

SCHOOL-AGE CARE

Before - and/or after – school care services for children ages five to thirteen. Sites can include childcare centers, childcare homes, in-home care, community centers, schools, and churches.

SHIFT CARE

A provider may decide to offer childcare services during several shifts of a 24-hour day. However, CCDF children are to be assigned, according to their service needs, to one of two 12-hour shifts (6pm to 6am or 6am to 6pm). The provider may not enroll more than their licensed capacity during either 12-hour shift. A child who needs care that would overlap during these shifts shall be assigned to **both** shifts.

SINGLE PARENT/GUARDIAN

A single parent is a parent who is raising a child in a household where the child’s other biological parent or step-parent is not in residence.

SUBGRANTEE

A provider of services who contracts with the Family and Social Service Administration’s grantee. A subgrantee must meet the same eligibility criteria as the primary grantee and adhere to all FSSA policies and procedures.

SUBSIDY BEGIN DATE

The date the family is eligible to begin receiving CCDF services. The subsidy begin date may not be more than two weeks prior to the application date for TANF and TANF Impact clients only. Non-TANF Impact clients, the subsidy begin date must occur the week of application or the week following.

SUBSIDY END DATE

The date CCDF services will end, unless the family completes the recertification process according to established guidelines. Typically, the subsidy end date is six months after the subsidy begin date.

SUBSTANTIATED

A determination regarding the status of a child abuse/neglect report whenever facts obtained during an investigation of the report provide credible evidence child abuse or neglect has occurred.

TEMPORARY MEDICAL CONDITION: (TMC)

A condition which would not be considered permanent by a physician, medical practitioner, or Social Security administration and will limit the person’s ability to work, attend school, seek employment or may be unable to care for their children. Temporary is defined as lasting less than twelve (12) weeks. A written Temporary Medical Condition statement must be provided by a medical practitioner, and provide estimated end date of the condition. Examples of TMC are: post surgery conditions, pregnancy situations, accident related conditions, and mental health related conditions.

UNLICENSED REGISTERED CHILD CARE MINISTRIES

Childcare services provided by a religious organization which is exempt from state licensing, but must meet the minimum requirements of sanitation, fire prevention, and building safety pursuant to IC12-3-2-12.7(c).

UPDATE

The process by which an intake agent completes a periodic review of an applicant’s information and documents changes to the application.

UTILITY

For purposes of CCDF, a utility is considered water, sewage, electric, cable, natural gas or other home heating source.

VOLUNTEER CAREGIVER

An individual who provides or participates in the childcare of a specific child with or without compensation.

VOUCHER

A document which authorizes reimbursement of childcare services for a specific child, including: provider, begin date, end date, and dollar amount. Multiple vouchers within the subsidy begin and subsidy end date may be created to facilitate flexibility and family choice.

VOUCHER BEGIN DATE

The date a voucher is considered valid for provider reimbursement. The first voucher begin date *must always* be the same as the subsidy begin date unless the parent has been placed on “approved leave”.

VOUCHER END DATE

The date a voucher is no longer considered valid for provider reimbursement.

WAITING LIST

A list of children from families who preliminarily meet financial eligibility and declare a service need for CCDF, but for whom there are no available CCDF funds.

WEEK

Defined as Sunday through Saturday.

WORKING

A person receiving wages or salary for performing services for another person or organization or receiving compensation for a service or product, then the person is said to be a working person.

ACRONYMS

ABE	Adult Basic Education
ACSI	American Christ Schools International
ADA	Americans with Disabilities Act
AIS	Automated Intake System (childcare)
AG	Attorney General
AJS	Applicant Job Search
BCC	Bureau of Child Care
BOI	Bureau of Investigations
CA/N	Child Abuse / Neglect
CAA	Community Action Agency
CAP	Community Action Program
CCDF	Child Care and Development Fund
CCRR	Child Care Resource and Referral
CDA	Child Development Associate
CHINS	Child In Need of Services
COA	Council on Accreditation
CPS	Child Protective Services
CRO	Central Reimbursement Office
DCS	Department of Child Services
DFR	Division of Family Resources
DOA	Department of Administration
DOE	Department of Education
DS	Direct Service
EC	Early Childhood
EI	Early Intervention
ESL	English as a Second Language
FC	Foster Care
FMLA	Family Medical Leave Act
FPL	Federal Poverty Level
FS	First Steps
FSSA	Family and Social Services Administration
GED	General Equivalency Diploma
HHS	Health and Human Services
HW	Hoosier Works
IACCRR	Indiana Association of Child Care Resource and Referral
IAEYC	Indiana Association for the Education of Young Children

IASACC	Indiana Association of School Age Child Care
IC	Indiana Code
ICES	Indiana Client Eligibility System (Food stamps, Medicaid, TANF)
IEP	Individual Education Plan
ILCCA	Indiana Licensed Child Care Association
IMPACT	Indiana Manpower Placement and Comprehensive Training
IPIN	Indiana Parent Information Network
IRS	Internal Revenue Service
ISETS	Indiana Support Enforcement Tracking System (Child support)
LLEP	Legally License-Exempt Provider
MOU	Memorandum of Understanding
NAA	National After-school Accreditation
NAEYC	National Association for the Education of Young Children
NAFCC	National Association of Family Child Care
NECPA	National Early Childhood Program Accreditation
OCP	Office of Community Planning
OTC	Over the Counter (referring to Hoosier Works Card issuing)
PES	Provider Eligibility Standards
POA	Plan of Action
POS	Point of Service
PRWORA	Personal Responsibility and Work Opportunity Reconciliation Act of 1996
PTQ	Paths to Quality
QRS	Quality Rating System
RFF	Request for Funds
RFP	Request for Proposal
RID	Recipient Identification Number
SAC	School Age Care (formerly School Age Child Care - SACC)
SCM	State Case Manager
SCR	State Central Registry
SEC	State Eligibility Consultant
SOS	Statement of Service
SSA	Social Security Administration
SSACC	State School Age Child Care
SSI	Supplemental Security Income
SSN	Social Security Number
TA	Technical Assistance
TANF	Temporary Assistance to Need Families (formerly AFDC)
TMC	Temporary Medical Condition

STATE OF INDIANA

FAMILY AND SOCIAL SERVICES ADMINISTRATION

CHILD CARE AND DEVELOPMENT

FUND CENTER

INTRODUCTION

The Child Care and Development Fund (CCDF) was authorized by Congress through the U. S. Department of Health and Human Services, by amending the Child Care and Development Block Grant regulations at 45 CFR Part 98. Section 103 (c) of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA) repealed the child care programs authorized under Title IV-A of the Social Security Act – Aid to Families with Dependent Children (AFDC) Child Care, Transitional Child Care, and At-Risk Child Care. In addition, PRWORA amended Section 418 of the Social Security Act to provide new federal child care funds and to transfer them to a “Lead Agency” under the amended Child Care and Development Block Grant Act.

In Indiana, the lead agency for the CCDF funding is the Family and Social Services Administration (FSSA), Division of Family Resources (DFR).

The DFR develops and implements policies and procedures for the administration of the grant funds. The CCDF State Plan outlines parameters for both local and state levels and includes program outcomes, systems development, and eligibility requirements.

