Child Care Subsidy Policy & Procedures Manual

CHILD CARE

Subsidy Policies and Procedures Manual

WV Department of Human Services
Bureau for Family Assistance Policy
Division of Early Care & Education
350 Capitol Street, Room B-18
Charleston, WV 25301-3704

September 3, 2026

CHAPTER 1: CHILD CARE PROGRAM GOALS AND DEFINITIONS 1
1.0. Child Care Program Description and Goals 1
1.0.1. Program Description 1
1.0.2. West Virginia State Goals 1
1.0.3. Federal Goals 1
1.1. Definition of Program Terms 1
CHAPTER 2: OVERVIEW OF CHILD CARE SERVICES APPLICATION PROCESS 8
2.0. Application Overview 8
2.1. Face-to-Face Application: 8
2.2. People's Access to Help (PATH) Application Option: 8
2.2.1. PATH Applicant: 9
2.2.2. Face to Face: 9
2.3. Items Covered During Application Interview: 9
2.3.1. Need: 10
2.3.2. Financial Eligibility: 10
2.3.3. Verifications: 10
2.3.4. Child Assessment: 10
2.3.6. Payment Rates: 10
2.3.7. Parent's Rights: 10
2.3.8. Parent's Responsibilities: 10
2.3.9. Parent Services Agreement: 10
2.3.10. Child Care Certificate: 10
2.3.11. Child Care Provider list: 10
2.3.12. How to Choose a Child Care Provider: 11
2.3.13. Local Resources: 11
2.4. The Application Process 11
2.4.1. Verifications Requested During Intake Interview 11
2.4.2. CCR&R Supplied Forms 11
2.4.3. Notifying Parent of Application Status: 12
2.5. The Interview Process: 14
2.5.1. Payment Rates Available 14
2.5.2. Allowable Charges by Providers 14
2.5.3. Parent's Rights 14
2.5.4. Parent Responsibilities 14
2.5.5. Consequences of Failure to Comply with Program Responsibilities 17
2.5.6. Other Services Offered by DoHS: 17
CHAPTER 3: DETERMINATION OF FAMILY ELIGIBILITY 18
3.0. Family Eligibility 18
3.1. Child Age Requirement 18
3.2. Family Criteria 18
3.2.2. Two Parent Households 19
3.2.3. Joint Custody 19
3.2.4. Foster Parent(s) – Participating in Qualifying Activity 19
3.2.5. Kinship/Relative Caretaker Parent(s) – Participating in Qualifying Activity 20

3.3. Child's Citizenship Requirement 21
3.3.1. U. S. Citizenship: 21
3.3.2. Qualified Alien: 21
3.3.3. Acceptable Proofs of Citizenship: 22
3.4. WV Residency Requirement and Proof of Identity: 22
3.4.1. Acceptable forms of proof of identity: 22
3.4.2. Acceptable Proofs of WV Residency: 23
3.5. Wage Requirements: 24
3.5.1. Wage Requirement for Eligibility 24
3.5.2. What is Minimum Wage? 24
3.5.3. Notes on Federal and West Virginia State Tax Withholding: 24
3.6. Minimum Qualifying Activity Participation Hour Requirement 25
3.6.1. Working Recipients: 25
3.6.2. WV Works: 25
3.6.3. Post-Secondary Education Students: 25
3.6.4. CPS Safety/Treatment Plan: 26
CHAPTER 4: DETERMINATION OF NEED FOR CHILD CARE 27
4.0. Need for Child Care 27
4.1. Activity: Employment in the Private or Public Sector 27
4.1.1. Verifications Required 27
4.1.2. Night Time Employment 27
4.1.3. Extended Work Shift 27
4.1.4. Teleworking: 28
4.2. Activity: Job Search 28
4.2.2. Job Search Begins: 29
4.2.3. Job Search Ends: 29
4.2.4. Requesting Additional Job Search Periods: 29
4.3. Activity: Self-Employment 29
4.3.1. Livelihood: 29
4.3.2. Hobby: 29
4.3.3. Self-Employment – Home-based: 29
4.3.4. Self-Employment – other: 29
4.3.5. Types of Self-Employment: 30
4.3.6. Criteria for Approval of Self-Employment Activity 30
4.4. Activity: WV WORKS 31
4.4.1. WV WORKS Approved Work Activities 32
4.4.2. WV WORKS Work-Eligible Requirement 33
4.4.3. WV WORKS: Two Parent Households 33
4.4.5. WV Works: Minimum Hours of Participation 33
4.4.6. WV Works; Minimum Wage Requirement 33
4.5. Activity: Job Training/Education 33
4.5.1. Reasonable Study Time 34
4.5.2. Scholarship Requirements 34
4.5.3. Satisfactory Progress and Attendance 34
4.5.4. Reinstatement After Closure for Failure to Improve 35
4.5.5. Petition for Reinstatement after a Second Suspension 36

4.5.6. Home Schooled Minor Parents 36
4.6. Supportive Services for Child Protective Services Recipients 36
4.7. Exceptions to Eligibility: Policy Exceptions 37
4.7.1. Family exceeds income guidelines at the end of a Job Search period: 37
4.7.2. Illness: 37
4.8. Interim Care 39
4.8.1. Reasons for Interim Care: 39
4.8.4. Attendance during the interim period: 40
4.9. Over-Night Care 40
4.10. Need for Care and School Age Children 40
4.11. AmeriCorps and Vista: 41
CHAPTER 5: FINANCIAL ELIGIBILITY FOR CHILD CARE SERVICES 43
5.0. Overview 43
5.1. Family Size 43
5.1.1. Adults Other than Spouses in the Household 43
5.1.2. Multi-Generational Households 43
5.1.3. Adult Children in the Household 44
5.1.4. Head of Household 44
5.1.5. Adoptive Children 44
5.1.6. Multiple Family Households 44
5.1.7. Unmarried Parents 44
5.1.8. Family Members Expected to Return 44
5.1.9. Biological Parents Residing on the Same Premises 45
5.2. Monthly Gross Income 45
5.2.1. Employment Income Considered in Determining Eligibility 45
5.2.2. Countable Non-Farm Self-Employment Income 47
5.2.3. Countable Income from Farm Self-Employment 48
5.2.4. Countable Unearned Income 48
5.2.5. Income Not Considered in Determining Eligibility 50
5.3. Conversion of Income to Monthly Amounts 51
5.3.1. Income Received on a Regular Basis 51
5.3.2. Irregular Income 51
5.3.3. Changes in Income during Certificate Period 52
5.4. Sources of Documentation/Verification 52
CHAPTER 6: CLIENT CASE MANAGEMENT & CONTINUED CONTACT 54
6.0. Client Case Management Overview 54
6.1. Case Management PATH Ticklers 54
6.1.1. Redetermining Eligibility: The Status Check 54
6.1.2. Procedures for Completion of Status Checks 55
6.1.3. Ticklers for Changes in Child Age 56
6.1.4. Need for Care 90 Day Tickler 56
6.2. Additions to Family Size 57
6.2.1. Adding a Child 57
6.2.2. Adding a Spouse or Biological Parent 57
6.3. Changes in Days and/or Hours of Care During the Certificate Period 58
6.4. Parental Child Care Fees 59

6.4.1. Who Pays Fees? 59
6.4.2. Who Collects Fees? 59
6.4.3. How Are Fees Determined? 59
6.4.4. How Are Fees Collected? 59
6.4.5. How Are Overdue Fees Collected? 60
6.4.6. Clients Requesting a Reduction in Fees 61
6.5. Procedures for Exceptions to Eligibility Policy 62
6.5.1. Family exceeds income guidelines at the end of a Job Search period: 62
6.5.2. Illness 63
6.6. Negative Actions: Appeals and Fair Hearings 64
6.6.1. If the client disagrees with a negative action, he or she may either: 64
6.6.2. Actions Not Considered Negative 65
6.6.3. Fair Hearing Procedures 65
6.7. Communication between CCR&R Agencies 65
6.7.1. Clients Moving from One CCR&R Region to Another 65
6.7.2. Improper Payment Prevention 66
CHAPTER 7: PURCHASE OF CHILD CARE THROUGH CERTIFICATES 67
7.0. Overview 67
7.1. Parental Choice 67
7.1.1. Expulsion 67
7.1.2. In-Home Child Care 67
7.1.3. Family Child Care Homes 70
7.1.4. Family Child Care Facilities 71
7.1.5. Child Care Centers 71
7.1.6. Out of School Time Child Care Programs 71
7.1.7. Use Of Out of State Providers 71
7.2. General Payment Provisions of the Certificate System 71
7.2.1. Payment Rates and Definitions 71
7.2.2. Payment Limitations 71
7.2.3. Use of Multiple Providers 71
7.2.4. Use of Substitutes 72
7.2.5. Operation of Multiple Child Care Sites 72
7.2.6. Eligibility for Provider's and/or Child Care Employee's Children 72
7.2.7. Certificate System Payment Rates 73
7.2.8. Enrollment-Based Payment: 74
7.2.9. Provider Closures and Billable Day Eligibility 77
7.2.10. Enrollment-Based Payment and Licensed Capacity 78
7.3. PATH Payment Process 79
7.3.7. CCR&R Review Requirements Prior to PATH Entry 81
7.3.8. Electronic Submission of Payment Requests 82
7.4. Payment Processing 83
7.5. Direct Deposit 83
7.6. Responding to Payment Inquiries and PATH 84
7.6.1. Payment Inquiries 84
7.6.2. PATH Plus 84
7.7. Child Care Attendance Sheets (ECE-CC-10-G) 84

7.7.1. Completion of Attendance Sheets 85
7.7.2. Signing In and Out 85
7.7.3. Accuracy of Records 85
7.7.4. Frequency of Submission 85
7.8. Lost and Returned Checks 86
7.8.1. Returned Checks: 86
7.8.2. Lost, Stolen and Misplaced Checks: 86
7.9. Wage Garnishment Requests 87
CHAPTER 8: Improper Payments: Prevention, Identification, Measurement and Recoupment 88
8.0. Improper Payments Overview 88
8.1. Maintaining Program Integrity 88
8.2. Improper Payment Prevention Strategies 89
8.3. Types of Improper Payments 90
8.3.1. Worker Error 90
8.3.2. Misrepresentation 90
8.3.3. Programmatic Infractions 91
8.4. Referrals to Investigations and Fraud Management 92
8.4.1. Procedure for Referrals 92
8.4.2. When Not to Refer to Investigations Fraud Management 92
8.5. Recovery of Improper payments 93
8.6. Subsidy Participation and Improper Payments 94
8.6.1. Clients 94
8.6.2. Unresolved Fraud Referrals and New Applications 94
8.6.3. Providers 94
8.6.4. Substantiated Misrepresentation in Child Care or other DoHS Programs 94
8.6.5. Exceptions for WV Works Participants 95
8.7. Billing Form Discrepancies 95
8.7.1. Using Critical Thinking 95
8.7.2. How to Address Use and Billing for Unauthorized Days and Times 96
8.8. Corrective Action Plans 98
8.8.1. Elements of a Corrective Action Plan 98
8.8.2. Procedures for Corrective Action for Child Care Resource and Referral Staff 98
CHAPTER 9: CHILD CARE RESOURCE AND REFERRAL PROVIDER ORIENTATION AND PAYMENT ENROLLMENT 101
9.0. General Provisions 101
9.1. Overview: Enrolling Providers in the Subsidy System 101
9.1.3. Notifications to Parents and Providers 102
9.2. Use of Providers in Other Counties and States 102
9.3. Child Care Provider Orientation 103
9.3.1. Best Practices for Provider Orientation 103
9.3.3. WV CARES Registration Process 105
9.3.4. WV STARS Registry Account 105
9.3.5. Child and Adult Care Food Program 106
9.3.6. WV Birth to Three 106

9.3.7. WIC 106
9.3.8. Zoning 106
9.3.9. List of Child Care Regulatory Specialists 106
9.3.10. CCR&R resources: 106
9.3.11. Discussion of Regulations: 107
9.3.12. Resource Information for Providers 107
9.4. Provider Payment Training (detail) 109
9.4.1. Discussion of Billing Procedures and Forms 110
9.4.2. Quality Tier Standards 111
9.4.3. Payment Rates and Tiered Reimbursement 111
9.4.4. Payment Training Quiz (ECE-CC-10H) 111
CHAPTER 10: GENERAL PROVIDER REGULATION INFO FOR CCR&R AGENCIES 113
10.1. Complaint Response and Procedures 113
10.1.1. Who Handles Complaints? 113
10.1.2. Complaint Intake Process 113
10.1.3. Special Circumstances – Child Abuse and Neglect Allegations 114
10.1.4. Parental Requests for Complaint Record 114
10.2. Communication with Providers, Department Staff and CCR&Rs 115
10.2.1. Communication between the CCR&R and the Department 115
10.2.2. Notice to Child Care Resource and Referral Agencies 115
CHAPTER 11: ADMINISTRATIVE HEARINGS 116
11.0. Overview 116
11.1. Reasons for Hearings 117
11.2. Adequate and Timely Notice of Decisions 117
11.2.1. Required Notice Information 117
11.2.2. Exceptions to Thirteen (13) Day Notice 118
11.3. Pre-Hearing Conferences 118
11.3.1. Release of Information 118
11.3.2. Critical Timelines Regarding Hearings or Pre-Hearing Conferences 118
11.4. Procedures for Handling Request for a Hearing 119
11.5. Hearing Preparation 119
11.6. During the Hearing 120
11.7. Denial or Dismissal 121
CHAPTER 12: PROVIDER RESOURCES 122
12.0. Overview 122
12.1. Kindergarten 122
12.2. Head Start and Early Head Start 122
12.3. West Virginia Pre-k Program 124
12.4. Grants 124
12.5. Child and Adult Care Food Program 125
12.5.1. Cooperative Agreements 125
12.5.2. Exchange of Information 125
12.5.3. Regulation of CACFP Providers 125
CHAPTER 13: CHILD CARE STAFF RESPONSIBILITIES 126
13.0. Overview 126

13.1. Division of Early Care & Education – Child Care & Quality Initiatives Staff 126
13.2. Division of Early Care and Education – Child Care Center Licensing Staff 127
13.3. DoHS Child Care Regulatory Specialists 127
13.4. Child Care Resource and Referral Agencies (CCR&R) 128
13.5. Quality Rating and Improvement System Specialist State Lead 130
13.6. Cooperative Agreements between the DoHS and the CCR&R 131
CHAPTER 14: RECORDING PROCEDURES 132
14.0. Introduction 132
14.1. Filing Procedures 132
14.1.1. Client Case Record 132
14.1.2. Child Care Provider Files Maintained by the CCR&R Agency 133
14.2. Record Retention and Disposal 134
14.3. Child Care Forms and PATH Reports for Subsidy Clients 135
14.4. Child Care Forms and PATH Reports for Providers 137
14.5. Miscellaneous Forms and PATH Reports 142

CHAPTER 1: CHILD CARE PROGRAM GOALS AND DEFINITIONS

1.0. Child Care Program Description and Goals

1.0.1. Program Description

Child care is a service which offers direct care and protections of infants, preschool, and school-age children during a portion of a twenty-four (24) hour day inside or outside of the child's own home. Child care is generally provided to children under the age of thirteen (13). In some situations, such as developmental delays, physical or behavioral disorders, or the need for supervision for children under court supervision, a child care plan for children under the age of eighteen (18) may be considered.

1.0.2. West Virginia State Goals

The primary goal of child care services is to provide experiences to children which will foster their healthy development while enabling their parents to participate in work or educational activities. Child care supplements the care and protection that a child receives from his parents.

1.0.3. Federal Goals

The federal Child Care & Development Fund, which provides the primary funding for the State of West Virginia's child care program, requires West Virginia to develop a plan for operation of services. The WV State Plan must address how federal funds will be utilized to address the federal goals for child care: to improve the affordability, availability, and quality of child care programs. Further information about how the State of West Virginia is addressing those goals is included in the West Virginia Child Care Plan which may be accessed through the Bureau for Family Assistance web site at:
https://bfa.wv.gov/media/39915/download?inline

1.1. Definition of Program Terms

The following definitions of program terms shall be used in interpreting child care program policy:

1.1.1. Accreditation:

Certification by a qualified entity, generally nationally recognized, that a program meets accepted standards of excellence established for such programs.

