

# Administration of the Child Care Assistance Program

## 2022-2023 Isanti 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 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, 2022.

Minnesota Statute, section 119B.08, subdivision 3

Steps to complete the plan process:

#### Step One – Review the plan

Review this plan. Determine if there are changes compared to previous plans or if there are new policies or procedures. Involve other staff as needed.

#### Step Two – Draft the plan responses

Note these guidelines:

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

#### Step Three – Inform or involve stakeholders

**DHS encourages counties and tribes to develop optional policies in coordination with local child care stakeholders.** This may include: parents, child care providers, culturally specific service organizations, Child Care Aware agencies, interagency early intervention committees, 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 (Friday, September 17, 2021)

#### Amendments to plans

A county or tribe may amend their Child Care Fund Plan at any time. 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 child care assistance policy specialist.

Return completed plans by **Friday, September 17, 2021** 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 Isanti	GENERAL PHONE NUMBER 763-689-1711	EXTENSION	GENERAL FAX NUMBER 763-689-9877
AGENCY'S FULL NAME Isanti County Health and Human Services		CCAP INTAKE PHONE NUMBER 763-689-1711	EXTENSION
MAIN OFFICE STREET ADDRESS 1700 East Rum River Dr. S. Ste. A		CITY Cambridge	ZIP CODE 55008
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.

#### 1. County or tribal director

FIRST NAME Penny		LAST NAME Messer	
PHONE NUMBER 763-689-1711	EXTENSION 8152	EMAIL ADDRESS Penny.Messer@co.isanti.mn.us	
ADDRESS 1700 East Rum River Dr. S. Ste. A		CITY Cambridge	ZIP CODE 55008

#### 2. 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.

FIRST NAME Karrie		LAST NAME Kolb	
TITLE Financial Assistance Supervisor		PHONE NUMBER 763-689-1711	EXTENSION 8119
EMAIL ADDRESS Karrie.Kolb@co.isanti.mn.us		SIR EMAIL ADDRESS X130583@cty.dhs.state.mn.us	
ADDRESS 1700 East Rum River Dr. S. Ste. A		CITY Cambridge	ZIP CODE 55008

### 3. 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.

FIRST NAME Kelly	LAST NAME Hohlen		
TITLE Eligibility Worker	PHONE NUMBER 763-689-1711	EXTENSION 8632	
EMAIL ADDRESS Kelly.Hohlen@co.isanti.mn.us	SIR EMAIL ADDRESS X130204@cty.dhs.state.mn.us		
ADDRESS 1700 East Rum River Dr. S. Ste. A	CITY Cambridge	ZIP CODE 55008	
FIRST NAME Ashley	LAST NAME Young		
TITLE Eligibility Worker	PHONE NUMBER 763-689-1711	EXTENSION 8663	
EMAIL ADDRESS Ashley.Young@co.isanti.mn.us	SIR EMAIL ADDRESS X130845@cty.dhs.state.mn.us		
ADDRESS 1700 East Rum River Dr. S. Ste. A	CITY Cambridge	ZIP CODE 55008	

### 4. Management of waiting list contact

Who is your waiting list contact person? Only identify one waiting list contact.

FIRST NAME Kelly	LAST NAME Hohlen		
TITLE Eligibility Worker	PHONE NUMBER 763-689-1711	EXTENSION 8632	
EMAIL ADDRESS Kelly.Hohlen@co.isanti.mn.us	SIR EMAIL ADDRESS X130204@cty.dhs.state.mn.us		

### 5. 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.

FIRST NAME Kelly	LAST NAME Hohlen		
TITLE Eligibility Worker	PHONE NUMBER 763-689-1711	EXTENSION 8632	
EMAIL ADDRESS Kelly.Hohlen@co.isanti.mn.us	SIR EMAIL ADDRESS X130204@cty.dhs.state.mn.us		

## 6. Provider registration contact

Who is your lead provider registration contact person? Only identify one provider registration contact.

