

# Administration of the Child Care Assistance Program

## 2020-2021 Clay County and Tribal Child Care Fund Plan

### Administration of the Child Care Assistance Program

**Background:** Counties and tribes must submit a biennial Child Care Fund Plan to the commissioner. Child Care Assistance Program (CCAP) rules and laws allow counties and tribes to establish some local policies and procedures. These local policies and procedures, when included in this plan and approved by the commissioner, are considered county/tribal policy and are used to support agency decisions during appeals. The Department of Human Services (DHS) will review and approve County and Tribal Child Care Fund Plans. Counties and tribes will receive approval letters for their Child Care Fund Plans from the commissioner of DHS. This plan period begins on January 1, 2020.

Minnesota Statute, section 119B.08, subdivision 3

Steps to complete the plan process:

#### Step One – Review the plan

Review this plan to make sure you understand what's being asked. Determine if there are changes to policies or procedures compared to previous plans, or if there are new policies or procedures. Involve other staff as needed.

*Note:* New questions were added and questions may have been re-ordered, changed, or removed.

#### Step Two – Draft the plan responses

#### Step Three – Inform or involve stakeholders

**DHS encourages counties and tribes to develop optional policies for the Child Care Assistance Program in coordination with local child care stakeholders.** This may include: parents, child care providers, culturally specific service organizations, Child Care Aware agencies (formerly known as child care resource and referral agencies), interagency early intervention committees, potential collaborative partners and agencies involved in the provision of care and education to young children. Consult with other agency staff such as fraud investigators and income maintenance and employment services staff.

#### Step Four – Share the draft plan

Prior to submission, you must make copies of the proposed plan available to the public and allow sufficient time for public review and comment. See question II.D of this plan; describe methods used to make the plan available to the public, particularly to those members listed in II.D.

#### Step Five – Submit the plan by the deadline

Submit the plan by the deadline, and note these guidelines:

- Identify all optional county/tribal Child Care Assistance Program policies; see question IX.A.
- Do not answer questions by stating that the reviewer should refer to a previous plan.
- Submit any agency-developed forms that have not been previously submitted and approved. Do not submit DHS and MEC<sup>2</sup> standardized forms. Refer to the DHS memo announcing this plan for a list of DHS created documents that are required for CCAP.
- Provide an answer to each question. Incomplete plans will be returned.

#### Amendments to plans

A county or tribe may amend their Child Care Fund Plan at any time, but the commissioner must approve the amendment before it becomes effective. If approved by the commissioner, the amendment is effective on the date requested by the agency unless a different effective date is set by the commissioner. Plan amendments must be approved or denied by the commissioner within 60 days after receipt of the amendment request. The department reserves the right to direct a county or tribe to amend its child care fund plan if the plan is no longer in compliance with Minnesota Statutes, Minnesota Rules, or federal law.

Minnesota Rules, part 3400.0150, subpart 3

Amendments include changes in county/tribal contacts, county/tribal optional policies, new or revised forms and notices. Amendments can be sent in letter form or by email to the agency's CCAP policy specialist.

Return completed plans by **Friday, August 30, 2019** to:  
[DHS.CCAP@state.mn.us](mailto:DHS.CCAP@state.mn.us)

# Administration of the Child Care Assistance Program

## I. Child Care Assistance Program contacts

### A. County or tribal agency

COUNTY OR TRIBE NAME Clay	GENERAL PHONE NUMBER 218-299-5200	EXTENSION	GENERAL FAX NUMBER 218-299-7515
AGENCY'S FULL NAME Clay County Social Services		CCAP INTAKE PHONE NUMBER 218-291-5770	EXTENSION
MAIN OFFICE STREET ADDRESS 715 11th ST N STE 102	CITY Moorhead	ZIP CODE 56561-2084	
MAIN OFFICE MAILING ADDRESS (if different)	CITY	ZIP CODE	

### B. County or tribal branch office (if applicable)

BRANCH NAME	GENERAL PHONE NUMBER	EXTENSION	GENERAL FAX NUMBER	CCAP INTAKE PHONE NUMBER	EXTENSION
ADDRESS OF BRANCH OFFICE		CITY		ZIP CODE	

### C. Agency contact people

This contact information is required to be completed and will be used by DHS staff to communicate with counties or tribes.

#### 1. County or tribal CCAP administrative contact

Who is your primary contact for the Child Care Assistance Program? This contact will receive policy bulletins, memos, and other high level communications. You may have more than one administrative contact.

<input checked="" type="radio"/> Mr. <input type="radio"/> Mrs. <input type="radio"/> Ms.	FIRST NAME Larry	LAST NAME Young			
TITLE Financial Assistance Supervisor		PHONE NUMBER 218-299-7111	EXTENSION	FAX NUMBER 218-299-7106	
EMAIL ADDRESS larry.young@co.clay.mn.us		SIR EMAIL ADDRESS x114561@cty.dhs.state.mn.us			
ADDRESS 715 11th Street North #102		CITY Moorhead		ZIP CODE 56560	

## 2. County or tribal client access contact

Who is your lead person/s who has contact with families receiving CCAP? You may have more than one client access contact.