CCDF CENTER GOALS AND PURPOSES

Section 98.1 of the CCDF Final Rules outlines the goals and purposes of the fund, as follows:

The goals are to:

- allow the state maximum flexibility in developing child care programs and policies that best suit the needs of the children and parents within the state;
- promote parental choice to empower working parents to make their own decisions on the child care that best suits their family's needs;
- provide consumer education information to assist parents in making informed child care choices;
- assist parents with child care who are trying to achieve independence from public assistance; and
- assist in implementing the health, safety, licensing, and registration standards established by state regulations.

The purposes are to:

- increase the availability, affordability, and quality of child care services;
- provide low income families with the financial resources to locate and afford quality child care for their children;
- enhance the quality and increase the supply of child care for all families, including those who receive no direct assistance under the CCDF;
- provide parents with a range of options in addressing their child care needs;
- strengthen the role of the family;
- improve the quality of and coordination among, child care programs and early childhood development programs; and
- increase the availability of early childhood development and before- and after- school-age care.

CENTER PERFORMANCE STANDARDS

Each Center has performance standards that must be adhered to for the duration of the agreement period. Failure to comply with these performance standards will result in the termination of the contract or withholding of payment.

1. Grantee must be in good standing with the Bureau of Child Care licensing section during the agreement period.
 - a) License revocation during the agreement period will result in immediate termination of agreement.
 - b) Upon receipt of second suspension or probationary license during agreement period, termination of the agreement will result with 30 days notice.

2. Grantee must meet and maintain accreditation requirements.
 - a) Failure to do so will result in immediate agreement termination.

3. When renewing accreditation, the grantee must be fully accredited by the expiration date of their current accreditation or provide a letter from the accrediting body stating that the center's accreditation has been extended.
 - a) Failure to do so will result in immediate agreement termination.

4. Grantee must attend all mandatory trainings, unless specifically excused by the Bureau of Child Care.
 - a) Failure to do so may result in termination of agreement with 30 days notice.

PURPOSE OF THIS MANUAL

The purpose of this manual is to provide CCDF Grantee with policies, procedures and guidelines to follow as they facilitate intake and eligibility services to prospective CCDF Center families

CCDF CHILD CARE SYSTEM

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Issues federal regulations and collects data

INDIANA FAMILY AND SOCIAL SERVICE ADMINISTRATION
Lead agency for CCDF administration

DIVISION OF FAMILY RESOURCES
*Issues program policies, procedures, parameters, monitors contracts, and collects data.
Develops and evaluates the CCDF State Plan and is accountable for administration of funds.*

CENTRAL REIMBURSEMENT OFFICE (CRO)
*Administers funds according to state and federal guidelines
Pays provider claims*

CCDF COUNTY PARTNERS

CCRR
Assists parents in finding childcare, recruits and trains childcare providers.

INTAKE AGENT
Contracts with State to enroll families in accordance with state and federal regulations

LOCAL DFR
Directs TANF referrals to Intake Agent, participates in the evaluation of county services

PROVIDER ELIGIBILITY SPECIALIST
Assists, inspects, and certifies legally-license exempt childcare providers as CCDF eligible

FAMILIES
Low-income families are assisted with childcare expenses, benefits from services such as Child Care Resource and Referral (CCRR), and education opportunities

PROVIDERS
*Legally operating and certified to meet minimum health and safety standards
Provide quality childcare to families*

CCDF Center Priorities

Child Care services are to be provided in accordance with the following goals:

Goal I: To achieve or maintain economic self support to prevent, reduce, or eliminate dependence (i.e. work, training or educational activities), OR

Goal II: To prevent or remedy neglect, abuse, or exploitation of children unable to protect their own interests (referrals from child Protective Services (DCS) from the local Division of Children Services).

Child Care Services must be provided to eligible families on a continuous basis for the entire agreement period as long as the family remains eligible.

SERVICE DEFINITIONS:

Child Care (0200)

A service which offers care and supervision of children in licensed child care centers. Services must consist of nutritious meals and snacks, and activities geared to meet the appropriate developmental needs of the children served. The service may be provided in daily, weekly or hourly units. The service does not include transportation.

RESTRICTION OF FUNDS

CCDF Direct Service Funds can not be used for:

1. The non-federal share (match) for other Federal grant programs;
2. The purchase or improvement of land, or for the purchase, construction, or permanent improvement of any building or facility;
3. Grants or contracts reimbursement for any sectarian purpose or activity, including sectarian worship or instruction except as provided in 45 CFR 98.30(4) and (5);
4. Supplementing program support; and
5. Supplementing quality initiatives.
6. Tuition. Funds may not be expended for students enrolled in grades one through twelve for:
 - a. Any service provided to such students during the regular school day;
 - b. Any service for which such students receive academic credit toward graduation; or
 - a. Any instructional services that supplant or duplicate the academic program of any public or private school.
7. Child care services provided by a CCDF Center for a child also enrolled in the CCDF voucher program. A child may not be enrolled or reimbursed simultaneously under both the CCDF child care voucher program and a CCDF Center program.

CONFIDENTIALITY

CONFIDENTIALITY OF RECORDS

It is permissible to exchange client (family) information between the Intake Agent and the Local DFR if allowed by law, and vice versa, when necessary for the administration of the program. Other parties requesting client (family) information must have the written permission of the client or must obtain a court order.

CONFIDENTIALITY ON THE PHONE

As required by IC 5-22-3-7:

The Contractor and any principals of the Contractor certify

the Contactor, except for de minimis and nonsystematic violation, has not violated the terms of:

- IC 24-4.7 (Telephone Solicitation of Consumers),
- IC 24-5-12 (Telephone Solicitations), or
- IC 24-5-14 (Regulation of Automatic Dialing Machine) in the previous 365 days, even if IC24-4.7 is preempted by federal law; and

the Contactor will not violate the terms of IC24-4.7 for the duration of the Contact, even if IC24-4.7 is preempted by federal law.

The Contractor and any principals of the Contractor certify an affiliate or principal of the Contractor and any agent acting on behalf of the contractor or on behalf of an affiliate or principal of the Contactor;

- except for de minimis and nonsystematic violations, has violated the terms of IC24-4.7 in the previous 365 days, even if IC24-4.7 is preempted by federal law; and
- will not violate the terms of IC24-4.7 for the duration of the Contract, even if IC24-4.7 is preempted by federal law.

ELIGIBILITY GUIDELINES

All families must meet the service need, financial need, identity, residency and age requirements to access CCDF Agreement services. The Grantee must initially determine that all adults in the family meet the service and financial need to qualify for CCDF Agreement services. The Grantee will indicate the number of weeks that child care services should be authorized and the weekly charges. The Grantee will print the referral and attach a completed Provider Information Page and give it to the parent. Failure of the parent to complete the application process with the intake agent may result in the Grantee's ability to receive reimbursement for the child's care.

SERVICE NEED

- Employment, Unemployment; or
- A certified or accredited training or educational program, including high school adult basic education, or GED. Post-secondary activities may take place inside/outside of the home ; or
- TANF IMPACT approved activity; or
- Job search activity; or
- Child Protective Services

FINANCIAL NEED

Financial Need: Effective 10/1/2002, a new applicant (see definition of new applicant) must have gross monthly family income less than 127% of the Federal Poverty Level to be enrolled in the program. Effective 9/30/2007, families may remain on the CCDF program as long as the family's Federal Poverty Level is less than 171%.

INCAPACITATED PARENT

The parent/guardian who has a medical condition that prevents him/her from working and is unable to care for children as verified by a doctor's statement is considered incapacitated. This condition could be temporary or permanent, however, the benefits a parent/guardian receives is dependent on the number of adults living in the household. These conditions could include family medical leave, post surgery conditions, pregnancy, post childbirth conditions, accident related conditions and mental health related conditions.

