Federal and State Changes to the Child Care Assistance Program – Phase 4

TOPIC

Child Care Assistance Program Phase 4 changes effective April 23, 2018 made as a result of the 2017 state legislative session.

PURPOSE

Provide information and instructions on policy changes.

CONTACT

Contact your Child Care Assistance Program policy specialist or submit your question through PolicyQuest.

SIGNED

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TERMINOLOGY NOTICE

The terminology used to describe people we serve has changed over time. The Minnesota Department of Human Services (DHS) supports the use of "People First" language.
I. Background

During the 2017 legislative session, many changes were made to the Child Care Assistance Program (CCAP). Most of these changes were required under the federal Child Care and Development Block Grant (CCDBG) Act of 2014. CCAP helps approximately 15,000 families pay for child care for 30,000 children throughout Minnesota.

This bulletin addresses the following changes that take effect April 23, 2018.

- A child can use up to two providers that can be paid by CCAP (one primary provider and one secondary provider), and CCAP will limit authorization and payments to a child’s secondary provider.
- CCAP will restrict authorizations to 25 children or dependents of employees per child care center.

II. Family mailing and implementation memos

The Department of Human Services (DHS) mailed information to families and issued two implementation memos prior to this bulletin.

A. Family mailing

On February 28, 2018, DHS sent a mailing to families with at least one child authorized with two or more providers. The mailing informed families that they must report information about each child’s primary and secondary provider to their worker by March 12, 2018.

Both implementation memos referenced below included copies of the family mailing, which contained a form parents may use to report their child’s primary and/or secondary provider. Refer to the “Child Care Assistance Program (CCAP)-Primary & Secondary Provider Report Form,” which DHS posted on the Systems Information Resource (SIR). SIR is a secure website and can only be accessed by county, tribal and state users who have been granted access. DHS will also publish this form on eDocs using the number DHS-7680.

B. Implementation memos

1. March 1, 2018 Implementation Memo

This memo informed county and tribal agencies about Phase 4 changes and included information about:

- General policy and system implementation
- The family mailing
- Agency actions needed to provide information to families who did not receive the mailing
- Instructions for tracking each child’s primary and secondary provider designations
- How to respond to family questions
2. March 21, 2018 Implementation Memo

This memo provided detailed instructions for county and tribal agencies to:

- Update new fields in MEC²
- Reduce Service Authorizations to implement the new policy limiting payments when a child uses multiple providers.

III. Payment is limited when a child has multiple providers

Effective April 23, 2018, CCAP will limit authorization and payment when a child has multiple providers. Unless a child uses legal nonlicensed (LNL) child care providers, each child can use up to two providers that can be paid by CCAP, one primary provider and one secondary provider.

Legal non-licensed (LNL) child care providers do not count toward the two provider limit. If a child uses an LNL provider and one other type of provider, the authorization and payment will not be reduced for either provider.

A. Policy information

1. General policy information

Each child can use up to two providers of the following types paid by CCAP:

- Licensed center
- Licensed family child care provider
- License-exempt center (or certified center)

Children authorized with two providers must have a primary provider and secondary provider:

- The amount of care authorized with a secondary provider is limited to 20 hours in a biweekly period.
- The amount paid to a secondary provider cannot be more than two daily rates in a biweekly period.

The family is responsible for telling their worker which provider is the primary and which is the secondary. If a provider reports information about their primary or secondary designation for a child on a parent’s behalf, follow up with the parent to confirm the information. Do not rely solely on the provider’s report.

See below for information about children authorized with legal nonlicensed (LNL) providers.
2. Children authorized with legal nonlicensed providers

Legal nonlicensed (LNL) providers do not count toward the two provider limit. If a child uses an LNL provider and one other type of provider, the authorization and payment is not limited for either provider.

Regardless of provider type, never authorize more than 120 hours of care per two-week period, per child, for all authorized providers.

If a child uses an LNL provider and two (or more) other providers:

- If two of the providers authorized are any combination of the following provider types: licensed centers, licensed family providers, or license-exempt centers, then:
  - The parent must select one licensed provider or license-exempt center as a primary provider and the other licensed provider or license-exempt center as the child’s secondary provider;
  - Authorization and payment with the child’s secondary provider is limited;
  - Authorization and payment with the child’s primary provider and the LNL provider(s) is not specifically limited.