<input type="radio"/> Mr. <input checked="" type="radio"/> Mrs. <input type="radio"/> Ms.	FIRST NAME Dawn	LAST NAME Envik		
TITLE Financial Assistance Specialist		PHONE NUMBER 218-299-7068	EXTENSION	FAX NUMBER 218-299-7106
EMAIL ADDRESS dawn.envik@co.clay.mn.us		SIR EMAIL ADDRESS x114554@cty.dhs.state.mn.us		
ADDRESS 715 11th Street North #102		CITY Moorhead		ZIP CODE 56560
<input type="radio"/> Mr. <input checked="" type="radio"/> Mrs. <input type="radio"/> Ms.	FIRST NAME Jamie	LAST NAME Davies		
TITLE Eligibility Worker		PHONE NUMBER 218-299-7079	EXTENSION	FAX NUMBER 218-299-7106
EMAIL ADDRESS jamie.davies@co.clay.mn.us		SIR EMAIL ADDRESS x114596@cty.dhs.state.mn.us		
ADDRESS 715 11th Street North #102		CITY Moorhead		ZIP CODE 56560
<input type="radio"/> Mr. <input checked="" type="radio"/> Mrs. <input type="radio"/> Ms.	FIRST NAME Jennifer	LAST NAME Landers		
TITLE Eligibility Worker		PHONE NUMBER 218-299-7055	EXTENSION	FAX NUMBER 218-299-7106
EMAIL ADDRESS jennifer.landars@co.clay.mn.us		SIR EMAIL ADDRESS x114484@cty.dhs.state.mn.us		
ADDRESS 715 11th Street North #102		CITY Moorhead		ZIP CODE 56560

## 3. Management of waiting list contact

Who is your waiting list contact person? The waiting list contact person identified is responsible for maintaining the waiting list and responding to the state's questions about families reported on the waiting list. Only identify one waiting list contact.

<input type="radio"/> Mr. <input type="radio"/> Mrs. <input checked="" type="radio"/> Ms.	FIRST NAME Dawn	LAST NAME Envik		
TITLE Financial Assistance Specialist		PHONE NUMBER 218-299-7068	EXTENSION	FAX NUMBER 218-299-7106
EMAIL ADDRESS dawn.envik@co.clay.mn.us		SIR EMAIL ADDRESS x114554@cty.dhs.state.mn.us		
ADDRESS 715 11th Street North #102		CITY Moorhead		ZIP CODE 56560

#### 4. Provider billing contact

Who is your lead billing contact person who is able to answer questions about billing and payments? Only identify one provider billing contact.

<input type="radio"/> Mr. <input type="radio"/> Mrs. <input checked="" type="radio"/> Ms.		FIRST NAME Kathy	LAST NAME Otte		
TITLE Statistical Specialist/Fiscal Worker		PHONE NUMBER 218-299-7045	EXTENSION	FAX NUMBER 218-299-7290	
EMAIL ADDRESS kathy.otte@co.clay.mn.us			SIR EMAIL ADDRESS x114409@cty.dhs.state.mn.us		
ADDRESS 807 11th St N		CITY Moorhead		ZIP CODE 56561-0280	

#### 5. Provider registration contact

Who is your lead provider registration contact person who is able to answer questions about provider registrations? Only identify one provider registration contact.

<input type="radio"/> Mr. <input type="radio"/> Mrs. <input checked="" type="radio"/> Ms.		FIRST NAME Kathy	LAST NAME Otte		
TITLE Statistical Specialist/Fiscal Worker		PHONE NUMBER 218-299-7045	EXTENSION	FAX NUMBER 218-299-7290	
EMAIL ADDRESS kathy.otte@co.clay.mn.us			SIR EMAIL ADDRESS x114409@cty.dhs.state.mn.us		
ADDRESS 807 11th St N		CITY Moorhead		ZIP CODE 56561-0280	

#### 6. LNL provider monitoring contact

Who is the lead contact person in the agency who is able to answer questions about LNL annual monitoring visits? Only provide one monitoring contact.

<input type="radio"/> Mr. <input type="radio"/> Mrs. <input checked="" type="radio"/> Ms.		FIRST NAME Kathy	LAST NAME Otte		
TITLE Statistical Specialist/Fiscal Worker		PHONE NUMBER 218-299-7045	EXTENSION	FAX NUMBER 218-299-7290	
EMAIL ADDRESS kathy.otte@co.clay.mn.us			SIR EMAIL ADDRESS x114409@cty.dhs.state.mn.us		
ADDRESS 807 11th St N		CITY Moorhead		ZIP CODE 56561-0280	

#### D. Subcontracted services

Counties and tribes may contract with an agency to administer all or part of their Child Care Assistance Program.

**Minnesota Rules, part 3400.0140, subpart 7**

If you are planning any changes in the administration of your CCAP, tell your CCAP policy specialist immediately. This could involve subcontracting or mergers of counties. Failing to notify DHS may delay the changes that you are planning to make.

Does your county or tribe contract with an agency for any part of the administration of CCAP?    Yes    No

Do not include cooperative agreements with employment and training service providers that work with MFIP/DWP families to develop and approve the employment service plan.

## II. Collaboration and outreach

**A.** How do you share information about the Child Care Assistance Program so that individuals, child care providers, social service agencies, etc. are aware of child care assistance? (Minnesota Rules, part 3400.0140, subpart 2)

Information on child care assistance is available through both the Clay County website as well as Community Action Program Lakes and Prairies (CAP-LP) website. CAP-LP is part of the Child Care Aware of Mn program. Parents who are seeking information about child care, are informed about the child care assistance program. Clay County Child Care Licensor's also make child care assistance information available to all licensed child care providers and encourage them to refer parents to the program. Information about the child care assistance program is also provided to employment and training agencies as well as our public health department. Posters and brochures are also displayed in the building's lobby. Legal Non Licensed [LNL] providers contact Fiscal Worker for all LNL Provider Information.