MATERNITY LEAVE

CCDF benefits may be provided while a parent/guardian is on maternity, provided the leave does not exceed twelve (12) weeks. The parent/guardian must provide the following:

- ✓ Proof of birth/pregnancy
- ✓ If reported prior to leave, statement from their employer indicating they have been assured of returning to their employment or documentation they are on family medical leave
- ✓ If reported after leave, verification of current employment or current check stub.

TWO PARENT HOUSEHOLD

(One parent working and one parent incapacitated)

CCDF benefits may be provided to allow one parent/guardian to participate in employment. The incapacitated parent must provide valid doctor's statement which indicates the following:

- ✓ Parent/guardian is unable to participate in a service need
- ✓ Parent/guardian is unable to care for their children
- ✓ Length of time parent/guardian is anticipated to be incapacitated

The incapacitated parent/guardian's service need shall be entered as the service need of the active parent.

TWO PARENT HOUSEHOLD

(One parent temporarily incapacitated and one parent permanently incapacitated)

CCDF benefits can be continued when one parent has a temporary medical condition which prevents the parent from participating in their employment and the other parent is permanently incapacitated. Both parent/guardians must provide a valid doctor's statement which indicates the following:

- ✓ Parent/guardian is unable to participate in a service need
- ✓ Parent/guardian is unable to care for their children
- ✓ Length of time parent/guardian is anticipated to be incapacitated

The parent/guardian who is temporarily incapacitated must also provide a statement from their employer indicating they have been assured of returning to their job or documentation they are on family medical leave. The permanently incapacitated parent/guardian's service need shall be entered as the service need of the active parent.

TWO PARENT HOUSHOLD*(Both parents temporarily incapacitated)*

CCDF benefits can be continued when both parents have a temporary medical condition which prevents the parents from participating in their service need. Both parents/guardians must provide a valid doctor's statement which indicates the following:

- ✓ Parent/guardian is unable to participate in a service need
- ✓ Parent/guardian is unable to care for their children
- ✓ Length of time parent/guardian is anticipated to be incapacitated

Both parents must also provide a statement from their employer indicating they have been assured of returning to their job or documentation they are on family medical leave. If one parent is participating in a training activity, this parent must also provide the current semester's school schedule when released from their doctor.

TWO PARENT HOUSEHOLD*(One parent on approved leave and one parent incapacitated)*

CCDF eligibility is maintained when one parent is on approved leave and one parent is incapacitated, however, no child care benefits will be paid. Both parent/guardians must provide appropriate documentation.

Incapacitated parent/guardian must provide a valid doctor's statement which indicates the following:

- ✓ Parent/guardian is unable to participate in a service need
- ✓ Parent/guardian is unable to care for their children
- ✓ Length of time parent/guardian is anticipated to be incapacitated

The parent/guardian on approved leave must provide the following:

- ✓ Doctor's statement indicating parent/guardian is unable to participated in their service need
- ✓ Doctor's statement indicating the length of time parent/guardian is anticipated to be on leave (must be less than twelve (12) weeks)
- ✓ Statement from their employer indicating they have been assured of returning to their employment or documentation they are on family medical leave

The parents/guardians service need shall be recorded as the service need of the parent/guardian on approved leave.

SINGLE PARENT HOUSEHOLD

CCDF benefits can be continued when a parent has a temporary medical condition which prevents the parent/guardian from working. The following documentation must be provided:

- ✓ Doctor's statement indicating the parent is unable to participate in their service need
- ✓ Doctor's statement indicating the parent is unable to care for their child(ren)
- ✓ Doctor's statement indicating the length of time the parent is anticipated to be on leave (must be less than twelve (12) weeks)
- ✓ Statement from their employer indicating they have been assured of returning to their employment or documentation they are on family medical leave

APPROVED LEAVE

An approved temporary lapse in service need, which does not exceed twelve (12) weeks, during which child care is not needed yet eligibility is maintained. Examples include:

- Family medical leave
- Maternity leave
- Temporary changes in formal custody
- A break in school of less than four (4) weeks or twelve (12) weeks for a returning junior or senior high school applicant

TEMPORARY LOSS OF SERVICE NEED (EDUCATION)

If a CCDF recipient is currently enrolled as a student, the voucher(s) for the child(ren) may be placed in “Approved Leave” during breaks in school which do not exceed 4 weeks provided the CCDF applicant plans to return to school at the end of the break. If the parent is a junior or senior high school parent, the vouchers may be placed in “Approved Leave” for up to 12 weeks as long as the minor parent intends to return to junior or senior high school. This action ensures the child will have CCDF benefits when the parent returns to school.

CHILD PROTECTIVE SERVICES

Families with children who receive or need to receive protective services as verified by the Local OFC can be eligible for CCDF child care services provided the CPS caseworker indicates the family needs child care out of the child’s home. The service and financial need requirements are waived for children who have been referred by their CPS caseworker as needing out of home care as part of the CPS case plan. A child who has been placed into another home is not eligible for this exception. This is for children who have not been removed from their own home but need outside care as identified by the CPS caseworker

RESIDENCY

The applicant and/or eligible child(ren) must be a citizen of the U. S. or a qualified (legal) alien and currently reside in Indiana. Only the citizenship and immigration status of the child, who is the primary beneficiary of the child care benefit, is relevant for eligibility purposes. The applicant must apply for CCDF in his/her county of residence. This can include a person who is temporarily residing in a domestic or homeless shelter in Indiana. There is no minimum length of time a person must reside in Indiana to obtain benefits.

AGE REQUIREMENTS

Children under the age of thirteen (13) and children ages 13 through 17 who meet the definition of a child with special needs (see definitions) or are under court supervision are considered eligible.

PHYSICAL CUSTODY

The individual, parent or guardian, having physical custody of the child is considered the applicant for CCDF benefits. Custody may be formal or non-formal. If the child is in informal custody and is NOT considered a foster child placed with a licensed foster family, the custodial adult(s) income WILL be considered when determining financial need. If a foster child is placed in a home with an unlicensed foster family, the foster parent(s) income WILL be considered when determining financial need.

MINOR PARENT

Minor parents must be in a training/education program and/or employed. The minor parent is the applicant for CCDF benefits and the minor parent and his/her child(ren) are considered a separate family unless the minor parent is in the household but is not the primary caregiver as documented by the applicant in writing, including signature and date. This statement must be provided with each application sequence until the minor parent is no longer in the applicant’s CCDF household. Minor parent means a parent under age eighteen (18).

NOTE: If a minor parent is an elementary, middle, junior or senior high school student, the voucher(s) for the child(ren) may be placed in “Approved Leave” for a break in school not to exceed twelve (12) weeks. The minor parent must plan to return to junior or senior high school at the end of the break. The action ensures the child(ren) will have CCDF benefits when the parent returns to school.

TEMPORARY CHANGES IN CUSTODY

When physical custody of a child(ren) is no longer with the CCDF applicant due to a formal custody agreement, a child(ren)'s voucher may be placed in "Approved Leave" for the period of time the child(ren) are not in the CCDF applicant's physical custody. This period may not exceed twelve (12) weeks. This action ensures the child(ren) will continue to receive CCDF benefits when the child(ren) returns to the CCDF applicant's home.

If the individual who obtains temporary custody of the child(ren) also needs childcare, the individual with temporary custody may apply for CCDF benefits according to CCDF policies.

