the household and add the child to the waiting list, if services are requested OR add an existing child to the waiting list to receive services.

## Step 2

When funding is available to pull the child from the waiting list, the case subsidy end date must be extended to provide 53 weeks of services for the new child, this will require a data change.

## Step 3

Vouchers for all children must be created for the extension. This will require the existing case to be extended to accommodate the new child up to 53 weeks, which must be completed through a data change request. This may extend the case for up to an additional 52 weeks (if the child is added the week before reauthorization) to allow ALL children to have a minimum 53 week-voucher.

### **PLEASE NOTE:**

This extension may occur multiple times during a subsidy period (if additional children are added before the end of the subsidy period) to allow ALL children to have a minimum 53 week-voucher.

Eligibility does not have to be re-confirmed when the case is extended. Please verify that address, phone, and email are still correct, and update as needed. No documentation is required.

## **3.5 Self-Employment**

In situations where a reauthorizing Applicant or Co-Applicant has provided evidence of a request for an IRS Tax Transcript (IRS form 4506T-EZ) the subsidy period of fifty-three (53) weeks may be extended eight (8) weeks to provide an opportunity for receipt of the tax transcript.

## **3.6 Temporary Fluctuation in Income (TFI)**

In situations where a reauthorizing Applicant or Co-Applicant's income temporarily fluctuates, and exceeds the established state maximum poverty guideline, the current subsidy period of fifty-three (53) weeks may be extended up to thirteen (13) weeks to provide an opportunity for re-evaluation of their income. After entering income, a prompt will warn the Eligibility Specialist that the income exceeds the maximum poverty level. The Eligibility Specialist should cancel the warning, mark income as TFI, and the Eligibility Software will extend the subsidy end date by thirteen (13) weeks.

### **STEPS TO COMPLETE A TEMPORARY FLUCTUATION IN INCOME (TFI) WHEN EXTENSION IS UNAVAILABLE OR AN INCOME UPDATE IS BEING PERFORMED**

#### **STEP 1**

When completing an income update, a prompt will warn the Eligibility Office that the Applicant's income exceeds the established maximum poverty guideline. The eligibility software will offer the following two (2) options:

- Income is accurate and is not fluctuating. Case is to be terminated.
- Income is temporarily fluctuating; case will not be terminated, and subsidy should be extended.

#### **STEP 2**

If the income is expected to fluctuate, select temporary income and save. The income will save; however, the case will not terminate. A Copayment will be based on the prior documented income.

#### **STEP 3**

If at least thirteen (13) weeks remain in the subsidy period, vouchers will be placed with a pending provider starting week fourteen (14).

If less than thirteen (13) weeks remain in the subsidy period and the subsidy period cannot be extended, the remaining weeks of TFI eligibility will carry forward to the next sequence when reauthorization is completed.

#### **STEP 4**

Advise the Applicant and/or Co-Applicant an income update must be completed within thirteen (13) weeks. An Applicant or Co-Applicant may attempt to update their income multiple times in the thirteen (13) week period. Failure to update their income or document

income below the established maximum poverty guideline will result in termination.

## **3.7 Reauthorization**

### **Required Notification of Upcoming Reauthorization**

The Applicant and Co-Applicant will be notified and eligible for reauthorization at least thirty (30) days prior to the current subsidy end date. This notification will also serve as a ten (10) calendar day notice should the Applicant and Co-Applicant be determined ineligible at the time of reauthorization. If an Applicant or Co-Applicant is found to be no longer eligible for services and is not eligible for Transitional Care, the ten (10) calendar day notice period will not be extended past the current subsidy end date.

#### **PLEASE NOTE:**

Prior to starting the reauthorization, the Eligibility Office must determine if all necessary documentation is available to complete the reauthorization process or if an extension of the subsidy end date is appropriate.