- If one or none of the other providers is a licensed center, licensed family provider, or license-exempt center, authorization and payment for any provider is not specifically limited.

3. Provider switches

Provider switches occur when:

- A child ends care with a provider(s) and starts care with another provider(s); or
- A child continues care with a provider, but the provider’s status (i.e. primary or secondary) changes.

When a child starts using a new primary provider, do not start or increase the authorization until the earlier of:

- The first day after the 15-day notice period ends with the previous primary provider. This applies when care is scheduled to end with the previous primary provider, and care is available and continues through the end of the notice period.

- The first day of the biweekly period after the 15-day notice period ends with the previous primary provider. This applies when the authorization is being reduced with the previous primary provider because they are transitioning to be the child’s new secondary provider. See instructions in the MEC² User Manual titled “Reduction of Hours to a Provider Requiring a 15-Day Notice Workaround.”

- The day when care is no longer available with the previous primary provider (e.g. the provider is closed).
• The day the child runs out of absent days. This applies when care ends with the previous primary provider who plans to bill during the 15-day notice period using absent days. In this situation, CCAP could pay for care using up to 10 consecutive absent days (assuming the child has absent days remaining during the calendar year).

• The day the previous primary provider states they will stop billing and/or the date they will not bill more than 20 hours per biweekly period if the provider continues as the child’s secondary provider. If the provider verbally agrees to stop or reduce their billing, document this in Case Notes.

Workers must not increase the Total Hours of Care Authorized field on the Billing window above 20 hours per biweekly period for a child’s secondary provider, unless one or more of the criteria above apply.

4. Back-up providers during school breaks and primary provider vacations

Some children use a back-up provider during school breaks, school release days, and/or when their primary provider is on vacation. A “back-up” provider is a provider a child uses when their usual primary provider is unavailable. In these situations there are options for authorizing care:

• If the usual primary provider states they will not or cannot bill for care during the time period, a Service Authorization can be issued for the new primary provider (i.e. “back-up” provider) for the entire period. This option might be used when the original primary provider is closed for an extended break or on vacation. If the usual primary provider verbally agrees to stop or reduce their billing, document this in Case Notes.

• Authorize care with the secondary provider (i.e. “back-up” provider) for up to 20 hours per biweekly period (this option may work for school release days).

• End Service Authorizations with a 15-day notice to the original primary provider so that care can begin with the new primary provider (i.e. “back-up” provider) without overlap (this option may work for longer school breaks such as summer or winter break).

There may be some situations where the amount of care that can be authorized and paid during the school break is limited due to this policy. The family is responsible for paying provider charges above what CCAP is able to pay.

Workers must not increase the Total Hours of Care Authorized field on the Billing window above 20 hours per biweekly period for a child’s secondary/back-up provider, unless:

• The provider is transitioning to the child’s primary provider; AND

• The child’s previous primary provider has been given proper notice and/or stated they will not bill.

B. MEC² system changes

System changes to support this policy have been delayed. DHS expects MEC² changes to be installed in the late summer or early fall of 2018.
Until MEC² programming is updated, this policy will be implemented by restricting authorizations to 20 hours or less per biweekly period with a child’s secondary provider. This workaround will limit payment to 20 hours or less in a biweekly period. Workers should not attempt to limit payment to two daily rates before system changes are installed.

C. County and tribal agency actions needed

1. Children authorized with multiple providers

   If there are children authorized with multiple providers (other than LNL providers) who still have care authorized for more than 20 hours with both providers:

   - If the family has not had an opportunity to choose a primary and/or secondary provider for their child:
     
     o Send the family a copy of the “Child Care Assistance Program (CCAP)-Primary & Secondary Provider Report Form” (DHS will publish this form on eDocs using the number DHS-7680); and
     
     o Give the family 15 calendar days to respond to the request for information. Families may report their child’s primary and/or secondary provider via phone, fax, or mail.
     
     o If the family reports the child’s primary and secondary provider within 15 calendar days, reduce the authorization for the child’s secondary provider to 20 hours or less per biweekly period. Allow for 15-day notice when reducing authorized hours. See instructions in the MEC² User Manual titled “Reduction of Hours to a Provider Requiring a 15-Day Notice Workaround.”