CHANGES IN PHYSICAL CUSTODY

When physical custody of a child(ren) currently receiving CCDF benefits changes due to a catastrophic event, the child(ren) may be entitled to continued benefits should the individual with physical custody meet CCDF eligibility guidelines. Catastrophic events include:

- Death/loss of parent/guardian
- Incarceration of parent/guardian
- Placement with a foster family or other guardian as identified by the Department of Child Services or placement back into the child's home.
- Deployment of parent into active military service.

PARENTS IN THE MILITARY

The person with physical custody of the child(ren) is considered the applicant(s) for benefits. Their service and financial need would be considered for eligibility. When a married couple is in the military, the parent stationed away from home shall also be counted in the family's household size and their income shall be counted toward eligibility.

FOSTER FAMILIES

Definition of Foster Parent: An individual who provides care and supervision as a substitute family on a 24-hour basis to a child who is deemed a ward of the local office of the Department of Child Services. A foster parent with the appropriate documentation, including valid Foster Family Home License, may be considered a valid applicant for enrollment of the foster child to the CCDF program. Foster parent of the same gender are both considered applicant for the CCDF program.

Foster parent(s) must document they are currently working or in a certified or accredited education or training program to be eligible for CCDF benefits. If the foster parent is applying for childcare for the foster child(ren), then the income of the foster parent(s), including the foster child per diem is not counted. Therefore the foster child is considered a "family of one". The applicant, who is the foster parent, will not be counted in the household. When foster children are biological siblings, the children may be listed on the same application. **Documentation required:**

- √ **Copy of the foster parent's valid Foster Family Home License (State Form 45562) which matches foster parent's residency verification**
- √ **Documentation from approving authority indicating the foster license has been renewed or address has been changed**
- √ **Verification the child is a ward of the State, such as, Medical Authorization (State Form 3319), court placement order, current per diem documentation or documentation from the DCS caseworker.**

At re-determination, the Intake Agent must assure the foster parent has a valid Foster Family Home License and obtain a current per diem statement with child's name or current documentation from the DCS caseworker including child's name.

CHILDREN WITH SPECIAL NEEDS

Documentation of a child with special needs must be made by evidence of enrollment in one or more of the following program or services:

- Children with Special Health Care Services;
- First Steps Early Intervention System;
- Public School Special Education;
- Supplemental Security Income (SSI);
- Head Start (those professionally diagnosed children with disabilities).

With parental consent, a copy of the program enrollment forms may be obtained and used as documentation of special needs. Benefit letters, enrollment numbers, or program cards can also be used as documentation of enrollment. For children age thirteen (13) or over, the required special needs documentation must indicate the child's need for adult supervision at all times.

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

Routine claim procedures are to be followed. Reimbursement will be made only for approved childcare services provided by an eligible provider for as long as funds are available and the child remains eligible.

ADDITIONAL COST FOR SPECIAL NEEDS

Not all child care programs may need an increased reimbursement rate to meet the child care costs of a child with special needs. Many children with special need can be included with no additional cost to the provider.

In order to calculate the actual childcare costs for a child with special needs, *the provider is to document and maintain accounting records reflecting only legitimate costs directly related to childcare services, per individual child, which do not include services associated with the child's individual disability funded by other sources, or the elected choice of the parent. Only those childcare costs not associated with the American's With Disabilities Act (ADA) accommodation may be integrated into the cost structure.* For questions regarding legitimate expenses, contact your CCDF Policy Consultant.

Once a child is verified as having special needs and the provider has documented additional childcare related expenses are necessary to provide childcare to the child, the Central Reimbursement Office (CRO) may reimburse up to, but **not exceeding 10%, over/above the market rate** in accordance with the child's age category/care setting.

The Intake Agent is to keep the child's eligibility for the special needs rate and the provider's documentation on file. Justification for the increased rate and the child's eligibility for the increased rate must also be maintained on site in the child's file for audit review. The increased reimbursement rate for children with special needs must be reviewed at each re-determination.

Routine claim procedures are to be followed. Reimbursement will be made only for approved childcare services provided by an eligible provider for as long as funds are available and the child remains eligible.

SIX MONTH ELIGIBILITY RE-DETERMINATION (UPDATE)

THE GUIDELINES

The Intake Agent must conduct an eligibility re-determination (update) with each family **at least every six months**. This requires the completion of a new Application, Form 805, as well as re-verifying and documenting the family's eligibility. The Grantee must complete a new referral and page 3 of the 805 application form, Provider Information

Page, for the parent requesting CCDF Center child care services. A re-determination (update) may be completed 30 days before the subsidy end date, but never after. **It is the responsibility of the Intake agent to notify the parent of the impending recertification 30 calendar days prior to the subsidy end date. This notification will also serve as ten-day notice should the family be found as ineligible at the time of their re-determination (update). If a family is found to be no longer CCDF eligible, the ten-day notice period will NOT be extended past the subsidy end date.**

NOTE: Intake Agents should include a question about a family's TANF status as part of any re-determination (update) interview.

CHANGES IN FAMILY CIRCUMSTANCES Required to Report

The grantee must report changes in information to the intake agent within ten (10) calendars days of date of occurrence:

- Address change
- Phone number change
- Change in family size
- Change in TANF status
- Loss of service need
- Job Loss – *reported within ten (10) days*

CHANGES IN FAMILY CIRCUMSTANCES Not Required to Report

Applicants are not required to report, the following changes.

- Change in Service Need
- Change in Service Type
- Change in income

DENIAL OF APPLICANT APPLICATION

DENIAL OF APPLICATION

A family **is to be denied** services in writing for any of the following reasons:

- Family income above 127% of poverty, at initial application
- Family income above 170% of poverty, at re-determination or update
- Co-pay exceeds weekly charge
- Child (the primary beneficiary of the service) is not a U.S. citizen, qualified alien and/or resident of the county or state
- Failure to provide complete information at time of enrollment

- Deliberate misrepresentation of information on the application
- No longer has a service need that meets CCDF eligibility criteria
- No CCDF funds available in the county
- Conviction of illegal receipt of government funds
- CCDF fraud conviction; and/or
- Failure to repay overpayment agreement

TERMINATION OF APPLICATION

The family or child (if applicable) *may be terminated* from service for any of the following reasons:

- Failure to pay family co-payment, if reported within thirty (30) days;
- Failure of an applicant to electronically document their child(ren)'s attendance
- Allowing another person to use their Hoosier Works for Child Care card to document attendance
- More than three changes of caregiver in 12 month period
- Full-family sanction

The family or child (if applicable) *will be terminated* from service for one of the following reasons:

- CCDF fraud conviction
- Failure to report loss of service need, unless there is a valid repayment agreement;
- Expiration of period of subsidy eligibility
- Failure to fully reimburse in-home child care provider
- Failure to complete required CCDF enrollment paperwork
- Welfare fraud conviction
- Child turns 13 (or 18 if child has a documented special need or need for court ordered supervision)
- A child who is the primary beneficiary of services is not a US citizen, qualified alien, and/or resident of the county and/or state.
- Failure to repay overpayment agreement according to the terms of the agreement
- Co-pay exceeds weekly charge
- Sixty(60) days of claim inactivity on a voucher

APPLICANT NOTIFICATION OF TERMINATION

If services are terminated to a client after the application has been signed, the family must receive at least ten-calendar day written notice. The child's provider must also be notified in writing by the Intake Agent at least ten (10) calendar days prior to the effective date of the action.

