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Minnesota Department of **Human Services**

Minnesota Child Care Assistance Program (CCAP) Child Care Provider Guide

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LB1-0001 (3-13)

ADA5 (12-12)

This information is available in accessible formats for individuals with disabilities by contacting your county worker. For other information on disability rights and protections to access human services programs, contact the agency’s ADA coordinator.

Why Should You Read This Booklet?

This booklet is for you - the child care provider. It explains what you need to know to get payment from the Minnesota Department of Human Services (DHS) for families who get benefits from the Child Care Assistance Program (CCAP). We want to make this program work for you and the families we serve.

What is CCAP?

CCAP helps some low income parents pay for child care. These are parents or guardians who need child care because they are working or are preparing for work. Parents apply for child care assistance through their county. The amount of the assistance they receive is based on a number of factors including family size, the family's income, the age of the child or children, the type of child care and how many hours of care are needed.

If a family is eligible for assistance, the payment is made directly to the child care provider except in certain cases when child care is provided in the child's home. If care is provided in the child's home the payment is made to the parent, who then must pay the provider.

Self-employment and tax issues

Most child care providers are self-employed. That means you are responsible for the children in your care, keeping records, and paying taxes on your income. You must keep records of the children's attendance and all payments received from the family, from CCAP, and from any other sources that pay child care expenses for the family (see page 48 for resources). CCAP makes payments on behalf of the family, but CCAP is not your employer.

Why CCAP needs your Social Security Number or Federal Employer Identification Number (FEIN)

The Internal Revenue Service (IRS) requires CCAP to obtain your Social Security Number (SSN) or Federal Employer Identification Number (FEIN) to report what we pay you. The name you give CCAP must match your name with the IRS. We check your name and SSN or FEIN with the IRS. If your name and number are not valid, you will be subject to an IRS fine and you will not get payments from CCAP. You may also have to pay back any money you have been paid.

What CCAP tells the Internal Revenue Service (IRS)

CCAP keeps track of all payments made to providers. CCAP does not take any taxes from payments made to you. We report what we pay you to the IRS. We will send you a statement (IRS 1099-Misc) in January, showing how much we paid you during the previous year. You must report this income for tax purposes. Talk to a tax advisor if you need information about how to include this income and payments you get directly from the family on your tax forms.

General CCAP Provider Requirements

A family who gets help paying for their child care through CCAP chooses a child care provider. When a family chooses a provider that is not already authorized by CCAP, CCAP will send the provider the forms and information the provider needs to become authorized. The provider must meet certain requirements to be paid by CCAP. CCAP pays the child care provider on behalf of the family.

A child care provider must be authorized by the county where the family lives to receive child care assistance payments. If you want to be authorized in more than one county because you care for children from families who live in different counties, you must complete the registration process in each county where you wish to be authorized. CCAP will not pay a provider who lives in the same home as the child.

Authorization

A provider chosen by a family receiving or applying for CCAP must be authorized before payment can be approved. To be authorized a provider must:

- Be a legal provider (see pages 3 and 4)
- Sign the *Provider Acknowledgment* for your provider type (see pages 3 and 4) and provide the following information:
  - The rates, policies for child absences and holidays, any notice days required before a child ends care, and any required registration fees
  - If licensed, proof of license status
  - Proof of any accreditation or credential (see page 16) if the provider accreditation rate bonus is being requested.

There are additional requirements for authorization of legal nonlicensed (LNL) providers (see page 5).

Provider Types and CCAP Registration Requirements

There are different types of providers. Different provider types have their own *Provider Registration and Acknowledgement* forms and different requirements.

Licensed family child care providers and licensed centers

A licensed individual or a licensed center must have a valid child care license issued by a state or a tribe and provide child care services in the licensing state or in the area under the tribe's jurisdiction.

Use "Licensed Provider Registration and Acknowledgement" (DHS-5190-ENG) found on the DHS website at https://edocs.dhs.state.mn.us/lfserver/Public/DHS-5190-ENG

As of July 1, 2014, the Child Care Assistance Program will not make payments to a child care center if more than half the children at the center are children of the center's employees or live with center employees.

License exempt centers

Generally, any center providing child care must be licensed, but there are some exceptions. Minnesota Statutes, section 245A.03, subdivision 2, states the types of child care that do not have to be licensed. Some types of child care that do not have to be licensed include:

- Child care provided for a cumulative total of less than 30 days in any 12-month period
- Child care operated by a school whose primary purpose is to provide child care to school age children
- Recreation programs that are operated or approved by a park and recreation board provide social and recreational activities
- Programs operated by a public school for children 33 months or older
- Camps licensed by the commissioner of the Minnesota Department of Health.

Use "Licensed Exempt Provider Registration and Acknowledgement" (DHS-5191-ENG) at https://edocs.dhs.state.mn.us/lfserver/Public/DHS-5191-ENG

Legal nonlicensed providers (LNL)

Generally, anyone providing child care must be licensed, but there are some exceptions. Minnesota Statutes, section 245A.03, subdivision 2, states that the following types of child care do not have be licensed:

- Child care provided by a relative to only related children and/or child care provided to children from one family that is not related to the provider. "Related" means a spouse, a parent, a natural or adopted child or stepchild, a stepparent, a stepbrother, a stepsister, a niece, a nephew, an adoptive parent, a grandparent, a sibling, an aunt, an uncle, or a legal guardian. (Although a spouse, a parent, a natural or adopted child or stepchild, or a stepparent are "relatives" as defined by licensing, they are not eligible for CCAP payments because they are part of the CCAP family).
- Child care provided for a cumulative total of less than 30 days in any 12-month period.

Although the types of child care listed above do not have to be licensed, the following people cannot provide unlicensed care to any child not related to them (Minnesota Statutes, section 245A.03, subdivision 2(b)).

- A person who applied for a child care license, or who had a child care license, and who received a license denial, fine, or sanction that has not been reversed on appeal.
- A provider who, as a result of the licensing process, has a disqualification that has not been set aside or a provider who has a household member who, as a result of a licensing process, has a disqualification that has not been set aside.

To be paid by CCAP, a LNL provider must:

- Be at least 18 years of age.

AND

- Not be a member of the Minnesota Family Investment Program (MFIP) assistance unit or a member of the family applying for or receiving child care assistance.

AND

- Provide child care only to related children, and/or provide child care to children from a single unrelated family at one time. Related refers to the provider being a sibling, a step sibling, a niece, a nephew, a grandparent, an aunt, or an uncle.

AND

- Not live in the same household as the child receiving child care assistance.

Use "Legal Nonlicensed Provider Registration and Acknowledgement" (DHS-5192-ENG) at https://edocs.dhs.state.mn.us/lfserver/Public/DHS-5192-ENG

Licensed family and LNL providers cannot get CCAP for their own children or children in their family while they are providing child care or being paid to provide child care. They may get CCAP for their children when they are in other activities that meet CCAP requirements. The hours the provider receives CCAP for their own children must not overlap with the hours they provide child care.

Additional Requirements for LNL Providers

Background study

A required part of the registration process for LNL providers is a criminal background study. The LNL provider and all household members 13 and older (in some cases age 10 and older) must fill out the *Authorization for Background Study* form. Once the LNL provider has returned the signed *Authorization for Background Study*, CCAP will request information about the provider and the household members from the Bureau of Criminal Apprehension, any juvenile courts, and social service agencies. CCAP may charge you a fee to cover the cost of the background study, but the fee cannot be more than $100 a year. Minnesota Statutes, section 119B.125, subdivision 2 identifies the factors which would prevent the authorization of an LNL provider.

Training requirements

Before CCAP can pay LNL providers, the providers must have current First Aid and CPR training. Current First Aid and CPR training means that the effective date shown on a card or certificate of completion has not expired as of the date the provider registration begins. An individual approved to provide First Aid and CPR training must provide the training. If after one registration period a provider still serves children receiving CCAP, the provider must take eight hours of additional training in topics listed in the Minnesota Center for Professional Development Registry before the county will approve the next registration. Child Care Aware agencies coordinate and offer training that is listed in the Registry.

Several organizations provide training with approved trainers. Training courses may have costs.

- **Child Care Aware,** 1-888-291-9811 or www.childcareawaremn.org
- **American Red Cross,** 612-871-7676 or www.redcrosstc.org (non-metro chapters listed on the website)
- **Minnesota Safety Council,** 651-291-9150 or www.minnesotasafetycouncil.org
- **Local fire departments or community education offices.**

Other requirements

- If a family chooses an LNL provider, the family must sign an acknowledgment stating that the parent and the provider have reviewed the health and safety information provided by the county.
- The family must provide, and the LNL provider must obtain, an immunization record for each child to the provider within 90 days of beginning care. The family must give the provider updated immunization information when it is available.
- In addition to the authorization requirements of Minnesota Statutes, section 119B.125, LNL providers must obey state and local health ordinances and building and fire codes that apply to the place where child care is provided.
- The county must give health and safety material to LNL providers and refer these providers to the local Child Care Aware agency (see page 48).

CCAP Provider Registration and Authorization Process

To register, contact the county agency where the family you plan to provide care for lives. You must fill out the *Provider Registration and Acknowledgement* form for your provider type and return it and the forms listed on the *Provider Registration and Acknowledgement* to the county agency. Other forms that are part of the registration process include:

- "Child Care Provider Responsibilities and Rights" (DHS-4079)
- "Notice of Privacy Practices for Child Care Providers" (DHS-3985)
- "CCAP Authorization for Release of Background Study" (DHS-5193) (for LNL providers only)
- W-9-Request for Taxpayer Information.

You must also provide all of your written payment policies.

After you have filled out and returned the forms, CCAP will review them and tell you by mail whether you have been authorized. You cannot be paid for care you provide until both you and the family who has chosen you as their provider have been authorized. If you are denied authorization as a child care assistance provider, a parent may appeal the denial. If the parent appeals, we will tell you by mail. You have the right to appeal the denial of your authorization to district court.

When both you and the family have been authorized, CCAP will send a *Service Authorization*. The *Service Authorization* lists the number of hours of child care approved for each child, the maximum rates for each child, and the family's copayment amount.

A provider must be reauthorized every two years. An LNL provider must also be reauthorized when another person over the age of 13 joins the household, a current household member turns 13, or there is reason to believe that a household member has a factor that prevents authorization. In some cases, an LNL provider might need to be reauthorized when another person over the age of 10 joins the household or a current member of the household turns 10.

In-Home Providers

Selection of in-home provider

Providers can only be paid for child care provided in the child's home if it is approved by the Minnesota Department of Human Services (DHS). **CCAP does not pay providers who live in the same home as the child.**

Payments for child care in the child's home can only be made when:

- The child's parents work or go to school out of the home

  AND
- Child care out of the home is not available

  OR
- A child being cared for has an illness or disability that would make it difficult for the family to take the child to a child care home or a child care center.