   - If the family had an opportunity to choose a primary and/or secondary provider for their child, but they failed to respond by the deadline:
     
     o Refer to “What to do if a parent does not report their child’s primary or secondary provider” (see Attachment A) for guidance about which, if any, Service Authorizations to reduce.
     
     o If necessary, follow instructions in the MEC² User Manual titled “Reduction of Hours to a Provider Requiring a 15-Day Notice Workaround” to reduce Service Authorizations with 15-day notice.

In some cases, workers previously reduced some Service Authorizations effective April 23, 2018 because families did not designate a primary and secondary provider for each child. If a family later designates a primary and secondary provider for each child, hours with the child’s primary provider can be increased retroactively to April 23, 2018 (as long as all other policy requirements are met).

Counties and tribes should monitor cases to ensure that care is not authorized for more than 20 hours with secondary providers. DHS will also be monitoring cases.
2. **Authorizing a child with multiple providers in the future**

Starting April 23, 2018, when authorizing care for a child with multiple providers, ask the parent to choose a primary and secondary provider for their child.

- Send the family a copy of the “Child Care Assistance Program (CCAP)-Primary & Secondary Provider Report Form” (DHS will publish this form on eDocs using the number DHS-7680); and
- Send the family a Special Letter giving them 15 calendar days to respond to the request for information. Families may report their child’s primary and/or secondary provider via phone, fax, or mail.

If the parent fails to respond within 15 days:

- If the child is not currently authorized with any providers, wait to authorize care with either provider until the parent tells you which provider is primary and which is secondary.
- If the child is currently authorized with one provider, and the parent requests care with a second provider, wait to authorize care with the new provider until the parent tells you which provider is primary and which provider is secondary.

When the parent responds, do not authorize more than 20 hours per biweekly period with the child’s secondary provider.

If a family requests retroactive care for a child with multiple providers, care authorized with the secondary provider for dates before April 23, 2018 are not subject to the 20 hour limit. Care authorized with a secondary provider for dates April 23, 2018 and later are subject to the 20 hour limit. When approving retroactive care with a secondary provider, code the Total Hours of Care Authorized field on the Child’s Provider window as follows:

- In the biweekly period when care starts, enter the number of hours authorized biweekly prior to April 23, 2018.
- Navigate to the biweekly period that starts April 23, 2018, and then reduce the authorized hours per biweekly period to 20 hours or less.

Do this as part of the same action, prior to approving the Service Authorization so a 15-day notice is not required to decrease authorized hours.

There are no changes to how child care is authorized when a child has an LNL provider and one other provider.

3. **Responding to parent and provider questions**

The parent is responsible for designating the primary and secondary providers for each child. Use the guidelines below when responding to questions for parents and providers about this policy.

   a. **Questions from parents**

   If parents contact you:
• Share general information about the new policy, such as:
  o Beginning April 23, 2018, CCAP can only authorize and pay one primary and one secondary provider per child.
  o Legal non-licensed (LNL) child care providers do not count toward the two-provider limit.
  o Parents choose their children’s primary and secondary provider, and they may choose a different primary and secondary provider for each child in their family.
  o For a primary provider, a child’s authorization and payment will likely not change. Depending on the hours authorized and how the provider bills, CCAP can pay a child’s primary provider up to the weekly maximum rate.
  o For a secondary provider, during a two-week billing period, CCAP cannot:
    ▪ Authorize more than 20 hours of care
    ▪ Pay more than two daily maximum rates.
  o Providers may charge parents the difference between their rates and what CCAP will pay.

b. Questions from providers

If providers contact you:

• Share general information about the new policy (see above for examples).
• Do NOT share case-specific information with providers (e.g. whether a parent designated them as a child’s primary or secondary provider).
• Do NOT accept information from a provider regarding their primary or secondary status for a child without confirming the information from the child’s parent.

IV. Payment for center employees is limited to 25 children

Effective April 23, 2018, no more than 25 center employees’ children and/or dependents can be authorized per child care center.

A. Background

Until April 23, 2018, the law states no more than half, or 50%, of the total children at a center can both be authorized for CCAP and be children or dependents of the center’s employees.