PAYMENT OF CHILD CARE SERVICES

Services provided during this ten-day period of notification are considered allowable childcare costs for reimbursement under the CCDF child care program. However, the Intake Agent must assure child care benefits are not paid beyond this notification period.

Service for childcare provided during an applicant's appeal action, WILL NOT be reimbursed after the ten-day termination period. However, if a finding is held in the applicant's favor, all childcare during the appeal process will be paid retroactively at the rate determined prior to termination provided the applicant completes CCDF enrollment forms timely and has utilized childcare through an eligible CCDF provider.

APPLICANT APPEAL PROCEDURE

The Intake Agent must inform the applicant of the Parent Appeal Process at time of initial applicant and at each re-determination.

When any adverse action is taken, such as denial, termination or increased co-pay, there is a three (3) step appeal process.

STEP 1: Within **ten calendar days** of receipt of Adverse Action letter, the applicant must send written request for appeal to the local Intake Agent Supervisor.

The Intake Agent has **ten calendar days** to review the request and respond in writing. This response must provide information on the next step in the appeal process. The Intake Agent will document research to support any decision made. The documentation shall be placed into the parent file.

STEP 2: If the applicant is not satisfied with the decision of the Intake Agent Supervisor, the applicant must send written request for appeal to the Child Care Administrator of the Bureau of Child Care within **15 calendar days** of receipt of the denial letter from the Intake Agent Supervisor.

Child Care Administrator
Attn: CCDF Appeals
402 W. Washington Street, W-361 MS02
Indianapolis, Indiana 46204-2739

The Child Care Administrator has **15 calendar days** to review the request and respond in writing. This response must provide information on the next step in the appeal process.

STEP 3: If the applicant is not satisfied with the decision of the Child Care Administrator, they have **15 calendar days** from receipt of letter from the Child Care Administrator to submit a **final written** request for appeal to the:

Director of the Division of Family Resources
Attn: CCDF Appeals
402 W. Washington Street, W-361 MS02
Indianapolis, Indiana 46204-2739

The Division Director of DFR has **15 calendar** days to review the decision of the Child Care Administrator of the Bureau of Child Care and respond in writing.

The decision of the Director of the Division of Family Resources is **final**.

LIMITATIONS OF APPEAL

All requests for appeals and responses **must be in writing**

If an applicant misses the timeline, the right to appeal is forfeited. All appeals sent by applicants will be counted as

sent on the date as postmarked. All dates on responses by the state will be counted as sent on the date of postmark.

COUNTY CHILD CARE MARKET RATE

Although childcare reimbursement is based on the individual provider's charge for service, there are established maximum reimbursement rates. These maximum rates are determined by a local market rate survey of Indiana licensed child care providers.

HOW RATES ARE DETERMINED

Survey results are compiled for each county through the oversight of the Division of Family Resources (DFR). Maximum county rates are established for full time weekly, daily, and hourly charges for center care, as well as, for childcare homes. Separate market rates are established for providers accredited by a recognized body, licensed and legally exempt childcare providers. The market rate table also reflects the above rates for each age category. The rates established are the maximum reimbursed for subsidized childcare programs administered through the DFR.

The established market rates are automatically entered into the Intake Software. Should the Intake Agent discover any market rate errors in the software, the CCDF Policy Consultant should be contacted immediately.

MARKET RATE CATEGORIES

- Infant – a child 0 to 11 months of age
- Toddler – a child 12-35 months of age
- Three, Four and Five - children ages three, four or five
- Kindergarten – a child six years of age regardless of whether they are attending kindergarten or a child enrolled in kindergarten
- School-age – a child attending school for the entire day needing care during traditional hours, including children attending all day kindergarten
- School-age other – a child attending school for the entire day needing care during non-traditional hours or a child attending school currently on summer break or qualifying year-round school break.

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.

IMPLEMENTATION OF MARKET RATES

The local market rate survey is updated at least every two years. Final versions of the market rate are made available to Intake Agents with instructions and the date of implementation. If the provider reimbursement will be adversely affected, the Intake Agent must give a written ten (10) calendar day notice prior to any changes taking effect. If the provider reimbursement is effective after the subsidy end date of the current application, no notice is necessary.

HOW PROVIDER REIMBURSEMENT IS CALCULATED

When the amount a provider charges is less than the market rate, the provider's actual charge is the maximum child care reimbursement made under this program. When the amount charged by the provider is greater than the market rate, the maximum reimbursement made under the program is the established market rate. In these situations, the child's parent or caregiver must assume responsibility for any additional costs of care, or the provider must be willing to accept a lower rate of reimbursement.

Although many child care providers charge on a weekly basis, there are also providers who charge daily and/or hourly rates for the services they provide. The amount of child care subsidy allowed for care in this situation is determined based upon the actual rate established by the child care provider for all children in the care setting whose needs are similar to those of the child for whom the subsidy is requested. However, in **no case will the total**

daily or hourly subsidy reimbursed for care be greater than the full time weekly market rate. Under no circumstances can the provider's actual charge be paid if it exceeds the market rate except in documented case of special needs. Further, the hourly rate of reimbursement should never exceed the daily rate.

OVER RATE CHARGE

When the chosen provider's established rates exceed the county market rate, this difference is called an "Over-Rate or Overage Charge". It is the responsibility of the application to discuss this balance with the provider. The provider may waive this charge if desired.

FAMILY CO-PAY

DEFINITION: A family's fee for childcare calculated using the Division of Family Resources' Child Care Income Eligibility Determination and Sliding Fee Scale.

Families with gross monthly income at or below 100% of poverty will have a zero co-payment. Families with gross monthly income over 100% are required to pay a co-payment. This weekly co-payment is determined at the time of the interview and is not based on actual attendance. When families have multiple children, the co-payment is based on the child requiring the most care.

The family pays the fee to the provider directly. **The family is responsible for the co-payment amount determined at eligibility determination, regardless of future attendance.** The provider is responsible for collecting the fee from the parent. Failure to pay family fees may result in termination of the child(ren) from the program provided it is reported to the Intake Agent within thirty (30) days.

INCREASED CO-PAY FEES

If a co-payment is increased after an application has been signed, the applicant and provider must receive a written ten (10) calendar day notice. If this increase occurs at re-certification, the increase will take affect as of the subsidy begin date without notice.

INCREASED PROVIDER FEES

If a provider increases their rates or becomes eligible for a higher market rate, the change may only take place at the time of CCDF family re-determination. A provider achieving accreditation, through an approved Bureau of Child Care (BCC) accrediting body, is offered an exception to the rule. Once approved, the provider must submit a new Provider Information Page to the Intake Agent for each child affected by the new provider charges. The Intake Agent will have a maximum of five (5) business days to complete these changes. If the Provider Information Page is not received by the Intake Agent within thirty (30) days of BCC approval, the change will only take place at the time of CCDF family re-determination.

Documenting Attendance

ENROLLING WITH THE CRO

The state contractor responsible for installation and maintenance of all Point of Service (POS) devices will contact the childcare provider to install a POS device at their facility. This will happen after the provider has at least one CCDF child enrolled in their childcare program. At the time of installation, the provider will receive a short training on the use of the machine as well as documents to complete their CCDF Provider enrollment. These forms include:

- POS device contract
- Provider Holiday Statement
- Discrepancy claim form with instructions
- Statement of Service form, **to keep as backup documentation**
- Payment schedule
- Direct deposit form
- W-9 form

PARENT / PROVIDER RESPONSIBILITY

CCDF providers must require parents to use their assigned Point of Service (POS) device as the method for documenting attendance for all CCDF children.