1.1.2. Adult:

An individual who is 18 years of age or older.

1.1.3. Applicant:

Anyone who applies for or requests child care services regardless of his/her race, color, creed, national origin, sex, age, or marital status; or anyone who applies to be a child care provider.

1.1.4. Approval:

Process by which DoHS approves a child care facility that is not required by law to be regulated which enables the service provider to participate in the child care subsidy certificate program.

1.1.5. Billable Day:
A billable day is a full day of care based on the child's authorization period and the monthly conversion process in Section 7.2.7 and Appendix C. Billable days represent the maximum number of days a provider may claim under enrollment-based payment for the service month. To qualify for enrollment-based payment, the child must meet the applicable attendance requirement during at least one calendar day of the service month, as provided in Section 7.2.8.

1.1.6. Certificate of Registration:
A statement issued by the Commissioner for a period of up to two years to a family child care home upon receipt of a self-certification statement of compliance with the applicable rules promulgated by the Commissioner.

1.1.7. Child:
An individual who is: 1) under 13 years of age, 2) 13 to 18 years of age and is either under court supervision or a special needs child as defined in 1.2.44.

1.1.8. Child Care Resource & Referral Agency (CCR&R or R&R):
An agency under contract with the Department of Human Services to maintain provider resources, provide consumer education, manage the child care subsidy program, refer parents to available providers, and offer services to improve the quality of child care, such as provider training and technical assistance.

1.1.9. Child Care Center:
A place operated for the care of 13 or more children on a nonresidential basis.

1.1.10. DoHS:
West Virginia Department of Human Services.

1.1.11. Emancipated Minor:
A child over the age of sixteen who has petitioned a court for emancipation and who has been declared by the court to be emancipated with all rights and duties of an adult; additionally, all children who are now or were previously legally married.

1.1.12. Enrollment-Based Payment: A method of payment in which the provider is reimbursed based on the child's authorized enrollment rather than the number of days the child is present, up to the number of billable days established by the Division of Early Care and Education for the service month. The provider may claim enrollment-based payment when the child meets the applicable minimum attendance requirement during the service month and all other conditions in Section 7.2.8 are met. Enrollment-based payment does not allow reimbursement for more days than supported by the child's authorization.

1.1.13. Facility:
A place or residence, including personnel, structures, grounds, and equipment used for the care of a child or children on a residential or other basis for any number of hours a day in any shelter or structure maintained for that purpose.

1.1.14. PATH:
The People's Access to Help (PATH) is the management information system used to maintain child care information on families and providers, determine eligibility and process payments.

1.1.15. Family:
One or more adults and children, if any, related by blood or law, and residing in the same household. Where adults other than spouses reside together, each shall be considered a separate family. Emancipated minors and children living under the care of individuals not legally responsible for their care shall be considered as separate families.

1.1.16. Family Child Care Home:
A facility which is used to provide nonresidential child care for compensation in the provider's home. The provider may care for four to six children, including children who are living in the household, who are under six years of age. No more than two of the total number of children may be under twenty-four months of age.

1.1.17. Family Child Care Facility:
Any facility which is used to provide nonresidential child care for compensation for seven (7) to twelve (12) children for four (4) or more hours per day, including children who are living in the household who are under six years of age. No more than four (4) of the total number of children may be under 24 months of age.

1.1.18. Foster Parent:
A person or persons living in a private residence that has been certified by the Department of Human Resources or by a licensed child placement agency to provide care on a residential basis for children who are in the legal custody of the State of West Virginia.

1.1.19. Full Day:
Care for at least four (4) hours but less than eighteen (18) hours per day, (from 4 hours and 1 minute up to 17 hours and 59 minutes).

1.1.20. Head of Household:
A natural parent, step parent, or an individual acting in loco parentis, such as a relative or non-relative who has been granted custody or guardianship by a court of law or who has assumed full physical custody and responsibility for a child, with or without legal custody.

1.1.21. Hobby:
An activity done for relaxation, and not for the purpose of meeting the basic daily living expenses of the individual. Activities generating income below the tax liability limit of $5000.00 per year shall be considered a hobby.

1.1.22. Homeless:
A family will be considered homeless if the family reports that they are a.) Unwillingly doubled up with family or friends; b.) Residing in hotels or motels, trailer parks, or campgrounds; c.) Residing in an emergency or transitional shelter, abandoned in hospitals, or awaiting foster care placement; or d.) Unsheltered or living and/or sleeping in a place that is unfit for human habitation.

1.1.23. Household:
A household consists of all individuals who live at the same address and share common kitchen facilities.

1.1.24. Kinship/Relative Parent(s):
A person or persons who lives in a private residence which has been certified by the Department of Human Resources, or by a licensed child placement agency, to provide care on a residential basis for children who are in the legal custody of the State of West Virginia. Kinship/Relative parent(s) provide caretaker services to a child in the legal custody of the State of West Virginia and are related to the child by blood or marriage, including cousins and in-laws, or by a person(s) recognized by the child as a relative. West Virginia child welfare services or certified placement agency will assess the eligibility of the home at the time.

1.1.25. Income Eligibility:
A method of determining eligibility that is based on establishing that the monthly gross income of the applicant/recipient's family is no more than the maximum income level allowable for the service requested or delivered.

1.1.26. Informal Family Child Care:
An informal family child care home provides care for three (3) or fewer children. At least one (1) child is not related to the provider. Informal child care providers are exempt from regulatory requirements but may volunteer to register to receive federal child care or food program funding.

1.1.27. In-Home Care:
In-home child care is provided by specific relatives, grandparents, aunts, uncles, and siblings of legal age, for a child or children in the child's own home..

1.1.28. In Loco Parentis:
A Latin term meaning, "In place of the parent" and refers to an individual who assumes parental status and responsibilities for a minor, without formally adopting the minor.

1.1.29. Instructional Time-Education-Only Services: Services or periods during which the primary purpose of the service is to provide a school-age child's required academic instruction rather than child care. Instructional time or education-only services do not qualify as allowable child care when provided as part of the child's regular school day,

result in academic credit, or supplant or duplicate the academic program the child is required to receive through a public, private, homeschool, or other educational program.

1.1.30. Licensed Capacity:
Licensed capacity is defined as the maximum number of children a provider is authorized to care for at any given time, as determined by the West Virginia Child Care Licensing Agency.

1.1.31. Livelihood:
A means of support or survival in which an individual engages to meet daily living expenses.

1.1.32. Minimum Wage:
The prevailing minimum wage mandated by state law in the state of West Virginia. In-home child-care provider reimbursements must equal West Virginia's minimum wage requirement unless special exceptions are granted. Self-employed individuals must meet West Virginia minimum wage requirements to be eligible for child care assistance.

1.1.33. Mixed-Use Provider: A provider that offers allowable child care services and also offers separate instructional, educational, tutoring, homeschool support, remote learning support, enrichment, or other services that do not qualify as allowable child care.

1.1.34. Monthly Gross Income:
Monthly gross income is the total amount of money, prior to deductions, received or earned monthly by members of a family.

1.1.35. Non-Traditional Work Hours:
Non-traditional work hours are defined as:

1.1.35.1. Approved care for at least four (4) hours provided either before 6:00 am or after 7:00 pm Monday through Friday.

1.1.35.2. Any 12-hour work/school shift or split shift which equals twelve or more care hours (including transportation) in a 24-hour period, and

1.1.35.3. Approved care for at least four (4) hours provided on a Saturday or Sunday.

1.1.36. Out of School Time Child Care Program:
A child care service that offers activities to children before and after school, on school holidays, when school is closed due to emergencies and on school calendar days set aside for teacher activities. OST Programs provide out of school time services typically for fewer than four (4) hours daily, and not more than 30 full days annually for children aged 5 and up.

1.1.37. Parent:

A parent by blood, marriage, or adoption; or a legal guardian or other person standing in loco parentis, such as foster parents, grandparents, other relatives, and persons receiving TANF benefits for children only.

1.1.38. Part Day 2-less than 4 hours:
Care provided at least 2 hours but not exceeding 3 hours and 59 minutes per day. (From 2 hours and 0 minutes up to 3 hours and 59 minutes)

1.1.39. Part Days less than 2 hours:
Care provided for more than 1 minute but not exceeding 1 hour and 59 minutes per day.

1.1.40. Registration:
Process by which a family child care home self-certifies compliance with the promulgated rules.

1.1.41. Relative Family Child Care:
A relative family child care home provides care only to children related to the caregiver. The caregiver must be a grandparent, great grandparent, aunt, uncle, great-aunt, great-uncle, or adult sibling. Relative family child care homes are exempt from regulatory requirements but may volunteer to register to receive federal child care or food program funding.

1.1.42. Resident:
An individual who has established West Virginia as a permanent home, the place where s/he intends to return after any period of absence. Individuals are not eligible if they consider another state "home," maintain a principal residence or voter or car registration in another state with an intent to return, with the following exceptions:

1.1.42.1. Non-residents who attend a West Virginia college or university

1.1.42.2. Migrant and itinerant workers who have entered the state to seek employment or fulfill a commitment.

These individuals are considered residents of West Virginia if they have proof of residency in West Virginia.

There are no requirements as to the duration of residency for applicants for child care subsidy. Documentation of West Virginia residency includes a West Virginia home address where the applicant lives and one or more of the following items: current West Virginia individual income tax return indicating West Virginia resident status, valid West Virginia driver's license, current West Virginia motor vehicle registration, proof of undergraduate student in states tuition payment, and other reasonable verification as listed in Chapter 3, Section 4.2.

1.1.43. Revoke/revocation:
Negative action taken by terminating licensure or registration when a provider fails to maintain established requirements of child care.

1.1.44. Self-Employment – Home-based:
Self-Employment in which the primary function of the business is performed in the home. Examples: (1) a beautician with a salon in the garage or (2) a family auto repair business operated in a building next to the family's residence.

1.1.45. Self-Employment – Other:
Self-Employment in which the primary function of the business is performed at a location other than the family's home. Example: plumber, lawn care business, construction worker, handy man, hairstylist who rents a booth. These individuals may use a portion of their home as a home office to conduct phone business or accounting but cannot claim the home office as an allowable deduction since the primary function of their work occurs elsewhere.

1.1.46. Service Provider:
Individuals who provide child care or other types of service to individual recipients. Providers are not required to meet any service eligibility criteria.

1.1.47. Special Needs Child:
One who experiences significant developmental delays or who has a diagnosed physical or mental condition which has a high probability of resulting in a significant developmental delay. A significant delay is a 25% delay in one or more areas of development or a six (6) month delay in two (2) or more areas. Areas of development include cognitive, speech/language, physical/motor, vision, hearing, psycho-social, and self-help skills. Developmental delay is determined by early intervention programs, special education programs, or other multi-disciplinary teams. Special Needs determination may also be made at the CCR&R level.

1.1.48. Status Check:
A form which is sent to child care recipients to assess continuing eligibility to receive child care services.

1.1.49. TANF Caretaker Relative:
An adult relative other than the natural or adoptive parent, such as a grandparent, aunt, uncle, brother, sister and their legal spouses and those relatives of preceding generations and their legal spouses. The Caretaker Relative home will be a private residence that has been approved by the Department of Human Resources. Caretaker services are provided by a relative of a child or children, NOT in the legal custody of the State and may, or may not, be receiving services from Child Protective Services. TANF Caretaker Relative eligibility designation must be determined by the WV DoHS Family Support Specialist.

1.1.50. Waiver:
A declaration that a certain rule is inapplicable in a particular circumstance.

1.1.51. Working:
Receiving a non-subsidized wage or salary for the work performed.

CHAPTER 2: OVERVIEW OF CHILD CARE SERVICES APPLICATION PROCESS

2.0. Application Overview

2.1. Face-to-Face Application:

Any parent who wishes to request child care services may apply by contacting the local Child Care Resource and Referral (CCR&R) agency. The applicant, or parent/head of household, must have custody of the child(ren) or reside with the child(ren). The CCR&R agency is responsible for taking applications and determining eligibility for subsidized care. While an application may be completed by a parent prior to an office visit, case managers should consult with their supervisors for guidance in processing these applications. The CCR&R agency staff shall conduct a face-to-face interview with the parent within 5 days of the parent's initial contact for clients served in main offices. CCR&R agency staff shall conduct a face-to-face interview with parents within 10 days for clients served at outreach offices, only when approval to visit outreach sites less often than weekly has been granted by the Division of Early Care and Education. Applications shall not be future dated.

The parent applies by completing the Application for Child Care Services (DAY-0614 or ECE-CC-1) or by supplying the application information to the CCR&R child care case manager who then completes the Child Care Intake screens in PATH. The parent must sign the application signature page which certifies an understanding of the process and verifies that the information is true and complete. The Child Care application signature page must contain an original signature. Copied signatures are not accepted.

Face to Face applications are best practice and the preferred method of approving clients for child care, however, there may be instances where a client cannot come into a CCR&R office. All applicants should be encouraged to attend a face-to-face meeting for child care application, however if the client states they cannot come into the office, a phone application should be offered.

When completing phone applications, the application date is the date of the phone call, client will be given 13 days to submit all required documents, including the original signed Parent Service Agreement and the Signature Page to the application (these documents cannot be faxed or emailed) The Child Care Parent Service Agreement must contain an original signature. Copied signatures are not accepted. Failure to submit these original documents will result in the denial of the application.

Should a paper application be mailed to the client, the application date shall be the date that a phone application is completed.

2.2. People's Access to Help (PATH) Application Option:

The West Virginia Department of Human Resources maintains an internet portal called PATH that enables West Virginia citizens to apply for certain benefits online. Online applicants are informed during the application process that they must still visit their local child care resource

and referral agency to complete their application and receive child care assistance. The start date of the application begins at the time of the face-to-face visit at the child care resource and referral. Child Care applications successfully completed via PATH will be transferred into PATH as an intake, 3 times per day (morning, mid-day, and evening). These intakes will be assigned to the county inbox where the applicant resides. PATH will automatically remove intakes older than 45 days from the county inbox. **Case manager Actions:**

2.2.1. PATH Applicant:
If a child care applicant calls a CCR&R office after successfully completing a child care application via PATH, instruct the applicant to come in to the CCR&R office as soon as possible to complete a face-to-face interview. Remind the applicant that subsidy payment cannot begin until the date of the face-to-face interview, regardless of when the online application was completed.

2.2.2. Face to Face:
Once the child care applicant comes into a CCR&R for a face-to-face interview after successfully completing a child care application via PATH, then the following steps should be taken:

2.2.2.1. Locate and open the intake in PATH To access a county inbox in PATH, click on the "Inbox" tab, then next to "Jurisdiction" select the appropriate county.

2.2.2.2. Change the "Date of Intake" date, under the General information tab, to the date of the face-to-face interview,

2.2.2.3. Verbally verify all other information listed in the application, ensuring all screens are completed and all information is correct.

2.2.2.4. Proceed as usual with standard intake practice (collecting verifications, entering contacts, issuing notices, etc.)

2.2.2.5. If a child care applicant calls a CCR&R office with questions or problems regarding the use of PATH itself, CCR&R staff must direct the applicant to the toll-free PATH Technical Call Center: (844) 451-3515.

2.3. Items Covered During Application Interview:
An interview must be held with the parent(s) upon completion of the application. During the interview, the CCR&R case manager explains how child care services are provided, and the parent supplies information needed to make appropriate child care arrangements. The case manager shall document any important information from the interview in PATH. The case manager shall also collect information and document it on the appropriate screen in PATH items required for Federal reporting, including primary language spoken in the home, whether the family is homeless, and whether a parent is a military service member. In addition to collection of information requested for completion of an application, the interview shall include:

2.3.1. Need:
Evaluation of the need for child care services.

2.3.2. Financial Eligibility:
The determination of financial eligibility. This should include an asset review, as families, including foster parents, kinship/relative parents and TANF Caretaker Relative parents, whose assets exceed $1,000,000 are not eligible for assistance.