If you think children in your care may qualify to have care provided in their own home, have the parent contact the county.

A CCAP family who is approved to have a child care provider care for their child or children in the family's home may be considered an employer of the provider. You should be aware of resources available about these legal rights and responsibilities. Parents are responsible for meeting any employer-related requirements when they choose a provider who will provide child care in the family's home.

CCAP payments are made to the family when the child care is provided in the child's home. The family must pay the provider. Counties will check with the provider, if needed, to make sure the payment is used for child care. The provider should contact the county if payment is not received timely from the family.

Because the family receives the payment and the Remittance Advice, an in-home provider must sign a release to let the family see information on the Remittance Advice (see page 44) about any amount being withheld from the payment for the provider and the reason for those withholdings (see page 40).

A 1099 form is issued by DHS to the in-home provider at the end of the year. CCAP payments will count as income to the provider.

Health and Safety Concerns

Unsafe Care

If a licensed provider's license has been temporarily immediately suspended or if there is an imminent risk of harm to the health, safety, or rights of a child in care with an LNL provider, a license exempt center, or a provider licensed by an entity other than the State of Minnesota, the county will deny or end the authorization of the provider.

If a provider's authorization is ended, CCAP will not make any payments for the time period after the effective date of the notice unless the reasons for the unsafe care have been resolved and the provider has been reauthorized.

Complaints against LNL providers

Within 24 hours of receiving a complaint about the health or safety of a child being cared for by a LNL provider, a county must report the complaint to:

- The child protection agency if the complaint alleges child maltreatment as defined in Minnesota Statutes, section 626.556, subdivision 10(e)
- The public health agency if the complaint alleges a danger to public health due to communicable disease, unsafe water supply, sewage or waste disposal, or building structures
- Local law enforcement if the complaint alleges criminal activity that may endanger the health or safety of children under care
- Other agencies that investigate complaints about the health and safety of a child if appropriate.

Copayments

What is a copay?

Families receiving CCAP may have to pay part of the cost of their child care. This portion of the cost is called a copay. The family's copay amount is based on their income and size of their family. The family owes you, the provider, their copay plus any amount you charge above the CCAP maximum rates. The *Service Authorization* (see page 22) and the *Billing Form* (see page 33) show the copay amount that will be deducted from the payment.

Both you and the family will know the copay amount in advance. If there is more than one provider, usually only one will collect the copay. The family tells their worker which provider is their primary provider. This is usually the provider who gives most of the child care. The family usually pays the copay to the primary provider.

It is your responsibility to collect the copay or make other payment arrangements with the parent. It is very important that you and the parent talk about the copay. It is up to you and the parent to decide how and when to collect the copay and other amounts CCAP does not pay. In working out the family's payment schedule, it may help to find out when the family gets paid.

What happens if the family does not pay the copay?

To stay eligible for child care the family must pay their copay or make other payment arrangements with you to pay their copayment. If they don't, you can circle "no" on the *Billing Form* where it asks if you have collected or waived the copay or if the parent has a payment plan.

If you circle "no" on the *Billing Form* or tell CCAP that the copay has not been paid, CCAP will send a notice to the family that their child care assistance case will close. CCAP must be notified by you or have other proof that the family has paid their copay or made arrangements to pay their copay to continue the family's assistance.

CCAP can end the family's assistance only for not paying the copay amount stated on the *Billing Form*. We cannot end the family's assistance for amounts the parent owes over the CCAP maximum rates or for other money the parent may owe you.

Other copay arrangements

A source other than the family may pay the family's copay or you may choose to waive the family's copay. This does not affect a family's eligibility for CCAP. If a source other than the family pays the family's copay, you must keep records of the payment source, amount, and time period covered by the payment for each family. If you waive a family's copay, you must keep records of the amount you waived and time period covered for each family.

Additional Provider Requirements

A provider must:

- Give CCAP their correct, valid SSN or FEIN
- Charge the family the same rate (or less than) they charge non-CCAP families
- Bill for the amount of care they provided
- Keep billing records and daily attendance records for each child in care for at least six years, and allow CCAP to review their records upon request
- Not bill a CCAP family for any amount collected by CCAP from the provider to recover a provider overpayment, or for any amount paid by CCAP to a creditor of the provider due to a lien, garnishment or other legal process.

Child care providers must maintain and make available on request the following records:

- Daily attendance records for all children receiving child care assistance. Attendance records must include:
  - Date of care
  - First and last name of each child in attendance
  - Times when each child was dropped off and picked up, which must be documented by the person dropping off and/or picking up the child.
- Records of charges and payments for all children in care.
- Proof of payments to you of a family's copayment made by a source other than the family. Document:
  - Payment source
  - Amount received
  - Time period covered.
- Proof of payments to you of part or all of a family's child care costs that CCAP cannot pay if the payment is made by a source other than the family. Document:
  - Payment source
  - Amount received
  - Type of expenses paid
  - Time period covered.

CCAP may ask to see these records or ask for copies of these records. The provider must make these records available as soon as is reasonably possible. A provider's authorization may be denied or ended if there is reason to believe the attendance records are not being kept. These records must be kept for 6 years after the day child care was provided. See the Resources section (page 48) for record-keeping and business resources.

A provider must report immediately to CCAP:

- If a child has been absent for more than seven consecutive days
- If a child ends care
- Any changes in information you previously provided in the *Provider Acknowledgment* including your address or phone number, rates, charges for absences and holidays, notice days required before a child ends care, and required registration fees
- Also, LNL providers must report all changes that require reauthorization (see page 6).

Licensed providers must report changes that may affect their license to their county licensing unit.

Parent, Provider, and County Communication

What can CCAP disclose about families?

The law allows CCAP to give limited information about families we serve once we have verified that you are the provider for that family.

We can tell you:

- The number of authorized hours for child care
- How much and how CCAP will pay you
- The amount the family must pay you
- The reason for any delay in payment.

A parent must sign a release to allow us to share any other information.

Notices to providers

You will receive a notice of any change to your provider authorization, or to a child's authorization, or a family's child care assistance if it affects the child care amount or the payment.

Notice to providers if a family's CCAP ends

When a family's child care assistance is closed, CCAP will send the provider a notice containing the following information:

- The family's name
- That child care assistance for the family is closing
- The day the case will close
- That CCAP payments will no longer be made for care provided after the closing date unless the family asks to continue receiving assistance during an appeal. The notice to a provider will not contain information on why payments will no longer be made.

The notice will be mailed to you at least 15 calendar days before the date of the action unless the family had appealed a negative action and loses the appeal.

Notice to providers of negative actions to families

CCAP will send you a notice of the following negative actions to families:

- A decrease in the hours of authorized care
- An increase in the family's copayment.

The notice will include the following information:

- The family's name
- A description of the action that does not contain information about why the action was taken
- The day the action is effective
- That unless the family appeals the action before the effective date, the action will occur on the effective date.

The notice will be mailed to you at least 15 calendar days before the date of the action unless the family had appealed a negative action and loses the appeal.

Notice to providers if a family stops using the provider

When a family stops using a provider but continues to receive assistance, CCAP will send the provider a notice containing the following information:

- The family's name
- That the family has decided to stop using that provider, and
- The day CCAP payments will end.

Notice to providers of negative actions to the provider

CCAP will send you a notice of the following negative actions to you:

- A denial of authorization of you as a provider
- An ending of authorization of you as a provider
- A decrease in the number of hours of care on a child's *Service Authorization*
- A finding that you have an overpayment.

The notice will include the following information:

- A description of the action
- The day the action is effective
- That unless a family appeals the action before the effective date or the provider appeals the overpayment, the action will occur on the effective date.

CCAP will mail the notice at least 15 calendar days before the date of the action unless:

- The family had appealed a negative action and loses the appeal
- You are a licensed provider whose license has been temporarily immediately suspended
- You are a LNL provider, a license exempt center, or a provider licensed by an entity other than the state of Minnesota, and CCAP believes that there is an imminent risk of harm to the health, safety, or rights of a child in care.

In these situations CCAP will send you a notice of termination that is effective the date of the action.

Other information

- Counties have up to 30 days to approve or deny an application, or up to 45 days with the family's consent. If you choose to care for a child before receiving a *Service Authorization*, you should collect payment from the family.
- A family must complete a redetermination every 6 months. The family is mailed a redetermination form. You (and the family) will get a 15-day notice if a family does not respond or if they are found ineligible.
- Families are informed that if they are changing providers, they must give a 15-day notice to you and to CCAP. CCAP will send you a notice telling you when your authorization ends. CCAP might not authorize care at a new provider until the end of this notice period if you require payment during the notice period. If you have other notice requirements, be sure to include these in a written contract with the family.
- Talk to the family's CCAP worker or another worker you have been told by the county to contact if you have questions about the *Service Authorization*.

- The notices sent by CCAP should contain enough information for you to know how much CCAP will pay for the care you provide to a family receiving CCAP. If the parent signs an agreement or contract agreeing to your policies, the parent is responsible for fulfilling that agreement. If your payment policies are different than CCAP policies, be sure to tell the family about any differences and what your policy is for collecting fees.
- If a provider is in violation of certain licensing or Child Care Assistance Program rules, counties may withhold authorizations or payments while in violation and for up to three months beyond the time the county determines the provider has corrected the violation.

What you should ask the parents

Before you provide care, you should have a *Service Authorization* (see page 22) to be sure the family is eligible for CCAP. If CCAP does not give you a *Service Authorization*, the family is responsible for the child care payment.

You should also ask families for other information you need to know, such as:

- What days and hours will the children be in care?
- What is the family's address and telephone number?
- What is the work telephone number for reaching a family member?
- Who else can you call in an emergency? What is that person's phone number?
- Who is allowed to pick up the children?
- When will the family pay their copay and/or share of the bill?

What providers and parents must do

Providers must:

- Fill out CCAP forms completely, accurately, and promptly return them
- Meet the provider requirements
- Treat CCAP families the same as other families for whom they provide care (This means providing the same services, not charging higher rates for CCAP families than other families, etc.)
- Provide healthy, safe and dependable child care.

Parents must:

- Remain eligible for child care assistance
- Pay their copay and/or share of the child care bill
- Inform their provider and their county worker when their schedule changes
- Report a change in provider at least 15 days before the change
- Report all other changes to their county worker within 10 days after the change
- Notify CCAP if a child authorized by CCAP attends preschool, Head Start, or any regularly scheduled program that may change the hours needed for child care.

Rates

CCAP has maximum rates that can be paid. CCAP can pay the provider's charge or the maximum rate, whichever is less.

CCAP maximum rates

A statewide child care provider rate survey is done every other year in Minnesota. The survey is done through Child Care Aware of Minnesota. All licensed family child care providers, licensed child care centers, and licensed school-age programs are included in the survey. The survey informs the state legislature about market rates. The state legislature sets the maximum rates.