When a provider has completed enrollment with the Central Reimbursement Office (CRO), the provider will be given a POS device for the purposes of electronically documenting children's attendance. The parent is responsible for utilizing their Hoosier Works for Child Care card to electronically document their child(ren)'s attendance. The provider is responsible for verifying an enrolled child's parent/guardian is properly documenting their child(ren)'s attendance. In addition, the provider is responsible for maintaining attendance records which support their electronic childcare claim (i.e. Parent Sign-in/out Sheets or other appropriate method.)

When properly used, attendance will be electronically transmitted to the CRO. This information is used to calculate the provider's childcare reimbursement which is electronically deposited into the provider's designated bank account on the date specified.

NOTE: The POS device should not be used as the sole source of attendance documentation. A provider should maintain back-up attendance records which include date, time of arrival and time of departure, as well as, custodial adult signature when possible.

In the event a provider has not received their POS device which results in an under-payment for childcare provided, the provider may file a Discrepancy Claim. This claim form must be submitted on the form provided to the address indicated on the form within sixty (60) days of the last day of childcare. Late claims will be denied unless resulting from a data change request.

FAILING TO USE THE POS DEVICE

Failure of the applicant and/or provider to properly use the POS device WILL result in a CCDF underpayment or non-payment for childcare services.

If a custodial adult continually fails to utilize the POS machine to document their child(ren)'s attendance, the provider should notify the Intake Agent of the problem. It is the responsibility of the Intake Agent to send a ten (10)

calendar day written notice to the applicant informing them their failure to electronically document their child(ren)'s attendance may result in termination of services. A copy of this written notification should be sent to the provider. The Intake Agent shall follow-up in ten (10) days to determine if the parent is using their childcare card to electronically document attendance. If the applicant or authorized user has not, their application shall be terminated.

60-DAY LATE CLAIMS

Providers should not allow discrepancy claims to accumulate. If a discrepancy claim is received sixty (60) days past the last day of the period claimed, the late claim must include a letter stating the request is due to a data change. The Bureau of Child Care reserves the right to deny a late claim.

PROVIDERS WITH MULTIPLE LOCATIONS

Providers are to care for a child at the site to which the child was assigned by the Intake Agent. Providers with multiple sites must have custodial adults use the Point of Service (POS) devices assigned to the specific site in order to electronically document attendance. The POS device should be located in the facility where child care is assigned. The provider must ensure **children attend and are claimed at the site to which they are assigned.**

PROVIDERS WHO MOVE

If a provider moves to a new facility, the provider must demonstrate compliance with applicable CCDF Provider Eligibility Standards prior to accepting payment for care provided at the new address. Custodial adults must contact the Intake Agent to change their childcare vouchers to the provider's new address prior to the effective date of the change. The Intake Agent will not be able to complete the request until the new facility appears in the Intake Software. This will not happen until the provider has met all requirements for participation. Once vouchers have been assigned to the new address, the provider must contact the CRO for assistance in programming their Point of Service (POS) device to reflect the change in address.

NOTE: If a provider moves without prior notification, there may be an interruption in payment or the provider may be paid for childcare determined to be inappropriate and require repayment. If a provider begins to care for children prior to demonstrating compliance with applicable CCDF Provider Eligibility Standards, the provider may not be paid for services provided.

ATTENDANCE

FULL TIME CARE

NON-SCHOOL AGE CHILDREN

Full time care is defined as twenty-five (25) hours or more per week, for **non school-age children.** When the child care provider charges a flat weekly rate, the child must attend a minimum of twenty-five (25) hours per week, Sunday through Saturday, to qualify for the flat weekly rate. For children enrolled on a daily basis (four (4) hours or more) or hourly basis, reimbursement can be made only for the time a child is in attendance. *Reimbursement for care can never exceed the full time weekly market rate.*

FULL DAY KINDERGARTEN

Children who attend *all day public school kindergarten are considered full time, school age children for market rate purposes.* The same rules for school age children apply in these cases.

SCHOOL-AGE CHILDREN (SCHOOL YEAR)

Full time care for school-age children is defined as fifteen (15) hours or more per week, Sunday through Saturday, during the school year when school is in session. When a school-age provider charges a flat

weekly rate, the full weekly rate can be paid for the school-age children who attend at least fifteen (15) hours per week, Sunday through Saturday, during the school year when school is in session. For children enrolled on a daily (three (3) hours or more) or hourly basis, reimbursement can be made only for the time the child was in attendance. *Reimbursement for care can never exceed the full-time weekly market rate.*

SCHOOL-AGE OTHER CHILDREN (SUMMER & NON-TRADITIONAL)

During the summer when school is not in session, and for care provided when an applicant works non-traditional hours any time during the calendar year, full time care for school-age children is defined as twenty-five (25) hours or more per week. For children enrolled on a daily (four (4) hours or more) or hourly basis, reimbursement is to be made only for the time a child is in attendance. *Reimbursement for care can never exceed the full-time weekly market rate.*

NOTE: School-other rates may also be paid for school-age children for the period of time when school is not in session. This time includes: summer vacation only. Exception: Children attending year-round school are eligible for school-other rates when the break in school is greater than two (2) weeks or has been approved by a BCC Policy Consultant.

PERSONAL DAYS

When enrolled *full-time with a full-time weekly subsidy*, each family is allowed *twenty (20) personal days per child during their enrollment year* for which reimbursement can be made if a child is absent. The personal days can be used at the parent's discretion. The Intake Agent is expected to explain personal day usage to the applicant at time of enrollment.

NOTE: Personal days may be used for days the provider is open for business, the child was scheduled to attend, and the child did not attend any portion of the day.

Parents have the option of choosing when they want to use their twenty (20) personal days for each child. Once the twenty (20) days are exhausted (for each child), the parent is responsible to pay for any days the child does not attend. **Personal days may not be used to provide two-week notice.** Any requirement for notice is between the parent and the provider.

Children with Special Health Needs: For children with special health situations (i.e. prolonged illness or injury) the treating physician is to document the child's needs for treatment and/or recuperation. This prescribed time may result in absences in excess of twenty (20) days. The Intake Agent and parent must work closely on the length of the absence. Documentation and request for a waiver must be submitted to the CCDF Policy Consultant for consideration.

HOLIDAYS

Reimbursement may be made to providers with an established written policy to charge all consumers for days they are closed due to a holiday. The provider may be reimbursed by the CCDF program for up to six (6) days per calendar year, per child, for children enrolled with a full-time weekly rate. The facility must be closed to be paid for the holiday. The provider must select the holidays, in advance, by completing the required documentation provided by the Central Reimbursement Office.

NOTE: A child must be in attendance at least one day, in the previous two (2) weeks, prior to the holiday to be paid for the holiday.

OTHER COSTS

Registration costs, mandatory fees and other optional child care expenses, such as art and gymnastics programs or

transportation costs, **cannot be paid** through the CCDF program

PROVIDER COMPONENT

Childcare reimbursement is only authorized to qualified child care sites. Qualified site is defined as an accredited childcare center that is licensed by the State **and** is accredited by an approved National organization on or before September 30, 2006.

The Bureau of Child Care recognized the following accrediting bodies:

- ACSI – American Christ Schools International
- COA – Council on Accreditation
- NAA – National After-school Accreditation
- NAEYC – National Association for the Education of Young Children
- NAFCC – National Association of Family Child Care
- NECPA – National Early Childhood Program Accreditation

GENERAL INFORMATION

Effective July 1, 2002, the General Assembly passed legislation that requires all child care providers to comply with certain health and safety standards prior to their participation in the Child Care and Development Fund Voucher Program.