2.3.3. Verifications:
Review of verifications supplied by parent and those still needed to confirm eligibility.

2.3.4. Child Assessment:
Assessment of the family's needs and a review of children to be placed in child care. This assessment should determine the developmental level of the child, any health and/or emotional problems, and the existence of any special needs.

2.3.5. Parent Choice:
Explanation of the types of child care available and the regulation required for each, as well as the pros and cons for each type of care.

2.3.6. Payment Rates:
Explanation of the payment rates available through the program and an explanation of allowable charges by the provider.

2.3.7. Parent's Rights:
An explanation of the parent's rights as a recipient of child care services.

2.3.8. Parent's Responsibilities:
A discussion of the parent's responsibilities as a recipient of child care services.

2.3.9. Parent Services Agreement:
A discussion of the Child Care Parent Services Agreement (DAY-0162).

2.3.10. Child Care Certificate:
A discussion of the Child Care Certificate (DAY-0176).

2.3.11. Child Care Provider list:
Provision of a list from PATH of registered family child care providers, licensed family child care facilities, unlicensed school-age child care programs, and child care centers who meet the family needs. The list shall include the name, zip code and telephone number of potential providers.

2.3.12. How to Choose a Child Care Provider:

Information to assist the family in selecting a child care arrangement that best meets their child(ren)s' needs based on issues such as transportation, cost, nearby schools, and quality of care.

2.3.13. Local Resources:

Notification of other services offered by DoHS, such as Food Stamps, CHIP, TANF, children with special health care needs, and other community resources. Parents shall be informed of the availability of the Community Resource List maintained by the CCR&R agency and given copies upon request. An alternative would be a referral to the web site if the resource list is maintained there and parents have access.

2.4. The Application Process

2.4.1. Verifications Requested During Intake Interview

During the intake interview, parents will be asked to submit several verifications. The verifications include the following proofs:

2.4.1.1. Identity.

2.4.1.2. West Virginia residency.

2.4.1.3. All income, including child support, if received.

2.4.1.4. Employment, school, training, WV Works participation for each parent in the home and/or other need for child care services.

2.4.2. CCR&R Supplied Forms

During the application process, a number of additional forms are completed or given to parents for completion and verifications are requested. Forms given to parents shall include the following:

2.4.2.1. Child's Medical Record (ECE-CC-3): The Case manager shall give the parent an appropriate number of Child's Medical Record (ECE-CC-3) to be completed and given to the provider for any child under the age of 6 years. The Case manager should explain that:

A. The medical examination and the immunization report/plan must be completed within thirty (30) days of placement and updated every two years until the child is six years of age. If immunizations are not current, the parent must give the provider a schedule for completion.

B. Parents shall be referred to the Health Check clinics (formerly known as EPSDT) and local Health Departments to obtain physical examinations and immunizations but may choose to utilize private physicians. The Health Check form or child health assessment form from a Head Start or child care center, which

contains immunization information, can be substituted for the ECE-CC-3C, if the form contains the same immunization requirements as those on the ECE-CC-3C and shows the date of completion. However, a note from the physician without a standard medical form is not acceptable.

C. Exemptions from immunization requirements are available for children whose parents provide written documentation of that immunization is contraindicated based on a child's medical condition. However, a provider has the right to refuse to accept a child with an exemption.

2.4.2.2. Child Care Parent Services Agreement (DAY-0162): The case manager should discuss the terms of the Child Care Parent Services Agreement (DAY-0162), which includes information about the parent's rights and responsibilities to maintain their eligibility and to the provider, as well as rules on using care appropriately to prevent improper payments. The parent and CCR&R case manager shall sign the agreement, and a copy shall be given to the parent for their records.

2.4.2.3. Emergency Information Form (ECE-CC-10E). This form must be completed by the parent on all children to be placed in care, notarized, and given to the provider at the time of enrollment.

2.4.2.4. A Child Care Certificate (DAY-0167) to be signed and given to the provider if the application is approved or the Notification of New Applicants (DAY-0177) if the application is pending or denied. For pending applications, parents shall also receive a Provider Notification Letter-Parent's Eligibility for Child Care (DAY-0613) to give to the provider to indicate the application is pending.

2.4.2.5. Other forms as needed. Applicants who have been employed for less than 45 days will be given a New Employment Verification form (ECE-CC-1B) to submit to their employer for completion.

2.4.3. Notifying Parent of Application Status:

2.4.3.1. If the applicant is not eligible for services, the CCR&R case manager shall issue a Child Care Parent Notification Letter (DAY-0179) that states the application is denied.

2.4.3.2. If the application cannot be completed due to the need for additional information or documentation, the case manager shall issue a Parent Notification Letter (DAY-0176) indicating that the application will be denied if the necessary information is not received within 13 days.

2.4.3.3. If the applicable information is received and the client is eligible:

A. A Child Care Certificate (DAY-0176) is issued from PATH and given to the parent who signs it and then gives it to the provider to be retained in the provider's record.

B. The CCR&R case manager may provide a Parent Notification Letter (DAY-0177) and a Provider Notification Letter (DAY-0613) on a temporary basis until the case is entered in PATH and a permanent Child Care Certificate is issued to the parent.

C. Clients choosing school-based care (i.e., after school programs located in schools), or clients choosing child care centers only open on weekdays, but who also need evening and/or weekend care shall be encouraged to choose a back-up provider for summer care/days when the school-based care or center is unavailable. Parents shall be issued a certificate for the back-up provider. The case manager shall note on the back-up provider certificate that the certificate is being provided as such, and care billed by the back-up provider shall only be approved for times when the primary provider is unavailable. Information on the use of a back-up provider shall be recorded in PATH contacts and include allowable times and reasons for use.

D. The Certificate or Provider Notification Letter (DAY-0613) is an indication that DoHS will pay for a portion or all the approved services. However, parents and providers must understand that new providers who have not completed the payment enrollment process or providers who have been closed for more than 12 months shall not receive reimbursement unless they attend payment enrollment training and complete a provider application within 30 days of client application.

E. Case manager Completion of the Child Care Certificate:

1. PATH will automatically populate sections I. through V. and VII. on the certificate. The starting date on the initial Certificate shall be the date of client application. If care does not begin until a later date, the case manager shall modify the Certificate to start at the later date.

2. Case managers shall use section VI. to record the parent's need for care schedule, so that providers will have a general idea of when to expect the child in care.

F. If the parent changes providers during the certificate period, he/she must notify the CCR&R case manager in writing within five (5) working days, and request that a Certificate be issued for the new provider. CCR&R staff may ask the previous provider to return the child care certificate to the CCR&R office, but the return is not necessary for the termination of payment to the provider or the continuation of services to the family.

2.5. The Interview Process:

CCR&R Case managers should discuss the following with applicants:

2.5.1. Payment Rates Available

See Appendix B – Child Care Payment Rates for rates available for children.

2.5.2. Allowable Charges by Providers

Allowable charges by the provider shall be limited to reasonable registration fees, transportation fees, late pick-up fees and charges for time not approved by the agency. The Provider shall inform the parent of these fees prior to enrollment. If the parent is responsible for paying a portion of the daily fee, the daily fee shall only be charged for days that the child is in care.

2.5.3. Parent's Rights

As a recipient of child care services, the parent:

2.5.3.1. Retains all legal rights to the child while the child is in care.

2.5.3.2. Makes decisions about choice of child care providers. Through the child care certificate program, the parent shall be allowed to choose from a variety of child care options. (See Chapter 7, Parental Choice Section). Parents must understand, however, that the safety of children is a primary concern. Therefore, providers must offer a safe environment and comply with State of West Virginia regulatory statutes. Background checks are completed by DoHS to determine if staff, providers, or any other adults in a caregiver's home have a history of child/adult abuse or neglect or a criminal record.

2.5.3.3. May request a list of substantiated parental complaints on any licensed or registered provider from the CCR&R case manager or from the DoHS Child Care Case manager. Lists of substantiated complaints are obtained from PATH (DAY-0616) and shall be limited to standards violations.

2.5.3.4. May appeal any denial and/or termination of child care services.

2.5.3.5. Has the right to have all provider fees disclosed prior to beginning services with the provider.

2.5.4. Parent Responsibilities

As a recipient of child care services, the parent has the following responsibilities:

2.5.4.1. Visiting providers before selection and placement of children, as well as monitoring care throughout placement.

2.5.4.2. Maintaining continuity of care for children. Parents shall be informed of the detrimental effects of frequent changes in provider and the importance of a consistent relationship with adults for a child's growth and development.

2.5.4.3. Complying with the provider's rules and procedures, such as picking the child up on a timely basis, providing clothing changes, diapers, diaper wipes, etc. Parents should understand the importance of a cooperative relationship with their child's provider. A positive relationship between the adults enhances the child's experiences in care and often eliminates problems such as disruption in the current child care arrangement.

2.5.4.4. Discussing with the provider any custody or visitation issues and providing names of people allowed to pick up the child(ren).

2.5.4.5. Ensuring that the provider of choice receives a signed Child Care Certificate (DAY-0176) or Provider Notification Letter (DAY-0613) prior to accepting children in care. The certificate or notification letter is the provider's only assurance of payment.

2.5.4.6. Signing children in and out of care daily. Parents may allow a provider or child care program staff to sign a child in or out, as applicable, if the child is transported to or from care by the provider or school buses.

2.5.4.7. Paying the child fee directly to the provider on a schedule negotiated between them.

2.5.4.8. Making private arrangements with the provider for payment if care is used for reasons and times not needed or not listed on the Certificate. The Agency will not pay for child care provided while parents attend medical appointments, go shopping, or participate in other non-work or school related activities.

2.5.4.9. Supplying the provider with a completed child health assessment form (ECE-CC-3C) on all children who have not reached their 6th birthday and updating forms every two years until the child is six (6) years of age. The provider retains the form in the child's record, except with in-home care where the parent is responsible for maintaining child health assessment and immunization records. When changing providers, the parent shall obtain a copy of the medical record for the new provider.

2.5.4.10. Supplying the provider with a completed, notarized Emergency Information Form (ECE-CC-10E) to be maintained in the provider's files.

2.5.4.11. Reporting changes in circumstances within five days. Failure to report changes to the agency may result in case closure, repayment of services used for time not approved, and/or 30-day penalty closure before services can be reopened. Income changes during the twelve (12) month period will not impact a parent's continuing eligibility for care unless the parent requests a redetermination due to decreases in income that might result in reduced fees. However, the parent(s) shall report the following changes in circumstances to the provider and to the agency, as appropriate:

A. Changes in identifying information – household members, address, telephone numbers, etc.

B. Changes in family size affecting eligibility–

1. Additions to household size: child, spouse, biological parent of children in the home, If the case manager has reason to believe that the client is not accurately reporting family size, the case manager can request verification: i.e., birth certificate, adoption documents, statement of acting *in loco parentis* for the addition of a child, or a copy of marriage certificate for the addition of a spouse.

OR

2. Subtractions to household size: child, spouse, or biological parent of children. If the case manager has reason to believe that the client is not accurately reporting family size, the case manager may request verification by legal documentation (i.e., legal separation papers, divorce decree, notice of removal of child from home). If no legal documentation is available, two notarized statements by persons other than relatives stating that the person is no longer in the home may be substituted.

C. Changes in employment – place of employment or days and hours worked.

D. Changes in provider. Clients who use school-based care providers and have a designated back up for summer care/days that the school-based program is unavailable are not considered to be "changing providers" as the client has already informed the case manager that the backup provider becomes the primary care provider when the school-based program is unavailable.

E. Loss of employment or termination from educational or training programs.

F. Need for job search time. Job search time must be requested and approved by the agency.

2.5.4.12. When entering changes of circumstances to the PATH record, a new assessment is done only when changes are made to the number of people in the family or income amounts that result in a reduction of fees. Recipients must verify income amounts. A new assessment changes the status check tickler to twelve (12) months from the date of the new assessment. The case manager will keep the original assessment date when adding a new member, as a full review of the case is not completed at this time.

2.5.4.13. Renewing the certificate by completing a status check at least 2 weeks before the current certificate expires. The CCR&R agency will send a status check to the client, by mail, 30 days before the certificate expires. However, it remains the parent's responsibility to obtain and complete a status check to renew the certificate.

2.5.4.14. Submitting changes in circumstances during the status check completed every twelve (12) months after initial application. A new Certificate will be sent to

parents every twelve (12) months based on successful completion of the status check. Status checks verify income and continuing need for services.

2.5.5. Consequences of Failure to Comply with Program Responsibilities

2.5.5.1. If a parent fails to fulfill these responsibilities, the case manager shall give a written warning regarding specific problems, noting that subsequent abuses may result in a 30-day penalty closure.

2.5.5.2. When a parent continues to use child care services when the need no longer exists (e.g., parent has lost job or quit school), the case will be closed, and no further payment made. The Recipient shall repay to the agency any child care monies paid on their behalf during the period of ineligibility.

2.5.5.3. If intentional misrepresentation may have occurred and if the estimated amount exceeds $1,000, the case will be referred to the Director of Investigation and Fraud Management. If the estimated amount is under $1,000, arrangements shall be made for recoupment. (See Chapter 8, Improper Payments).

2.5.6. Other Services Offered by DoHS:

The CCR&R case manager should inform the parent of other available DoHS services, including Supplemental Nutrition Assistance Program (SNAP), Children's Health Insurance Program (CHIP), Temporary Assistance for Needy Families (TANF), children with special health care needs, and other community resources.

CHAPTER 3: DETERMINATION OF FAMILY ELIGIBILITY

3.0. Family Eligibility

To be eligible for child care services, the family must verify the identity of the head of household, meet WV residency requirements, income requirements, and activity requirements. A child must meet age and WV residency requirements, need child care for a portion of the day, and reside with the head of household applying for services.

3.1. Child Age Requirement

3.1.1. Be under 13 years of age, or

3.1.2. May be 13 years through 17 years of age if:

3.1.2.1. Under court supervision. The family must provide documentation. Once documentation is received, the CCR&R case manager shall enable the "Under court supervision" box on the child's General Information Screen in PATH. **Or**

3.1.2.2. Meet the definition of special needs child. (See Chapter 1, Section 2). Children presenting a significant delay of at least 25% in one or more areas of development, or a six (6) month delay in two or more areas as determined by an early intervention program, special education program or other multi-disciplinary team shall be eligible for the Special Needs status. The family must provide the CCR&R with a copy of the child's assessment verifying the special needs status. The determination of special needs status may be made at the CCR&R Agency level. Once documentation is received, the CCR&R case manager shall enable the special needs box on the child screen in the Child Care Assessment.

3.1.2.3. In the case where Special Needs status is unlikely to change. After the initial determination of Special Needs status, the CCR&R case manager is not required to obtain further verifications for the special needs child over the life of the child care case.

3.2. Family Criteria

The child must reside or live at the same address, with a family meeting the following criteria: the family('s):

3.2.1. Eligibility Guidelines:

Monthly gross income, by family size, falls within the eligibility guidelines in Appendix A,

OR

Receives TANF benefits (not including TANF benefits received for children only- see 3.2.3.) and is participating in:

3.2.1.1. WV Works approved training and education activities.

3.2.1.2. Self-initiated training and education activities.

3.2.1.3. Employment; **OR**

3.2.1.4. Is receiving TANF for children only. However, families receiving TANF for children only must meet monthly gross income by family size.

3.2.2. Two Parent Households

If both parents, or a parent and stepparent are in the home, child care services cannot be approved for work or training related needs unless both are participating in a qualifying activity, such as working or attending school/training.