Prior to April 23, 2018:

• DHS monitored centers’ compliance with the law and instructed county and tribal agencies not to take any action to enforce the law unless DHS specifically directed them to do so.
MEC² tracked children of employees by matching information county and tribal workers coded on the Employer FEIN field on parents’ Earned Income windows with the center’s FEIN listed on the Tax Information window.

Beginning April 23, 2018:

- Counties and tribes take primary responsibility for monitoring centers’ compliance and communicating with centers and families about the law.
- The Employer FEIN field in the Details box on the Earned Income window will be disabled effective April 23, 2018. MEC² will use a different method to track children of center employees.

### B. Policy information

#### 1. General policy information

CCAP cannot pay for more than 25 children to attend a child care center where their parents work.

For the purpose of this law:

- “Child care center” includes both licensed and license-exempt child care centers.
- “Child or dependent” means the center employee is the child’s birth or adoptive parent, stepparent, legal guardian, or Minnesota Family Investment Program (MFIP) or Diversionary Work Program (DWP) caregiver. For the purpose of this bulletin, “child” refers to “child or dependent.”
- “Center employee” means any person who works in or for the center. This includes paid or unpaid staff and contract or temporary employees.

#### 2. Centers authorized for more than 25 children of employees

On April 23, 2018, if a child care center has open authorizations for more than 25 employees’ children:

- Existing authorizations for employees’ children will remain open, provided the families remain eligible and children remain authorized.
- New authorizations for additional employees’ children cannot be opened until the number of employees’ children authorized falls below 25.

If additional Service Authorizations are approved when a center already has 25 or more employees’ children authorized, do not take action to close any Service Authorizations. DHS will monitor authorizations and may develop further guidance.

#### 3. Authorizing care for children of center employees

DHS developed a new MEC² Web Report titled the “PV107 CCAP Center Employee Report,” which provides county, tribal, and state staff with information about employees’ children authorized at child care centers to help them determine if and when they can authorize care for children of center employees.
employees. **Agency staff must have access to view the report, which is based on their MEC² security role. This report will be available beginning April 23, 2018.**

DHS will post a guide on the Systems Information Resource (SIR) titled “CCAP Worker’s Guide to the PV107: CCAP Center Employee Report (BOBI Report)” that gives information about how to access and use the PV107 Report. The Systems Information Resource (SIR) is a secure website and can only be accessed by county, tribal and state users who have been granted access.

MEC² caseworkers must generate and review the PV107 each time before they authorize care for a child at the center where their parent(s) work to determine if the center already has 25 or more employees’ children authorized.

If fewer than 25 employees’ children are authorized, care can be authorized for additional employees’ children at the center, up to the maximum of 25.

If 25 or more employees’ children are authorized, care cannot be authorized for additional children of center employees at that center until the number of employees’ children drops below 25.

If a child whose parent is employed somewhere other than the child care center where the child attends, including a different child care center, requests authorization at a center authorized for 25 or more employees’ children, approve the authorization. This law does not affect authorizations for children whose parents do not work at the center where they attend.

See the MEC² System Changes section of this bulletin for more information about the PV107 CCAP Center Employee Report.

4. **Retroactive authorizations**

CCAP policy allows workers to authorize care retroactively for a maximum of six months. See [CCAP Policy Manual § 4.12 (Date of Eligibility)](https://www.dhs.state.mn.us/mec). Prior to authorizing care retroactively for a center employee’s child, review the PV107 Report. View the report back to the date the family requests care. This only applies to retroactive authorizations requested for April 23, 2018 and later.

- Deny authorizations for the entire retroactive period if the center is authorized for more than 25 center employees’ children for the entire time period the family is requesting care.
- Authorize care retroactively for up to six months if:
  - The center is authorized for fewer than 25 center employees’ children for the entire time period the family is requesting care; and
  - The family meets all eligibility and activity requirements.
- Only authorize care for dates when less than 25 employees’ children were authorized. Workers will need to open and close Service Authorizations in single actions, which may involve approving multiple short Service Authorizations. For an example, see Attachment B – “Example: Authorizing Retroactive Care for a Center Employees’ Child”.

Note: If a family requests care for multiple children and the number of center employees’ children is close to 25, see Section IV. B. 6. (“Family requests care for more children than can be authorized”) of this bulletin for more information.
5. **Processing redeterminations for children of center employees**

At redetermination, continue authorizing care for employees’ children at the center(s) where their parent(s) work if:

- The family completes the redetermination process and meets all eligibility requirements.
- There is no break in eligibility or authorization.