Effective July 1, 2005, the General Assembly passed legislation stating licensed child care homes and licensed child care centers would be considered compliant with CCDF Provider Eligibility Standards as long as the Indiana license is valid.

ADVERSE ACTION AGAINST A PROVIDER Other than CCDF Provider Eligibility Standards

GENERAL INFORMATION

In certain situations where there are immediate concerns for the protection of children or the integrity of a provider, the Division of Family Resources may take adverse action against a provider affecting their ability to participate in the CCDF program.

SUSPENDING A PROVIDER

A provider *may be suspended* by the Division of Family Resources from the CCDF program under the following circumstances.

- The death of a child while in the provider's care;
- A pending abuse/neglect charge against the provider, an existing employee of the provider, or a member of the provider's household, indicating behavior harmful to children;
- A substantiated health or safety hazard;
- Threatening behavior;
- Providing false information on any form connected with the CCDF program;
- Being under investigation for fraud;

- Possession or use of Hoosier Works for Child Care Cards as documented by a Bureau of Child Care staff member or representative; and/or
- Illegally operating a home or facility

In the above circumstances, the suspension can be effective immediately upon notice to the provider. The Intake Agent will be notified to immediately contact CCDF applicants to select a new provider. Applicants shall be referred to the local Child Care Resource and Referral (CCRR) agency if they need assistance selecting a new provider. Payment will not be made during the period of suspension. The provider will remain suspended pending the outcome of an investigation.

TERMINATING A PROVIDER

CCDF PROVIDER ELIGIBILITY STANDARDS

A provider *will be terminated* by the Division of Family Resources from the CCDF program for failure to comply with CCDF Provider Eligibility Standards as of the effective date of the Notice of Order (see Provider Eligibility Standards section) and remain in effect until the Notice of Order has been rescinded.

OTHER REASONS FOR TERMINATION

A provider *will be terminated* by the Division of Family Resources from the CCDF Program under the following circumstances.

- A substantiation or conviction of abuse/neglect against the provider, an existing employee of the provider, or a member of the provider's household indicating behavior harmful to children;
- Substantiated fraud in the receipt of any type of government funds;
- Proven forgery of signature on any form;
- Loss or denial of licensure or registration in situations where the action is due to substantiated abuse or neglect.

In the above situations, termination of the provider will become effective immediately upon notice and will be permanent. Payment will cease upon termination of the provider. The Intake Agent will be notified to immediately contact CCDF applicants to select a new provider. Applicants shall be referred to the local Child Care Resource and Referral (CCRR) agency if they need assistance selecting a new provider.

PROVIDER APPEAL OF ADVERSE ACTION Other than CCDF Provider Eligibility Standards

In situations where the Division of Family Resources takes adverse action (other than CCDF Provider Eligibility Standards) against a provider that affects their ability to participate in the CCDF program, there is a two-step appeal process.

STEP 1 Within **15 calendar days** of receipt of termination notice, the provider must send a written request for appeal to the:

Child Care Administrator
Attn: CCDF Appeals
402 W. Washington Street, W-361 MS02
Indianapolis, Indiana 46204-2739

The Child Care Administrator has **15 calendar days** to review the request and respond.

STEP 2 If the provider is not satisfied with the decision of the Child Care Administrator, they have **15 calendar days** to submit a **final written** request for appeal to the:

Director of the Division of Family Resources
Attn: CCDF Appeals
402 W. Washington Street, W-361 MS02
Indianapolis, Indiana 46204-2739

The Director has **15 calendar days** to review the decision of the Child Care Administrator of the Bureau of Child Care and respond in writing.

The decision of the Director of the Division of Family Resources is **final**.

LIMITATIONS OF APPEAL

If a provider misses the timeline, the right to appeal is forfeited. All appeals sent by providers will be counted as sent on the date as postmarked. All dates on responses by the state will be counted as sent on the date as postmarked.

Provider payments will not be made during the appeals process. However, if a decision is found in favor of the provider, any CCDF enrollments will be paid. A provider may not enroll any new CCDF children during the appeal process.

PROVIDING SERVICES TO CCDF FAMILIES Participating through a Center Agreement

THE MEMORANDUM OF UNDERSTANDING

Each CCDF Grantee and CCDF Intake Agent must have a current (within the current contract year) signed Memorandum of Understanding (MOU). This MOU outlines the responsibilities of both parties in the delivery of service to CCDF families participating through a center agreement. When implementing or changing policies or procedures, both parties should review the MOU to determine if such actions will violate their existing agreement.

GENERAL PRINCIPLES

In general, it is the responsibility of the CCDF Center to:

- √ Determine preliminary eligibility
- √ Generate appropriate referrals for childcare services
- √ Provide families with a printed referral, completed provider information page as well as general enrollment information
- √ Notify the CCDF Intake Agent of known changes in family circumstance with may affect participation in the CCDF program
- √ Complete all budget functions associated with their contract

In general, it is the responsibility of the CCDF Intake Agent to:

- √ Check for new referrals
- √ Make enrollment appointment available to CCDF Center clients within five (5) business days of

- referral creation
- √ Determine client eligibility
- √ Provide printed voucher to the CCDF Center upon application completion
- √ Maintain client files
- √ Communicate any changes in client status to the CCDF Center
- √ Act upon changes in family circumstance reported by the CCDF Center within five (5) business days
- √ Notify client of impending recertification at least thirty (30) days in advance

CCDF CENTER INITIAL CLIENT APPLICATION

CCDF Center client applications are completed in the same manner as CCDF Intake applications. It is the responsibility of the Intake Agent to determine the appropriate subsidy begin and end dates which correspond to the client's service need. It is also the sole responsibility of the Intake Agent to determine the amount of care authorized based upon the client's documented service need. (See "Intake Component for further information.)

While the Intake Agent is responsible for authorizing child care services based upon the client's documented service need, the Intake Agent may not exceed the number of weeks or amount of funding authorized by the CCDF Center as stated on the client's child care referral. However, the Intake Agent may reduce the amount authorized based upon the client's documented service need.

For specific information on entering a CCDF application for a CCDF Center client, please refer to your software procedure manual.

NOTE: A CCDF Center child should not be added to an active intake application until after the CCDF Contract Centers subsidy end date.

CLIENT RE-DETERMINATION

The intake agent must conduct an eligibility re-determination with each CCDF Center family at least every six (6) months. This requires the CCDF Center to create a new childcare referral for the CCDF family. A re-determination including completion of a new Application may be completed thirty (30) days before the subsidy end date, but never after.

NOTIFICATION OF UPCOMING RE-DETERMINATION

It is the responsibility of the Intake Agent to notify the parent of the impending re-determination at least thirty (30) days prior to the subsidy end date. The notification may be made using computer generated letters, or agency letters which contain similar information provided the mailing date has been documented. This notification will also serve as the family's ten (10) calendar day notice of termination for failure to complete re-determination timely. It is the responsibility of the CCDF Center to provide the family with a referral at the time of re-determination.

METHOD OF RE-DETERMINATION

When completing a re-determination (update), the Intake Agent may use a variety of methods including:

- √ Face-to-face interview
- √ Mail
- √ Fax with the assistance of the CCDF Center

MAINTAINING A CLIENT FILE

A client file is maintained in the same manner as any CCDF client. However, it is best practice to include in the client file a copy of the child care referral generated by the CCDF Center.