Rates differ by county, type of provider, and age of the child. Rate types include hourly, daily, and weekly. Provider payments are based on the maximum rates in the county where the provider lives. If the care is provided in the child's home, the rate is based on the county where the family lives (where the care is provided). If the provider lives outside of Minnesota, rates are based on the maximum rates in the county where the family lives. LNL providers are paid on an hourly basis.

There are three types of maximum rates that can be paid to providers through the child care assistance program. The maximum rates are listed in three DHS documents. The rate paid to a provider caring for a child through CCAP cannot be higher than their typical private pay charge. For specific rates see the following documents available at http://edocs.dhs.state.mn.us:

- "Minnesota CCAP Standard Maximum Rates" (DHS-6441B)
- "Minnesota Child Care Assistance Program - 15 Percent Quality Differential Maximum Rates" (DHS-6442B). Programs that are accredited by some organizations, providers who hold certain professional credentials and those with a 3-Star Parent Aware rating are eligible for 15 percent higher rates for quality, not to exceed the provider's charge.
- "Minnesota Child Care Assistance Program 20 Percent Quality Differential Maximum Rates" (DHS-6824). Providers with a 4-Star Parent Aware Rating are eligible for 20 percent higher rates for quality, not to exceed the provider's charge.

For more information regarding quality differential rates, see the Higher Rates for Quality section (page 16). Age groups for determining maximum CCAP rates.

Age groups for determining maximum CCAP rates

Age groups that apply when making payments for family child care are established by Minnesota Statutes, section 245A.02, subdivisions 16 and 19, and are enforced by the Minnesota Department of Human Services - Division of Licensing.

The following age groups are for children in center child care:

Center Child Care	
Infant	6 weeks up to 16 months of age*
Toddler	16 months up to 33 months of age*
Preschool	33 months but not yet attending kindergarten*
School-age	Is at least of sufficient age to attend the first day of kindergarten within the next 4 months**

The following age groups are for children in family child care:

Family Child Care	
Infant	6 weeks to 12 months of age***
Toddler	12 months to less than 24 months of age
Preschool	24 months up to the age of being eligible to attend kindergarten within the next 4 months
School Age	Is at least of sufficient age to attend the first day of kindergarten within the next 4 months**

* A child may be designated as an "infant" up to the age of 18 months, a "toddler" up to the age of 35 months, or a "preschooler" at the age of 31 months for purposes of staff ratios, group size, and programming, if the parent, teacher, and center director determine that the designation is in the best interest of the child.

** CCAP's definition of child, Minnesota Statute, section 119B.11, subdivision 4, allows CCAP participation and payment for children through age 12 or age 14 if the child has a documented disability.

*** Care for a child less than 6 weeks of age in family child care or in the care of a LNL provider will be paid at the infant rate.

Age groups that apply when making payments for center child care are established by Minnesota Rules, chapter 9503 and are enforced by the Minnesota Department of Human Services – Division of Licensing.

Higher Rates for Quality

CCAP can pay up to **15 or 20** percent above the CCAP standard maximum rate, but not more than the provider's charge. The higher rate may be paid if the provider submits proof that they hold certain current early childhood development credentials, are accredited by an approved organization or have received a 3- or 4-star quality rating through Parent Aware.

The higher rate is available for both licensed and LNL providers. **The rates paid to a provider continue to be the lesser of the CCAP rates or the rate the provider charges all families.**

Links to the DHS documents listing the maximum rates with quality differentials can be found in the Rates section (page 14).

See the Resources section (page 48) for help with becoming accredited or getting credentialed.

Provider Credentials

CCAP can pay up to **15** percent above the CCAP standard maximum rate, but not more than the provider's charge, if the provider submits proof that they hold certain current early childhood development credential. Use the "Quality Differential Rate Request Form" (DHS-4795) to request the higher rate.

For licensed family child care providers or LNL providers, early childhood developmental credentials ONLY include:

- A Child Development Associate (CDA) credential (http://www.cdacouncil.org)
- A child development associate degree
- A diploma in child development from a Minnesota state technical college
- A bachelor's or a higher degree in early childhood education from an accredited college or university
- Completion of the Competency Based Training and Assessment Program (http://www.pla-inc.org/).

Each adult on a family child care license must have one of the listed credentials to get the higher rate. Licensed family child care providers and LNL providers are NOT eligible for the higher rate if they do not hold one of the above credentials, or they hold a credential other than the ones listed above.

Family child care providers can also receive a higher rate differential for holding certain accreditations (see Accreditation section below).

Accreditation

CCAP can pay up to **15** percent above the CCAP standard maximum rate, but not more than the provider's charge, if the provider submits proof that they are accredited by an approved organization. Use the "Quality Differential Rate Request Form" (DHS-4795) to request the higher rate.

Licensed and Licensed-Exempt Child Care Center Accreditations

Approved accreditations for early care and education programs (2014)*:

- Accredited Professional Preschool Learning Environment (APPLE), offered by the Florida Association for Child Care Management (FACCM)
- American Montessori Society (AMS) School Accreditation
- Association of Christian Schools International (ACSI) Accreditation

- Association of Montessori International – USA (AMI) – Montessori School Recognition
- Council on Accreditation (COA) – Early Childhood Education (ECE) Program Accreditation
- National Accreditation Commission (NAC) for Early Care and Education Programs Accreditation
- National Association for the Education of Young Children (NAEYC) Accreditation
- National Early Childhood Program Accreditation Commission Inc. (NECPA) Accreditation
- The NHSA Quality Initiative: Head Start Performance Excellence and Quality Recognition Program, offered by the National Head Start Association (NHSA)

Approved accreditations for school-age/after school programs (2014)*:

- Council on Accreditation (COA) – After school (ASP) & Youth Development (YDP) Program Accreditation
- Minnesota Afterschool Accreditation Program (MAAP), offered by the Minnesota School-Age Care Alliance (MNSACA)

* Accrediting organizations must apply to be considered for inclusion on the list of approved accreditations. Accrediting organizations must have their approval status reviewed and re-assessed every two years. The Department of Human Services will offer the opportunity for accrediting organizations to apply and be added to the list annually and will publish an updated list each year. The updated list is included on the "CCAP Quality Differential Rate Request Form" (DHS-4795).

Family Child Care Accreditations

There continues to be one accreditation for family child care providers to qualify for the 15 percent higher rate for quality, as provided in statute. This accreditation is not subject to approval and renewal. There is not currently a process to add or assess accrediting organizations for family child care providers.

Family child care providers can also receive a higher rate differential for holding certain credentials (see Provider Credentials section on previous page).

Approved accreditations for family child care providers:

- National Association for Family Child Care (NAFCC) Accreditation

Parent Aware 3- and 4-Star Rating

Parent Aware is Minnesota's Child Care Quality Rating and Improvement System. Highly-rated providers participating in Parent Aware are eligible for a higher CCAP rate.

- Providers who achieve a three-star Parent Aware rating will be paid up to 15% above the standard maximum rate, not to exceed the provider charge.
- Providers who achieve a four-star Parent Aware rating will be paid up to 20% above the standard maximum rate, not to exceed the provider charge.
- Family child care providers **and** child care centers are eligible for the higher rates.

Eligible providers will be automatically authorized to receive a higher maximum payment by DHS through the MEC² system within 30 days of rating.

Special Needs Rates

A special needs rate may be requested/approved when:

- The provider charges more only for a child with special needs
  OR
- The provider charges more but spreads the cost of caring for a child with special needs across all children in care. The higher rate may only be paid for the child with special needs.

It is the provider's responsibility to assure compliance with the Americans with Disabilities Act (ADA).

Special needs rates for individual children

A higher rate may be paid for children with special needs if the child requires a higher level of care for his or her age due to a physical, behavioral or medical disability. The disability must be documented, and the provider must explain why the child needs a higher than normal level of care, what their extra costs are, and what steps they have taken to meet those needs.

To ask for a special needs rate for an individual child the parent must:

- Complete the "CCAP Special Needs Rate Variance Request – Parent and Provider Request" (DHS-4194) https://edocs.dhs.state.mn.us/lfserver/Public/DHS-4194-ENG
- Include proof of the child's special needs due to a disability.

Special needs rates for children in an at-risk population

CCAP defines "at-risk" as challenges both inside and outside a child's home that make it harder for the child to achieve his or her full potential. These challenges could include a federal or state disaster, limited English proficiency in the family, a history or risk of abuse or neglect, family violence, homelessness, the age of the mother, the level of the mother's education, family mental illness, a developmental disability, or a parent's chemical dependency or other substance abuse. The at-risk population must be defined by the county that authorizes care and approved by DHS. Not all counties define at-risk populations. At-risk populations may be different in different counties.

A higher rate may be paid for a child in an at-risk population if the child requires specialized training, services, or environmental adaptations to meet the needs of the child or the at-risk population.

To ask for a special needs rate for children in an at-risk population, contact the county.

The provider must:

- Provide a description of the special training, services, or physical changes that will occur to meet the needs of the child or the at-risk population
- Provide an assurance that the rate they are asking for is the same rate they would charge for care of a child in the at-risk population in a family not receiving child care assistance, AND
- If appropriate, provide a statement explaining that the rate the provider charges for all children should be the special needs rate for the child in the at-risk population because the provider has spread the cost of caring for children with special needs across all families.

Absent Days and Holidays

Billing for absent days

The Child Care Assistance Program will pay for up to 25 absent days per calendar year, per child at a licensed provider or license exempt center. CCAP will not make absent day payments to legal nonlicensed (LNL) child care providers. The family is responsible for any absent days that CCAP does not cover. Children of parents under age 21 who do not have a high school diploma, and who attend certain child care programs, may qualify for an exemption from the 25-day limit and the 10 consecutive day limit. Contact the county if you serve high school students and offer specialized services to see if you qualify for this exemption.

Children with documented medical conditions or illnesses that cause more frequent absences may exceed the 25-day absent limit and the 10 consecutive day limit. Medical conditions or illnesses must be documented on "CCAP Medical Condition Documentation Form" (DHS-4602).

Licensed providers may bill CCAP for absent days if:

- The care was authorized by CCAP and scheduled by the parent, but the child was absent AND
- It is the provider's policy to bill all of their families for absent days AND
- The scheduled hours are identified in the provider's attendance records as an absent day AND
- The care is available.
- If a child is absent for part of a day, the payment for that day will be for the amount of care that is scheduled for that day but the day will not count toward the 25-day limit.
- Families and providers will be told the number of absent days used by each child on the *Service Authorization*. Additionally, the provider will be told the number of absent days used on the *Remittance Advice*. However, this information is only as current as the last bill submitted by the provider. If a child has more than one provider, or if *Billing Forms* are not submitted timely, it is possible that the number of absent days that have been used will be different than the information provided.

If a provider is aware that a child has stopped attending or has been absent for 7 consecutive days they should notify the family's CCAP worker immediately.