## **SECTION 4 CCDF NONCOMPLIANCE**

### **4.1 Notice of Adverse Action (NOA)**

An adverse action written notice must be provided if the Applicant and/or Co-Applicant are facing a potential termination of services for reasons which include, but are not limited to, the following:

- A request to provide documentation due to a critical error, which will effect eligibility; **or**
- A request for required documentation for authorization or re-authorization; **or**
- A requirement to select a new provider when the current provider is no longer eligible.

In response to an administrative error, the Eligibility Office may send the Applicant and Co-Applicant a written request for additional information. However, if the Applicant or Co-Applicant does not respond to the request, services cannot be terminated.

**PLEASE NOTE:**

An Applicant and their provider must be notified in writing at least ten (10) calendar days before an adverse action can be taken unless the adverse action is to occur at the Applicant's subsidy end date. If an Applicant or Co-Applicant has not appropriately responded to the Adverse Action request in a timely manner, the case shall be terminated. Any reimbursement made after the Eligibility Office's failure to timely terminate an unresolved Adverse Action will be considered an inappropriate payment and may require a payment reduction and/or repayment from the Eligibility Office.

**Reasons an application will be ineligible:**

1. Household income does not meet financial eligibility.
2. Household does not meet service need requirements.
3. Child who is the primary beneficiary of service is not a US citizen, qualified alien and/or resident of Indiana.
4. Failure to select an eligible provider.

**Reasons an application may be terminated:**

1. Failure to provide complete information at the time of authorization, reauthorization, or update.
2. Misrepresenting, concealing, or withholding information on the Application, State Form 805.
3. Failure to remain current on any existing repayment agreements determined by OECOSL.
4. Previous substantiation of welfare fraud, any component of fraud, or illegal receipt of government funds.
5. Failure to respond to requests for information related to eligibility determination from OECOSL or the Eligibility Office within the required time frame.
6. Failure to pay weekly copayment owed, if reported within thirty (30) days from first missed payment.
7. Failure to select an eligible provider.
8. A change of residency outside of the State.
9. Substantiated fraud or intentional program violations.
10. Household income does not meet financial eligibility.
11. Household does not meet service need requirements.
12. Failure to fully reimburse eligible in-home (nanny) provider.
13. Excessive absences

## **4.2 Applicant Appeal Process**

When any adverse action is taken such as termination or denial of service, the Applicant or Co-Applicant may appeal. The Eligibility Office must inform the Applicant / Co-Applicant of the Appeal Procedure at the time of initial authorization, reauthorization, and issuance of Adverse Action.

### **Level 1 Appeal**

Within ten (10) calendar days of the termination date, denial date, or subsidy expiration date, the Applicant or Co-Applicant must send a written request of appeal to the Eligibility Office.

The Eligibility Office has ten (10) calendar days to review the request and respond in writing. This response must provide information on the next steps of the appeal process, if the appeal is denied. The Eligibility Office will document research to support any decision made. The documentation shall be scanned into the case file.

### **Level 2 Appeal**

If the Applicant or Co-Applicant is not satisfied with the decision of the Eligibility Office supervisor, they must send a written request for appeal to the Assistant Director of CCDF Policy within fifteen (15) calendar days of receipt of the denial letter from the Eligibility Office at the below address.

#### **Office of Early Childhood and Out of School Learning**

**Attn: Assistant Director of CCDF Policy**

**CCDF Appeals  
402 West Washington Street, W-362, MS-02  
Indianapolis, IN 46204-2739**

The Assistant Director of CCDF Policy has fifteen (15) calendar days to review the request and respond in writing. This response must provide information on the next step of the appeal process.

## Level 3 Appeal

If the Applicant or Co-Applicant is not satisfied with the decision, they have fifteen (15) calendar days from receipt of the letter from the Assistant Director of CCDF Policy to submit a final written request for appeal to:

### **Office of Early Childhood and Out of School Learning**

**Attn: Director of Operations - CCDF Appeals  
402 West Washington Street, W-362, MS-02  
Indianapolis, IN 46204-2739**

The Director has fifteen (15) calendar days to review the decision of the Assistant Director of CCDF Policy and respond in writing. The decision of the Director is FINAL.