MAINTAINING A WAITING (CONTACT) LIST

It is the responsibility of the CCDF Center to maintain a waiting (contact) list of families wishing to access their CCDF Center funds. It is the responsibility of the Intake Agent to maintain a waiting list for families currently participating through a CCDF Center who wish to gain access to CCDF Intake funds to allow for greater flexibility in provider selection.

As of the date of this manual, the AIS system will not allow the Intake Agent to place an active CCDF Center child on the AIS waiting (contact) list. Therefore, it is the responsibility of the Intake Agent to maintain a manual waiting (contact) list. Families on this list will be placed at the front of the AIS waiting (contact) list and will be first to be notified when funds become available.

NOTE: A child may not actively participate in the CCDF Center program and the CCDF intake program simultaneously.

PROGRAM ABUSE POLICES AND PROCEDURES

In order to ensure CCDF dollars are used to their full potential, the Bureau of Child Care has developed CCDF Program Abuse Policies and Procedures as follows:

Definition: Program Abuse is defined as *any* false reporting of facts or information, providing false documentation, or the omission of facts by the CCDF applicant.

INTAKE AGENT ROLE

The Intake Agent is expected to report all suspicions of fraudulent activity in the CCDF Program to the CCDF Fraud Coordinator. These instances include, but are not limited to, the following:

Parent/Applicant Program Abuse or Fraud

- √ Failure to report a biological or custodial adult as a household member
- √ Failure to report a loss of service need
- √ Failure to report a move to another county or state
- √ Failure to report other forms of income including child support and social security benefits
- √ Submission of suspicious documentation, including wage verification

Provider Program Abuse or Fraud

- √ Providing care at an address which has not been licensed/registered/or certified or allowing other individuals not properly certified according to CCDF regulations to provide child care at any location operated by or under the control of Provider.
- √ Providing care at an address which differs from the address indicated on the applicant's Provider Worksheet or CCDF voucher.
- √ Having possession of or using the applicant's Hoosier Works for Child Care card or having possession of card numbers or pin numbers on or off premises.
- √ Submission of suspicious, false or misleading documentation.

Intake Agent Fraud

- √ Suspicious activity by an employee
- √ Suspicion of employee program abuse in receipt of CCDF benefits

Should the Intake Agent fail to report any fraudulent activity which is *defined in the contract as being within the scope of intake duties*, the Intake Agent *will* be held accountable for any overpayment. Further, it could be considered a failure to perform contract obligations.

PROCEDURES FOR REPAYMENT AGREEMENTS

When the Intake Agent documents a case where the parent/applicant did not have a service or financial need, the following procedures should be followed:

APPLICANT IS PRESENT

- STEP 1** Determine the time period when the applicant did not have a service or financial need. This will include begin and end dates to be entered on the repayment agreement in the service date field.
- STEP 2** Determine the total amount of the overpayment which is equal to the amount provided on the case payment report regardless of the end date of care.
- STEP 3** If the parent/applicant is present, the Intake Agent should complete the Non-Compliance and Repayment Agreement forms and have the applicant sign. If the applicant refuses to sign the agreement, proceed to Step 5.
- STEP 4** Send the original applicant signed agreement or unsigned agreement and supporting documentation to:
- FSSA - Financial Management
CCDF – MS34
P.O. Box 7128
Indianapolis, IN 46207-7128
- And: Family and Social Service Administration
MS02 Attn: CCDF Fraud Coordinator
402 W. Washington Street
Indianapolis, IN 46204
- And: The regional CCDF Policy Consultant
- STEP 5** Note the terms of the CCDF repayment agreement in the Intake Software note field indicating if the agreement was signed or unsigned.

APPLICANT IS NOT PRESENT

- STEP 1** Determine the time period when the applicant did not have a service or financial need. This will include begin and end dates to be entered on the repayment agreement in the service date field.
- STEP 2** Determine the total amount of the overpayment.
- STEP 3** Mail the applicant a Non-Compliance form and Repayment Agreement (see “Forms” section) for the applicant to sign and return within ten (10) days. The date mailed and the date the information is to be returned to the Intake Agent should be noted in the Intake Software note field.

- STEP 4** Send the provider a ten (10) day notice indicating the applicant's child care assistance will end if the parent fails to comply with CCDF program request.
- STEP 5** Create a pending voucher(s) beginning the Sunday following the tenth day.
- STEP 6** When the signed repayment agreement has been received, restore voucher for applicant's child(ren) and provide a copy of the voucher to the provider. (If signed repayment agreement is not received, proceed to Step 9.)
- STEP 7** The original applicant's signed or unsigned agreement and supporting documentation shall be sent to:
- FSSA – Financial Management
CCDF – MS34
P.O. Box 7128
Indianapolis, IN 46207-7128
- And Family and Social Service Administration
MS02 Attn: CCDF Fraud Coordinator
402 W. Washington Street
Indianapolis, IN 46204
- And The Regional CCDF Policy Consultant
- STEP 8** Note the terms of the CCDF repayment agreement in the AIS note field indicating if the repayment agreement was signed or unsigned.
- STEP 9** If repayment agreement is not signed, delete all pending vouchers and terminate the case.

PROCEDURES FOR REPORTING SUSPECTED PROGRAM ABUSE

When the Intake Agent suspects program abuse, but is unable to document the applicant's non-compliance, the Intake Agent will report these suspicions to the CCDF Fraud Coordinator. This is done by sending a completed Fraud Referral including any supporting facts and/or documentation to the CCDF Fraud Coordinator and the regional CCDF Policy Consultant. The Bureau of Investigations will determine a plan of action/investigation which may include assigning the case to the Intake Agent for resolution.

Fraud Determination of less than \$2,500

The Bureau of Investigations will either refer to the Intake Agent to seek repayment or refer to the County Prosecutor for legal action. In most cases, the case will be referred to the local intake by the CCDF Fraud Coordinator for repayment resolution. The Intake Agent will be notified of the finding for development of a repayment agreement. See Procedures for Repayment Agreement – Parent is Not Present.

Fraud Determination of \$2,500 or more

The Bureau of Investigations may recommend criminal prosecution, in addition to collection of the overpayment in these instances. The Intake Agent will be notified of the findings by the CCDF Fraud Coordinator or their CCDF Policy Consultant. The Bureau of Child Care will determine the appropriate action and communicate this to the Intake Agent.

BUDGET

Utilization

Grantees have the responsibility to fully utilize their allocation, but must be careful not to exceed center's allocation. Failure to fully utilize your full FY 2011-2012 allocation will result in a reduction of funding for FY 2013-2014. Grantees will be responsible for referring families to the intake agent only when they have sufficient funds available. **Centers that utilize all their funding before the end of the year are required by contract to continue to serve eligible children through the end of the agreement year at the same co-pay.**

AIS Centers System manages the availability of funds to center by prohibiting total year-to-date obligations from exceeding total funds available for each center. The entire year's worth of funding is made available to the center in CIS from the start of the agreement year. That enables each Center to utilize their funds at a pace of their choosing. It is the responsibility of each center to manage their funds properly and ensure that they stay within their budget.

CONTRACT REQUIREMENTS

All grantees must be in good standing with the Indiana Department of Revenue, the Secretary of State's Office, and have filed with FSSA a current Provider Data Form (PDF) providing a current Employee Identification Number (EIN), W-9 (also completed by the depository), and a Direct Deposit Form (if applicable).