Billing for holidays

CCAP will pay a provider's charge for up to 10 federal or state holidays per year if:

- The provider is closed and not providing care AND
- The provider charges all families for these days AND
- The holiday falls on a day when the child is authorized and scheduled to be in attendance.

If care is available on the holiday, but the child is absent, count the day as an absent day.

The 10 recognized state and federal holidays are:

- New Year's Day (January 1st)
- Martin Luther King's Birthday (3rd Monday in January)
- Washington and Lincoln's Birthdays (3rd Monday in February)
- Memorial Day (last Monday in May)
- Independence Day (July 4th)

Registration Fees (see below)

- Labor Day (1st Monday in September)
- Christopher Columbus Day (2nd Monday in October)*
- Veterans Day (November 11th)
- Thanksgiving (4th Thursday in November)
- Christmas Day (December 25th)

*The day after Thanksgiving may be substituted for Christopher Columbus Day.

Other cultural or religious holidays may be substituted for the TEN recognized state and federal holidays if the parent or provider notifies the county of the substitution prior to or within ten days after the holiday.

CCAP cannot pay for more than TEN total holidays (recognized and/or substituted) per calendar year, per child. A county may limit holiday substitutions if approving the request would impact the family, such as when a second provider needs to be paid for that day.

If the provider's service is not available on the holiday the provider bills for but the family needs care from another provider on that day, only one provider may be paid.

CCAP cannot pay for provider vacation days, provider sick days, or any other days that child care is not available, other than for holidays.

Registration Fees

CCAP will pay a registration fee up to the maximum registration fee if a licensed provider or license exempt center charges the fee and the fee is not included in the provider's rate. Registration fees cannot be paid to LNL providers.

The family must pay for any part of the registration fee that is more than the maximum amount. The maximum child care registration fees are printed in a document called "Minnesota CCAP Maximum Child Care Registration Fees" (DHS-6443) https://edocs.dhs.state.mn.us/lfserver/Public/DHS-6443-ENG.

CCAP can pay for two registration fees per child in a 12-month period. Any additional registration fees are the family's responsibility.

If a registration fee is a refundable deposit, the provider must deduct the fee from the final bill at the time the family ends care. CCAP will track refundable registration fees.

Service Authorization

On the following page is an example of a *Service Authorization*. CCAP will send both you and the family a copy of the *Service Authorization*. This form provides information that you and the family need to know.

The *Service Authorization* will tell you:

- The start date – the first day you will be paid by CCAP to care for this child.
- The number of hours of care approved – this is the maximum number of hours of care that CCAP will pay for this child for each two-week time period.
- The age group of the child – this affects the rate that can be paid.
- The maximum rates that can be paid hourly, daily, and weekly for that age category.
- The total number of absent days that have been paid for that child in that calendar year as of the notice date.
- The copay amount that the family must pay you every two weeks. The copay may be a prorated amount for the first payment period if the care does not begin at the start of a CCAP service period.

The *Service Authorization* may or may not include information about a child's expected schedule. "Scheduled hours" means the days and hours during a service period that a child will attend child care as determined by the child care worker, the parent, and the provider based on the parent's verified schedules, the child's school schedule, and any other factors relevant to the family's child care needs. Contact the worker if you are unsure of a child's expected schedule.

Flexible schedules

Statements on the *Service Authorization* say that:

- The hours of child care that can be paid are based on the parent's and child's schedule. A family with a schedule that changes may be authorized for more hours of care than can be paid by the child care assistance program.
- Bill only for the time that the child has been scheduled to be in your care as agreed upon by you, the parent(s) and the child care worker. The family must pay for any care you provide not included in this schedule.

If a parent has a work schedule that does not have the same number of hours every week, the number of hours of care approved for a child on the *Service Authorization* may be a different number of hours that a parent is expected to work in a two week time period.

If you have a family with a schedule that changes, it is important that you work with the family and the family's CCAP worker so you know the number of hours that can be paid by CCAP.

- If the family needs less child care than what is authorized because the parent is scheduled to work fewer hours, CCAP may not be able to pay for this number of hours of care for a two-week period. You can only bill for hours the child is authorized and scheduled to be in care.
- If the family needs more child care than what is authorized because the parent is scheduled to work additional hours, do not bill for more hours than authorized without getting approval from the county.

Questions?

If you have any questions about the *Service Authorization* or the information provided on the *Service Authorization* call the family's CCAP worker or another county worker you have been told by the county to contact for more information.

Sample Service Authorization
DHS/TSS DIVISION
PO BOX 64965
ST. PAUL MN 55164-0965

July 19, 2012 11:07 AM

Provider ID: 22222
Case Number: 527858
ANGELES N ABILA

Adorable Learning Center
XXXXXXXXXXXXXXX
MINNEAPOLIS MN 55407-2444

Child Care Assistance Notice of Decision

This authorization may have important changes; please read it carefully. The children, dates or amount of the authorization may be changing or the authorization may be ending. If you have questions contact the Child Care Assistance worker indicated below.

The rate represents the most our county will pay for the age group shown. Listed below is the amount of child care authorized for a two week period.

This information is in effect June 25, 2012:

Child Name	Child ID	Authorization Starts	/ Ends	2wk Hrs Auth	Abs Days Used	Age Grp	Rate Type
ANGELES N. ABILA	17868	06-25-12	None	120	0	TD	MR

Age Group: IN=Infant, TD=Toddler, PR=Preschool, SC=School Age
Rate Type: MR=Maximum Rates, AC=Accredited, SN=Special Needs, SF=Special Facility

Listed below are the maximum rates we can pay for each Rate Type and Age Group:

Rate Type	Age Group	Effective	Hourly	Daily	Weekly
Maximum Rates	Toddler	06-25-12	7.53	64.15	213.47

The copayment amount is $0.00 effective June 25, 2012.

We will pay you by Electronic Funds Transfer.

Call the worker below if you need more information about this case.

WORKER: XXXXX XXXXXX TELEPHONE: (XXX) XXX-XXXX

This information is available in other forms to people with disabilities by calling your county worker. For TTY/TDD users, contact your county worker through the Minnesota Relay at 711 or (800) 627-3529. For the Speech-to-Speech Relay, call (877) 627-3848.

COPAYMENT INFORMATION

A copayment is the family's share of the total amount you charge for two weeks of child care services. The family must pay you their share every two weeks.

Listed above is the copayment amount the family must pay. If the amount listed is more than zero, you must collect the amount from this family every two weeks but the amount collected cannot exceed your total charges. If the amount is zero, the family does not have to pay you a copayment.

HOURS and RATE INFORMATION

The hours of child care that can be paid is based on the parent's and child's schedule. A family with a schedule that changes may be authorized for more hours of care than can be paid by the child care assistance program.

The rate listed on this notice is the highest hourly rate the county can pay for child care for the specific age group listed. You may only charge this rate for a CCAP family if it is the rate you charge to all families in your care.

You may not bill a county or a CCAP family more than your standard rate for a family who does not receive child care assistance. This is stated under Minnesota Law.

BILLING INFORMATION

You will receive a pre-printed Billing form. This is sent before the start of each 2 week service period. Complete the Billing Form after the last day of care for that 2 week period and return it within 10 days to the address provided.

Bill at the hourly, daily or weekly rate that you charge to all families in your care. However, we will only pay at the county maximum rate.

Bill only for the time that the child has been scheduled to be in your care as agreed upon by you, the parent(s) and the child care worker. The family must pay for any care you provide not included in this schedule.

ABSENT DAY INFORMATION

If the child is absent on a day that the child was scheduled to be in care, you may be paid under the absent day policy. The number of absent days that can be paid may be limited. If you bill for hours that the county cannot pay, you may need to pay back the money.

FUTURE CHANGE

We will notify you by mail if the number of hours or the amount that we will pay changes or the copayment amount changes.

Provider Charges

Providers determine the manner in which they charge for the child care they provide to families. Many providers charge in ways other than hourly, daily, or weekly. As an example, school age care is often charged using before-school or after-school session rates. The amount CCAP can pay depends on how many hours of care can be authorized based on the parent's activity and the child's need for care.

Providers should not need to change their billing practices. If the provider charge is $20 for an afternoon session, that is what the provider should charge and bill CCAP.

CCAP is able to authorize payment at the provider's rate, not to exceed the county maximum rate, for all hours of child care authorized for the family.

Providers may not charge CCAP families more than families not receiving child care assistance for the same services.

Billing for Child Care

About the *Billing Form*

You will receive a *Billing Form* for each family you provide child care for. The *Billing Form* will cover either two weeks or four weeks, based on the cycle you select. Each *Billing Form* can be used only for the time period stated on the form. A sample *Billing Form* is included on pages 33 and 34.

The *Billing Form* tells you:

- The time period covered by the *Billing Form*
- The copay amount (if any) that will be deducted
- The maximum authorized child care hours
- The names of the eligible children in the family and their age groups.

After you have provided care for the time period covered by the *Billing Form*, fill out the *Billing Form* and send it to the address indicated for processing and payment. Be sure to send the *Billing Form* in promptly. **All provider bills must be sent to CCAP within 60 days of the last date of service on the bill.** CCAP may pay a bill submitted after this 60-day limit only if the provider shows good cause for the delay. Each county defines good cause. CCAP cannot pay a bill submitted more than a year after the last date of service on the bill.

Providers who give false information on a *Billing Form* could be disqualified from receiving future CCAP payments and could face criminal charges.

General *Billing Form* guidelines

- Bill CCAP at your usual rates for the total amount of care provided.
  Note: If you charge different types of rates for the same child you must fill in each rate on a different line of the *Billing Form*.
- Fill in your total charge in dollars and cents (For example: $400.00). The total charge must equal the amount on the individual lines of the *Billing Form*.
- Mark any of the appropriate boxes that apply to you. This includes reporting a copay not paid.
- Have the parent sign and date the form if required by the county.
- You, the provider, must sign and date the form. You should not sign and date the form until after the last day of care in that billing period.
- Mail the *Billing Form* to the address indicated for processing and payment. **Do not send in the Billing Form until after you have provided all of the care for the time period covered.**
- Keep a copy of your completed *Billing Form* for your records.
- Providers who receive payments for CCAP children from other sources other than CCAP must track other payments. A "Child Care Assistance Program Financial Tracking Form" (DHS-5318) for the provider to use to help track and record third-party payments is available at https://edocs.dhs.state.mn.us/lfserver/Legacy/DHS-5318-ENG.