**B.** Agencies are required to work with other public and private community resources that provide services to families to maximize community resources for families with young children. These other resources include, but are not limited to, Child Care Aware, School Readiness, Early Learning Scholarships, Head Start, and Early Childhood Screening. List the community programs your agency works with. (Minnesota Statute, section 119B.08, subdivision 3 (1))

Our community works with the local Head Start program which offers pre-school for eligible children that will help with the transition to kindergarten. Solutions Behavioral Healthcare Professionals offers a program called Incredible Years. This is a child/family intervention for children with mental health and behavioral needs. Solutions provides individual services to children in child care that have behavioral concerns if requested to assist the family and provider in stabilizing the child's behaviors. Moorhead Public Schools has adopted the Incredible Years model and works with Solutions to provide the programming to elementary and kindergarten students. EIS (Early Intervention Services) is available for young children with identified developmental and emotional needs. Wrap Around and Family Group Decision making services are available through County Collaborative for all families, as well as respite funds for some families in Head Start. Our agency works closely with the schools and technical colleges, Community Action Councils, Child Care Aware of MN, CAP-LP, early childhood programs and county licensor's.

**C.** How do you work with the community based programs and service providers identified above to maximize public and private community resources for families with young children? Include in this description the methods used to share information, responsibility, and accountability among these service and program providers as you work to foster collaboration among agencies and other community-based programs that provide flexible, family-focused services to families with young children and to facilitate transition into kindergarten.

We attend the MFIP orientations that are offered by Career Force. One of the child care workers attends that meeting with new participants and explains to them the process of applying for Child Care Assistance and contact information for them so it is easier to connect with the appropriate person. We have a great relationship with all providers and will attend meetings as needed to discuss child care and how we are better able to serve our residents. We attend community workshops and job fairs when made aware to us and offer information to people who ask regarding child care. We will attend child care provider orientation or training that is put on by our county child care licensor's when asked. We request our licensor's to inform all providers about child care assistance so they can encourage families to apply if they are having difficulties paying the full expense.

**D.** Copies of the proposed plan must be made reasonably available to the public, including those interested in child care policies such as parents, child care providers, culturally specific service organizations, Child Care Aware of Minnesota agencies (child care resource and referral), interagency early intervention committees, potential collaborative partners and agencies involved in the provision of care and education to young children. **You must allow time for public review and comment prior to submitting this plan to DHS for approval.** (Minnesota Statute, section 119B.08, subdivision 3 (2)).

**1.** Describe your procedures and methods to make copies of the **draft plan** reasonably available to the public.

Notification is provided on our Clay County website inviting citizens to review and comment on the plan. A copy of

the plan is posted on the website as well as paper copies made available at our office. The posting is a News Flash which will push the notice out to our Facebook and Twitter accounts. The posting was done on July 25, 2019 and the comment period was invited through August 26, 2019. The Public Notice and draft plan is set to terminate at the end of the comment period. Should changes to the plan be made after the public comment period, the plan will be updated and sent to DHS for final approval.

On July 25, 2019, an electronic copy of the proposed plan was emailed to our local Child Care Aware provider as well as our local Early Intervention Committee for review and comment.

Upon the DHS final approval of the plan, it will be placed on our county website for review at all times at the following link:

<https://mn-claycounty.civicplus.com/209/Child-Care-Assistance-Program-CCAP>

Interested Individuals may also request a copy of our plan from the Financial Services unit located at 715 11th ST N STE 102, Moorhead, MN. 56560. Copies of the plan may also be received from Larry Young by phone (218-299-7111), fax (218-299-7515), email (larry.young@co.clay.mn.us) or US Mail at 715 11th ST N STE 102, Moorhead, MN. 56560

**2. When was your draft plan available for public review?**

From July 25, 2019 through August 26, 2019.

**E.** After your plan is approved by DHS, do you post your approved county/tribal plan on your website?  Yes  No

### III. Eligibility

#### A. Education plans outside an Employment Plan

Prior to completing this section, please review Minnesota Rules, part 3400.0040 and Minnesota Statutes 119B.10 Subdivision 3 in their entirety to ensure your policies are in compliance.

##### 1. High school diploma/GED high school equivalency diploma

**1a.** Do you approve all high school and GED programs?  Yes  No

##### 2. Remedial and basic skills courses (includes Adult Basic Education and English as a Second Language)

**2a.** Do you approve all remedial and basic skills courses?  Yes  No

##### 3. Post-secondary programs

**3a.** Describe your criteria and procedures for approving a post-secondary program outside an Employment Plan that will lead to employment.

Students must complete an Employability Plan which outlines their course of study as well as expected completion date. This plan is signed by both the student as well as the students advisor. The plan clearly states what the client's responsibilities are in order to have their education approved as an eligible activity. All initial plans will be approved if they have the approval of the post-secondary institution's advisor/counselor. Follow up is done each semester to determine if the student is in good academic standing.

**3b.** Identify the factors that contribute to the above criteria (for example: the availability of jobs where family resides or intends to reside, wage data, job placement rates in field of study).

The post-secondary institution has approved the employability plan. The school's advisor/counselor is best qualified to determine if this is an appropriate plan and would reasonably lead to full-time employment.

##### 4. Changes to education plans outside an Employment Plan

**4a.** Do you have a different approval policy if a participant requests a change to their education plan?  Yes  No

## B. Basic Sliding Fee Waiting List management

### 1. Priorities for service

Have you established sub-priorities for the fifth priority Basic Sliding Fee waiting list beyond those required in [Minnesota Statute, section 119B.03, subdivision 4](#)?