FIRST NAME Kelly	LAST NAME Hohlen		
TITLE Eligibility Worker		PHONE NUMBER 763-689-1711	EXTENSION 8632
EMAIL ADDRESS Kelly.Hohlen@co.isanti.mn.us		SIR EMAIL ADDRESS X130204@cty.dhs.state.mn.us	

## 7. Legal nonlicensed provider monitoring contact

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

FIRST NAME Jennifer	LAST NAME Darling		
TITLE Social Worker		PHONE NUMBER 763-689-1711	EXTENSION 8148
EMAIL ADDRESS Jennifer.Darling@co.isanti.mn.us		SIR EMAIL ADDRESS N/A	

## 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](#))

Application packets are available at Isanti County Family Services. CCAP is also actively promoted through MFIP/DWP orientation, overviews, and job clubs. BSF recruitment beyond the above listed efforts is not pursued while a waiting list is in existence. If an applicant comes in for other programs and appears to be eligible for CCAP, they are informed of this at that time.

**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 \(1\)](#))

Child Care Aware and Parent Aware flyers are distributed with every CCAP application packet and are also given at the request of families who are in need of child care providers. Child Care Aware and Parent Aware Flyers and Head Start brochures are readily available in the Isanti County Family Services lobby. If a parent connects with the CCAP worker, the worker will refer them to Parent Aware.

**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.

Each year, Isanti County Family Services participates in the Operation Community Connect (OCC) event where we reach out to various providers such as; Child Care Aware, Lakes and Pines, and Public Health. We ask them to participate and provide resources related to the services they offer to Isanti County residents. The OCC event is a one day event that is open to all Isanti County residents.

**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, 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.

Isanti County Family Services posted the 2022-2023 CCAP Plan on their website with a link to the Child Care Assistance Supervisor's email for comment.

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

Our plan was posted on our website on July 26, 2021 - August 25, 2021 and was available for review and comment for 30 days.

**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. Identify agency developed documents used for education plan requests and notices used to communicate approval or denial in each response and list these in the agency developed document section X.B.

#### 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.

Isanti County provides the applicant with a Child Care Education Plan Application to complete. The applicant is to provide proof to the Child Care Assistance Worker after each semester/ quarter/ session of training that he/ she is achieving acceptable progress. Students must maintain at least a good academic standing as determined by the educational institution.

**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).

Isanti County Family Services considers the education plan when the occupational outlook shows a demand for the

proposed profession and if the proposed profession is likely to move the trainee to a full-time gainful 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 third priority Basic Sliding Fee waiting list beyond those required in [Minnesota Statute, section 119B.03, subdivision 4](#)?

Yes  No

#### 2. When adding a family to your BSF waiting list, you must inform the family of the priority group determination, and the number of families on the waiting list or an estimated time that they will spend on the waiting list before reaching the top.

How do you notify a family they were placed on the waiting list?

- The family is sent DHS-7883A (You have been placed on the Child Care Assistance Program (CCAP) waiting list)
- The family is sent a notice developed by our agency (list this notice in section X.B Agency developed documents)

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

CCAP Policy Manual,  
Chapter 4.3.12.12

Minnesota Statute, section  
119B.03, subdivision 2

3a. Statute requires that you review and update your waiting list at least every six months. How are families notified of this six month review?

- The family is sent [DHS-7883B \(Child Care Assistance Program \(CCAP\) waiting list update\)](#)
- The family is sent a notice developed by our agency (list this notice in section X.B Agency developed documents)

Describe your agency's process for reviewing and updating the waiting list. If your agency does not currently have a waiting list, describe your process in the event your agency does start a waiting list.

Isanti County Family Services sends out DHS 7883B informing the family of the six month review. They will need to check either they want to stay on the waiting list or be removed, sign and date, and return the form to our office within 15 days. If they choose to stay on the list, they will remain on the list. If it is not received back they will be removed from the waiting list.

3b. How are families notified they are removed from the waiting list for not responding to the six month review?