Billing for families who have flexible schedules

In most cases, you can bill and CCAP can pay for the full number of hours of care that have been authorized for a child. This number of authorized hours will be the number of hours of care on the *Service Authorization (*see pages 22 and 23). **However, if the number of hours of child care that a child needs changes often due to a parent's work schedule, a child's school schedule, or for another reason, CCAP may not be able to pay for all of the hours of care authorized for a child.**

Statements on the *Service Authorization* say that:

- The hours of child care that can be paid are based on the parent's and child's schedule.
- A family with a schedule that changes may be authorized for more hours of care than can be paid by the Child Care Assistance Program.
- Bill only for the time that the child has been scheduled to be in your care as agreed upon by you, the parent(s) and the child care worker. The family must pay for any care you provide not included in this schedule.

If a parent has a work schedule that does not have the same number of hours every week, the number of hours of care approved for a child on the *Service Authorization* may differ from the number of hours that a parent is expected to work in a two-week time period.

If you have a family with a schedule that changes, it is important that you work with the family and the family's CCAP worker so you know the number of hours that can be paid by CCAP.

- If the family needs less child care than what is authorized because the parent is scheduled to work fewer hours, CCAP may not be able to pay for this number of hours of care for a two-week period. You can only bill for hours the child is scheduled to be in care.
- If the family needs more child care than what is authorized because the parent is scheduled to work additional hours, do not bill for more hours than authorized without getting approval from the county. Billing for more hours than a child is authorized may cause your payment amount to be incorrect.

It is important that you work closely with the family and the child care worker in these cases so that you or the family do not receive an overpayment. Scheduled hours recorded on the *Billing Form* must reflect the specific hours and days that a child was actually scheduled and authorized to be in care. Do NOT split up hours to maximize payment. Knowingly entering false information on the *Billing Form* constitutes fraud, which may result in disqualification and/or criminal charges.

Absent day information on the *Billing Form*

Families and providers will be told the number of absent days used by each child on the *Service Authorization*. Additionally, the provider will be told the number of absent days used on the *Remittance Advice*. **However, this information is only as current as the last bill submitted by the provider.** If a child has more than one provider, or if *Billing Forms* are not submitted timely, it is possible that the number of absent days that have been used will be different than the information provided.

Filling out the *Billing Form*

See the sample *Billing Form* on pages 33 and 34. **The first page of the *Billing Form* tells you:**

- The name of the family
- The time period covered by the *Billing Form*
- A description of the codes you will use to fill out the *Billing Form*
- A place for you to sign and date the form
- A place for the family to sign and date the form, if required by the county
- A place for you to give information to the family's worker
- A place for the family's worker to give you information you need to know
- The worker's name and phone number.

You must sign and date the form to be paid. You should not sign and date the form, or have the parent sign and date the form, until after the last day of care in that billing period. By signing the *Billing Form*, you are stating that what you are billing for is correct.

The second page of the *Billing Form* gives you information on each child you care for from the family. This is where you fill out your charges and each child's schedule.

Age Group	Auth Hours	Unit Type	Nbr of Units	Unit Rate	Amount Billed	NSH fees	Reg Fees	Subtotal
Infant	80	H	80	16	$480	0	$50	$530

This section shows the child's name, the age group of the child, and the maximum authorized hours for the child. This is where you bill for the child care you provided.

If you believe the authorized hours are not enough to cover the number of hours that should be paid by CCAP, contact the family's CCAP worker or another worker you have been told by the county to contact for more information.

Unit type:

Fill in "H" if you are billing hourly, "D" if you are billing daily, or "W" if you are billing weekly. If you are not billing hourly, daily, or weekly, fill in "0" for other.

- Monthly or session rates would be "0". A monthly rate must be adjusted to cover the number of days of the service period.
- If you charge by the ¼, ½, or ¾ hour, you should use the "0" unit type and fill in the ¼, ½, or ¾ hour rate and the number of ¼, ½, or ¾ hour units.
- If you charge different types of rates for the same child, you must fill in each rate on a different line.

Number of units:

Fill in the number of the units you are billing for (that matches the "Unit Type") for the service period. The number of units must be a whole number.

- If you are billing hourly "H", put in the number of hours
- If you are billing daily "D", put in the number of days
- If you are billing weekly "W", put in the number of weeks.

- If you are billing in a way other than hourly, daily, or weekly "0", put in the number of units that fit with the way you bill.
  - A school-age provider might have a before and an after school session rate. If a child attends five mornings a week for two weeks the provider would fill in "0" unit type with "10" units. If a child attends five mornings and five afternoons a week for two weeks and the sessions are the same rate the provider would fill in "0" unit type with "20" units. If the morning and afternoon sessions are different rates the provider should use two lines on the *Billing Form*, one for each rate.
  - If a provider charges by the half-hour, the provider should use the "0" unit type and fill in the half-hour rate and the number of half-hour units.
  - If a provider charges monthly or in another way that is greater than the service period, the provider will need to adjust their charge to cover the number of days of the service period.

Unit Rate:

Fill in the amount that you charge for the "Unit Type" that you entered. This is the amount you charge for one unit.

Amount Billed:

Fill in the amount that you charge for all of the units of care. This is the "Unit Rate" multiplied by the "Nbr of Units."

Registration Fees:

Fill in any required registration fees that you charge.

Subtotal:

Fill in the total of the "Amount Billed" plus any "Reg Fees" for this child.

Copay Collected: Y/N	Waived: Y/N	Payment: Y/N	Copay: 27.00

This line tells you what the family's copay is. You should collect this amount from the family.

- Circle "Y" after "Copay Collected" if the family has paid you their copay.
- Circle "N" after "Copay Collected," "Waived," and "Payment Plan," to report that the copay has not been paid. **Do not circle these if the family paid the copay, but owes you for charges over the CCAP maximum rate.**
- If you do not charge the family their copay amount circle the "N" after "Copay Collected" and the "Y" after "Waived."
- If the family owes you their copay but you and the family have agreed to how and when they will pay you, circle the "N" after "Copay Collected" and the "Y" after "Payment Plan."

Total: $253.00

This line is where you fill out your total charge. This amount is the total of all of the charges that you billed on the lines above minus the copayment.

- **Do not include any amount in the "Total" that you have not billed for in the billing section.**

Daily Scheduled Attendance Record															
Beginning 06/25/12	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Total
	25							02							
Scheduled # of Hours	8	8	8	8	8			8	8	8	8	8			80
Attendance A=Absent H=Holiday				A				H							

This section has the daily calendar for the service period.

Scheduled Hours:

Fill out the number of hours that the child **was scheduled and authorized** to be in care for each day in the service period. **Due to rounding, this amount does not need to match the amount billed in the "billing" section if the provider bills by the ¼, ½, or ¾ hour. See page 30.**

- The hours the child was scheduled and authorized to be in care are based on the parent's and child's schedule. If the child attends care outside the hours authorized by CCAP, do not enter those hours on the *Billing Form*. Only enter scheduled hours that the child was scheduled AND authorized to be in care.
- Fill in the number of hours that the child was scheduled to be in care even if the child did not attend for all or part of the time scheduled.
- **The number of hours must be in full hours.**
  - If a child was scheduled to be in care for a partial hour, round the number up to the next full hour. (If the child was scheduled to be in care 7.5 hours, fill in 8 hours).
- **Do not enter more hours than the child was scheduled to be in care.**

If the number of hours entered in the "Daily Scheduled Attendance Record" section is greater than the number of hours authorized for the child, the payment may be incorrect.

A family with a schedule that changes may be authorized for more hours of care than can be paid by CCAP. Fill in the number of hours that the child has been scheduled to be in your care as agreed upon by you, the family, and the child care worker.

If the child was absent or you were closed for a holiday, fill in the number of hours that the child was scheduled to be in care that day.

Absent days and holidays:

Fill in an "A" for any day the child is absent for all scheduled hours that day or an "H" for any day you were closed for a holiday if the child was scheduled to be in care. If a child was absent for part of a day but attended for part of the day do not fill in an "A" (see "Absent Days and Holidays" on pages 18 and 19 for more information).

Billing and Scheduled Hours

The hours entered in the "Daily Scheduled Attendance Record" and the amount you bill do not need to match. You should bill at your usual rates for the total amount of authorized and scheduled care, even if you know that CCAP will not be able to pay in the same unit that you charge. In the "Daily Scheduled Attendance Record" you should fill in the number of hours that the child was authorized and scheduled to be in care for each day in the service period.

Example:
If you have a child who attends Monday through Friday from 8 a.m. to 1 p.m. and you charge a daily rate of $20.00 for any day the child is scheduled to be in care for more than 4 hours, fill out the *Billing Form* as follows:

Age Group	Auth Hours	Unit Type	Nbr of Units	Unit Rate	Amount Billed	Reg Fees	Subtotal
Infant	50	D	10	$20	$200		$200

Your charge is 10 days at $20.00 per day = $200.00.

Fill out the "Daily Scheduled Attendance Record" section:

Daily Scheduled Attendance Record															
Beginning 06/25/12	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Total
	25							02							
Scheduled # of Hours	5	5	5	5	5			5	5	5	5	5			50
Attendance A=Absent H=Holiday															

Rounding

If you charge families for child care in a unit smaller than an hour, you must fill out the top section of the second page of the *Billing Form* to reflect your actual charge, but you must round up to full hours in the "Daily Scheduled Attendance Record" section.

If you have a child who attends Monday through Friday from 8 a.m. to 3:30 p.m. and you charge the family for 7 ½ hours per day, fill out the *Billing Form* as follows:

Age Group	Auth Hours	Unit Type	Nbr of Units	Unit Rate	Amount Billed	Reg Fees	Subtotal
Infant	80	H	75	$6	$450		$450

Your charge is 7.5 hours x 10 days = 75 hours at $6.00 per hour = $450.00.

Although you are charging for ½ hours, you must fill out the "Daily Scheduled Attendance Record" section in full hours, rounding up:

Daily Scheduled Attendance Record															
Beginning 06/25/12	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Total
	25							02							
Scheduled # of Hours	8	8	8	8	8			8	8	8	8	8			80
Attendance A=Absent H=Holiday															

Your payment will be calculated based on the hours entered in the "Daily Scheduled Attendance Record" section, but will not exceed the amount that you billed in the "Billing" section. You should bill in the way that you charge all families.

If you have a child who attends Monday through Friday the first week and Monday through Thursday the second week from 8 a.m. to 3:30 p.m. and you charge the family for 7½ hours per day, fill out the *Billing Form* as follows:

Age Group	Auth Hours	Unit Type	Nbr of Units	Unit Rate	Amount Billed	Reg Fees	Subtotal
Infant	72	H	67	$6	$402		$402
		0	1	$3	$3		$3

Your charge is 7.5 hours x 9 days = 67.5 hours.

The top line of the section above shows your billed amount for 67 hours at $6.00 per hour = $402.00. The second line of the section above shows your billed amount for one ½ hour, listed as "0" (other), at $3.00. The total amount billed is $405.00.