Yes  No

### 2. Six month review of Basic Sliding Fee Waiting List

CCAP Policy Manual,  
Chapter 4.3.12.12

Minnesota Statute, section  
119B.03, subdivision 2

**2a.** Statute requires that you review and update your waiting list at least every six months. How are families notified of this six month review? Describe your agency's process for reviewing and updating the waiting list. Please include your agency's six month review letter in Section IX.B. If your agency does not currently have a waiting list, describe your process in the event your agency does start a waiting list.

A cover letter along with a redetermination notice is sent to the family.

**2b.** When families are removed from the waiting list for not responding to the six month review are they sent an additional notice or does the six month review letter include notification they will be removed from the waiting list if they do not respond?

The cover letter explains that we must review their status to remain on the waiting list. The letter informs them that they must complete the review and return to the county by a certain date. Failure to do so will result in the removal from the waiting list.

### 3. Applications mailed to families on the Basic Sliding Fee Waiting List

Applications must be sent to families on the waiting list when there is funding available for Basic Sliding Fee. When do you remove the family from the waiting list?

- Family is removed from the waiting list when the application is sent to the family. The notice sent with the application informs the family that their name has been removed from the waiting list.
- Family is removed from the waiting list when you receive the completed application. If no application is received, the family is removed at the end of the time period allowed for returning the application. The notice sent with the application informs the family that their name will be removed from the waiting list if the application is not received by the deadline.

### 3. Temporarily ineligible families on the Basic Sliding Fee Waiting List

When a family reaches the top of the waiting list and is temporarily ineligible for child care assistance, leave the family at the top of the waiting list for a period of time not to exceed 90 calendar days, according to priority group and serve the applicant who is next on the waiting list unless an alternative procedure is provided in the agency's plan.

Minnesota Rules, part  
3400.0040, subpart 17

Minnesota Rules, part  
3400.0060, subpart 6

Are there exceptions to the 90 day policy that extends the timeframe for a family who has reached the top of the waiting list and is temporarily ineligible?

Yes  No

## C. Child care for school release days

1. How do case workers authorize care for school release days in your agency?

CCAP Policy Manual,  
Chapter 9.1.3

- Authorize actual hours needed and increase or decrease hours based on known school release days.
- Authorize the hours care is needed when there are no school release days.
- Authorize the highest number of hours care is needed with the provider.
- Other method.

## 2. How do you communicate scheduled and authorized hours to parents, providers and billing workers?

Initial communication on authorized hours occurs with the parent by the CCAP Financial Worker. This communication may occur via in-person, phone, correspondence or email. If additional hours are needed to be approved, generally the provider communicates this to our Fiscal Worker. Follow-up communication will then occur often via email between the provider, CCAP Financial Worker, and the Fiscal Worker in our auditors office. The CCAP Financial Worker will put comments on the notices if there are special circumstances with the hours of childcare provided. We exchange voice mails, phone conversations and emails with our families when there is any question in the hours that are being authorized.

## D. Child care for families with flexible schedules

### 1. How do case workers authorize care for families with flexible schedules in your agency?

CCAP Policy Manual,  
Chapter 9.1.6

- Authorize the typical number of hours needed and when the schedule requires additional care, the provider bills for the additional care.
- Authorize the minimum number of hours care is needed and when the schedule requires additional care, the provider bills for the additional care. Payment is made by increasing the number of hours listed in the "total hours of care authorized" field on the billing window or by creating a new Service Authorization.
- Authorize the highest number of hours care is needed with the provider. The provider is expected to bill only for the time that care is needed.
- Other method.

### 2. How do you communicate scheduled and authorized hours to parents, providers and billing workers?

If the provider requests more hours during these times they communicate to our Fiscal Worker. Communication will occur often via email between the provider, CCAP Financial Worker, and the Fiscal Worker in our auditors office. The Financial Worker will put comments on the notices if there are special circumstances with the hours of childcare provided. We exchange voice mails, phone conversations and emails with our families when there is any question in the hours that are being authorized.

## E. Authorizing care for clients with Employment Plans

Job counselors and CCAP workers must communicate child care needs for clients with Employment Plans. Guidance is found in [CCAP Policy Manual, Chapter 9.1.5](#).

### 1. CCAP workers must obtain an activity schedule or the days and times that child care is needed. Who is responsible for obtaining the schedule information from the client?

- Job counselor provides schedule or days and times that child care is needed to CCAP worker.
- CCAP worker obtains schedule from client.
- Other method.

### 2. How do you communicate required information between job counselors and CCAP workers (email, fax, case notes, verbal, DHS-7054, etc.)?

Emails and interoffice mail is used between the county and the employment agency, Career Force to communicate all information between the two agencies. We also have a monthly meeting between a Career Force worker and Financial Worker to discuss the Career Force workers caseload and all topics are discussed at this time as well.



## IV. Provider compliance policies

### A. Reasons for closing a provider's registration

Minnesota Statutes, section 119B.13, subdivision 6(d) allows counties and tribes to refuse to issue a child care authorization, revoke an existing authorization for a provider, stop payment, or refuse to pay a bill under circumstances described in the six clauses below. Counties and tribes must indicate which clauses they will include in their plan, and must apply the policies consistently to providers.

CCAP Policy Manual,  
Chapter 9.3

CCAP Policy Manual,  
Chapter 14

- An agency cannot implement these policies without establishing them in their plan.
- An agency must notify their CCAP Policy Specialist at least 10 days prior to closing a provider's registration or taking any other action to enforce any of these policies, except clause 4 when notified by DHS.
- An agency that does not implement these policies may still pursue a fraud disqualification for a provider. These policies can be used in addition to, or in combination with, a fraud disqualification.