This applies even when a center is authorized for more than 25 employees’ children.

A family whose case closes for failure to complete the redetermination process has 30 calendar days to submit required documents. See [CCAP Policy Manual §10.6.6 (Redetermination Processing – Reinstatement)](https://www.ccappolicymanual.org).

If a Service Authorization for a center employees’ child closes for failure to complete the redetermination process:

- Reinstate the child’s eligibility and authorization if the family returns required documents within 30 calendar days of the case closing, and the family is determined eligible, even if the center where the child attends is authorized for 25 or more employees’ children.
- Keep the child’s eligibility and authorization closed if: a) the family returns required documents more than 30 days late, and/or b) the family is determined ineligible. In these cases:
  - The family must reapply.
  - If 25 or more employees’ children are authorized at the center, the child cannot receive CCAP at the center where their parent works.

6. **Family requests care for more children than can be authorized**

If a family requests care for children at the center where the parent(s) work, and the PV107 report shows fewer than 25 employees’ children are authorized, authorize care for up to 25 employees’ children per center.

Do not authorize care for more than 25 employees’ children per center. If a parent requests care for more children than can be authorized, notify the parent that not all of their children can be authorized with the center. This may include situations when siblings in a family have existing authorizations at a center where their parent(s) work, and then a new baby is born.

**The parent must decide which children will be authorized at the center where they work. The parent may also choose for some or all of their children to attend a different provider.**

Example:

- A parent wants her three children to attend the center where she works.
- Prior to issuing a Service Authorization, the worker checks the PV107 report and sees the center is already authorized for 24 children of center employees. The worker can only authorize care for one of the family’s children.
• The worker calls the parent to ask if she would like to have one child authorized at the center and if so, which child.

• The parent is not available, so her worker leaves her a voicemail asking for a return call and sends her a Special Letter requesting this information.

• Three days later, the parent calls and says she wants her youngest child to attend the center where she works.

• The worker checks the PV107 report again. The report shows the center is still authorized for 24 employees’ children.

• Per the parent’s request, the worker authorizes care for the family’s youngest at the center where the parent works, and the parent chooses another provider for her two older children.

Note: If 25 or more employees’ children are authorized at the center by the time the parent contacts the worker, the worker must deny authorizations for all children in the family. This is why it is important to check the PV107 prior to issuing any Service Authorizations, as the number of authorized children can change day to day.

7. Temporary and permanent loss of employment

If a parent experiences a temporary leave of absence from their job at a child care center, consider the parent an employee of the center if the parent intends to return to work when the leave ends. The parent’s children continue to count as employees’ children during the leave if they remain authorized. If CCAP suspends care during the parent’s leave, only reauthorize care at the end of the leave if the number of employees’ children at the center is below 25.

Examples of a temporary leaves of absence may include, but are not limited to, medical and/or maternity leaves.

If the parent does not intend to return to work at the end of the leave, consider this a permanent end of employment. CCAP no longer counts the parent as a center employee.

• Follow procedures for establishing extended eligibility if applicable. See CCAP Policy Manual §9.15.6 (Extended Eligibility).

• Code MEC² Case Data windows appropriately. Make sure to:
  o Record end dates on applicable Employment Activity and Earned Income windows,
  o Update the Center Employer Look-up box in the Earned Income window, and
  o Update the Reporter Type field on the Child’s Provider window to “12 Month Reporter” if a parent working at the center was the only reason the family was a Schedule Reporter.
8. New centers

New centers that become licensed or registered on or after April 23, 2018 cannot have authorizations for more than 25 employees’ children. This includes new centers located at the same site as a previous center, which was authorized for more than 25 employees’ children.

9. Family questions

If a family asks why a Service Authorization was denied or wants help finding another provider, provide the following information:

- Give the family a copy of “Child Care Assistance Program Payments for Children of Center Employees-Questions and Answers for Parents” (DHS-6960C). DHS will update this document to reflect new policies.

- When issuing a Service Authorization Denial to a family, copy and paste the text below into the Worker Comments portion of the notice. You may also provide this information verbally.