3.2.3. Joint Custody

In cases where parents have joint custody or share custody of their children and both parents are eligible to receive child care assistance; the parents shall have separate cases and shall be entered into PATH as two (2) families. Each parent is responsible for paying the fee on the days the child is in his or her custody. The amount of fee paid is determined as follows:

3.2.3.1. When the parents use different providers, each parent must pay the fee amount based on his or her income.

3.2.3.2. When the parents use the same provider, each parent shall pay the fee amount based on his or her income and days each parent used the provider. For example, Parent A used 7 days and Parent B used 8 days, Parent A pays the fee due for the 7 days and Parent B pays the fee due for 8 days. Parents should not be told the other parent's fee amount. Child care case information is confidential.

3.2.4. Foster Parent(s) – Participating in Qualifying Activity

If there are two Foster Parents in the home, both Foster Parents must be participating in a qualifying activity, such as working or attending school/training. For a Foster Parent or Parents who need child care, services are available, providing that the foster parents do not own assets more than $1,000,000. The children placed in their care must be in the legal custody of the State of West Virginia, (See Chapter 1, section 2, for definition of foster parent).

3.2.4.1. To verify official Foster Status, and to verify that the child is in the legal custody of the State of West Virginia, the person must supply the CCR&R case manager with a copy of one of the following forms that the applicant can obtain from the CPS worker who placed the child:

A. WV DoHS Medical Care Authorization for Child in Foster Care (SS-FC-40)

B. Foster Care Plan and Placement Agreement. (FSC-0031 or SS-FC-6a)

(NOTE: CCR&R Case manager will accept these forms with or without notary seal.)

C. A written statement of custody and/or child placement from an approved WV Child Placement Agency.

D. Foster Care parent(s) will not be approved without receipt of verification of the child's legal status.

3.2.4.2. If the foster parent presents with alternate verification of child status the CCR&R case manager will contact a Policy Specialist at the Division of Early Care and Education for approval of the document.

3.2.4.3. In PATH, each foster child or sibling group is a separate family within the household and financial eligibility is based on the foster child's income. Child income, such as child support, shall be entered in PATH with any fees for service waived. Boarding care payments are not considered income for a child.

3.2.4.4. The CCR&R case manager shall designate one of the foster parents as head of household but exclude foster family income in determining eligibility. Foster parents must verify employment or attendance in an education or job training program.

3.2.4.5. Foster care parents cannot receive child care subsidy payments or place the child in any child care center, family child care facility, or family child care home of any type in which they own all or part of the care facility.

3.2.5. Kinship/Relative Caretaker Parent(s) – Participating in Qualifying Activity

If there are two Kinship/Relative Parents in the home, both Kinship/Relative Parents must be participating in a qualifying activity, such as working or attending school/training. For a Kinship/Relative Parent or Parents who need child care, services are available, providing that the Kinship/Relative parents do not own assets more than $1,000,000. The children placed in their care must be in the legal custody of the State of West Virginia, (See Chapter 1, section 2, for definition of Kinship/Relative parent).

3.2.5.1. To verify official Kinship/Relative, and to verify that the child is in the legal custody of the State of West Virginia, the person must supply the CCR&R case manager with a copy of one of the following forms that the person can obtain from the CPS worker who placed the child:

A. WV DoHS Medical Care Authorization for Child in Foster Care (SS-FC-40)

B. Foster Care Plan and Placement Agreement. (FSC-0031 or SS-FC-6a)
(NOTE: CCR&R Case manager will accept these forms with or without notary seal.)

C. A written statement of custody and/or child placement from an approved WV Child Placement Agency.

D. Kinship/Relative parent(s) will not be approved without receipt of verification of the child's legal status.

3.2.5.2. If the Kinship/Relative parent presents with alternate verification of child status the CCR&R case manager will contact a Policy Specialist at the Division of Early Care and Education for approval of the document.

3.2.5.3. In PATH, each Kinship/Relative child or sibling group is a separate family within the household and financial eligibility is based on the Kinship/Relative child's income. Child income, such as child support, shall be entered in PATH with any fees for service waived. Boarding care payments are not considered income for a child.

3.2.5.4. The CCR&R case manager shall designate one of the Kinship/Relative parents as head of household but exclude Kinship/Relative family income in determining eligibility. Kinship/Relative parents must verify employment or attendance in an education or job training program.

3.2.5.5. Kinship/Relative parents cannot receive child care subsidy payments or place the child in any child care center, family child care facility, or family child care home of any type in which they own all or part of the care facility.

3.3. Child's Citizenship Requirement

The child must be a US citizen or a "qualified alien" as defined by the Immigration and Nationality Act. Only the citizenship and immigration status of the child, who is the primary beneficiary of the child care benefit, is relevant for eligibility purposes. The child must be a U.S. citizen or a qualified alien. All new and renewal child care applicants, including foster care, Kinship/Relative caretaker, and TANF Caretaker Relative parents, must verify that children receiving child care services are either a U.S. Citizen or a qualified alien. Applicants who cannot provide verification of citizenship within 13 days of application are not eligible to receive child care services.

3.3.1. U. S. Citizenship:

A U.S. Citizen is either:

3.3.1.1. A person born in the territory of the United States under the 14th Amendment of the United States Constitution; **OR**

3.3.1.2. A person who has undergone naturalization. Naturalization is the process by which a citizen of a foreign country becomes a United States citizen.

3.3.2. Qualified Alien:

All qualified alien cases must be approved by ECE staff. Case managers must not open any child care case for qualified aliens without scanning and emailing the documentation of qualified alien status to ECE staff for approval. According to federal regulation a qualified alien is:

3.3.2.1. Lawfully admitted for permanent residence.

3.3.2.2. Granted asylum.

3.3.2.3. A refugee admitted to the United States.

3.3.2.4. An alien paroled into the United States for a period of at least one year.

3.3.2.5. An alien whose deportation or removal is being withheld.

3.3.2.6. An alien granted conditional entry.

3.3.2.7. An alien who is a Cuban Haitian entrant under the Refugee Education Assistance Act of 1980.

3.3.2.8. An alien who (or whose child or parent) has been battered or subjected to extreme cruelty in the US.

3.3.3. Acceptable Proofs of Citizenship:

Citizenship can be verified by submission of any acceptable document that proves a U.S. place of birth or documents showing that the person is a U.S. citizen. (See Appendix E for a list of acceptable documents.) All documents must be either an original or a copy certified by the issuing agency. A copy of the verification must be filed in the legal block of the case file and its location noted in PATH document tracking. Verification of citizenship is required only once unless later evidence makes it questionable.

3.4. WV Residency Requirement and Proof of Identity:

Child care applicants must be a resident of the State of West Virginia. Proof of identity and residency is required and shall be established by showing a valid photo ID and proof of residency, selected from the following list. If clients do not have proof of identity, they shall be given 13 days to provide it.

3.4.1. Acceptable forms of proof of identity:

3.4.1.1. An original, valid, current, unexpired Certificate of U. S. Citizenship (INS Form N-560) with photograph.

3.4.1.2. An original, valid, current, unexpired Certificate of Naturalization (INS Form 550, or INS Form 570) with photograph.

3.4.1.3. An original, valid, current West Virginia driver's license, permit, or ID card, that expired less than six (6) months with photograph.

3.4.1.4. An original, valid, unexpired out of state driver’s license.

3.4.1.5. An original, valid, current, unexpired U. S. Military ID Card.

3.4.1.6. U. S. Military Retiree Card or Uniform Service Identification Privilege Card (DD 1173) with current photograph.

3.4.1.7. An original, valid, current, unexpired, or legally extended United States passport with current photograph.

3.4.2. Acceptable Proofs of WV Residency:

Proofs of WV residency must show the client's current physical address. If the applicant is unable to provide an acceptable proof of residence in their own name, and resides in the home of another individual, the applicant may submit a proof of residency by proxy. Residence by proxy is a document from the list below, that indicates applicant's correct physical address, accompanied by a written statement by the individual whose name appears on the document, verifying the applicant's residency. New proof of residency must be submitted within thirteen days of a change of physical address. Post Office Box addresses, cell phone bills, and 911 residence verifications are not accepted as proof of WV residency. WV driver's licenses are not acceptable as proof of residency unless issued after July 1, 2003. If the mailing address is different than the physical address, this discrepancy must be documented in case contacts. The following proofs are acceptable:

3.4.2.1. WV utility bills with service at a WV residence address, not more than 45 days old. The bill must clearly indicate the physical location of the residence. For example: "bill for" or "service at."

3.4.2.2. WV property tax bill or receipt indicating a WV residence address.

3.4.2.3. WV individual income tax return for the most recent year.

3.4.2.4. WV mortgage documents or homeowner insurance documents for a WV residence or proof of WV home ownership with a WV residence address.

3.4.2.5. WV W-2 Form not more than 18 months old with the applicant's name and WV residence address.

3.4.2.6. WV weapons permit with a WV residence address.

3.4.2.7. WV Motor Vehicles registration card that contains a WV residence address.

3.4.2.8. WV Voter's registration card with a WV residence address.

3.4.2.9. WV school enrollment form if applicant is under age 18 with the applicant's WV residence address.

3.4.2.10. Proof that the adult learner is enrolled in a West Virginia educational program, not metro or out-of-state, tuition payment verification.

3.4.2.11. WV Homestead tax exemption with a WV residence address.

3.4.2.12. Residential rental and/or lease agreement with a WV address. Lease must be signed and dated by Lessor and Lessee.

3.4.2.13. Residency by proxy (see section 3.4.2)

3.5. Wage Requirements:

Applicants receiving child care assistance in order to work must earn wages that comply with applicable federal and WV state laws. Child care funds cannot be used to support employment with employers who do not comply with the Fair Labor Standards Act and West Virginia Division of Labor Wage and Hour laws.

3.5.1. Wage Requirement for Eligibility

Any recipient of child care assistance who is an employee in the private sector must be paid at least West Virginia minimum wage for all hours of work performed. If the recipient is not making at least the applicable West Virginia minimum wage for all work performed, the recipient will not be eligible for child care services, with the following notes:

3.5.1.1. Self Employed Individuals:

Self-employed child care recipients must make at least the current West Virginia minimum wage for each hour of work performed, to be eligible for child care services.

3.5.1.2. Employees that Receive Gratuities

In West Virginia the minimum wage an employer can pay employees who receive gratuities is $6.13 per hour, ***if*** the employee makes enough tips to achieve the minimum wage of $8.75. This practice is called an "Employer Tip Credit" – tips are credited towards the minimum wage requirement. If the employee does not make enough in tips to achieve the minimum wage of $8.75 – the employer must pay the employee minimum wage. (The "employer tip credit" is disallowed.) Employees who receive gratuities must make at least $8.75 per hour after their wage and tips are combined to be eligible for child care services. Employees that receive gratuities, but whose combined hourly wages/tips do not equal $8.75 or greater, are not eligible for services.

3.5.2. What is Minimum Wage?

The West Virginia minimum wage is: $8.75 per hour. Employees who customarily receive gratuities must be paid at least $6.13 per hour.

3.5.3. Notes on Federal and West Virginia State Tax Withholding:

Child care funds cannot be used to support employment with employers who do not comply with West Virginia Tax Department or Federal tax withholding laws.

A. West Virginia Income Tax Withholding: West Virginia income tax must be withheld from wages paid to resident employees for services performed either within or without the state and from wages paid to nonresident employees for services

performed in the state. This amount must be listed on the pay stub received by the employee. It is possible, depending upon earnings, family size and withholding status for this amount to be "$0."

B. Federal Income Tax Withholding:

1) Non-self-employed: Federal income tax and Federal Insurance Contributions Act (FICA) tax (social security, Medicare, etc.) must be withheld from wages paid to resident employees for services performed and from wages paid. This amount must be listed on the pay stub received by the employee. It is possible, depending upon earnings, family size and withholding status for these amounts to be "$0."

2) Self Employed: A tax similar to the FICA tax is imposed on the earnings of self-employed individuals, such as independent contractors. This tax is imposed not by the Federal Insurance Contributions Act but instead by the Self-Employment Contributions Act of 1954. This tax payment should be reflected on Schedule C of IRS Form 1040 and calculate the self-employment tax on Schedule SE of IRS Form 1040. Estimated taxes must be paid quarterly using form 1040-ES if estimated tax liability exceeds $1,000.

3.6. Minimum Qualifying Activity Participation Hour Requirement

3.6.1. Working Recipients:

Any recipient of child care assistance who is an employee in the private or public sector must work at least 20 hours per week. If the recipient is not working at least 20 hours per week, the recipient will not be eligible for child care services.

3.6.2. WV Works:

WV WORKS participants must participate in **Job Training/Educational Activities** their qualifying Works activity at least 20 hours per week or to the maximum extent assigned by the WV WORKS Family Support Specialist. WV Works recipients who do not meet this requirement are not eligible for child care services**:**

3.6.2.1. **Job training** participants must participate in their qualifying activity to the maximum extent possible as assigned by the job training program or employer. Recipients participating in job training activities less than 20 hours per week will not be eligible for child care services.

3.6.2.2. **High School Students:** Recipients enrolled in high school are exempt from the minimum activity hour requirement.

3.6.3. Post-Secondary Education Students:

Recipients enrolled in post-secondary educational activities must meet the minimum credit hour requirement, based on the program's designation of full or part-time status, to be eligible for services:

3.6.3.1. Undergraduate Students:

A. Fall/Spring –

1) A minimum of 12 credit hours, or

2) A minimum of 6 credit hours, plus at least 15 hours of employment, job training or additional WV Works activities.

B. Each Summer Session –

1) A minimum of 6 credit hours, or

2) A minimum of 3 credit hours, plus at least 15 hours of employment, job training or additional WV Works activities.

3.6.3.2. Graduate Students:

A. Fall/Spring –

1) A minimum of 9 credit hours, or

2) A minimum of 3 credit hours, plus at least 15 hours of employment, job training or additional WV Works activities.

B. Each Summer Session –

1) A minimum of 6 credit hours, or

2) A minimum of 3 credit hours, plus at least 15 hours of employment, job training or additional WV Works activities.

3.6.3.3. Correspondence and Web-based Only Courses – Students enrolled only in web-based courses are not eligible for child care. Students enrolled in a mixture of in-person and web-based courses will be eligible for care if they meet the above credit hour requirements. Students enrolled in correspondence only courses are not eligible for services.

3.6.4. CPS Safety/Treatment Plan:

Recipients in this category are exempt from the minimum hour requirement.

CHAPTER 4: DETERMINATION OF NEED FOR CHILD CARE

4.0. Need for Child Care

To be eligible for child care assistance, families must demonstrate a need for care. In general, that means that the head of household must be involved in a qualifying activity that prevents the parent from providing care and supervision of the children in the household during the time the parent is participating in the activity. If there are two parents in the home, both must be involved in a qualifying activity.

It is possible for a parent to meet all other eligibility requirements, but not demonstrate a need for care. For example, if the household consists of a single father and his two school age children, and he only participates in his qualifying activity during the times the children are in school, the family does not demonstrate a need for care.

Child care recipients who do not use child care assistance for an extended period no longer demonstrate an established need for child care assistance and therefore may not remain an active case. (See procedures in Chapter 6, Section 6.1.4).

4.1. Activity: Employment in the Private or Public Sector

Income-eligible parents who are working in the private or public sector (not self-employment) and who have children who need care are considered to need child care.

4.1.1. Verifications Required

Employment must be verified by the client submission of:

4.1.1.1. One month's worth of check stubs, not older than 45 days, **OR**

4.1.1.2. The New Employment Verification Form (ECE-CC-1B) in the case of new employment situations in which the applicant has not yet received pay: Clients using the ECE-CC-1B to verify employment must submit one month's worth of check stubs to the agency within 45 days from the first day of employment.

4.1.2. Night Time Employment

Parents who are working at night may be approved for a maximum of eight additional hours of sleep time. However, children shall not remain in care longer than 18 hours within a 24-hour period.

4.1.3. Extended Work Shift

An Extended Work Shift is defined as parents whose work shifts are between 18 and 72 continuous hours in a one-week span. This care is intended for those who are employed by public service type agencies such as fire departments, law enforcement, emergency response, health care, human services, and mental health services. It is not intended to be used as respite care or in place of foster care. These parents may receive child care services provided:

4.1.3.1. Verification is provided from the employer of the length of the work shift.

4.1.3.2. Child care is not used as a substitute for residential care if the work is performed as part of the parent's residential rehabilitation program or other similar treatment program.