- Families are sent an additional notice
- Six month review letter includes notification they will be removed from the waiting list if they don't respond
  - The family is sent DHS-7883D (You will be removed from the Child Care Assistance Program (CCAP) waiting list)
  - The family is sent a notice developed by our agency (list this notice in section X.B Agency developed documents)

#### 4. 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?

- 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.
- 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.

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

When a family reaches the top of the waiting list and is temporarily ineligible, 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

Do you have an alternate procedure 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?

Service authorizations are sent to the parents and providers through MEC2. Our county preference is that the Child Care Assistance Workers review/audit the billings prior to sending them to the billing worker for payment.

## 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?

Anytime a provider is registered, they are sent a Provider Guide DHS-5260. The Provider Guide details the expectations about what they can bill the county for. The billing forms that are sent to the Provider state what the maximum rate is that the county will pay and the approved authorized hours.

## 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.)?

The job counselors complete the Child Care Authorization form DHS-7054 which is sent to the Child Care Assistance

Workers by email. The job counselors will also use the Status Update form DHS-3165 which will be sent by email also.

## F. Extending redetermination dates beyond 12 months

Redeterminations may be extended beyond 12 months for a family that has a caregiver under the age of twenty-one, who does not have a high school or general equivalency diploma (GED), and is a student in a school district or another similar program that provides or arranges child care, parenting, social services, career and employment supports and academic support to achieve high school graduation.

An agency may identify other reasons to extend redetermination dates beyond 12 months as an optional policy. For example, an agency may extend redetermination dates to balance out a workload. [See CCAP Policy Manual, Chapter 10.3.](#)

1. Does your agency extend redetermination dates beyond 12 months?

Yes  No

## 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 seven 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 13

- An agency cannot implement these policies without establishing them in their plan.
- An agency must notify their child care assistance 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 13 of the CCAP Policy Manual. The agency should consider pursuing a fraud determination through other means described in section 13.9.3 in the CCAP Policy Manual. There also may be overpayments charged to the provider applied to time periods when Clause 1 occurred.

**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 13 of the CCAP Policy Manual. The agency should consider pursuing a fraud determination through other means as described in section 13.9.3 in the CCAP Policy Manual. There also may be overpayments charged to the provider applied to time periods when Clause 2 occurred.

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



What Child Care Assistance Program rules are you choosing to implement under this clause?

If a provider fails to report child absent days, a child that is no longer attending care, or any changes in the information provider acknowledgment, and any changes that would require a new LNL background study. If a provider fails to report when a child's attendance falls to less than half of the authorized hours.

Isanti County Family Services has the right to refuse to pay a bill, revoke child care authorization, and refuse to issue a child care authorization.

Providers would be required to submit monthly attendance records and submit new billings for the child/children. Monthly attendance records will need to be complete to show dates and times of attendance.

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

Providers would be required to submit monthly attendance records and submit new billings for the child/children. Monthly attendance records will need to be complete to show dates and times of attendance. The provider will need to complete a Provider Compliance Affidavit attesting that they will follow the terms as noted.

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

- Clause 4:** A provider is operating after receipt of a licensing order of suspension, revocation, or decertification (this occurs when providers are appealing the revocation, suspension, or decertification).

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 child care assistance policy specialist if you are planning to take action prior to receiving the monthly DHS listing.

- 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?

Providers would be required to submit monthly attendance records and submit new billings for the child/children. Monthly attendance records will need to be complete to show dates and times of attendance. The provider will need to complete a Provider Compliance Affidavit attesting that they will follow the terms as noted.

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

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

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

The provider must provide verification of the billing rates or verification of the changes to the billing rates. Once this has been done, the provider will have corrected the condition.

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

- 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?

The provider must provide verification of the child's attendance by submitting their attendance records. If the provider provided billing statements that misrepresented a child's attendance, they will be required to resubmit the billing form with the accurate attendance information for this child in order to receive payment. The provider will also need to sign a Provider Compliance Affidavit and once this has been done, the provider will

have corrected the condition.

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

## 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 X.B and if the document(s) have not yet been approved by DHS, submit with this plan for review and approval.