Does your agency plan to disqualify providers for reasons listed in Minnesota Statutes, section 119B.13, subdivision 6(d)?  Yes  No

Which clause(s) does your agency plan to implement? Check all that apply.

- Clause 1:** A provider admits to intentionally giving the agency materially false information on the provider's billing forms.

If you checked Clause 1, your agency must also pursue, at minimum, a disqualification and establishment of an Intentional Program Violation (IPV) using the Administrative Disqualification (ADH) process described in Chapter 14 of the CCAP Policy Manual. The agency should consider pursuing a fraud determination through other means described in section 14.12.6 in the CCAP Policy Manual. There also may be overpayments charged to the provider applied to time periods when Clause 1 occurred.

When enforcing this clause, you have the option to use MEC<sup>2</sup> generated notices or DHS optional notices to notify providers and/or families. The DHS optional notice to families communicates they are still eligible for CCAP. The DHS optional notice to providers gives specific information on why their registration closed and, according to policy, does not include provider appeal rights. Contact your CCAP Policy Specialist for samples of the DHS optional notices and instructions on how to use the notices.

What type of notice will you send to families?  MEC<sup>2</sup> generated notices  DHS optional notices

What type of notice will you send to providers?  MEC<sup>2</sup> generated notices  DHS optional notices

*Note:* If your agency uses DHS optional notices, add the optional notice(s) to Section IX.B and if the document(s) have not yet been approved by DHS, submit with this plan for review and approval. You must also close the provider's registration in MEC<sup>2</sup>. Contact your CCAP Policy Specialist for system instructions.

- Clause 2:** The agency finds a preponderance of evidence that the provider intentionally gave the agency materially false information on the provider's billing forms or attendance records.

If you checked Clause 2, your agency must also pursue, at minimum, a disqualification and establishment of an Intentional Program Violation (IPV) using the Administrative Disqualification (ADH) process described in Chapter 14 of the CCAP Policy Manual. The agency should consider pursuing a fraud determination through other means as described in section 14.12.6 in the CCAP Policy Manual. There also may be overpayments charged to the provider applied to time periods when Clause 2 occurred.

When enforcing this clause, you have the option to use MEC<sup>2</sup> generated notices or DHS optional notices to notify providers and/or families. The DHS optional notice to families communicates they are still eligible for CCAP. The DHS optional notice to providers gives specific information on why their registration closed and, according to policy, does not include provider appeal rights. Contact your CCAP Policy Specialist for samples of the DHS optional notices and instructions on how to use the notices.

What type of notice will you send to families?  MEC<sup>2</sup> generated notices  DHS optional notices

What type of notice will you send to providers?  MEC<sup>2</sup> generated notices  DHS optional notices

Note: If your agency uses DHS optional notices, add the optional notice(s) to Section IX.B and if the document(s) have not yet been approved by DHS, submit with this plan for review and approval. You must also close the provider's registration in MEC<sup>2</sup>. Contact your CCAP Policy Specialist for system instructions.

- Clause 3:** A provider is in violation of Child Care Assistance Program rules, until the agency determines the violations have been corrected.

What CCAP rules are you choosing to implement under this clause?

The MN CCAP Provider Registration and Acknowledgment form outlines the obligations of the Provider. By signing the form, the Provider agrees to follow all CCAP statutes, rules and policies. Noncompliance would depend on the severity of the violation which could result in delayed CCAP payment up to 3 months beyond the time the condition is corrected. If the violation resulted in substantiated harm to any child under the Provider's care and control, MN DHS Child Care rules may require more severe penalties.

How will your agency determine the provider has corrected the condition?

Violations must be corrected immediately when confirmed by Clay County. This will be monitored via a Licensur visit to Provider's home and/or receipt of a Provider's documentation that the condition has been corrected and conforms to MN CCAP statutes, rules and policies.

Your agency may withhold payment for a period of up to three months beyond the time the condition has been corrected.

Will you apply a penalty period beyond when the condition is corrected?  Yes  No

When enforcing this clause, you have the option to use MEC<sup>2</sup> generated notices or DHS optional notices to notify providers and/or families. The DHS optional notice to families communicates they are still eligible for CCAP. The DHS optional notice to providers gives specific information on why their registration closed and, according to policy, does not include provider appeal rights. Contact your CCAP Policy Specialist for samples of the DHS optional notices and instructions on how to use the notices.

What type of notice will you send to families?  MEC<sup>2</sup> generated notices  DHS optional notices

What type of notice will you send to providers?  MEC<sup>2</sup> generated notices  DHS optional notices

Note: If your agency uses DHS optional notices, add the optional notice(s) to Section IX.B and if the document(s) have not yet been approved by DHS, submit with this plan for review and approval. You must also close the provider's registration in MEC<sup>2</sup>. Contact your CCAP Policy Specialist for system instructions.

- Clause 4:** A provider is operating after receipt of a licensing order of suspension or revocation (this occurs when providers are appealing the revocation or suspension) or a final order of conditional license, for as long as the conditional license is in effect.

Note: Agencies do not have the option to close registrations of providers operating with conditional licenses.

If you choose this option, DHS will send you a list once a month to inform you of providers in this category. You may act sooner if you learn of this licensing status through your licensors, etc. Contact your CCAP Policy Specialist if you are planning to take action prior to receiving the monthly DHS listing.

What licensing violations are subject to this clause?