Although you are charging for ½ hours, you must fill out the "Daily Scheduled Attendance Record" section in full hours, rounding up:

Daily Scheduled Attendance Record															
Beginning 06/25/12	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Total
	25							02							
Scheduled # of Hours	8	8	8	8	8			8	8	8	8	0			72
Attendance A=Absent H=Holiday															

Your payment will be calculated based on the hours entered in the "Daily Scheduled Attendance Record" section, but will not exceed the amount that you billed in the "Billing" section. **You should bill in the way that you charge all families.**

Sample Billing Form
DHS/TSS Division
PO Box 64965
SAINT PAUL MN 55164-0965

July 23, 2012 10:33 AM

Provider ID: 100988
Case Number: 528010
XXXXXX XXXXX

Ken's Nice Care Center
XXXXXXXXXXX
HINCKLEY MN 55037-0079

Child Care Assistance Billing Form

This billing is only valid for care given from: 08/06/12 - 08/19/12.

Complete the billing areas for each child AND complete the daily scheduled attendance record. Completed billing forms should be returned to the address in the upper left corner.

See the provider guide for details.

REFERENCES
* Unit Type: H=Hourly D=Daily W=Weekly O=Other
* Attendance Codes: A=Absent Day H=Holiday

I certify the following child care billed is correct. I know I am responsible for collecting any copay amount owed from the family. I understand that if the family fails to pay their copay the family may be ineligible.

I understand that I must submit all billing forms within 60 days of the date child care was provided or the payment may be denied.

Signature of Provider:_____ Date:_____

I certify the following child care billed is correct.

Signature of Parent: _____ Date:_____

_____Provider Comments_____
|
|
|
|_____|

Call the worker below if you need more information about this case.

WORKER: XXXXXXX XXXXXXXXX TELEPHONE: (XXX) XXX-XXXX

This information is available in other forms to people with disabilities by calling your county worker. For TTY/TDD users, contact your county worker through the Minnesota Relay at 711 or (800) 627-3529. For the Speech-to-Speech Relay, call (877) 627-3848.

Provider ID: 100988-Ken's Nice Care Center
Case Number: 528010-XXXXXX XXXXX

BILLING FORM

Child Name: XXXXXXX XXXXX
Service Period: 08/06/12 to 08/19/12

Age Group	Auth Hours	Unit Type	Nbr of Units	Unit Rate	Amount Billed	Reg Fees	Sub-Total
School Age	80						

Copay Collected: Y / N Family Copay: 0.00
Waived: Y / N Payment Plan: Y / N Total:

Daily Scheduled Attendance Record

Beginning	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Totl
08/06/12	06							13							
Scheduled # of Hours															
Attendance A=Absent H=Holiday															

Electronic Billing with MEC² PRO

MEC² is the computer system that Minnesota's counties use to administer CCAP. It helps counties in determining family eligibility and making payments to child care providers.

MEC² PRO is an online billing tool that works with MEC². It allows providers to submit bills using a secure internet connection. In addition to allowing providers to submit bills electronically, it:

- Allows providers to view the status of their CCAP Service Authorizations and payments online
- Reduces paperwork and mailing costs, and
- Increases payment timeliness.

To use MEC² PRO, providers need a computer and an internet connection. However, not all counties use MEC² PRO. In addition, counties that use MEC² PRO can choose which providers they want to enroll.

Contact the county where you are registered to find out whether MEC² PRO is an option for you.

Payments

CCAP will pay:

- For the scheduled and authorized hours of child care
- Up to the DHS maximum rates
- Minus the family's copay amount.

CCAP will not pay:

- More than your bill
- For more care than the scheduled and authorized hours
- For more than the CCAP maximum rates
- For provider vacation days, provider sick days, or any other days that child care is not available, other than for holidays.

The amount paid is based on:

- The county where care is provided
- The age of child
- The type of provider
- The number of hours of child care that are authorized
- The schedule of when care is needed.

Payment rules

All providers

- The number of hours of care paid cannot exceed 120 hours in two weeks, per child for all authorized providers.
- If a family chooses a provider who charges more than the amount CCAP can pay, the family must pay the additional amount.
- Once the maximum allowed payment is calculated, the copay is deducted from the total.
- CCAP can pay the provider's charge or the county's maximum rate, whichever is less.

Legal nonlicensed providers (LNL)

- LNL providers only can be paid by the hour.
- CCAP cannot pay for more than 10 hours of care in one day.
- CCAP cannot pay for more than 50 hours of care in one week.

Licensed family child care providers, licensed centers, and license exempt centers

- CCAP will pay up to the maximum weekly rate, if the child is authorized and scheduled for more than 35 hours per week with a single provider.
- CCAP will pay up to the maximum daily rate, if the child is authorized and scheduled for 35 hours or less per week and more than 5 hours in one day with a single provider.
- CCAP will pay up to the maximum hourly rate, if the child is authorized and scheduled for 35 hours or less per week and 5 or less hours in one day with a single provider.
- CCAP can never pay more than the maximum weekly rate to a single provider for one week of care.
- For child care paid using the daily rate, a full day is counted as 10 hours of care.
- For child care paid using the weekly rate, a week is counted as 50 hours of care.

Payment rules examples

You should submit your bill in the way that you would bill all families you provide care for.

In all of these examples, you would fill out the hours in the "Daily Scheduled Attendance Record" section with the number of hours the child was authorized and scheduled to be in care for each day of the service period. CCAP will calculate your payment to be the maximum that can be paid – not to exceed your charge.

1. **An LNL provider bills for 93 hours of care in a two-week period:**
   Example – During the first week of the service period, the child is authorized and scheduled to be in care for a total of 33 hours (11 hours a day, Monday through Wednesday). During the second week of the service period, the child is authorized and scheduled to be in care a total of 60 hours (10 hours per day, Monday through Saturday).

Fill out the *Billing Form*:

Daily Scheduled Attendance Record															
Beginning 06/25/12	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Total
	25							02							
Scheduled # of Hours	11	11	11	0	0			10	10	10	10	10	10		93
Attendance A=Absent H=Holiday															

CCAP will pay a total of 80 hours (30 hours for the first week and 50 hours for the second week). For the first week, payment is capped at 30 hours. This is because CCAP cannot pay LNL providers for more than 10 hours of care in one day. For the second week, payment is capped at 50 hours. This is because CCAP cannot pay LNL providers more than 50 hours in one week.

2. **A licensed provider or license exempt center bills for 90 hours in a two-week period:**
   Example – During the first week of the service period, the child is authorized and scheduled to be in care for a total of 60 hours (15 hours a day, Monday through Thursday). During the second week of the service period, the child is scheduled to be in care a total of 30 hours (15 hours per day, Monday and Tuesday).

Fill out the *Billing Form*:

Daily Scheduled Attendance Record															
Beginning 06/25/12	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Total
	25							02							
Scheduled # of Hours	15	15	15	15	0			15	15	0	0	0			90
Attendance A=Absent H=Holiday															

CCAP will pay one weekly rate and two daily rates. For the first week, payment is capped at the weekly rate. This is because the child was authorized and scheduled to be in care for more than 35 hours. CCAP cannot pay more than the weekly rate, even when a child is authorized and scheduled for more than 50 hours of care in one week. For the second week, payment is capped at two daily rates. This is because the child is scheduled and authorized for 35 hours or less in the week but more than 5 hours in each day. CCAP cannot pay more than the daily rate, even though the child was scheduled to be in care for more than 10 hours each day.

3. **A licensed provider or license exempt center bills for 70 hours in a two-week period:**
   Example – During each week of the service period, the child is authorized and scheduled to be in care for a total of 35 hours (7 hours a day, Monday through Friday).

Fill out the *Billing Form*:

Daily Scheduled Attendance Record															
Beginning 06/25/12	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Total
	25							02							
Scheduled # of Hours	7	7	7	7	7			7	7	7	7	7			70
Attendance A=Absent H=Holiday															

In most cases, CCAP will pay 10 daily rates. This is because the child was authorized and scheduled to be in care for 35 hours or less in each week, but more than 5 hours in each day. However, if the weekly rate is less than 10 daily rates, payment would not be more than the weekly rate. CCAP will never pay more than the maximum weekly rate to a single provider for one week of care.

Additional Payment Information

After you have provided the care and mailed in your *Billing Form*, your *Billing Form* will be processed. Counties have up to 30 days to process *Billing Forms,* when you submit a bill within 10 days of the end of the billing period. Once the bill is processed, payments are generated nightly. If you care for more than one family from one county, a payment could cover more than one *Billing Form*. If a *Billing Form* is incomplete or incorrect, it may be sent back to you. This could delay the processing of your billing and your payment.

When CCAP makes a payment, a *Remittance Advice* is sent to the provider. The *Remittance Advice* gives you the details about the payment that you received. Please keep this notice for your tax records.

Electronic funds transfer (EFT)

EFT/direct deposit will be available for all payments and is encouraged for all providers. In most cases, you will receive your money faster by using EFT. You won't have to wait for a check to arrive in the mail. With EFT, the money will be deposited automatically into your account.

Why should I use EFT?

EFT is safe, reliable, and easy to use. With EFT, you will get your money safely and quickly. EFT not only saves you time and effort, it also saves tax dollars. EFT costs the state less money than printing and mailing paper checks.

How will I know how much money has been deposited into my account?

With EFT, you will no longer be mailed paper checks. You will be mailed a Remittance Advice that details what you've been paid each billing cycle.

To sign up for EFT, use:

"Direct Deposit for the Minnesota Child Care Assistance Program" (DHS-3552) https://edocs.dhs.state.mn.us/lfserver/Legacy/DHS-3552-ENG.

You can get this form from a CCAP worker or from the internet.

Deductions from your payments

If you have an overpayment (see page 46) a certain amount will be deducted from each of your CCAP payments until the overpayment is paid.

If you owe money for state or federal taxes or for child support, CCAP is required by law to take a certain amount from each of your CCAP payments until the amount is paid. CCAP will be told by the Minnesota Department of Revenue, the IRS, or the court that we must take money from your payments and they will tell us how much we need to take. This amount will be sent to the agency you owe. They also will tell us when we can stop taking money from your payments.

If the SSN or FEIN that you give CCAP is not correct, the IRS will tell us and then we must deduct part of your CCAP payments for backup withholding taxes for both the IRS and the MN Department of Revenue.

You cannot charge families more to cover any deductions from your payments.

If you have problems with your payment

Contact a CCAP worker in the county where the family or families live if you did not receive a payment or have questions about a payment.

If you lost the check or the county tells you that a payment was sent by check and you did not receive it, you must fill out the "Nonreceipt/Replacement Affidavit" (DHS-1609) https://edocs.dhs.state.mn.us/lfserver/Public/DHS-1609-ENG and give it to a CCAP worker in the county where the family or families live. You can get this form from a CCAP worker or from the internet.

If you receive a check that is damaged

If you receive a check that is so badly damaged that it cannot be cashed, contact the county where the family lives and ask for a new check.

The check number, date, and amount must be readable to replace a check.
A new check will be sent one to three days after the county processes your request.