  “This provider cannot be authorized to care for additional children of employees at the center. You are still eligible for the Child Care Assistance Program. You may choose another child care provider. If you need help finding a new child care provider, contact Parent Aware at 1-888-291-9811 or http://parentaware.org/. Once you choose a new child care provider, call your worker to let them know the new provider’s name, address and phone number. The new provider you choose must be registered with your county before payments can be made.”

10. Provider questions and data privacy

If a center representative asks general questions about the law, give the provider a copy of “Child Care Assistance Program Payments for Children of Center Employees - Questions and Answers for Providers” (DHS-6960A). DHS will update this document to reflect new policies.

If a center representative asks about their center’s status with the law or about specific families or children:

- Follow data privacy laws:
  - Agencies may share general information about center’s status with the law, such as the number of employees’ children authorized at the center.
  - Agencies must not share case- or child-specific information with the provider (e.g. individual’s names, information about why a family lost eligibility, and/or information pertaining to documentation a family needs to submit).

- Explain the following:
  - Centers are responsible for managing their own enrollment and should keep track of how many children are: a) children of center employees and b) authorized to receive CCAP.
When counting authorized children, CCAP includes all children who have open Service Authorizations and get Billing Forms.

Current reporting requirements for parents and providers continue to apply.

- Providers must report immediately when children stop attending.
- Parents must report employment changes within 10 days.

Note: If a provider reports a change of employment on a parent’s behalf, workers must follow up with the parent to confirm the change. Providers do not receive notice when workers deny Service Authorizations for specific children, nor are providers notified when their center is authorized for 25 or more employees’ children.

C. MEC² System changes

MEC² changes have been made to support this policy.

1. PV107 report

Refer to Section IV. B. 3. (“Authorizing care for children of center employees”) of this bulletin for information about resources DHS developed for tracking children of center employees.

MEC² caseworkers must review the PV107 each time prior to authorizing care for a child at the center where their parent(s) work to determine whether they can authorize care for employees’ children.

The report is updated nightly and the center’s information may change from day-to-day (Service Authorizations may be issued for children of center employees, or Service Authorizations may close).

The report will be available beginning April 23, 2018.

2. New Case Data fields

Although this policy does not take effect until April 23, 2018, new Case Data fields were installed in MEC² on March 26, 2018 to support the change:

- Center Employer Look-up (on Earned Income window)
- Child Care Center Matches Employer field (on Child’s Provider window)


The Employer FEIN field in the Details box on the Earned Income window will be disabled effective April 23, 2018. Workers no longer need to complete this field beginning April 23, 2018.

3. Notices

Beginning April 23, 2018, workers must send a Service Authorization Denial Notice to a family when denying an authorization for an employees’ child at a child care center already authorized for 25 or more employees’ children.
On the Child’s Provider window, DHS will add a new drop-down option for the SA End/Denial Reason field. The new reason is “Authorization Denied.” Workers can only use this code when denying a Service Authorization that was never approved. When workers select this code, MEC² will generate a Service Authorization Denial notice for the family informing them that CCAP denied an authorization for a specific child with a specific provider.

Providers do not receive notice when workers deny Service Authorizations for specific children, nor are providers notified when their center is authorized for 25 or more employees’ children.

Note: Workers must print a copy of the page(s) of the PV107 report showing a center is authorized for 25 or more employees’ children to retain for the family’s case file each time they deny a child’s Service Authorization.

D. County and tribal agency actions needed

1. Update Case Data fields

Workers must take these steps each time they confirm a parent starts work at a child care center to make sure the PV107 report properly counts children of center employees:

1. On the Earned Income window, complete the new Center Employer Look-up box:
   a. If provider ID for the center where the parent works is known:
      i. In Center Employer Look-up box, click Provider ID: field.
      ii. Enter the Provider’s ID. (Pressing <TAB> or clicking on another field populates the Provider Name: and Site Address: fields automatically.)
   b. If provider ID for the center where the parent works is unknown:
      i. In Center Employer-Look-up box, click “Provider Search.”