Providers with a suspended license?  Yes  No

When applying this clause for a provider with a suspended license, what provider types will you apply the clause to?  
 Licensed family child care  Licensed centers  Both

Providers with a revoked license?  Yes  No

When applying this clause for a provider with a revoked license, what provider types will you apply the clause to?  
 Licensed family child care  Licensed centers  Both

When enforcing this clause, you have the option to use MEC<sup>2</sup> generated notices or DHS optional notices to notify providers and/or families. The DHS optional notice to families communicates they are still eligible for CCAP. The DHS optional notice to providers gives specific information on why their registration closed and, according to policy, does not include provider appeal rights. Contact your CCAP Policy Specialist for samples of the DHS optional notices and instructions on how to use the notices.

What type of notice will you send to families?  MEC<sup>2</sup> generated notices  DHS optional notices

What type of notice will you send to providers?  MEC<sup>2</sup> generated notices  DHS optional notices

*Note:* If your agency uses DHS optional notices, add the optional notice(s) to Section IX.B and if the document(s) have not yet been approved by DHS, submit with this plan for review and approval. You must also close the provider's registration in MEC<sup>2</sup>. Contact your CCAP Policy Specialist for system instructions.

**Clause 5:** A provider submits false attendance reports or refuses to provide documentation of the child's attendance upon request.

How will your agency determine the provider has corrected the condition?

After the Provider has submitted the correct attendance records to this agency and any over payments have been reconciled.

Your agency may withhold payment for a period of up to three months beyond the time the condition has been corrected.

Will you apply a penalty period beyond when the condition is corrected?  Yes  No

When enforcing this clause, you have the option to use MEC<sup>2</sup> generated notices or DHS optional notices to notify providers and/or families. The DHS optional notice to families communicates they are still eligible for CCAP. The DHS optional notice to providers gives specific information on why their registration closed and, according to policy, does not include provider appeal rights. Contact your CCAP Policy Specialist for samples of the DHS optional notices and instructions on how to use the notices.

What type of notice will you send to families?  MEC<sup>2</sup> generated notices  DHS optional notices

What type of notice will you send to providers?  MEC<sup>2</sup> generated notices  DHS optional notices

*Note:* If your agency uses DHS optional notices, add the optional notice(s) to Section IX.B and if the document(s) have not yet been approved by DHS, submit with this plan for review and approval. You must also close the provider's registration in MEC<sup>2</sup>. Contact your CCAP Policy Specialist for system instructions.

**Clause 6:** A provider gives false child care price information.

How will your agency determine the provider has corrected the condition?

The Provider MN CCAP Registration and Acknowledgment form indicates Providers are not allowed to charge CCAP Families more than private pay families. Clay County enters Provider rates into MEC<sup>2</sup> System as listed on the CCAP Provider Registration form which must be in agreement with a received copy of the Provider policies. Provider billings that are out of compliance will be investigated, which may result in delayed payment and /or the Provider being charged with a crime.

Your agency may withhold payment for a period of up to three months beyond the time the condition has been corrected.

Will you apply a penalty period beyond when the condition is corrected?  Yes  No

When enforcing this clause, you have the option to use MEC<sup>2</sup> generated notices or DHS optional notices to notify providers and/or families. The DHS optional notice to families communicates they are still eligible for CCAP. The DHS optional notice to providers gives specific information on why their registration closed and, according to policy, does not include provider appeal rights. Contact your CCAP Policy Specialist for samples of the DHS optional notices and instructions on how to use the notices.

What type of notice will you send to families?  MEC<sup>2</sup> generated notices  DHS optional notices

What type of notice will you send to providers?  MEC<sup>2</sup> generated notices  DHS optional notices

*Note:* If your agency uses DHS optional notices, add the optional notice(s) to Section IX.B and if the document(s) have not yet been approved by DHS, submit with this plan for review and approval. You must also close the provider's registration in MEC<sup>2</sup>. Contact your CCAP Policy Specialist for system instructions.

- Clause 7:** A provider fails to report decreases in a child’s attendance. A provider must report to the county on the billing form when a child’s attendance in child care falls to less than half of the child’s authorized hours or days for a four-week period.

How will your agency determine the provider has corrected the condition?

After the Provider has submitted the correct attendance records to this agency and any over payments have been reconciled

Your agency may withhold payment for a period of up to three months beyond the time the condition has been corrected.

Will you apply a penalty period beyond when the condition is corrected?  Yes  No

When enforcing this clause, you have the option to use MEC<sup>2</sup> generated notices or DHS optional notices to notify providers and/or families. The DHS optional notice to families communicates they are still eligible for CCAP. The DHS optional notice to providers gives specific information on why their registration closed and, according to policy, does not include provider appeal rights. Contact your CCAP Policy Specialist for samples of the DHS optional notices and instructions on how to use the notices.

What type of notice will you send to families?  MEC<sup>2</sup> generated notices  DHS optional notices

What type of notice will you send to providers?  MEC<sup>2</sup> generated notices  DHS optional notices

*Note:* If your agency uses DHS optional notices, add the optional notice(s) to Section IX.B and if the document(s) have not yet been approved by DHS, submit with this plan for review and approval. You must also close the provider's registration in MEC<sup>2</sup>. Contact your CCAP Policy Specialist for system instructions.

## B. Notification to providers

Your agency must notify all currently registered providers and any new providers wishing to register with your agency of the provider compliance clause(s) being implemented. Notification options include:

- Sending a mailing to all providers registered with your agency.
- Adding information to your agency's provider registration packets.

How will you notify providers about the provider compliance clauses your agency is choosing to implement? Add the notification document(s) to Section IX.B and if the document(s) have not yet been approved by DHS, submit with this plan for review and approval.