Check (Warrant)

A sample of a *Warrant* is included on page 43. The *Warrant* provides basic payment information. You will not receive a *Warrant* if you get your payment through EFT/direct deposit. The *Warrant* will be mailed separately from the *Remittance Advice*. The *Warrant* cannot be forwarded to a different address. If you move, you must tell a CCAP worker your new address or you may not get your payment.

Remittance Advice

A sample *Remittance Advice* is included on pages 44 and 45. The *Remittance Advice* will be mailed separately from the *Warrant*. The *Remittance Advice* gives you the details about the payment that you received. The *Remittance Advice* lists the children whose care is included in the payment, the type of service being paid, the age group of the child, the dates of service, the type and number of units being paid, the payment rate, the amount paid for each child, the family's copayment, the amount paid for each family, any provider deductions, and the total payment.
Please keep this notice for your tax records.

STATE OF MINNESOTA

WARRANT No. 60002000

DHS Child Care
P.O. Box 64583
ST. Paul, MN 55164-0583

Child Care Center
1000 10TH AVE N
BROOKLYN PARK, MN 55555-1234

Advice Stub

Payment Date: 10/10/2007
Payment Type: Original

Fin. Resp Agency: Hennepin County
Provider Name: Child Care Center
Provider ID: 2319
Payment ID: 600000888
Total Trans: 8

Gross Payment: $ 2,616.49

Net Payment: $ 2,616.49

DETACH ALONG PERFORATION

THIS WARRANT HAS A GOLDMED BACKGROUND ON WHITE PAPER AND MICROPRINTING IN THE AMOUNT BOX

STATE TREASURER-DEPARTMENT OF FINANCE

STATE OF MINNESOTA

No. 60002000

PAY TO THE ORDER OF

Two Thousand Six Hundred Sixteen Dollars and 49 Cents
2319
600000888

Date: 10/10/2007

$ ****2,616.49

Child Care Center
4666 85TH AVE N
BROOKLYN PARK, MN 55443-1957

Void After 01/07/2008

void STATE TREASURER void COMMISSIONER OF FINANCE

⑆09600096 2⑈ 6000 2000⑈

Sample Remittance Advice

DHS/TSS DIVISION
PO BOX 64965
ST. PAUL MN 55164-0965

October 12, 2012 7:40 AM

Provider ID: xxxx

Child Development Center
xxxx xxTH AVE N
BROOKLYN PARK MN 55443-1957

CHILD CARE ASSISTANCE PAYMENT

Payment ID: 600000888
Total Amount: $1071.89

The payments listed on the following pages were made on behalf of the child care assistance family(ies). Please check this information to make sure it is correct.

Financial Responsible Agency: Hennepin
Telephone: xxx-xxx-xxxx

REFERENCE CODES FOR REMITTANCE ADVICE

Service Type Code:
* SS=Services
* RF=Registration Fee
* SP=Supplemental Payment
* RC=Rate Change
* CC=Correct and Reissue Copayment
* OT=Other

Age:
* IN=Infant
* TD=Toddler
* PR=Preschool
* SC=School Age

Rate:
* WK=Weekly
* DA=Daily
* HR=Hourly

MINNESOTA CHILD CARE ASSISTANCE PROGRAM
Provider/Family Remittance Advice

Date Issued: 10/10/2012
Provider: Child Development
Site Address: xxxx xxTH AVE N
BROOKLYN PARK MN 55443

Payment ID: 600000888
Warrant #: 757
EFT #: <Not Found>
Total Amount: $2616.49
Fin Resp Agency: Hennepin
Contact Number: xxx-xxx-xxxx

Provider ID: xxxx

Name: DEBBIE A xxxxxx
Case: 421806

Transaction ID: 1799
Servicing Agency: Hennepin
Contact Number: xxx-xxx-xxxx

CHILD	TYPE	AGE	SERVICE DATES	UNIT/RATE	Amount	Abs Used
Taylor xxxxxxxx	SS	PR	9/24-10/07/12	40 @ 5 Hour	200.00	1
Riley xxxxxxxx	SS	TD	9/24-10/07/12	2 @ 150 Week	300.00	0
Robert xxxxxxxx	SS	IN	9/24-10/07/12	2 @ 200 Week	400.00	5

Family Biweekly Copay: -100.00
Total Family Payment: $800.00

Comments:

Name: BETTY B xxxxxxx
Case: 422142

Transaction ID: 1805
Servicing Agency: Hennepin
Contact Number: xxx-xxx-xxxx

CHILD	TYPE	AGE	SERVICE DATES	UNIT/RATE	Amount	Abs Used
Billy B xxxxxxxx	SS	IN	8/01/01-8/12/12	3 @ 33.43 Day	100.29	10
Billy B xxxxxxxx	SS	IN	8/01/01-8/12/12	1 @ 145.60 Week	300.00	10
Billy B xxxxxxxx	RF	IN	8/01/01-8/12/12	0 @ 0	53.00	10

Family Biweekly Copay: - 27.00
Total Family Payment: $ 271.89

Comments:

Gross Payment: $ 1071.89
Claim Recoupment: 0.00
IRS Levy: 0.00
State Levy 0.00
TIN Levy 0.00
Child Support: 0.00
Net Payment: $ 1071.89

Overpayments, Disqualifications, and Appeals

Overpayments

If a family or provider is paid more child care assistance than they should have been paid, that amount is considered an overpayment. An overpayment must be recovered even when the overpayment was due to a CCAP error or to circumstances outside the control of the family or provider.

An overpayment must be recovered from the family if the family benefited by paying less for child care expenses than they should have paid under CCAP requirements.

An overpayment must be recovered from a provider if the overpayment did not benefit the family, but benefited the provider by causing the provider to receive more child care assistance than the provider would have been paid under CCAP requirements.

If a provider with an overpayment continues to care for children receiving child care assistance, the overpayment must be recovered by decreasing the provider's CCAP payments. The provider may not charge families more to cover the cost of the overpayment. If the provider no longer cares for children receiving child care assistance, CCAP will ask the provider to repay the overpayment. If the provider does not agree to repay the overpayment, CCAP will begin civil court proceedings to recover the overpayment unless the costs to recover the overpayment are more than the overpayment.

A provider with an overpayment is not eligible to care for children receiving child care assistance until:

1. The overpayment is paid in full, or
2. Arrangements are made to pay the overpayment.

When both the family and the provider acted together to cause the overpayment, both the family and the provider are responsible for the overpayment no matter who benefited from the overpayment.

A provider who has been charged with an overpayment may request a fair hearing to deny responsibility for the overpayment and/or to object to the amount of the overpayment.

Disqualifications

A provider caring for children receiving child care assistance is disqualified from receiving CCAP payments when the provider is found to have wrongfully obtained child care assistance:

- By a federal court
- By a state court
- By an administrative disqualification hearing determination or waiver
- Through a disqualification consent agreement
- As part of an approved diversion plan under section 401.065, or
- Through a court-ordered stay with probationary or other conditions.

The disqualification periods are:

- 1st offense is for 1 year
- 2nd offense is for 2 years

Any subsequent offense results in permanent disqualification.

Appeal rights

An appeal is a legal process where a third party reviews a decision made by CCAP. You may appeal a decision if you are unhappy with an action taken by CCAP.

There are two ways you can appeal

- If you are charged with an overpayment, you may appeal the overpayment to a human services judge. You must appeal within 30 days from the date you received the notice of overpayment by sending a letter saying you do not agree with the overpayment. You can send this letter to the county agency or directly to the State Appeals Office. If you show "good cause" for not appealing within 30 days, the agency can accept your appeal for up to 90 days from the date you received the overpayment notice. "Good cause" is when you have a good reason for not appealing on time. The human services judge will decide if your reason meets the requirements for good cause. You can ask to meet informally with the county to start to try to solve the problem, but this meeting will not delay or replace your right to an appeal. You may represent yourself at the hearing, or you may have someone (an attorney, relative, friend or another person) speak for you.

  Write: Minnesota Department of Human Services
  Appeals Office
  P.O. Box 64941
  St. Paul, MN 55164-0941
  OR

  Call: Metro: 612-431-3600 (Voice)
  Outstate: 800-657-3510
  TTY/TDD: 800-627-3529
  Fax: 651-431-7523

- **If you are unhappy with any other action taken,** you may appeal to district court. You may represent yourself at the hearing, or you may have an attorney represent you.

Access to free legal services

You may be able to get legal advice or help with an appeal from your local legal aid office. To contact your local legal aid office call:

Hennepin.....612-334-5970

Ramsey.....651-222-4731

All other Minnesota counties...888-354-5522

Resources and Other Information

eDocs

eDocs is a web-based document storage area that provides access to Minnesota Department of Human Services (DHS) forms and documents. Anyone who has Internet access and has a current version of Adobe Acrobat Reader can use eDocs. eDocs can be found at http://edocs.dhs.state.mn.us.

Child Care Aware Agencies

In addition to being a resource for information about CCAP, these 19 regionally based agencies provide important services to providers and parents, including:

- Child care referrals and consumer education for parents seeking child care. This information is available for free. It is based on information collected from providers.
- Professional development on DHS-approved topics by qualified trainers on such topics as first aid, health and safety, child development, business practices, and more. A six-month training catalog is available every January and July.
- Consultation and technical assistance on challenges such as recruiting and assisting new licensed family child care providers; using the Quality Coaching Model when serving at-risk children; accessing the USDA Child Care Food Program.
- The Child Care Aware Statewide Network website: www.childcareawaremn.org has information in multiple languages.
- Grants to family child care providers (both licensed and legal nonlicensed) and centers for training, program improvements and equipment/materials. More information is available by calling 651-290-9704, ext. 108, or 866-807-6021, or visiting www.childcareawaremn.org.
- Outreach/access with other early childhood and school-age initiatives to ensure all families have access to Child Care Aware services and to develop child care services as needed in the community.
- Work with refugee and immigrant populations to ensure access to early childhood services and to develop culturally appropriate child care and training.
- Provide information to family, friend and neighbor (FFN) caregivers on health/safety, health/safety kits, training, and grants and connect providers with community services.
- Information collection on the supply of child care providers in Minnesota, and conducting an annual Market Rate Survey for the Department of Human Services.

Contact your local Child Care Aware agency for more information. You can reach your local agency online at www.childcareawaremn.org or call 888-291-9811.

Parent Aware: Minnesota's Quality Rating System

Designed by child care providers, early learning professionals and parents, Minnesota's voluntary Parent Aware Rating Tool is intended to support children by creating a provider rating system. The rating system is designed to recognize and support early educators for the quality of care they deliver and build on this quality by supporting their efforts at program improvements. Parent Aware is built upon the understanding that providing high quality child care and early learning experiences are not easy tasks, and the pressures placed on providers are many.