4.1.3.3. The provider, if regulated under West Virginia state law, obtains a waiver for the care of the parent's child(ren) beyond the number of hours permitted by regulation.

4.1.3.4. The Child Care Resource and Referral agency supervisor has reviewed and approved the application.

4.1.3.5. This care is intended for those who are employed by public service type agencies such as fire departments, law enforcement, emergency response, health care, human services, and mental health services. It is not intended to be used as respite care or in place of foster care.

4.1.4. Teleworking:

Teleworking is defined as work that occurs at home during scheduled business hours rather than commuting to an office or employer location daily.

4.1.4.1. The employer must approve a work area in the home that is free of interruptions and contains the necessary equipment needed to perform assigned tasks. These parents may receive child care services provided:

4.1.4.1.1. The parent can submit a written statement from the employer indicating the days and hours approved by teleworking. **OR**

4.1.4.1.2. The parent can provide a copy of a telework contract signed by the employer indicating the days and hours telework is approved.

4.1.4.2. Teleworking is not intended to be used as a self-employment location.

4.1.4.3. During public health emergencies, when child care providers operate under critical care designation, clients whose work activity is telework will not be eligible for subsidized child care.

4.2. Activity: Job Search

Child care may be provided for three months for current recipients or new applicants who have lost employment or who have completed school and are looking for work. Recipients who meet eligibility requirements and request job search time shall be granted.

4.2.1. Job search time:

Will be approved for job search activity 8 hours per day, 5 days per week, during the normal business hours for the selected job site.

4.2.2. Job Search Begins:

Job search will begin on the day immediately following: the last date of previous employment, or the last date of previous qualifying activity.

4.2.3. Job Search Ends:

Job search shall end when:

A. the parent becomes employed;
B. the parent begins another qualifying activity; or
C. the parent completes an authorized job search period without obtaining employment or entering another qualifying activity.

If the parent does not secure employment or begin another qualifying activity by the end of the authorized job search period, the child care case shall be closed. The parent may not reapply or re-open child care based on job search as the qualifying activity for thirty (30) days following case closure.

Recipients who meet eligibility requirements and have completed a Job Search period, may request job search time for an additional period. Job Search shall be granted.

4.2.4. Requesting Additional Job Search Periods:

A recipient who has completed a job search period and meets continued eligibility requirements may request an additional job search period after the thirty (30) day waiting period, unless they begin a new qualifying activity sooner.

4.3. Activity: Self-Employment

The following definitions shall apply to child care policies regarding self-employment:

4.3.1. Livelihood:

Means of support or survival in which an individual engages to meet daily living expenses.

4.3.2. Hobby:

An activity done for relaxation, and not for the purpose of meeting the basic daily living expenses of the individual. Activities generating income below the income tax liability limit of $5000.00 per year shall be considered a hobby.

4.3.3. Self-Employment – Home-based:

Self-employment in which the primary function of the business is performed in the home. Examples: a beautician with a salon in the garage, a family auto repair business operated in a building next to the family's residence.

4.3.4. Self-Employment – other:

Self-employment in which the primary function of the business is performed at a location other than the family's home. Example: plumber, lawn care business, construction worker, handy man, hairstylist who rents a booth. These individuals may use a portion of their home

as a home office to conduct phone business or accounting but cannot claim the home office as an allowable deduction since the primary function of their work occurs elsewhere.

4.3.5. Types of Self-Employment:

4.3.5.1. Sole Proprietorship: A sole proprietorship is a business run by an individual. The owner is the business; or the owner has all the profits and losses of the business. The owner also has all the control and all the liability from the business operations. Business taxes are paid by the owner through his or her personal income tax return.

A. An individual who is the owner of a business type other than a Sole Proprietorship is not eligible for Child Care Subsidy.

B. An individual who receives regular/irregular income or salary from any business type other than a Sole Proprietorship and owns any portion of that business, is not eligible for Child Care Subsidy.

C. An individual participating as a partner of any business is not eligible for child care subsidy.

4.3.6. Criteria for Approval of Self-Employment Activity

Child care may be approved for parents who are self-employed if the following conditions are met:

4.3.6.1. The family depends upon the self-employment activity for their livelihood, and the time and effort put into the activity indicates intent to make a profit. Passive or casual activities that can be more appropriately qualified as "hobbies" or volunteer work do not meet this criterion.

4.3.6.2. Parents must participate in self-employment activity a minimum average of 20 hours per week and show an income of at least minimum wage per hour. If both parents are self-employed, jointly, or separately, the minimum work hour/minimum wage requirement applies to each.

4.3.6.3. At the time of application, Self Employed individuals must provide a copy of their current State of West Virginia Business Registration, copy of consultant contract for independent sales, and a copy of any other required trade licenses or certifications. Check the State of West Virginia Secretary of State web site for information on what types of self-employment require a trade license:
www.wvsos.com/business/licensing/checklicensing.htm.

4.3.6.4. Self Employed individuals must provide a complete copy of their current tax return by April 30 of each year, including the 1040 form, 1040 Schedule C, (Profit or Loss from Business), 1040 Schedule SE, (Self-Employment tax,) and any other tax forms as required per type of self-employment. (Refer to the chart, Section 4.3.7) Under no circumstances will an extension for submission of tax returns be granted, even if the client

has been granted an extension to file by the IRS. Clients granted an extension to file by the IRS will be closed for failure to submit tax returns by the April 30th deadline.

4.3.6.5. Special Notes on Home-based Self-Employment: (see definitions for home-based self-employment business, 4.3.3.). Most people choose self-employment for the opportunity to have flexibility in their work schedules and incomes. As such, child care services for self-employed home-based businesses will only be approved for the following situations:

A. The type of work performed entails a clear and present danger to the child (for example, an auto repair business or metal working shop) and/or

B. The primary type of work performed consists of face-to-face meetings/appointments with clients (for example, a beautician or masseuse) which prevent direct supervision of children.

C. The applicants' children must be age 6 or under, or up to age 13 if the child is diagnosed with any Special Needs.

4.3.6.6. Self-employment type approvals are limited to Contracted, Sole Proprietorships.

A. Applicants who are participating as a member of a C Corporation, S Corporation, Limited Liability Company (LLC), or Partnership, shall not be eligible for WV Child Care Subsidy.

Documents Required

Type	Definition	Tax Forms Required	Calculating Income
Sole Proprietorship	Individual owns and operates trade or business alone. All profit and loss belong to the individual	Form 1040 Schedule C Schedule SE (if required by the IRS)	Profit from a business is calculated as: Gross receipts minus allowable expenses as defined by the WV Child Care Policy 5.2.2.2

4.4. Activity: WV WORKS

Children of work-eligible parent(s) who receive TANF benefits and who are participating in an approved work activity under WV WORKS are considered in need of child care. The status of WV Works parents must be verified by the WV Works Family Support Specialist. Verification of status must be no older than 45 days. CCR&R case managers must document the activity schedule and method of verification in case contacts.

4.4.1. WV WORKS Approved Work Activities

WV Works applicants must verify that they are participating in an approved work activity. CCR&R case managers may also communicate directly with WV Works staff when agreements exist between both agencies to share information. Approved work activities include:

4.4.1.1. Unsubsidized employment (fully employed in the private sector with no DoHS subsidy to employer or employee).

4.4.1.2. Subsidized private or public-sector employment (DoHS subsidizes or funds all or a portion of the employee's salary.)

4.4.1.3. Participation in the Joint Opportunities for Independence (JOIN) Program, a work experience and skill acquisition program primarily operated by private sector providers. Placements are limited to 32 hours per week with an additional requirement of 6 hours weekly in job search.

4.4.1.4. Job Readiness/Job Search that provides classroom training and actual job search for up to 6 weeks (no more than 4 consecutive weeks), with minimum participation of 120 hours per month.

4.4.1.5. Attendance at secondary school or course of study leading to GED in the case of a teen recipient who has not completed secondary school.

4.4.1.6. Adult basic education for parents over the age of 20 who do not have a high school diploma or GED. Approved courses include English as a Second Language, literacy, and remedial education courses.

4.4.1.7. Post-secondary education activities such as work study, clinicals, practicums and student teaching activities.

4.4.1.8. Vocational education training, if courses provide employment skills (not to exceed 12 months for any one individual.)

4.4.1.9. On-the-Job Training or the Employer Incentive Program (EIP), a subsidized training and employment program.

4.4.1.10. A participant in the Community Work Experience Program (CWEP), a work experience activity operated in public and non-profit agencies; or

4.4.1.11. A participant in Community and Personal Development Services including participation in parenting activities, structured mentoring activities, financial, nutritional, emotional, and other personal development counseling, volunteer work with local community-based agencies and sheltered workshops.

4.4.2. WV WORKS Work-Eligible Requirement

There are circumstances in which only one parent in a two-parent home is participating in a WV Works activity, but the family may still need and qualify for child care assistance. To receive child care as a WV Works participant, at least one parent in the home must be determined "work-eligible" by a WV WORKS Family Support Specialist and participating in an approved activity. The WV Works worker should supply information regarding each parent's work-eligible status and activity information before child care can be approved. The other parent in the home may be exempt from the work requirement because they are receiving SSI. However, these individuals may elect to be "work eligible." If they elect work eligibility, they must also participate in an approved activity.

4.4.3. WV WORKS: Two Parent Households

4.4.3.1. If both parents are "work eligible," child care time can be approved for the parents to participate in their required WV Works Activities.

4.4.3.2. If one parent in a two-parent home is not "work eligible" and verification of such status is supplied by WV Works, child care can be approved for the "work eligible" parent to participate in the required WV Works Activity, only if:

A. The family provides a doctor's statement that explains why the work-ineligible parent's condition prevents care and supervision of children.

B. The children in need of care are under eight years of age.

4.4.4. Care may be continued for former WV Works participants as long as the condition exists or until children reach eight years of age.

4.4.5. WV Works: Minimum Hours of Participation

Work Eligible parents must participate in their approved activity a minimum of 5 hours per week, or 20 hours per month.

4.4.6. WV Works; Minimum Wage Requirement

Self-employed work eligible parents must meet the minimum wage requirement (see Chapter 3, Section 5) in order to count self-employment as their activity. WV Works parents claiming self-employment must enroll in another activity if their income from their self-employment activity does not meet minimum wage requirements. In addition, self-employed WV Works parents must meet all other child care policy self-employment requirements.

4.5. Activity: Job Training/Education

Children of parents who verify attendance at job training and educational programs demonstrate a need for child care. Job training/education is defined as on-the-job training, vocational training, skill training, secondary school programs, post-secondary schools, colleges, and universities. Parents shall be considered eligible for care with the following clarifications:

4.5.1. Reasonable Study Time

When parents are involved in educational activities or training requiring non-classroom study, reasonable study/research periods are allowed.

4.5.1.1. Generally, 1 hour of study time per hour of classroom activity is appropriate.

4.5.1.2. When possible, study periods shall be arranged between classes or immediately following the last class of the day to provide a consistent and uninterrupted routine for the child(ren) in care. Parents may participate in "Study Groups" if the group's meetings fall within study time already granted by the case manager.

4.5.1.3. When granting study time, the case manager should consider the:

A. Complexity of the client's courses.

B. Amount of time in between classes.

C. Ages of the client's children.

D. Type of Program/Degree being pursued by the client and whether course work is completed during class time (such as with trade schools) or if the student is expected to complete course work outside of class.

4.5.2. Scholarship Requirements

Child care can also be granted for educational activities required to maintain scholarship eligibility, provided that participation in the required activity prevents direct supervision of children.

A. Example 1: A student attending college on a volleyball scholarship would be unable to supervise their children while attending mandatory practices and games. Child care time can be granted to participate in this activity.

B. Example 2: A student attending college on an educational scholarship is required to walk for 45 minutes, three times per week as a course requirement. Child care cannot be approved for this activity since the parent could take the children along and complete the walk requirement.

4.5.3. Satisfactory Progress and Attendance

4.5.3.1. At the time of Status Check, adult parents who attend educational activities or training must provide documentation of satisfactory progress and attendance for the most recent program enrollment. (For college students, this is demonstrated by maintaining a 2.0 grade point average.) If an alternative grading rubric is used, the adult learner must maintain an average or above rating based upon the program's assessment tool.

4.5.3.2. Adult learners who fail to maintain an average or above average rating, or whose progress report reflects withdrawals (W – WP -WF) and/or incompletes (I) in more than half of the registered courses shall be given an improvement period for one semester upon provision of a letter from the educational program confirming the adult learner continues to attend scheduled classes.

4.5.3.3. A copy of the learner's progress report will document compliance. All learners will need to submit statements from the educational or training program that documents attendance and progress as satisfactory.

4.5.3.4. **Failure to Improve** - If the adult learner fails to meet the requirements stated in 4.5.3.2. within the designated improvement period, the case shall be closed for one regular semester, if the only qualifying activity is education. Clients participating in qualifying activities shall have their hours and days on the certificates reduced to cover only the qualifying activity. For example, see chart below:

Failed Improvement Period	Closed Semester
Fall	Spring
Spring	All Summer Sessions
Summer sessions	Fall

4.5.3.5. Applicants whose cases are closed for failure to submit documentation of satisfactory progress must submit the required documentation when reapplying for services if the qualifying activity is still Job Training/Education.

4.5.3.6. Minor parents attending high school are exempt from the satisfactory progress requirement for continued approval; however, they must meet the satisfactory attendance requirement.

4.5.4. Reinstatement After Closure for Failure to Improve

4.5.4.1. When a client wishes to receive child care for school after a closed semester, the client must submit proof of re-acceptance into the chosen program.

4.5.4.2. The case can be reopened, or hours expanded on the existing certificate to cover the school activity once proof of re-acceptance is submitted.

4.5.4.3. Failure to maintain satisfactory progress and attendance again will result in suspension of child care for school activities for a period of one calendar year.

4.5.4.4. Third and subsequent suspensions will be for a period of two calendar years each.

4.5.5. Petition for Reinstatement after a Second Suspension

Reinstatement after a second or subsequent suspension is only by written petition to the Division of Early Care and Education. The petition must be in writing and provide evidence that the adult learner can meet the satisfactory progress and attendance requirements. The written petition for reinstatement must be submitted at least 30 days prior to the beginning of the semester for which reinstatement is sought.

4.5.6. Home Schooled Minor Parents

Minor Parents who are being Home Schooled may be approved for care when the home-schooling teacher provides the minor parent with a schedule of study verifying the need for care and the days and hours that care is needed.

4.6. Supportive Services for Child Protective Services Recipients

Children residing with parents that are unable to provide adequate care or supervision and whose parents need support and assistance with child care responsibilities to prevent or alleviate child abuse or neglect. Children in need of care must continue to reside in the home of the parent for whom the safety or treatment plan is written. Children who have been removed from the home of the parent for whom the plan is written and placed in foster care, Kinship/Relative care, TANF Caretaker Relative or other guardianship are not eligible for CPS related child care.

4.6.1. Child care services shall not be viewed as an entitlement for recipients of child protective services. Rather, it is a supportive service for recipients of child protective services to be used in conjunction with other needed services, such as parent education or counseling.

4.6.2. Child protective services recipients shall be allowed to exercise their choice of child care providers, unless the CPS or the child care case manager determines it is not in the best interests of the child.

4.6.3. Since the provision of child care in this circumstance shall be coordinated with protective services staff to ensure that care is necessary and appropriate, it must be component of the CPS Safety Plan (DDE CPS-0149), CPS Treatment Plan (DDE CPS-0154) or the WV Safety First Plan.

4.6.4. For documentation, the CPS worker must supply the CCR&R child care case manager with the safety or treatment plan that contains the goal associated with the need for child care before the CCR&R case manager issues a Certificate. The safety plan must document the days and hours that child care is needed.