The Isanti County Provider Compliance Letter is included in all registration and renewal packets. Isanti County Family Services initially notified all registered providers by sending the notice to them when the 2020-2021 CCAP plan was developed.

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

## V. Unsafe care

### 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 (LNL) provider, certified license exempt center, or a provider licensed by an entity other than the state of Minnesota, child care authorization must be terminated immediately. See [Minnesota Rules 3400.0185, subpart 2, clause D](#).

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.

#### 1. Conditions of unsafe care

1a. Identify any additional conditions of unsafe care your agency applies to providers. NOTE: For legal nonlicensed providers, 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 required treatment by a physician.

We follow the provisions for LNL providers for all providers

1b. Do these conditions apply to all provider types? If no, explain which criteria apply to which provider types.

Yes - All provider types

#### 2. 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 provider, certified license exempt center or a provider licensed by an entity other than the state of Minnesota, child care authorization must be terminated immediately. Agencies do not give the provider 15 calendar days notice. See [Minnesota Rules 3400.0185, subpart 2, clause D](#).

2a. Of the unsafe care conditions listed in V.A.1, 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?

Isanti County Family Services will refer to MN State Statute 626.556 Subd. 2 (o) when determining if there is an imminent risk.

2b. Do these conditions apply to all of these provider types: legal nonlicensed providers, certified license exempt centers and providers licensed by an entity other than the state of Minnesota? If no, explain which criteria apply to which provider types.

Yes - All provider types

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

### A. 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? NOTE: DHS typically sends a list of annual monitoring visits that must occur within the next 90 days, but agencies must take other steps to monitor authorized LNL provider caseloads to ensure all providers who need an annual monitoring visit are identified.

The LNL provider spreadsheet is monitored and updated by the provider worker and shared with the LNL Provider Monitoring Contact. Our tracking list is monitored and if needed, an annual visit is conducted.

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

The Child Care Assistance Worker will notify the LNL Provider Monitoring Contact when an annual visit is due. The LNL Provider Monitoring Contact will conduct a site visit while using the DHS 7867 Monitoring Checklist and any other county and DHS Child Care Licensing documents as deemed appropriate. If the site visit is deemed to be in passing standards, the CCAP worker will document this information on their LNL Provider spreadsheet. If the site visit does not pass the standards, the LNL Provider Monitoring Contact worker will continue to conduct the site visits until they are in compliance. If they are not in compliance, they will not receive Child Care Assistance Payments.

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?

There is no time limit placed on LNL Provider and there is no limit to the number of re-inspections.

- Other

## B. 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?

Requests from the public for this purpose are referred to our Child Care Licensing Worker. They maintain a LNLP log and any substantiated complaints. If appropriate, complaints may be referred to Children's Services. The request for information would go directly to our Child Care Licensing Worker.

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

The worker would make this information available according to our data privacy guidelines.

### 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?

The Financial Assistance Supervisor and or the CCAP Worker connects with the LNL licensing department to verify the aggregate number of deaths, serious injuries, and substantiated maltreatment incidents for children under the care of a LNL provider. We complete the quarterly report, email it to DHS, and keep the email in a folder for record retention.

## VII. 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 for 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 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

## VIII. 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.

For claims received 60 days after the month of service the following would define good cause:  
Documented agency/ county error or delay  
Documented death or illness of the provider  
Natural disaster affecting the parent, provider, or agency.

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

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

A documented death or a serious illness.

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?

If the parent is unavailable or cannot be located for signature, a note of explanation by the provider is accepted. In the case of a documented death, serious illness, or if the parent is unavailable due to no longer having their children attend that provider and a two week notice was not given. The agency would accept the provider's signature only in these circumstances.

## 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.

Any underpayment would be corrected regardless of the amount and no time limit will be set.