Parent Aware is expanding and will be available statewide by 2015.
To find out when it will be available in your county and for more information, visit http://www.parentawareratings.org/.

Resources to help get national accreditation

Providers can get help to become accredited from the Accreditation Facilitation Project. Providers may get information about this program by calling 800-711-5690 or 651-646-4514.

Reimbursement for one-half of the direct cost of child care center and family child care accreditation may be available. Contact Child Development Services at the Minnesota Department of Human Services at 651-431-3865 or by e-mail at dhs.child.care@state.mn.us for more information.

Local Child Care Aware programs may have grant dollars available that could help with the accreditation process. Contact your local Child Care Aware agency for more information. You can reach your local agency by calling 888-291-9811 or at www.childcareawaremn.org.

Obtaining credentials and degrees

Provider scholarships for credit-based education and/or a national CDA credential are offered by the Child Care Aware network, T.E.A.C.H. Early Childhood® Program at 651-290-9704, ext. 108, or toll free at 888-308-3224 or at www.childcareawaremn.org.

R.E.E.T.A.I.N.
(Retaining Early Educators Through Attaining Incentives Now)

The goal of R.E.E.T.A.I.N. is to lower the turnover rates among child care providers who work with young children. R.E.E.T.A.I.N. provides incentive grants to eligible child care providers. Grant dollars are a wage supplement and can be used at the discretion of the recipient. For more information call 651-290-9704, ext. 108, or 888-308-3224, or visit www.childcareawaremn.org.

Minnesota Early Childhood and School-age Professional Development System

DHS, along with the Minnesota Departments of Education and Health, has set up a system of professional development for people working with children and youth in child care and other early childhood and school-age settings. This system, through the work of the Child Care Aware agencies and the Minnesota Center for Professional Development, provides information and training on child/youth development, quality care, licensing requirements, training and trainer approval, credentials and certifications and college degrees. Information and resources for providers are available on the Minnesota Center for Professional Development's website: http://www.mncpd.org or by calling toll-free 855-378-3131 and at the Minnesota Child Care Aware Network office at: www.childcareawaremn.org or by calling 888-291-9811.

Professional development resources

The Minnesota Center for Professional Development's website is the central online site that brings together information on the current Minnesota Professional Development System such as: a training calendar that lists training offered statewide; career guidance to help with professional development and job possibilities; a registry system that can track training taken and provide individual learning records; professional development training and financial support offered through Child Care Aware agencies; as well as professional resources for both child care providers and trainers.

National Association of Family Child Care

This association provides information and resources to family child care providers on business-related issues. More information is available at http://www.nafcc.org/.

Resources for in-home child care providers

U.S. Department of Labor Fact Sheets #14, Coverage Under the FLSA, and #23, Overtime Pay Requirements of the FLSA, provide a summary of the minimum wage and overtime laws. These Fact Sheets are available at http://www.dol.gov/whd/.

Record Keeping and Taxes

First Children's Finance has tools posted online to help organize records you may need to complete your taxes. This website includes other tools such as contracts and policies. Resources are available at www.firstchildrensfinance.org.

Brochures

Caring for Children (DHS-4723)
This is a child care resource guide that helps parents in immigrant and refugee families find and use child care in Minnesota. It helps parents and child care providers get children ready for school. This brochure is available in 11 languages.
https://edocs.dhs.state.mn.us/lfserver/Legacy/DHS-4723-ENG

Do you need help paying for child care? (DHS-3551)
This brochure for families provides basic child care information and explains the basic program requirements of the Child Care Assistance Programs.
https://edocs.dhs.state.mn.us/lfserver/Public/DHS-3551-ENG

Your Growing Child brochure – age 1 through 3 months (DHS-2688)
This brochure offers helpful tips on the development and health care of children ages 1 through 3 months.
https://edocs.dhs.state.mn.us/lfserver/Public/DHS-2688-ENG

Your Growing Child brochure – age 4 through 5 Months (DHS-2689)
This brochure offers helpful tips on the development and health care of children 4 through 5 months.
https://edocs.dhs.state.mn.us/lfserver/Public/DHS-2689-ENG

Your Growing Child brochure – age 6 through 8 Months (DHS-2690)
This brochure offers helpful tips on the development and health care of children 6 through 8 months.
https://edocs.dhs.state.mn.us/lfserver/Public/DHS-2690-ENG

Your Growing Child brochure – age 9 through 11 months (DHS-2691)
This brochure offers helpful tips on the development and health care of children 9 through 11 months.
https://edocs.dhs.state.mn.us/lfserver/Public/DHS-2691-ENG

Your Growing Child brochure – age 12 through 14 months (DHS-2692)
This brochure offers helpful tips on the development and health care of children 12 through 14 months.
https://edocs.dhs.state.mn.us/lfserver/Public/DHS-2692-ENG

Your Growing Child brochure – age 15 through 17 months (DHS-2693)
This brochure offers helpful tips on the development and health care of children 15 through 17 months.
https://edocs.dhs.state.mn.us/lfserver/Public/DHS-2693-ENG

Your Growing Child brochure – age 18 through 23 months (DHS-2694)
This brochure offers helpful tips on the development and health care of children 18 through 23 months.
https://edocs.dhs.state.mn.us/lfserver/Public/DHS-2694-ENG

Your Growing Child brochure – age 2 years (DHS-2695)
This brochure offers helpful tips on the development and health care of children at age 2. https://edocs.dhs.state.mn.us/lfserver/Public/DHS-2695-ENG

Your Growing Child brochure – age 3 years (DHS-2696)
This brochure offers helpful tips on the development and health care of children at age 3. https://edocs.dhs.state.mn.us/lfserver/Public/DHS-2696-ENG

Your Growing Child brochure – age 4 through 6 years (DHS-3362)
This brochure offers helpful tips on the development and health care of children between the ages of 4 and 6 years old.
https://edocs.dhs.state.mn.us/lfserver/Public/DHS-3362-ENG

Your Growing Child brochure – age 7 through 10 years (DHS-3363)
This brochure offers helpful tips on the development and health care of children between the ages of 7 and 10 years old.
https://edocs.dhs.state.mn.us/lfserver/Public/DHS-3363-ENG

Keeping Kids Safe: Your Home Care Emergency Plan (DHS-5299)
This is a booklet for family child care providers and family friend and neighbor caregivers. It describes common emergency situations and sets out the planning steps to take to be prepared if something happens.
https://edocs.dhs.state.mn.us/lfserver/Legacy/DHS-5299-ENG

Family and Group Family Child Care (DHS-5407)
This is a brochure with general information for potential applicants for a license to provide family and group family child care.
https://edocs.dhs.state.mn.us/lfserver/Public/DHS-5407-ENG

Child Care Centers (DHS-6170)
This is a brochure with general information for potential applicants for a license to operate a child care center.
https://edocs.dhs.state.mn.us/lfserver/Public/DHS-6170-ENG

Early Childhood Indicators of Progress – Birth to 3 (DHS-4438)
This brochure is intended as a resource to support the learning and development of Minnesota's infants and toddlers and to promote high quality early childhood care and education. https://edocs.dhs.state.mn.us/lfserver/Legacy/DHS-4438-ENG

What Does a Safe Sleep Environment Look Like?
This brochure offers tips for keeping babies safe during sleep time.
https://www.nichd.nih.gov/publications/pubs/Documents/Safe_Sleep_Environment_English_2013.pdf

Health and Safety Resource List for Parents and Legal Nonlicensed Providers (DHS-5192A)
This resource list is a supplement to DHS-5192 CCAP Legal Nonlicensed Provider Registration and Acknowledgement and DHS-5367 CCAP Parent Acknowledgement When Choosing a Legal Nonlicensed Provider forms.
https://edocs.dhs.state.mn.us/lfserver/Public/DHS-5192A-ENG

Commonly Used Forms

The following are CCAP forms that you may need:

Notice of Privacy Practices for Child Care Providers (DHS-3985)
This is a notice for child care providers telling them their privacy rights.
https://edocs.dhs.state.mn.us/lfserver/Public/DHS-3985-ENG

Child Care Provider Responsibilities and Rights (DHS-4079)
This is a CCAP information sheet explaining child care provider's rights and responsibilities.
https://edocs.dhs.state.mn.us/lfserver/Public/DHS-4079-ENG

Important Information for Child Care Providers (DHS-4018)
Appeal rights information for Child Care providers.
https://edocs.dhs.state.mn.us/lfserver/Public/DHS-4018-ENG

CCAP Special Needs Rate Variance Request-Parent and Provider Request (DHS-4194)
Child Care Assistance Program (CCAP) special needs request form for providers to submit to county.
https://edocs.dhs.state.mn.us/lfserver/Public/DHS-4194-ENG

CCAP Licensed Provider Registration and Acknowledgement (DHS-5190)
CCAP form used by counties to register licensed child care providers so they can be authorized to receive child care assistance payments.
https://edocs.dhs.state.mn.us/lfserver/Public/DHS-5190-ENG

CCAP Licensed Exempt Provider Registration and Acknowledgement (DHS-5191)
CCAP form used by counties to register licensed exempt child care providers so they can be authorized to receive child care assistance payments.
https://edocs.dhs.state.mn.us/lfserver/Public/DHS-5191-ENG

CCAP Legal Nonlicensed Provider Registration and Acknowledgement (DHS-5192)
CCAP form used by counties to register legal nonlicensed child care providers so they can be authorized to receive child care assistance payments.
https://edocs.dhs.state.mn.us/lfserver/Public/DHS-5192-ENG

CCAP Authorization for Release of Background Study (DHS-5193)
CCAP authorization form used to give permission to share private data with other agencies. https://edocs.dhs.state.mn.us/lfserver/Public/DHS-5193-ENG

Direct Deposit for the Minnesota Child Care Assistance Program (DHS-3552)
Brochure explaining the benefits of directly depositing child care payments to bank accounts. The brochure includes a Direct Deposit Authorization form.
https://edocs.dhs.state.mn.us/lfserver/Legacy/DHS-3552-ENG

CCAP Quality Differential Rate Request Form (DHS-4795)
This form requests verification of child care provider qualifications that are needed for determining the Accreditation Rate Differential.
https://edocs.dhs.state.mn.us/lfserver/Public/DHS-4795-ENG

Affidavit of Failure to Receive Warrant - Vendors/Payees (DHS-1609A)
This form is used by individual child care providers to certify that they have lost or not received payment for child care provided. It must be completed before re-issuance can occur.
https://edocs.dhs.state.mn.us/lfserver/public/DHS-1609A-ENG

Child Care Assistance Program Financial Tracking Form (DHS-5318)
This form is used to record payments for child care fees or expenses from sources other than CCAP.
https://edocs.dhs.state.mn.us/lfserver/Legacy/DHS-5318-ENG

Minnesota Department of Human Services
Community Partners and Child Care Services
P.O. Box 64962
St. Paul, MN 55155-0962