4.6.5. The CCR&R case manager must receive a copy of the safety plan prior to issuing a Child Care Certificate when completing twelve (12) month status checks.

4.6.6. For families whose income falls within the income eligibility guidelines, the applicable fee shall be charged unless waived in the Safety or Treatment Plan. The plan shall state the reason for including the waiver.

4.6.7. For families whose income exceeds the eligibility guidelines, income and fees may be waived **only** if child care is a component of the Safety Plan designed to prevent a child's removal from the biological/adoptive parent's home. If the child has already been placed outside the biological/adoptive parent's home (i.e., caretaker relative's home), this waiver is not applicable.

4.7. Exceptions to Eligibility: Policy Exceptions

Policy exceptions shall be reviewed by the CCR&R supervisor for approval and then forwarded to the Division of Early Care and Education via PATH. (See Chapter 6, Section 5, Exception to Eligibility Policy for further exception requirements).

4.7.1. Family exceeds income guidelines at the end of a Job Search period:

Although the situation does not occur frequently, there may be occasions when a family will submit verification of household income, after a change in qualifying activity, such as the end of a Job Search period, that exceeds income guidelines based upon the current Sliding Fee Scale. However, when the family's household income exceeds the State's current income guidelines, , but falls under 85% of the current State Median Income (SMI) the State is required to provide a graduated phase out of assistance.

4.7.1.1. When the situation occurs as described above, the Child Care Resource and Referral Agency (CCR&R) will further assess the household income based upon the current SMI. If the household income falls below 85% of the SMI, the CCR&R Case Manager must enter an "Over Income Policy Exception" in PATH. The "Over Income Policy Exception" can be found on the same PATH screen with the "Medical Policy Exception." Upon approval of the "Over Income Policy Exception", the Division of Early Care and Education will assist the Case Manager with calculating the Child Care Fee.

4.7.2. Illness:

In certain extraordinary situations child care may be approved for children under the age of six years in the following circumstances: a family member's release from hospitalization; a recent determination of a temporary or permanent disability of a parent; physician ordered bed rest during pregnancy; medical treatment for a terminal illness. Exceptions are granted in order to give the family time to prepare and plan for coping with the illness and the effects of treatment and finding alternate child care arrangements/assistance.

4.7.2.1. Hospitalization, Surgery, and Post Hospitalization/Surgery Recovery

For currently active cases, child care may be provided when a family member is hospitalized, requires in or out-patient surgery, and/or released from the hospital. In cases of hospitalization/surgery recovery (for hospital admissions exceeding 48 continuous hours), documentation shall include, but not be limited to:

A. A discharge plan and diagnosis and a treatment plan if one is developed to follow up the discharge plan.

B. The anticipated length of time for recovery.

C. The documentation shall be related to the parent's illness or the illness of a sibling for which hospitalization was required.

D. The approval period is limited to six weeks. If a longer recovery period is indicated by the physician in which minimal care and supervision of a child cannot be provided, the approval may be for a period not to exceed six months.

E. Post hospitalization/surgery recovery approvals will be considered only for an active child care case and will not be considered for a new application or intake.

4.7.2.2. Recent Determination of Temporary or Permanent Disability.

A disability exception approval will not exceed 6 months. This category of policy exception is for one time only per child care case or same family. The exception is granted in order to give the family time to prepare and plan for coping with the disability and finding alternate child care arrangements/assistance in cases of newly determined temporary or permanent disability of the parent, the documentation shall include, but not be limited to:

A. An official disability determination by a state or federal agency with a determination date that is within three (3) months of the child care application or redetermination.

B. A treatment plan and the medical statement by a licensed physician which describes how this condition prevents the care of children.

C. A disability exception approval will not exceed 6 months.

4.7.2.3. Bed Rest during Pregnancy.

If a physician orders bed rest during pregnancy, the approval period will not exceed the date of delivery, nor can the approval be for 24-hour care.

4.7.2.4. Medical Treatment for a Terminal Illness.

Exceptions may be approved for a terminally ill patient undergoing treatment without a previous hospitalization, provided there is a physician's statement describing the medical condition and that the condition and/or treatment prevents the care and supervision of children. The approval period will not exceed 6 months. This category of policy exception is for one time only per child care case or family. Child care may be approved if the illness or condition prevents the parent(s) from providing minimal care and supervision of the child(ren). A signed and dated medical statement from a licensed physician must describe how the medical condition prevents care for the child(ren).

For currently active cases, child care may be provided when a family member is hospitalized, requires in or out-patient surgery, and/or released from the hospital. In cases of hospitalization/surgery recovery (for hospital admissions exceeding 48 continuous hours), documentation shall include, but not be limited to:

A. A discharge plan and diagnosis and a treatment plan if one is developed to follow up the discharge plan.

B. The anticipated length of time for recovery.

C. The documentation shall be related to the parent's illness or the illness of a sibling for which hospitalization was required.

D. The approval period is limited to six weeks. If a longer recovery period is indicated by the physician in which minimal care and supervision of a child cannot be provided, the approval may be for a period not to exceed six months.

E. Post hospitalization/surgery recovery approvals will be considered only for an active child care case and will not be considered for a new application or intake.

4.8. Interim Care

For periods in which the client is unable to participate in their qualifying activity for any of the reasons listed in 4.10.1, interim child care may be approved and paid under the guidelines in this section.

4.8.1. Reasons for Interim Care:

4.8.1.1. Temporary employment shut downs (less than 90 days). Example: A factory shuts down every July for two weeks to do maintenance. The client is unable to attend work because the factory is closed, and the period of temporary shutdown (less than 90 days) is too short to warrant participation in a different qualifying activity.

4.8.1.2. Breaks of no more than 90 days between training courses or school sessions. Examples:

A. Spring Break.

B. Semester Breaks between terms, i.e., between winter and spring terms or between spring and summer terms.

C. Breaks between different sessions of trade instruction.

D. Jury Duty: Parents must submit documentation of jury summons.

E. Maternity Leave: Parent will use the current certificate. Should maternity fall at the end of the client's eligibility period, client must indicate an expected return to work date by submitting a New Employment Form or letter from the employer.

4.8.2. Interim care cannot be approved for:

4.8.2.1. Illness

4.8.2.2. Extended absences that do not coincide with breaks in school or employment.

4.8.2.3. Absences due to extreme weather conditions.

4.8.2.4. Breaks of more than 90 days. For example, interim care cannot be approved for the summer break spring and fall sessions. Clients wishing to use care between breaks of more than 90 days must participate in a qualifying activity. (See Chapter 3 for examples of a qualifying activity.)

4.8.3. Interim care is not to exceed:

4.8.3.1. The lesser of 15 days per request or the total number of days needed to cover the break.

4.8.3.2. The number of possible attendance days in the period for which it is granted. For instance, if the provider is only open Monday through Friday, the provider cannot bill and receive payment for weekend days in which the child could not have been in attendance.

4.8.3.3. Parents on jury duty may request more than 15 days of interim care if they provide documentation that they are still serving.

4.8.4. Attendance during the interim period:
Will be at the parent's discretion. However, parents must advise providers of their intention to attend or not attend so that providers can make staffing arrangements as necessary.

4.9. Over-Night Care
The child may occasionally need overnight care, e.g., when parents are briefly hospitalized or need to attend short term training sessions out of town. Payment may be made in this type of situation for a family already receiving child care services. However, a parent may not be approved for child care services to specifically meet the need for 24-hour care. When a parent needs services for 24-hour residential care only, the CCR&R case manager should explore other appropriate programs.

4.10. Need for Care and School Age Children
It is a violation of Federal Regulations to pay for child care during the time that a child could attend public school. Child Care and Development Fund (CCDF) subsidy funds may not be used for services provided during the regular school day; services for which the student receives academic credit toward graduation; or instructional services that supplant or duplicate the academic program of a public or private school.

When determining the need for care for a school-age child, the CCR&R case manager shall consider the parent's qualifying activity and the child's school or instructional schedule to determine the periods during which child care is needed.

When a provider offers both allowable child care and instructional, educational, or other non-allowable services, child care subsidies may only be authorized for the periods during which allowable child care services are provided and the child has an approved need for care.

Payments may be made for children who are unable to attend school for short periods of time due to illness, virtual learning as a result of a public health crisis, suspension. Children who have been deemed unready for kindergarten shall be subject to the requirements in section 4.10.2.

4.10.1. Parents of children who are enrolled in a virtual learning program resulting from a public health crisis must provide documentation from the school board of education that their child is enrolled in a school administered virtual learning program.

4.10.2. Parents of children deemed unready for kindergarten should be encouraged to seek placement in Pre-K if room is available. The parent must provide documentation from the school board that their child has been deemed unready for kindergarten. The CCR&R case manager shall file this in the Correspondence Section of the Client file and document in PATH contacts.

4.10.3. The CCR&R case manager shall indicate, in the Narrative section of the WV Child Care Certificate, the name of the child(ren) and that they are a school aged virtual learner. The CCR&R case manager shall file the documentation in the Correspondence Section of the Client file and document in PATH contacts.

4.11. AmeriCorps and Vista:

Applicants who are AmeriCorps or Vista participants are not eligible for WV child care assistance. Participants in these programs have their own child care assistance fund, administered by GAP Solutions Inc. Please refer these applicants to the website:

https://www.americorpschildcare.com/

"AmeriCorps Child Care Benefits Program

The AmeriCorps Child Care Benefit Program is available for qualified, active, full-time AmeriCorps State and National, VISTA, NCCC, and FEMA Corps Members who need the benefit to serve; eligibility requirements are listed below for each AmeriCorps program. Child care benefits are paid directly to qualified child care providers for all or of part of the member's child care costs during their active time of service with AmeriCorps; child care benefit payments cannot be paid directly to AmeriCorps members.

Child care benefits may not exceed applicable payment rates as established in the state in which the child care is provided under the Child Care and Development Block Grant Act of 1990 (42 U.S.C. 9858c(4)(A)).”

CHAPTER 5: FINANCIAL ELIGIBILITY FOR CHILD CARE SERVICES

5.0. Overview

To determine the financial eligibility of applicants for or recipients of child care, it is necessary to determine:

A. The size of the family.

B. The amount and source of monthly gross income received by all members of the family and calculate the monthly gross income for the family.

C. If the monthly gross income of the applicant's family falls below the maximum allowable income by comparing the family's monthly gross income to the amount listed in the chart contained in Appendix A as appropriate for the family size. Families whose income falls at or below the appropriate level are eligible.

D. If the family's assets exceed the asset cap of $1,000,000. All families, including foster parents Kinship/Relatives, and TANF Caretaker Relatives, who own assets in excess of $1,000,000 will not be eligible for child care assistance. Assets include checking and savings accounts, retirement accounts, stocks, bonds and other financial instruments, trust funds, burial plots, vehicles, real estate and other property, personal collections, livestock, business equipment and property, and jewelry.

E. The CCR&R case manager shall use the following general procedures and guidelines to calculate family size, verify monthly gross income, and determine types of income to count or exclude to establish eligibility for child care. See Appendix A for income eligibility guidelines.

5.1. Family Size

A family is defined as one or more adults and children, if any, related by blood or law and residing in the same household (See Chapter 1, Definitions Section), with the following exceptions and interpretations:

5.1.1. Adults Other than Spouses in the Household

Adults other than spouses are considered separate families even if related in some manner other than as spouses. (In PATH, these individuals are listed as non-participating adults.)

5.1.2. Multi-Generational Households

Although three generations of a family may live in one household, they shall be considered as separate families, even if the person representing the middle generation is under 18 years of age, as long as the biological parent retains legal custody of the child. In cases where the parent retains legal custody, the grandparents will not be counted as members of the same family as the parent and child. (Grandparents are listed as Non-Participating Adults in PATH). In cases where the legal custody of the child rests with the grandparents, and the

biological parent is in the household, both biological and legal guardians shall be counted as participating members of the household.

5.1.3. Adult Children in the Household

An adult child (age 18 or older) residing with his/her parents is not a member of his/her parents' family. (This person is listed as a Non-Participating Adult in PATH).

5.1.4. Head of Household

The head of household may be a natural parent, step parent, or an individual acting in loco parentis, such as a relative or non-relative who has been granted custody or guardianship by a court of law or who has assumed full physical custody and responsibility for a child, with or without legal custody.

5.1.5. Adoptive Children

Children legally adopted are treated the same as natural children.

5.1.6. Multiple Family Households

In situations where adults, who are not spouses, reside together, any children in the household will be considered part of the family of the parent(s).

Example: Mr. and Mrs. X and their two children live in a household with Mrs. X's sister (Y) and her one child. Mr. and Mrs. X and their two children constitute one family while Mrs. Y and her child constitute a second family.

5.1.7. Unmarried Parents

Although West Virginia does not recognize common law marriage, a couple living together as spouses will be considered members of the same family if they are both biological, adoptive, or foster parents of a child or children living in the household. However, if a couple resides together and each has a child of their own and share no children in common, they are two separate families and entered into PATH as such.

5.1.8. Family Members Expected to Return

A family member who is away from the family residence for reasons of employment, education, training, shared custody, or military deployment and who returns regularly, maintains a residence outside the country, or is expected to return, shall be considered as a member of the household.

Example 1: Mr. and Mrs. A reside in Sutton with their two children. Mr. A is employed in New York City and maintains an apartment there but returns home on average once a month. Mr. A would be considered a member of the same household as his wife and children and the family would consist of Mr. A, Mrs. and the two children.

Example 2: Sally and Jeff are the children of Mr. X and Mrs. X, who are divorced. Sally and Jeff live in New York with Mr. X during the week and with Mrs. X on the weekends and for two weeks in the summer. Mrs. X receives child care services for her youngest child Ann but does not work weekends and does not need child care for Sally and Jeff. However,

since they return regularly to the household, Sally and Jeff are considered members of the household for purposes of calculating family size. Mrs. X's family size is 4, consisting of Mrs., her child Ann, and Sally and Jeff.

Example 3: Mr. & Mrs. X are married. They share two children. Mr. X maintains a residence in Dublin, Ireland. Mr. X returns regularly to visit the family in the US. Mr. X would be considered a member of the same household as his wife and children and the household members are Mr. X, Mrs. X and the two children.

5.1.9. Biological Parents Residing on the Same Premises

Biological parents residing on the same premises shall be considered members of the same household. Premises are defined as a building, group of buildings and/or contiguous parcels of land under the control of a single owner, who may rent out portions of the premises. For example: if the biological mother resides with a grandparent, and the grandparent rents a garage apartment on the premises to the biological father of the child, both the mother and the father shall be considered a single household, since they reside on the same premises. Biological parents residing on the same premises per this definition can apply for Family Member Status Waiver if they can prove separate residences by supplying any of the documents listed in 3.4.2 for each parent. Statements signed by other family members will not suffice for this purpose.

5.2. Monthly Gross Income

Monthly gross income is the total amount of money, prior to deductions, received or earned monthly by the members of the family. Income received on other than a monthly basis must be converted to a monthly income.

5.2.1. Employment Income Considered in Determining Eligibility

5.2.1.1. Countable Employment Income.

The amount considered as income is earnings before deductions are made for taxes, bonds, pensions, union dues or any similar type of deductions. Total money earnings received for work performed as an employee including:

A. Wages.

B. Salary.

C. Commissions.

D. Tips.

E. Piece rate payment, and

F. Cash bonuses.

G. Mileage/travel reimbursements IF it is counted as taxable income (a fringe benefit) by the IRS.

1. Countable income: Mileage and travel reimbursements that exceed the IRS's per diem rates are considered fringe benefits. Taxes are calculated and withheld from the reimbursement. This will be evident from the paystub.

2. Mileage and travel reimbursements that do not exceed the IRS's per diem rates are not counted when calculating MGI.

5.2.1.2. Methods of Verification:

Employment income must be verified by the client by submitting one of the following:

A. One month's worth of check stubs, **OR**

B. The New Employment Verification Form (ECE-CC-1B) in the case of new employment situations in which the applicant has not yet received pay.