2. Repeat this process for each Earned Income window for each parent and each job at a child care center.

3. Click “Save.”

4. On the Child’s Provider window, in the Provider Information box, the new Child Care Center Matches Employer field auto-populates to “Yes” after the Earned Income window is saved. If the parent works at the center their child attends, but this field does not auto-populate:
   a. Check the Center Employer Look-up box on the Earned Income window to make sure the window is coded correctly to indicate a parent works at the center their child attends.
   b. If the value entered in the Provider ID field on the Earned Income window matches the value entered in Provider ID field on the Child’s Provider window, but the Child Care Center Matches Employer field still does not say “Yes,” contact the Help Desk or submit a Help Ticket.
5. Confirm that the **Reporter Type** field is coded as “**Schedule Reporter**” if the parent is an employee of a DHS licensed center. License exempt centers are subject to payment limits for children of center employees but their employees are not necessarily Schedule Reporters.

6. Click “**Save**.”

7. Put the case through background.

8. Make sure to record end dates on applicable Employment Activity and Earned Income windows, and update the **Center Employer Look-up** box on the Earned Income window when you confirm a parent stops working at a child care center.

Note: The **Employer FEIN** field in the Details box on the Earned Income window will be disabled. Workers no longer need to complete this field beginning April 23, 2018.

2. **Check the PV107 report each time before authorizing care for center employees’ children**

Workers must view the PV107 report prior to authorizing care for any child at a child care center where their parent works to determine if more than 25 employees’ children are currently authorized.

View the report on the day that you are authorizing care. Do not use an old report when authorizing care.

When authorizing care retroactively:

- Follow guidance in Section IV. B. 4. ("**Retroactive authorizations**") of this bulletin.
- Review the version of the PV107 report that provides the daily number of children of center employees’ authorized at a center to determine which dates, if any, care can be authorized.

3. **Authorizing care**

Workers must follow standard CCAP policies for authorizing care. Additionally, follow policies outlined in this bulletin:

- When the family requests retroactive authorization, refer to Section IV. B. 4. ("**Retroactive authorizations**") of this bulletin.
- When a redetermination is being processed, refer to Section IV. B. 5. ("**Processing redeterminations for children of center employees**") of this bulletin.
- When the family requests care for more children than can be authorized, refer to Section IV. B. 6. ("**Family requests care for more children than can be authorized**") of this bulletin.

4. **Send notice to families**

If the authorization is approved, no special notice or text is required for families or providers.

Include the following comment on Service Authorization Denial notice to **families**:

“This provider cannot be authorized to care for additional children of employees at the center. You are still eligible for the Child Care Assistance Program. You may choose another child care
provider. If you need help finding a new child care provider, contact Parent Aware at 1-888-291-9811 or http://parentaware.org/. Once you choose a new child care provider, call your worker to let them know the new provider’s name, address and phone number. The new provider you choose must be registered with your county before payments can be made.”

Workers must print a copy of the page(s) of the PV107 report showing a center is authorized for 25 or more employees’ children to retain for the family’s case file each time they deny a child’s Service Authorization.

Note: Providers do not receive notice when workers deny Service Authorizations for specific children, nor are providers notified when their center is authorized for 25 or more employees’ children.

5. **Respond to family questions**

   See Section IV. B. 9. ("Family questions") of this bulletin.

6. **Protect data privacy when responding to provider questions**

   See Section IV. B. 10. ("Provider questions and data privacy") of this bulletin.

### V. Training and resources

#### A. Training opportunities

**Statewide in-person training opportunities**

DHS provided statewide outreach and in-person trainings for CCAP worker in March and April 2018 to cover Phase 4 policy changes.

#### B. Forms and other documents

1. **New forms and other documents for CCAP workers**

   DHS created the following resources for CCAP workers:

   - **PV107 CCAP Center Employee Report** – This report provides county, tribal, and state staff with information about employees’ children authorized at child care centers to help them determine if and when they can authorize care for children of center employees. **Agency staff must have access to view the report, which is based on their MEC² security role.** This report will be available beginning April 23, 2018.

   - **CCAP Worker’s Guide to the PV107: CCAP Center Employee Report (BOBI Report)** – This resource is posted on the Systems Information Resource (SIR), a secure website and can
only be accessed by county, tribal and state users who have been granted access. The guide provides information about how to access and use the PV107 Report.