## **PAYMENT OF SERVICE DURING APPEAL**

Service for child care provided during an Applicant and Co-Applicant's appeal will not be reimbursed after the ten (10) calendar day notice. However, if a finding is held in the Applicant and Co-Applicant's favor, all child care during the appeal process will be paid retroactively provided the Applicant or Co-Applicant completes reauthorization timely, has a service need during the entire appeal period, and has utilized child care through an Eligible Provider. After an appeal, the Applicant and Co-Applicant who can demonstrate a current service need but are unable to document a service need during the entire appeal period, may reauthorize using their current service need.

## **4.3 Determination of a Repayment Agreement**

A repayment is needed when a non-compliance with CCDF Policies and Procedures resulted in child care subsidy being paid when the Applicant or Co-Applicant was ineligible for the program and Family and Social Services Administration (FSSA) is seeking repayment for that time frame.

### **REPAYMENT APPEAL POLICY:**

If a repayment determination has been made and the Applicant and/or Co-Applicant disagree, a written appeal must be submitted following the appeal guidelines provided below.

## **STEPS TO DETERMINE A REPAYMENT AGREEMENT**

### **STEP 1**

Establish a begin and end date to be entered on the CCDF Repayment form for the period of time which the Applicant or Co-Applicant was ineligible.

### **STEP 2**

Determine if the Applicant and Co-Applicant were eligible for transitional care. If yes, reduce and/or eliminate their overpayment by the number of eligible transitional care weeks.

### **STEP 3**

Determine the total amount of the overpayment by pulling payment details from eligibility software less any reduction due to transitional care.

### **STEP 4**

Complete the CCDF Non-compliance and CCDF Repayment form.

### **STEP 5**

Send copies of the forms to the Applicant/Co-Applicant for signatures and include the CCDF Repayment Appeal form.

- Send a copy of the agreement and all relevant documents to OECOSL.

### **STEP 6**

Provide a signed copy of the forms to the Applicant/Co-Applicant and send a copy of the signed agreement to OECOSL.

**Scan and Email to:** [CCDF\\_Repayment@fssa.in.gov](mailto:CCDF_Repayment@fssa.in.gov)

## Re-Payment Appeal Process

If the Applicant or Co-Applicant does not agree with the re-payment, they must send a written request for appeal to the Assistant Director of CCDF Policy, at the address below, within thirty (30) calendar days from the date of they received the re-payment agreement.

**Office of Early Childhood and Out of School Learning  
Attn: Assistant Director of CCDF Policy - CCDF Appeals  
402 West Washington Street, W-362, MS-02  
Indianapolis, IN 46204-2739**

## 4.4 Program Abuse or Fraud

### Reporting Fraud

Fraud may be reported to OECOSL in variety of ways. Applicants, Co-Applicants, child care providers and concerned citizens may report suspected fraud by contacting:

- 800-403-0864; **or**
- ReportFraud@fssa.IN.gov; **or**
- FSSA Investigations and Compliance Division, Room E-414, 402 W Washington Street, Indianapolis, IN 46204

## **4.5 Eligibility Office Role**

All suspected fraud should be reported to the appropriate CCDF Policy Consultant prior to action taken. The CCDF Policy Consultant will review the documentation with the Eligibility Office to determine if a fraud referral is needed.

If the Eligibility Office suspects they have received fraudulent documentation, the following information should be sent through a SECURE FSSA email account to the **CCDF Policy Consultant**:

- 1. Applicant's name**
- 2. Address**
- 3. Date of birth**

The CCDF Policy Consultant will review the information provided and decide whether to request more information for the case and share those results with the Eligibility Office.

### **Instances could include and are not limited to:**

#### ***APPLICANT AND CO-APPLICANT PROGRAM ABUSE***

Any of the following instances should be based on submitted documentation only.