1. Clients using the ECE-CC-1B to verify employment must submit one month's worth of check stubs to the agency as soon as they are received.

2. Failure to supply follow up check stubs will result in case closure.

5.2.1.3. Reviewing Check Stubs.

A. CCR&R case managers should review check stubs carefully to ensure that the client is accurately reporting their income.

1) Case managers should compare current payment amounts to year-to-date amounts and review carefully for discrepancies.

2) The case manager should also review the check for overtime payments, bonuses, incentive payments, tips, and commission that may only be earned intermittently. These items will show up in the year-to-date portion of the check stub even if the client shows no earnings in those categories for the current pay period. If the client shows earnings in those categories, the case manager should follow the steps outlined in Section 5.3.2, as appropriate, to calculate an accurate average monthly income.

B. Paystubs should be no more than 45 days old. Consecutive paystubs are preferred; however, it is acceptable for the case manager to calculate the amount of a missing paystub using the year-to-date amounts listed on the paystub immediately preceding and the paystub immediately following the missing paystub. Case managers using this method to calculate income should clearly explain steps taken in case contacts.

5.2.2. Countable Non-Farm Self-Employment Income

Net income from non-farm self-employment: gross receipts minus allowable expenses. Gross receipts include the value of all goods sold and services rendered.

5.2.2.1. Methods of Verification.

A. Self Employed clients with prior established self-employment must submit tax records to the CCR&R by April 30 of each year to verify that the business is producing taxable income at the time of assistance.

B. Self Employed clients will be given the Self-Employment Ledger form (ECE-CC-1C) to track Income and Expenses.

C. Clients who choose not to use the ECE-CC-1C Form may substitute:

1. Business records from an outside accountant **OR**

2. Ledger Books or other bookkeeping records, such as Quicken Software reports.

D. The CCR&R reserves the right to request additional documentation, such as receipts or invoices as needed to verify income and expenses.

E. The gross income from self-employment business activity shall be used to determine eligibility and amount of assistance if the information submitted by the parent is not sufficient to adequately determine net profit.

5.2.2.2. Allowable Expenses.

The following expenses are allowable deductions in calculating net income.

A. Cost of goods purchased.

B. Rent, heat, light, power on the income producing property.

C. Cost of Supplies.

D. Wages and salaries paid to employees other than the business owner/parent of child.

E. Business taxes and/or licenses.

F. Advertising goods or services.

G. Interest (not payments) on the principle of the purchase price of income producing property.

H. Real estate taxes paid on the income producing property.

5.2.2.3. Disallowed Expenses.

The following expenses are not allowable deductions in calculating net income for purposes of this policy.

A. Money set aside for pensions and profit-sharing plans.

B. Federal, State, and local income taxes.

C. Depreciation and Depletion.

D. Net losses from previous years

.

E. Mileage Rate on vehicles and other travel costs.

F. Premiums paid for health/medical insurance.

G. Payments on the principal of the purchase price of income producing real estate and capital assets, equipment, machinery, and other durable goods.

H. Entertainment and meals.

I. Personal expenses paid out of business accounts (personal car payments, utility bills, personal primary residence mortgage/rental payments, clothing, vacation expenses, etc.) Small businesses may provide in-kind compensation to owners in the form of payment of personal bills and expenses directly from business accounts. This is treated as countable income, as it is part of the client's compensation.

J. If the family uses its residence in a self-employment enterprise, the utility costs, rent or interest on the mortgage of the residence will not be allowed unless they can be shown as separate from the household's normal usage.

5.2.3. Countable Income from Farm Self-Employment

Countable income from farm self-employment consists of gross receipts minus operating expenses from the operation of a farm by a person on his own account as an owner, renter or share cropper. Gross receipts include the value of all products sold, government crop loans, money received from rental of all farm equipment and incidental receipts from the sale of other goods. Operating expenses include expenses directly relating to the operation of the farm such as cost of feed, fertilizer, seed and other farming supplies, cash or wages paid to farm hands, rent, and interest on farm mortgages and farm taxes.

5.2.4. Countable Unearned Income

5.2.4.1. Social Security – any regular social security benefits after deductions for medical insurance.

5.2.4.2. Dividends, interest on saving or bonds, income from Estates or Trusts, rental income, or royalties.

5.2.4.3. Public assistance payments including TANF, such as Relative Caretaker pay, WV Employment Assistance Program, WV Works Post-Employment Supplements, and SSI.

5.2.4.4. Pensions and annuities.

5.2.4.5. Unemployment compensation.

5.2.4.6. Workers' compensation.

5.2.4.7. Alimony. If less than ordered by the court, count only the amount received. Amounts received above the court-ordered amount are also considered income. Other court ordered forms of Spousal Support, i.e., house/rent payments, child care expenses, grocery bill, shall be counted as income.

5.2.4.8. Child Support. Other court ordered forms of Child Support, i.e., house/rent payments, child care expenses, grocery bill, shall be counted as income. CCR&R case managers are not to require that parents submit proof of child support received in one form of verification. (See list of acceptable verifications in Chapter 5, Section 4.) If a court order is submitted as proof of child support, the court order shall stand as proof of child support received for the children listed on the order for all successive reviews unless the order is changed. Child Support verification as stated by the parent is acceptable. In this case, the CCR&R case manager will make a detailed entry in case contacts regarding the parent's self-reported Child Support income.

5.2.4.9. Veteran's benefits.

5.2.4.10. Payments received from participation in a vocational rehabilitation program.

5.2.4.11. Any other monies received on a regular basis from any source, except for those listed under 5.2.5., excluding money received to purchase required school books or supplies, or pay tuition.

5.2.4.12. Taxed fringe benefits: mileage, meals, incidental reimbursements. (If these items do not have taxes calculated and withheld, they are not countable income, see 5.2.5.22)

5.2.4.13. Transitional Compensation for Abused Dependents Program funds issued directly to the parent from the Department of Defense

5.2.5. Income Not Considered in Determining Eligibility

The following sources of income should be excluded (not counted) in computing the amount of a family's monthly gross income:

5.2.5.1. Money received from the sale of property such as stocks, bonds, real estate, or automobiles, except money received from the sale of property is counted as income if the person is self-employed or otherwise engaged in the business of selling property. For example, an individual who sub-divides a plot of land and is selling lots for residential or business purposes is considered self-employed as a real estate developer. An individual who consistently offers one or more automobiles for sale is self-employed in the business of automobile sales.

5.2.5.2. Withdrawals of bank deposits.

5.2.5.3. Loans or other money borrowed.

5.2.5.4. Tax refunds.

5.2.5.5. Monetary Gifts received on an infrequent basis, such as those received on birthdays or holidays.

5.2.5.6. Lump sum inheritances or insurance payments.

5.2.5.7. Bonus value of food stamps.

5.2.5.8. Capital gains.

5.2.5.9. The value of USDA donated foods.

5.2.5.10. Payment received under the Uniform Relocation Assistance and Real Properties Acquisition Policy Act of 1970.

5.2.5.11. Earnings from employment or self-employment of a child under 18 years of age. However, if the child is a primary recipient of child care or the spouse of the recipient of child care, his/her earned income will not be excluded from the calculation of family monthly gross income.

5.2.5.12. Grants, scholarships, or work study.

5.2.5.13. Federal insurance undergraduate loans and grants.

5.2.5.14. Home produce used for household consumption.

5.2.5.15. Other assets such as real estate, bank accounts, stocks, and bonds.

5.2.5.16. Earnings or boarding care payments received by approved foster and kinship/relative families.

5.2.5.17. Amounts received through adoption subsidy or legal guardianship program.

5.2.5.18. Lump sum severance pay.

5.2.5.19. Monies received for participation in WIA activities.

5.2.5.20. Military Housing Allowance (BAH)

5.2.5.21. Military Basic Allowance for Subsistence

5.2.5.22. Untaxed mileage or meal reimbursements

5.2.5.23. Transitional Compensation for Abused Dependents Program funds issued directly to the child from the Department of Defense

5.2.5.24. GI Bill

5.2.5.25. Child support arrearages and tax intercepts.

5.3. Conversion of Income to Monthly Amounts

Conversion of income amounts to monthly gross income is computed in the following manner:

5.3.1. Income Received on a Regular Basis

PATH automatically converts income received on a regular basis, but more frequently than once a month, to a monthly amount by:

5.3.1.1. Multiplying average weekly amounts by 4.3,

5.3.1.2. Multiplying average bi-weekly amounts by 2.15, or

5.3.1.3. Multiplying average amounts received or paid twice monthly by 2.

5.3.2. Irregular Income

The CCR&R case manager shall convert irregular income, or income amounts that vary from pay day to pay day, to monthly amounts by:

5.3.2.1. Prorating income received less often than once a month by dividing the amount by the number of months it is intended to cover. Individuals who, by contract or self-employment, derive their total annual income in a period shorter than one year shall have that income averaged over a 12-month period. These individuals may include school employees, farmers, or other self-employed persons. This would apply to both unearned income, which is intended to meet future needs, as well as income from work performed in the past. **OR**

5.3.2.2. Averaging the amount of the irregular income received in the past to arrive at a monthly amount which can be anticipated in the future. The case manager will generally average the monthly gross income received in the previous three months. However, if an applicant/recipient experiences or has experienced a recent substantial decrease or increase in his/her regular income, the case manager will take this into consideration to estimate the income the applicant/recipient can reasonably expect to receive in the future. **OR**

5.3.2.3. Total the income that varies seasonally throughout a year, and then dividing by 12 to obtain an expected average monthly income. The case manager should take into consideration any change in the rate of payment that has taken place when calculating the average. **OR**

5.3.2.4. In situations where an applicant or member of the family has recently experienced a temporary disruption (less than 90 days) of income due to a strike, job loss, cut back in number of hours to be worked or other factors, the CCR&R case manager shall consider as income that amount that the client can reasonably anticipate receiving during the next month. Monthly reporting by the client of income received should be requested until the temporary disruption is ended.

5.3.3. Changes in Income during Certificate Period

Clients whose income changes during a certificate period shall remain eligible for services until the next status review. If the client's income has decreased, the client may request a fee reduction. (See Chapter 6, Section 4.6) CCR&R case managers shall not increase fees for clients whose income has increased due to increased work hours, pay raise or other income during the certificate period. For instructions on making changes to an assessment during the certificate period, see Chapter 6, section 3. For instructions on adding a spouse/parent/child to the household see Chapter 6, section 2.

5.4. Sources of Documentation/Verification

The methods acceptable for verifying most eligibility criteria can be found in the following chart. The working applicant/recipient must receive a non-subsidized wage or salary, either from an employer or through self-employment, to meet the definition of working (see Chapter 1, Definition of Program Terms). In situations where a non-working applicant/recipient (attends school or training) has no income from any source, the client's statement to this fact will be accepted unless the CCR&R case manager has reason to believe the statement is not truthful. All documentation must be no older than 45 days except for the exceptions listed for child support, alimony, and tax records. Tax records must reflect the most recent period.

Item to Be Verified	Method of Verification
INCOME a. wages b. salary c. incentive payments d. bonuses	1 months' worth of Check stubs ECE-CC-1B until the first regular pay period; then must verify through check stub. Tax records
Profit from self-employment	Income tax records ECE-CC-1C Client business records
Social Security and SSI	Check, Bank Statement showing direct deposit, Award letter
Unemployment Compensation	Check, Bank Statement showing direct deposit, Award letter
Worker's Compensation	Check, Bank Statement showing direct deposit, Award letter
Alimony and Child Support	Court Order (Court orders are valid for the life of the case for the children listed on the order or until the order is changed.) Statement from Child Support Office Letter from the payee
Veteran's Pensions	Check, Bank Statement showing direct deposit, Award letter
Pensions	Check, Bank Statement showing direct deposit, Award letter
Dividends, Interest or Other Income	Statements or Notifications from Bank or Financial Institution
Net Income from rental property	Income tax records Applicant's records
Net Income from Boarders	Income tax records Applicant's records
Receipt of Income Maintenance –TANF	WV Works

CHAPTER 6: CLIENT CASE MANAGEMENT & CONTINUED CONTACT

6.0. Client Case Management Overview

It is the responsibility of the CCR&R agency to maintain an eligible case load by having continued contacts with families, reviewing the case record as needed, and comparing the case record to provider payment requests as needed. The importance of contact with parents cannot be over emphasized. Contacts with parents shall be used to:

- Determine continued need for child care services.
- Determine if child care arrangements are satisfactory.
- Be updated on changes in the family's situation, and
- Offer support through linkage with community resources.

Once deemed eligible, the child shall receive services "at least at the same level" for the duration of the eligibility period. This means that the benefit cannot be reduced during the twelve-month period.

If the parent reports changes within the eligibility period that would increase the family's benefit, the case manager must reassess the case and make the appropriate increase in the family's benefit.

6.1. Case Management PATH Ticklers

The CCR&R case manager should review their PATH ticklers monthly.

6.1.1. Redetermining Eligibility: The Status Check

The financial eligibility of each family receiving child care services shall undergo a status check periodically. Although status checks must be done by mail, staff are encouraged to have personal contact with parents at this time. This may best be accomplished with a telephone interview. After status checks or other contacts with the family, the case manager should document the case notes in the PATH Contact screen, enter the necessary recordings and changes in the PATH record and send proper notices to the parent.

The CCR&R case manager will be notified via PATH Tickler when redeterminations are due. A status check must be completed on each case during the twelfth month of the current service period, or more frequently as needed.

For example: If a status check or approval was completed January 20, 2018, the next status check is due February 1, 2019. PATH will consider the status check overdue as of the last day of the month February 28, 2019. If an assessment is not entered in PATH within 60 days of the due date (April 30, 2019) PATH will no longer process payments to the provider. Every effort should be made to enter status checks in a timely manner. In rare instances where status checks are not entered within 60 days, and payment is due to the provider, payment should be sent to the Division of Early Care and Education for completion.

6.1.2. Procedures for Completion of Status Checks

The CCR&R case manager shall review their PATH Ticklers monthly for a listing of cases due for status checks.

6.1.2.1. Status Check Time Frames

When a status check is due, the DAY-0612, Notification of Redetermination, and the Status Review (ECE-CC-1E) form will be mailed to the parent. The family will be asked to complete and return the form. The status check form shall be mailed no later than the first day of the month, with the due date on the 15th day of the month and closure date 13 days later or the last day of the month.

For example: For a status check due in August, the Child Care Parent Notification and Status Check/Review form are mailed no later than August 1. The dates on the notification letter shall indicate to return by August 15th to be closed on August 31st. The return date at the top of the Status Check/Review form should be August 15th.

6.1.2.2. Parent and Provider Notifications

The parent needs to return the Status Review (ECE-CC-1E) with all required documentation/verification for work, school, and income. If it is not returned by the 15th day, then the DAY-0613, Provider Certificate Notification Letter, shall be sent to the child care provider notifying them of the parent closure effective the last day of the month. If it is returned, the case manager will evaluate the information considering current eligibility requirements and determination of continuing need. If the case remains eligible, the case manager is to complete an assessment in PATH, so services may continue. If an assessment is not completed within sixty days of the due date, PATH will not allow further payment to be made.

6.1.2.3. Status Check – Continued Eligibility

When a family is determined to remain eligible at status check, the CCR&R case manager shall issue the DAY-0176 Child Care Certificate to notify the parent of on-going eligibility and/or change of fees. The parent(s) shall then take the certificate to the provider. The certificate is to be signed by both the parent and provider. Upon completion of the status check, an entry will be made into the PATH case of all information to update the record.

6.1.2.4. Status Check – Family Found Ineligible

If the family is determined to be ineligible at status check, the CCR&R case manager shall issue the DAY-0179, Child Care Parent Notification of Denial or Closure, to notify the parent of termination of services and their right to appeal this action. The CCR&R case manager shall issue a DAY-0613 to notify the provider that the family is no longer eligible for child care services. If the family returns the status check after the 15th day, and is found ineligible, the case manager shall issue a DAY-0179 informing the client that they are ineligible and that the previous closure notice for failure to return the review by the 15th day of the month remains in effect.