2. Revised forms and other documents for parents

DHS plans to revise the following forms for parents:

- Minnesota Child Care Assistance Program Application (DHS-3550)
- Combined Application - Child Care Addendum (DHS-5223D)
- Child Care Assistance Program Redetermination Form (DHS-5274)
- CCAP Change Report Form (DHS-4794)
- Child Care Assistance Program Payments for Children of Center Employees – Questions and Answers for Parents (DHS-6960C)

3. Revised forms and other documents for providers

DHS plans to revise the following forms for providers:

- CCAP Child Care Provider Guide (DHS-5260)
- Minnesota Child Care Assistance Programs Licensed Center Provider Registration and Acknowledgment (DHS-5190)
- Minnesota Child Care Assistance Programs License Exempt Provider Registration and Acknowledgment (DHS-5191)
- Child Care Assistance Program Payments for Children of Center Employees – Questions and Answers for Providers (DHS-6960A)

DHS plans to discontinue the following forms and documents for providers:

- Child Care Assistance Program Payments for Children of Center Employees – Center Documentation Form (DHS-6960B) - OBSOLETE

C. Other tools and resources

CCAP policy manual

DHS plans to update the CCAP Policy Manual mid-April to reflect new policy. DHS will notify CCAP agencies when updates have been made.

VI. Legal References

Minnesota Statutes, section 119B.09, subdivision 9a
Minnesota Statutes, section 119B.097
Minnesota Statutes, section 119B.13, subdivision 1 (e) & (g)
Americans with Disabilities Act (ADA) Advisory

This information is available in accessible formats for people with disabilities by calling (651) 431-3809 (voice) or by using your preferred relay service. For other information on disability rights and protections, contact the agency’s ADA coordinator.
Attachment A – What to do if a parent does not report their child’s primary or secondary provider

A child is authorized with 2 providers*, but the parent has not reported the child’s primary or secondary provider to the agency by the deadline. What do you do?

- Both providers 20 hours or less?
  - Yes: Keep both SAs open, and maintain the same hours. Case note your action. If either the parent or a provider contacts CCAP to increase an authorization to above 20 hours biweekly: 1) confirm the child’s primary and secondary provider with the parent, and 2) only allow an authorization above 20 hours biweekly with the child’s primary provider.
  - No: Both providers over 20 hours?
    - Yes: Keep both SAs open. Reduce both SAs to 20 hours biweekly. Case note your action. Inform the parent that only one SA may be increased above 20 hours biweekly once they confirm the child’s primary and secondary provider.
    - No: One 20 hours or less, and one over 20 hours?
      - Yes: Keep both SAs open, and maintain the same hours. Case note the provider with more than 20 hours biweekly is primary and the provider with less than or equal to 20 hours biweekly is secondary.
      - No: Both providers over 20 hours?
        - Yes: Keep both SAs open. Reduce both SAs to 20 hours biweekly. Case note your action. Inform the parent that only one SA may be increased above 20 hours biweekly once they confirm the child’s primary and secondary provider.

*Do not count: a) legal non-licensed (LNL) providers, or b) providers with authorizations currently scheduled to close.
Scenario

- A parent receives MFIP and submits his CCAP application on December 1, 2018.
- The application is complete on December 8 and the worker processes the application that day.
- The parent has been working as a cook at the child care center where his child attends care since July 2, and he requests authorization back to July 2.
- The worker checks the PV107 report back to July 2.
- There are dates in that time frame when there were more than 25 center employees’ children authorized and times when there were less than 25 center employees’ children authorized.
- The worker must look at each date the parent requests care prior to approving the authorization.
- The worker can only authorize care for dates when less than 25 employees’ children were authorized, so they will need to open and close Service Authorizations in single actions, which may involve approving multiple short Service Authorizations (SAs).

How would this play out?

- **July 2 through August 22** – The PV107 shows 25 or more center employees’ children authorized, so SAs cannot be approved.
- **August 23 through August 30** – The PV107 shows fewer than 25 center employees’ children authorized, SAs can be opened and closed for these dates only as part of a single action.
- **August 31 through October 24** – The PV107 shows 25 or more center employees’ children authorized, so SAs cannot be approved.
- **October 25** – The PV107 shows fewer than 25 center employees’ children authorized, so SAs can be opened and closed for these dates only as part of a single action.
- **October 26 through November 28** – The PV107 shows 25 or more center employees’ children authorized, so SAs cannot be approved.
- **November 28 and beyond** – The PV107 shows fewer than 25 center employees’ children authorized, so SAs can be approved ongoing starting 11/28.