Current copies of MN CCAP Provider policies are included in all Provider Registration & Renewal packets which are mailed or sent electronically to Providers. We also include a link, to the current MN CCAP Provider Manual. All Providers can access the Provider manual via our Clay County public website. Current MN CCAP Provider forms are also available on the Clay County public website

*Note:* This notice differs from the adverse action notice your agency sends when closing an individual provider's registration under these clauses.

## V. Policies applicable to legal nonlicensed (LNL) providers

### A. Unsafe care

An agency may deny authorization as a child care provider to any applicant or rescind authorization of any provider when the agency knows or has reason to believe that the provider is unsafe or that the circumstances of the chosen child care arrangement are unsafe. See [Minnesota Statute, section 119B.125, subdivision 4](#). When a provider's authorization is rescinded due to unsafe care, the agency must close the provider's registration with a 15 calendar day notice. If there is also an imminent risk of harm to the health, safety or rights of the child(ren) in care with a legal nonlicensed provider, child care authorization must be terminated immediately.

The department has identified that when substantiated maltreatment occurred in a legal nonlicensed care setting related to an incident where a child died or was seriously injured, the child care setting is considered unsafe care. A serious injury is one that requires treatment by a physician.

What other conditions of unsafe care does your agency apply to legal nonlicensed (LNL) providers or legal nonlicensed care arrangements **beyond those contained in Minnesota Statute, sections 245C.14 or 245C.15?**

Not Applicable

NOTE: The Consolidated Appropriations Act of 2018 (Public Law 115-141) prohibits states from expending federal CCDF funds on providers where a serious injury or death occurred due to substantiated health or safety violations.

### B. Imminent risk

Some unsafe care conditions present an imminent risk for children in care. When there is an imminent risk of harm to the health, safety or rights of a child in care with a legal nonlicensed (LNL) provider, child care authorization must be terminated immediately. Agencies do not need to give the provider at least 15 calendar days notice. See [Minnesota Rules 3400.0035, subpart 5, clause E](#).

What conditions does your agency recognize as presenting an imminent risk to the health, safety or rights of a child in care with a legal nonlicensed provider?

The existence of any condition or practice which could reasonable be expected to cause serious physical harm or death to any child, by an Legal Non Licensed Provider for a Clay County Family. Clay County or Other Social Service Child Protection Unit would determine, by investigation, if any substantiated condition or practice exists.

### C. Annual monitoring

Any legal nonlicensed (LNL) provider with an open Service Authorization for a child who is not related to them must have an annual monitoring visit. Related means the provider is the child's sibling, grandparent, great-grandparent, aunt, or uncle of the child, based on blood relationship, marriage or court decree.

1. How does your agency track legal nonlicensed providers who are registered with your agency and who have an open Service Authorization for unrelated children?

The Fiscal Worker will create and maintain a manual tracking system for Clay County Legal Non-Licensed Providers who care for a Non-Related child. There shall be an initial Monitoring Visit and subsequent Annual Monitoring visit as long as the LNL Provider cares for a Non-Related child.

2. What are your agency's internal processes and procedures for completing monitoring visits?

The Fiscal Worker will refer the Clay County Legal Non-Licensed Provider to Clay County Licensing workers who will conduct the Monitoring Visit using DHS-7867 form with the follow up DHS-7867A form, if necessary

3. If a provider does not show compliance with an annual monitoring visit, under what conditions can they receive CCAP payments in the future?

- Only if the provider is licensed
- The provider must show compliance with another monitoring visit

If the agency performs another monitoring visit, what conditions are placed on the visit? For example, is there a time limit that the provider must wait before the visit can be performed? Is there a limit on the number of re-inspections?

The LNL Provider may submit documentation for some indicators. Clay County may request a re-visit as well to document correction. Any substantiated serious inquiry or death of any children with this LNL provider will result in immediate permanent closure of this LNL Provider Registration therefore, ending all CCAP payments.

Other

## D. Complaints and incidents

### 1. Records of substantiated parental complaints

Within 24 hours of receiving a complaint concerning the health or safety of children under the care of a legal nonlicensed (LNL) provider, an agency must relay the complaint to the agency's child protection agency, county public health agency, local law enforcement, and/or other agencies with jurisdiction to investigate complaints. Information regarding substantiated complaints must be released following applicable data privacy laws. See [Minnesota Statutes Chapter 13](#). When a report is substantiated, see Minnesota Rules, part 3400.0140, subpart 6, for record retention and provider payment policies.

When complaints are substantiated how do you:

1a. Maintain these records?

Clay County has a tracking system within retention guidelines of substantiated complaints concerning the health and safety of children in the care of legal Non-licensed providers.

1b. Make this information available to the public when requested?

If there is a parental concern regarding maltreatment by a provider it is referred to the proper department to investigate (ie: Child Protection, Sheriff's Department, Licensing etc.). Each department will screen the report for the appropriate course of action to be taken either individually or jointly. Investigations into complaints may involve a number of activities such as collateral contacts, interviews of children, providers, parents, as well as record reviews and County Attorney consultations. The county keeps a complaint log of substantiated complaints and a copy of the substantiated complaint is kept in the provider file. When the county receives a request the county will give the information over the phone, or if they request, the county will supply the information in writing. Clay County will release information in compliance with Minnesota Statutes, Chapter 13.

### 2. Aggregate reporting of incidents

At least quarterly, agencies must report to the Minnesota Department of Human Services the aggregate number of deaths, serious injuries, and substantiated maltreatment incidents for children under the care of legal nonlicensed (LNL) providers.

How will you record and maintain accurate counts of incidents that occur in legal nonlicensed settings registered by your agency?

These incidents will be recorded and maintained by the Clay County Child Protection Unit for quarterly totals to be conveyed to the Fiscal Worker for tracking and reporting.