## E. Provider rates

Does your agency enter provider rates on MEC<sup>2</sup>?  Yes  No

## F. Absent day policy

The Child Care Assistance Program limits the number of paid absent days for licensed child care providers and certified license-exempt centers. Payment may exceed absent day limit at the request of the provider and with the approval of the county or tribe, if at least one parent in the family:

Minnesota Statute,  
section 119B.13,  
subdivision 7

- Is under the age of 21; and
- Does not have a high school or general equivalency diploma; and
- Is a student in a school district or another similar program that provides or arranges for child care, parenting support, social services, career and employment supports, and academic support to achieve high school graduation.

Do you have any registered child care providers that meet these requirements?  Yes  No

## IX. Program integrity

**A.** Agency case management reviews can be used to determine causes of errors and identify specific policies needing review.

1. Do you conduct case management reviews of CCAP?  Yes  No

If yes, describe the process, including:

- How cases are selected,
- Which staff complete the reviews,
- What forms are used (DHS-5312D is available. If a different form is used, please list form(s) in Section X.B. Agency developed documents and submit with plan),
- How errors are resolved, and
- How staff are informed of correct policy.

The Child Care Assistance Workers randomly select cases for review. They use the DHS-5312D while reviewing the cases. If errors are found, corrections are made, and case notes are entered. If errors are found, The Financial Assistance Supervisor will review the case with the Child Care Assistance Worker.

2. Do you conduct case management reviews of CCAP providers?  Yes  No

If yes, describe the process, including:

- How providers are selected,
- Which staff complete the reviews,
- What forms are used (DHS-5312E is available. If a different form is used, please list form(s) in Section X.B. Agency developed documents and submit with plan),
- How errors are resolved, and
- How staff are informed of correct policy.

The Child Care Assistance Workers randomly select provider files for review. They use the DHS-5312E while reviewing the file. If errors are found, corrections are made, and case notes are entered. The Financial Assistance Supervisor will review the files with the Child Care Assistance Workers.

## X. Other information

### A. Additional agency optional policies

Do you have any other policies that apply to the Child Care Assistance Program which are not specifically required by state or federal rule or law? ([Minnesota Rules, part 3400.0140, subpart 1](#)) ([Minnesota Rules, part 3400.0150, subpart 2](#))

Under Clause 2, the agency will send providers a DHS optional notice for Administrative Disqualifications. The optional notice will notifying the provider their registration will be closed and an Administrative Disqualification for an intentional program violation is imposed.

### B. Agency developed documents

- All agency developed forms and notices used for the Child Care Assistance Program must reflect current policy and be approved by DHS.
- Counties and tribes must use documents developed by DHS for administration of child care assistance.
- Agency developed documents must not duplicate or replace DHS documents.
- Local agencies may create supplemental documents subject to DHS approval.
- Documents must be written using plain language standards and meet other communication guidelines.
- Review forms, notices and documents at least every two years to ensure they reflect current child care assistance policy and laws.

#### Document inventory for your agency

Use this table to list all agency developed forms, notices, and documents your agency uses to administer child care assistance. List all documents in the table. Submit any new and revised forms, notices or written documents that have not been previously approved.

Only new and/or revised forms, notices, or written documents that have not been previously approved must be submitted with this plan for DHS approval.

*Note:* Refer to the DHS memo announcing this plan for a list of DHS created documents required for the Child Care Assistance Program. Do not list or submit DHS created documents.

Name of agency developed document	Document reflects current CCAP policy	Status of current document
Education Plan	<input checked="" type="checkbox"/> Agency assures compliance	<input type="checkbox"/> DHS previously approved - no changes <input checked="" type="checkbox"/> DHS previously approved - revised and needs DHS approval <input type="checkbox"/> New document - needs DHS approval
Provider Compliance Policies Letter	<input checked="" type="checkbox"/> Agency assures compliance	<input checked="" type="checkbox"/> DHS previously approved - no changes <input type="checkbox"/> DHS previously approved - revised and needs DHS approval <input type="checkbox"/> New document - needs DHS approval

Name of agency developed document	Document reflects current CCAP policy	Status of current document
Provider Compliance Affidavit (Clauses 3,5,7)	<input checked="" type="checkbox"/> Agency assures compliance	<input checked="" type="checkbox"/> DHS previously approved - no changes <input type="checkbox"/> DHS previously approved - revised and needs DHS approval <input type="checkbox"/> New document - needs DHS approval

## XI. County and tribal assurances

Check the designated boxes below to assure compliance.