- Failure to report a biological or custodial adult as a household member when evidence exists.
- Failure to report other forms of income, including child support, second employment, etc.

#### ***PROVIDER PROGRAM ABUSE***

Any of the following instances should be reported to the appropriate CCDF Policy Consultant, in writing.

- Providing care at an address which has not been licensed, registered, or certified.
- Providing care at an address which differs from the address indicated on the Applicant's ProviderWorksheet and/or Voucher.

#### ***ELIGIBILITY SPECIALIST FRAUD***

Any of the following instances should be reported in writing to the appropriate CCDF Policy Consultant.

- Suspicious activity by an employee.
- Suspicion of program abuse in receipt of services by any employee of the agency.

## **4.6 Intentional Program Violation (IPV)**

An Applicant/co-Applicant may be denied services based on submission of false or misleading documentation after review with a CCDF Policy Consultant.

## **4.7 Provider Compliance / Noncompliance**

### **Provider Compliance**

#### **PROVIDER ELIGIBILITY STANDARDS POLICY:**

A CCDF eligible provider must assure CCDF Provider Eligibility Standards are always maintained. Failure to maintain compliance may result in decertification through a Notice of Order.

The Eligibility Office will be notified of a child care provider's failure to comply with Provider Eligibility Standards. Eligibility Specialists must identify if there are vouchers assigned and send a Notification of Denial / Revocation to the Applicants/Co-Applicants within three (3) business days of receipt to ensure adequate notice is given regarding the status of their current child care provider. Case notes should be entered of notice sent.

The eligibility software system will automatically move children assigned to an ineligible provider to pending provider effective the Sunday following the effective date of the Notice of Order.

#### **PROVIDER SEARCH EXTENSION POLICY:**

If an Applicant or Co-Applicant is unable to locate a CCDF Eligible Provider, they may make a written request for a thirty (30) day provider search extension. Child care will not be paid during the provider search extension.

### **PLEASE NOTE:**

Applicant's or Co-Applicant's questions regarding a provider's ineligibility should be referred to the provider. (Some denials or revocations may be based on confidential information.) If an Applicant or Co-Applicant wishes to leave their child(ren) in the care of the ineligible provider, their services will be terminated, and future eligibility is subject to availability of funds. Ineligible providers who choose to file an appeal will not be reimbursed during the appeal process.

## SECTION 5 PERFORMANCE STANDARDS

### 5.1 Quality Assurance and Monitoring

The Eligibility Office (Grantee) is required to maintain performance standards regarding Quality Assurance. **These standards are as follows:**

- An accuracy rate of less than 100% of Applicant files reviewed by the State shall result in a reduction of the monthly payment to Grantee for active family case files found to have errors. In addition, if Grantee has two (2) consecutive months of an accuracy rate of less than 97% for the Applicant files reviewed, grantee shall be placed on a probationary status by the State for a period of three (3) months.
- Grantees on probationary status that have an accuracy rate of less than 97% for the Applicant files reviewed, shall incur a reduction of the monthly payment for active family case files found to have errors and for the direct services paid to providers on files found to be ineligible.
- If after three months on probation, the accuracy rate of files reviewed remains less than 97%, the State may terminate their contract agreement pursuant to Section VII SUSPENSION AND TERMINATION Paragraph A of the contract agreement.

### Monitoring and Audit

OECOSL will conduct a review of recipient files to monitor compliance. In addition, the Eligibility Office may be audited by the FSSA Audit, State Board of Accounts, and/or Federal Audit.

## REASONS FOR INVALID VOUCHERS

The Quality Assurance (QA) process includes the identification of invalid vouchers. Applicants/Co-Applicants or children appearing on the weekly QA report for any of the following reasons are ineligible to receive services:

- Employment services need with no wages recorded.
- Child over thirteen (13) years old and not documented as special needs.
- Child attending a closed provider.
- Age ineligible child.