## VI. Special needs rates

Special needs rates, above the standard maximum rates, can be paid to providers if approved by the commissioner of DHS (up to the provider's charge).

Minnesota Statute,  
section 119B.13,  
subdivision 3

Minnesota Rules,  
part 3400.0130,  
subpart 3

CCAP Policy  
Manual,  
Chapter 9.54

## A. Special needs rates for children in at-risk programs

You may choose to pay special needs rates to certain populations defined as "at-risk" in your County and Tribal Child Care Fund Plan. At-risk means environmental or familial factors exist that could create barriers to a child's optimal achievement. This could include, but is not limited to: a federal or state disaster, limited English proficiency in a family, history of abuse or neglect, a determination that the children are at risk of abuse or neglect, family violence, homelessness, age of the mother, level of maternal education, mental illness, development disability, parental chemical dependency or history of other substance use.

1. Do you pay a special needs rate for at-risk populations?  Yes  No

If yes, identify which at-risk populations you pay a special needs rate

We have authorized special needs rates in the past for at-risk populations, however at this time there are none. Clay County currently has no active Special Needs Providers. A past example, was a child with autism with a specific provider who was certified to care for children with autism.

2. If you have chosen to pay special needs rates for at-risk populations, include information for each child care provider that provides specialized services for the at-risk populations identified above. You must have DHS approval for special needs rates to be paid. If you have a contract or agreement with the identified child care provider, submit the contract or agreement as an attachment to this plan. **Attach a rate schedule for each at-risk child care provider or population served that identifies the rate begin date, rate end date, and rate amount.**

Organization name/ contractor	Provider name	License or certification number	At-risk population served	Documentation that supports specialized services by provider to the at-risk population	Documentation in client file that supports that the child is included in the at-risk population

If this information changes, including additional population groups identified by your agency, new facilities, or a proposed change in rates paid, DHS must approve the change. Submit a request to amend your plan. This information will be used during case audits.

## B. Special needs rates for care of sick children

You may choose to pay special needs rates for the care of sick children. Special needs rates for care of sick children apply to rates paid above the standard maximum rates to a provider that cares for sick children. You must have DHS approval for these rates to be paid.

Minnesota Rules, part  
3400.0110, subpart 8

1. Do you pay a special needs rate for care of sick children?

Yes  No

## VII. Payment policies

### A. Provider registration renewal

How often do you renew a provider's registration?

Yearly  Every two years  Other

Minnesota Statute, section  
119B.125, subdivision 1

### B. Payment to two providers when a child is sick

When a child is sick and being cared for by a second provider, do you pay both the regular provider that charges an absent day and the second provider that is caring for the child?

Yes  No

Minnesota Statutes,  
section 3400.0110,  
subpart 8

**Note:** If the rate paid for care of sick children exceeds maximum rates, the "rates for care of sick children" must be included in the special needs rates section of this plan.

### C. Submission of invoices

If a provider receives an authorization of care and a billing form for an eligible family, the provider must submit the billing form to the agency within 60 days of the last date of service on the billing form. If the provider shows good cause for the delay you may pay bills submitted after 60 days.

Minnesota Statute, section 119B.13, subdivision 6

1. What is your **definition of good cause** for delay in submitting a billing form? Agency error must be included in this definition.

Minnesota Statutes, section 119B.13, subdivision 6, states that all provider bills must be submitted to the county within 60 days of the last date of service on the bill. The county may pay a bill submitted after this 60 day limit if the provider shows good cause for the delay. The county defines good cause as the following:

- The provider has contacted the county concerning the particular vouchers and they are working on resolving the issue (signature of parent, verification of dates, etc.)
- The county was in error in not paying the voucher, the amount that was paid to the provider was incorrect, or the voucher was not issued by the county within 30 days of the last date of service on the bill
- If a voucher was "lost" in the mail but reported within 90 days of the last day of service on the bill, a new voucher can be issued but must be resubmitted within 30 days
- All payments made after 60 days must have supervisor approval
- No payments will be made later than 180 days after the last day of service on the bill unless the delay is because of agency error. In that case, payments can be made up to 1 year past the last date of care on the billing form.

2. Does your agency have any providers using MEC<sup>2</sup> PRO?  Yes  No

2a. DHS states CCAP agencies can decide which providers are granted access to submit bills using MEC<sup>2</sup> PRO. How do you decide which providers are granted access?

It is up to the Provider if they wish and they have the ability to use the PRO function.

2b. When would you deny or revoke MEC<sup>2</sup> PRO access to any of these providers?

Yes, for any provider who demonstrates substantial non-compliance for MN CCAP Provider policies

3. When is a provider signature not needed on a billing form?

If the provider is unable to sign due to death, illness or another circumstance approved by the county. Providers participating in the MEC<sup>2</sup> PRO System are exempt from the signature requirement.

4. Do you require the parent signature on the billing form?  Yes  No

4a. When is a parent signature not needed on a paper billing form?

When billing forms are submitted through MEC<sup>2</sup> PRO a parent signature is not required. A parent signature is also not required if care has ended with the provider before the voucher has been submitted and the provider has made several attempts to contact the family to sign the voucher with no success.

### D. Underpayments

If you have underpaid according to Child Care Assistance Program policies, do you make corrective payments? .

Yes  No

If yes, under what conditions do you make corrective payments? You may apply criteria such as a dollar amount or how far back the situation occurred.

Corrective payments are made when there has been an agency error. Corrective payments may also be made when a provider submits a written or email request [always retained on file] due to a billing error. These corrective payments would usually occur within 60 days of the billing period payment.