**A. The county or tribe is informing parents about the following as required under [Minnesota Rules, part 3400.0035, subpart 1](#).**

- The documentation necessary to confirm eligibility for CCAP
- Waiting list information
- Application procedures
- The importance of prompt reporting of a move to another county to avoid overpayments and to increase the likelihood of continuing benefits

**County or tribe assures compliance**

In addition, the agency uses the following:

"[Parent Acknowledgement When Choosing a Legal Nonlicensed Provider](#)" (DHS-5367) assures compliance with the following:

- Families rights and responsibilities when choosing a provider

"[Do You Need Help Paying for Child Care?](#)" (DHS-3551) assures compliance with the following:

- Federal and state child and dependent care tax credits
- Earned income credits
- Other services for families with young children required by state and federal laws
- Child Care Aware services
- Child Care Assistance Program eligibility requirements
- Family copayment fees and how computed
- Information about how to choose a provider
- Availability of special needs rates
- The family's responsibility for paying provider charges that exceed county maximum payments in addition to the family copayment fee

**County or tribe assures compliance and uses DHS-5367 and DHS-3551**



**B. The agency is distributing the following information to registered legal nonlicensed providers as required by:**

[Minnesota Rules, part 3400.0140, subpart 5.](#)

Use of "[Health and Safety Resource List for Parents and Legal Nonlicensed Providers](#)" (DHS-5192A) assures compliance with the following:

- Child immunization requirements
- Child nutrition
- Child protection reporting responsibilities
- Health and safety information required by federal law
- Child development information
- Referral to Child Care Aware; and
- Resources and training options to meet federal and/or state-required health and safety topics

**County or tribe assures compliance by use of DHS-5192A**

**C. Child Care Assistance Program (CCAP) Tasks and Timeframes**

The county or tribe must perform tasks and meet timeframes required to administer the Child Care Assistance Program. These tasks include, but are not limited to:

- Assessing CCAP eligibility
- Registering child care providers
- Processing payments

These tasks and timeframes are required under the Child Care and Development Fund (CCDF), 98.11(a)(3) Administration under Contracts and Agreements, Minnesota Statutes 119B, Minnesota Rules 3400, CCAP Policy Manual, and MEC<sup>2</sup> User Guide.

**County or tribe assures compliance**

**D. Child Care Assistance Program (CCAP) Funding**

DHS releases a forecast twice each fiscal year (November and February) which includes the overall budget for the Child Care Assistance Program, including all child care subprograms and administrative dollars. The county or tribe is reimbursed administrative dollars as outlined in Minnesota Statutes 119B.15. In addition to receiving the Basic Sliding Fee allocation, the county or tribe contributes a fixed local match equal to that county's/tribe's calendar year 1996 contribution, as outlined in Minnesota Statutes 119B.11, Subd. 1.

The county or tribe is provided a calendar year Basic Sliding Fee allocation, published at least annually and based on the formula outlined in Minnesota Statutes 119B.03, Subd. 6. When there is not sufficient funding to serve all eligible non-MFIP families, the county or tribe manages the Basic Sliding Fee waiting list according to the priorities outlined in Minnesota Statutes 119B.03, Subd. 4.

**County or tribe assures compliance**

## **E. Child Care Assistance Program (CCAP) Reporting**

The county or tribe is required to submit timely reports to the Department of Human Services. The reports include, but are not limited to:

- Basic Sliding Fee waiting list
- Override monitoring
- Basic Sliding Fee adjustments

**County or tribe assures compliance**

## **F. Limited English Proficiency Plan**

The county or tribe has completed a Limited English Proficiency Plan, describing how it serves families with limited English Proficiency

**County or tribe assures compliance**