## Quality Assurance (QA) Review

### QUALITY ASSURANCE REQUIREMENT:

It is the Eligibility Office's responsibility to maintain data integrity and assure the Applicant and Co-Applicant's eligibility is accurately determined and the subsidy is appropriately authorized.

## 5.2 Eligibility Specialist Audit of an Application

### STEPS FOR NOTIFICATION OF FILE ERROR AND TIMELY SUBMISSION OF QUALITY ASSURANCE CORRECTION

If a quality assurance review identifies an invalid or incomplete authorization, the Eligibility Office shall:

#### STEP 1

Have five (5) business days from the application completion to scan in documents to the case in the eligibility software.

#### STEP 2

Once Monitoring has determined there is a critical error, Eligibility will have ten (10) business days to correct the error.

#### STEP 3

On the 11<sup>th</sup> business day after application completion, corrections will go to the State. Monitoring queue for review.

- If an error is approved by Monitoring, then case is placed in completed queue.

- If an error is not approved and still deemed critical, a system notification will go to the Eligibility Office indicating why it was not approved.

## STEP 4

Eligibility will have five (5) business days from the notice of an error being “not corrected” to appeal the error in Quality Assurance Software.

## STEP 5

On the 6<sup>th</sup> business day from the date of the notice, if an error is not fixed or the appeal is not approved, the case will go to the Payment Reduction Letter. If the appeal is approved, the case will move to the completed queue.

## THE RESULT FOR NO SUBMISSION OF QUALITY ASSURANCE CORRECTION

Failure to make a timely correction of a critical error will require the Eligibility Office to terminate the ineligible application. The case will be listed on the Payment Reduction Letter. If the missing documentation will result in an administrative error, services **may not** be terminated.

## 5.3 The Eligibility Software Quality Assurance Reports

The eligibility software generates quality assurance reports to identify potential data errors. It is the sole responsibility of the Eligibility Office to review reports and correct data errors weekly.

The Consultant Consortium (TCC) will email weekly Quality Assurance reports which summarize the eligibility software’s potential data errors. In addition, a representative of TCC support will conduct Quality Assurance Calls with the Eligibility Office. The Eligibility Office is required to participate in these calls. The purpose of the call is to identify potential data integrity issues, discuss upcoming software enhancements, evaluate eligibility performance, and answer Eligibility Office questions. A summary of all Quality Assurance calls will be provided to the Eligibility Office, Assistant Director of CCDF Policy and CCDF Policy Consultant.

# SECTION 7 CCDF Forms & Resources

## 7.1 CCDF Forms

### CCDF Linked Forms

1. [Parents/Applicants Rights and Obligations](#)
2. [Child Care and Development Fund \(CCDF\)/On My Way Pre-Application](#)
3. [Child Care Assistance Residency Statement](#)
4. [Statement of Self-Employment Profit and Loss](#)
5. [Wage Detail](#)
6. [CCDF Voucher Program Tipped Employee Worksheet](#)
7. [Secondary School Enrollment Verification](#)
8. [Name Attestation](#)
9. [New Hire Verification](#)
10. [Request for Cash Earnings](#)
11. [Job Search Documentation](#)
12. [CCDF/OMW Report of Change](#)
13. [Provider Information Form](#)
14. [Workforce Certificate/Apprentice Program Forms](#)
15. [CCDF Child Care Voucher Program Appeal](#)
16. [On My Way Pre-K Parent Agreement Form English](#)
17. [On My Way Pre-K Parent Agreement Form Spanish](#)

## 7.2 Resources

1. [Early Ed Connect](#)
2. [Child Care Resource and Referral](#)
3. [Policy Consultant Map](#)
4. [Eligibility Office Map](#)
5. [CCDF Sliding Fee Schedule FPL Chart with Co-pays](#)
6. [Income Limits to Get on CCDF Cheat Sheet](#)
7. [Income Limits to Stay on CCDF Cheat Sheet](#)