6.1.2.5. Status Check – Case Closures

The case managers should request the case for closure no later than noon on the first working day of the month. The supervisor should have all cases approved for closure by the end of the day on the first working day of the month.

6.1.3. Ticklers for Changes in Child Age

PATH ticklers will identify children approaching an age category that may result in payment rate change or program ineligibility due to aging out of the program. Age categories are established in the Payment Rate Chart (Appendix B).

6.1.3.1. Payment Rate Changes Based on Child's Age

Payment rate changes occur when a child moves into a new age category identified in the Payment Rate Chart (Appendix B): toddler at 25 months, preschool at 37 months, and school age at 60 months. The case manager shall issue a new Child Care Certificate (DAY-0176) to the family for delivery to the provider, identifying the effective date of the new reimbursement rate. If the child's birthday is the first day of the month, the rate will change that month, so notice should be sent 13 days prior to the child's birthday. If the child's birthday falls on the second day of the month or later, the payment rate will change the following month; notice should be sent at least 13 days prior to the change in rate.

6.1.3.2. Aging Out of Care

When a child turns age 13, the worker should send appropriate 13-day notices to both the parent and the provider noting the date child(ren) will become ineligible which will be the last day of the current certificate period.

A. The 13-year-old child will remain eligible through the end of the current Child Care Certificate period.

B. West Virginia Child Care Centers are not permitted to provide services to children, aged 13 and above. If the 13-year-old child is enrolled in a Child Care Center, the parent(s) must choose an alternate provider type to continue receiving child care services.

6.1.4. Need for Care 90 Day Tickler

Child care resource and referral staff will use the PATH tickler system monthly to review payment history of all cases identified as having no payment for 90 days. Any parent who does not use child care assistance for an extended period no longer has an established need for child care assistance and therefore may not remain an active case.

6.1.4.1. Any case which has not utilized child care for a 3-month period or longer shall be sent notice that the case will be closed.

6.1.4.2. Procedures for notification to the parent and the provider of a negative action shall be followed. If notice is being sent at the time of redetermination, then the DAY-0612 (Parent Notification of Redetermination) will be used to notify the parent of

the case closure and reason with the explanation that the status check is to be returned only if the parent disagrees with notice to close and completes a request for a conference (second page of the notice). A DAY-0613 will be sent to notify the provider of the case closure. It will be important in these cases for the CCR&R worker to establish contact with the parent to determine the need for care.

6.2. Additions to Family Size

If the case worker has reason to believe that the client is not accurately reporting family size, the case manager can request verification: i.e., birth certificate, adoption documents, statement of acting *in loco parentis* for the addition of a child.

6.2.1. Adding a Child

To add a child in the middle of an assessment period the case manager shall:

6.2.1.1. Complete a new assessment in PATH. The beginning date should be the first day of the month to which the child needs added. For example, if the case manager is notified by an existing client on 4/13/18 that a child has been adopted and needs to start child care on that date, the assessment date should begin on 4/1/18.

6.2.1.2. Update the Service Log in PATH. In the example given, the case manager should change the service dates for the new child to 4/13/18, since that is the date, the child joined the family and started care.

6.2.1.3. Issue a Child Care Certificate (DAY-0176) to the family which includes the new child, making sure to change the beginning date for eligibility for the new child to the date the child will start care.

6.2.2. Adding a Spouse or Biological Parent

To add a spouse or biological parent to household in the middle of an assessment period the case manager shall:

6.2.2.1. Send a Child Care Parent Closure Notice (DAY-0179) to the client requesting new income, employment and/or school verifications to be returned within 13 days for the spouse/biological parent added to the home.

6.2.2.2. Include on the DAY-0179 that the child care case will close within 13 days if the spouse/biological parent is not participating in an approved activity, and/or if new income verification received shows that the family is ineligible for services.

6.2.2.3. Send a Provider Notification - Client Eligibility (DAY-0613) to all child care providers connected to the case, noting impending closure date.

6.2.2.4. Close the case on the date given in the DAY-0179, if verifications are not returned within 13 days, or verifications show that the family is now ineligible.

6.2.2.5. Complete a new assessment in PATH if returned verifications show that the family is eligible. The beginning date for the assessment is the first day of the month after the spouse/biological parent has joined the family. Example: The case manager is notified on 4/16/19 that the client has married. The case manager mails a Child Care Parent Closure Notice (DAY-0179) to the client requesting income and employment/school verification for the spouse by 4/29/19. The client returns requested verifications by 4/21/19, and the verifications show the family is eligible. The case manager will complete a new assessment on the case with a start date of 5/1/19.

6.2.2.6. After completing the assessment, the case manager shall mail a new Child Care Certificate (DAY-0176) to the client, noting the new daily fee, if applicable. The case manager shall also mail a DAY-0613 to the provider noting the new fee.

6.3. Changes in Days and/or Hours of Care During the Certificate Period

Clients may need to request changes to their days and/or hours of care during the certificate period. These changes should not move the recertification date of the certificate or increase the child care fee. To increase or decrease the hours on the child care certificate the case manager will need to do a new assessment in PATH.

6.3.1. The client should submit documentation of the need for schedule change.

6.3.2. The case manager shall make no changes to any of the income screens unless the client is also requesting a reduction in fees (See Chapter 6, Section 6.4.6). If the client is not requesting a reduction in fees, do not change any of the income information currently. Wait until the previously scheduled review date.

6.3.3. The case manager should enter the new days and hours into the new assessment.

6.3.4. The case manager will then connect the children on the service log to the child care provider, making sure to change the end date to the end date of the original certificate. For example: Martha calls in on June 15 because her hours will be increased at work on July 1, 2018. Her original certificate and assessment were valid from March 1, 2020, through August 31, 2020. The case manager completes a new assessment with a start date of July 1, 2020, to increase the hours reflected on the certificate. The assessment will automatically populate the end date of December 31, 2018. However, the client must complete a status check by August 31, 2018. Therefore, the case manager should be sure to end date the service log for August 31, 2018, and issue the new certificate with that date.

6.3.5. The case manager will issue a new certificate reflecting the correct days, hours, and dates to the client.

6.3.6. The case manager will set a tickler to mail out the client's status check in the original review month, not the month reflected by the assessment.

6.4. Parental Child Care Fees

Most child care recipients will be required to pay a portion of the cost of the service as a fee to the child care provider. Fees shall be paid for each child in care based on number of days of care. Fees vary according to family size and income. Applicable fee amounts must be indicated on the Child Care Certificate provided to each parent. The sliding fee scale is included as Appendix A.

6.4.1. Who Pays Fees?

Parents with earnings of less than 40% of Federal Poverty Level as shown on the Sliding Fee Scale (Appendix A) are exempt from fees. Children who are in the legal custody of the State of West Virginia and who are in approved foster homes, approved kinship/relative homes are also exempt. All other parents shall pay the fee unless waived by the CPS worker as part of an approved safety or treatment plan.

6.4.2. Who Collects Fees?

Child care providers will be responsible for collecting fees from parents but may charge only those fees indicated on the Child Care Certificate. If a parent uses more than one provider, both providers will collect the fee.

6.4.3. How Are Fees Determined?

The fee a parent is charged is based on the family size, income, and number of children in care. The sliding fee scale in Appendix A lists income ranges and corresponding fees that parents must pay to receive child care benefits.

6.4.3.1. Once a parent's monthly gross income has been determined, the case manager refers to the sliding fee chart to determine the column representing the family's size, and then the income level.

6.4.3.2. A daily fee will be assessed for each child in care.

6.4.3.3. The daily fee amount will be the same for each child.

6.4.3.4. If more than three children need child care, the fee will be assessed only for the three youngest children. Parents shall not be charged for more than 3 children.

6.4.3.5. Except for the initial certificate, which may show an effective date in the middle of a calendar month, the parent fee is to be initiated or the fee amount changed at the beginning of a calendar month. For example: If an assessment completed July 2019 shows an increase in the daily fee, the parent and provider shall be sent notification letters that the new fee will be effective 8/1/2019.

6.4.4. How Are Fees Collected?

6.4.4.1. The child care provider is responsible for billing and collecting fees from parents, using the daily fee amounts listed on Child Care Certificates (DAY-0176) or the Provider Notification Letter (DAY-0613).

6.4.4.2. Fees should be paid at least monthly. Providers and parents jointly decide when and how often fee payments will be due. Other options for collecting fees include daily, weekly, or bi-monthly.

6.4.4.3. Fees may be collected up to 30 days in advance. However, if fees are collected in advance, the provider must credit to the following month or reimburse to the parent, the fee for any days paid, but not used. The billing procedure may be a formal or informal process.

6.4.4.4. Providers are asked to provide receipts upon request. A billing and receipt form (ECE-CC-10D) is available for providers who opt to use a formal billing procedure.

6.4.4.5. Providers shall bill the amount of fee according to instructions provided on Fee Collection Instructions Form (ECE-CC-10C).

6.4.4.6. The provider charges the family a daily fee per child, up to three children, based on the total number of full days care is provided to the family.

6.4.4.7. If part days of care are provided, the provider is to convert those to full days using charts provided in the instructions.

6.4.4.8. Providers shall not bill the daily fee for days that the child is not in care.

6.4.5. How Are Overdue Fees Collected?

CCR&R staff can only assist child care providers in collecting the parent's portion of the daily fee. CCR&R staff do not assist providers collecting late pick-up fees, registration fees, transportation fees, and fees for times not approved by the agency. If a parent does not pay the required daily fee and the provider decides to pursue collection, the following process must be followed:

6.4.5.1. Parent fees should be paid at least monthly. The provider must notify the CCR&R case manager in writing no earlier than five no later than 30 days after the date payment was due.

6.4.5.2. The provider shall not make additions to the child care fee amount for the purpose of timely payment enforcement, i.e., "late payment penalty for late payment of child care fees."

6.4.5.3. The case manager shall then send notices to the parent via the Child Care Parent Closure Notice (DAY-0179) and to the provider via the Provider Notification-Parent Eligibility (DAY-0613) that Child Care Services will be terminated 13 days from the date of the closure letter.

6.4.5.4. The parent has the right to make the fee payment within the 13-day period or to request a pre-hearing conference or hearing.

6.4.5.5. If the parent pays the fee, the provider must notify the CCR&R case manager in writing and care will be continued. In addition to notification from the provider, the parent must supply the CCR&R with a receipt verifying payment of the overdue fee within the 13-day period or the case will be closed. The CCR&R case manager must confirm the veracity of the receipt with the child care provider. Confirmation with the provider and continuation of services should be noted in case contacts. If the provider disputes the veracity of the receipt, the child care case will be closed.

6.4.5.6. If the parent requests a hearing within 13 days, services will be continued until the issue is resolved.

6.4.5.7. If the parent neither pays the fee nor requests a hearing, the case will be closed at the end of the 13-day period.

6.4.6. Clients Requesting a Reduction in Fees

Clients who lose employment or experience a reduction in household income during the assessment period may request that their fee be reduced. To determine the new fee, the case manager shall:

6.4.6.1. Request new income verification and proof of income reduction. Proof of income reduction may include:

A. Lay off notifications,

B. Termination of benefits (SSI, TANF, Child Support) letters,

C. Termination letters (in the case of involuntary discharge from employment)

D. Receipt of unemployment benefits,

E. Check stubs showing a reduction in work hours.

F. Subtraction of spouse/ biological parent of children from household. If the case manager has reason to believe that the client is not accurately reporting family size, the case manager may request verification by legal documentation (i.e., legal separation papers, divorce decree). If no legal documentation is available, two notarized statements by persons other than relatives stating that the person is no longer in the home may be substituted.

6.4.6.2. Verify that a need for care still exists.

6.4.6.3. Complete a new assessment in PATH to determine the amount of the new fee. The new assessment date shall begin on the first day of the month following the request for reduction.

6.4.6.4. Mail the new certificate reflecting the reduced fee to the client.

6.4.6.5. Mail a DAY-0613 to the provider noting the reduced fee and the effective date.

6.5. Procedures for Exceptions to Eligibility Policy

6.5.1. Family exceeds income guidelines at the end of a Job Search period:

Although the situation does not occur frequently, there may be occasions when a family will submit verification of household income, after a change in qualifying activity, such as the end of a Job Search period, that exceeds income guidelines based upon the current Sliding Fee Scale. However, when the family's household income exceeds the State's current income guidelines, but falls under 85% of the current State Median Income (SMI) the State is required to provide a graduated phase out of assistance. When the situation occurs as described above, the Child Care Resource and Referral Agency (CCR&R) Case Manager will further assess the household income based upon the current SMI.

6.5.1.1. If the household income falls below 85% of the SMI, the CCR&R Case Manager must enter an "Over Income Policy Exception" in PATH. The "Over Income Policy Exception" can be found on the same PATH screen with the "Medical Policy Exception." Upon approval of the "Over Income Policy Exception", the Division of Early Care and Education will assist the Case Manager with calculating the Child Care Fee.

6.5.1.2. The CCR&R Case manager will collect all relevant information needed for approval and enter the request into PATH under the Policy Exception Screen. The request must, at a minimum, contain the following information:

A. Parent(s) name, address, and telephone.

B. Name and birth dates of children.

C. Number of people in the household.

D. Family income.

E. Reason for requesting an exception. This includes a description of the condition requiring the exception, and the date the condition began.

F. The anticipated end date of the policy exception should the request be approved.

6.5.1.3. The request for an exception will be reviewed by the CCR&R supervisor. After the supervisor's approval, it must be forwarded via PATH to the Division of Early Care and Education.

6.5.1.4. The Division of Early Care and Education shall review the exception request and provide a decision within 30 days.

6.5.1.5. If approved, payment may be backdated to the date of income eligibility.

6.5.1.6. If denied, the case manager shall notify the parent in writing that the exception was not approved, and the parent is responsible for payment to the provider (See Chapter 4, Need for Child Care, for additional exception requirements based on State Median Income (SMI)

6.5.2. Illness

In unusual, extraordinary circumstances, exceptions to eligibility policy can be requested. Exceptions will be granted on an individual basis and only in situations where the circumstances of the client are so different from the norm that the policy is unfair or inappropriate when applied to the individual client. Consideration is given to factors such as the age of the child, the child's ability for self-care, the amount of supervision or hands-on care required for the child, and if there are other household members present who can aid in the supervision of the child. When an exception request is made, CCR&R case managers shall inform parents the approval is not guaranteed. The parent and provider must establish private payment arrangements to ensure that the provider is paid during the time the exception request is reviewed. The following steps should be taken to process an exception request.

6.5.2.1. The CCR&R Case manager will collect all relevant information needed for approval and enter the request into PATH under the Policy Exception Screen. The request must, at a minimum, contain the following information:

A. Parent(s) name, address, and telephone.

B. Name and birth dates of children.

C. Number of people in the household.

D. Family income.

E. Reason for requesting an exception. This includes a description of the condition requiring the exception, the date the condition began, and an explanation of why care is needed.

F. Resources explored for provision of child care prior to requesting child care services, i.e., community, family, volunteers.

G. Amount family can financially contribute to the cost of the service.

H. Probable consequences to the family if the exception is not granted.

I. Anticipated length of time the exception is needed, and, for illness or injury, the length of time anticipated for recovery.

6.5.2.2. The request for an exception will be reviewed by the CCR&R supervisor. After the supervisor's approval, it must be forwarded via PATH to the Division of Early Care and Education.

6.5.2.3. The Division of Early Care and Education shall review the exception request and provide a decision within 30 days.

6.5.2.4. If approved, payment may be backdated to the date of application.

6.5.2.5. If denied, the case manager shall notify the parent in writing that the exception was not approved, and the parent is responsible for payment to the provider (See Chapter 4, Need for Child Care, for additional exception requirements based on a medical condition.)

6.6. Negative Actions: Appeals and Fair Hearings

Any notification of negative action must be in writing on the Parent Notification Letter (DAY-0177 or DAY-0179), including denial of an application and termination of services. The form letter shall include the specific negative action, with citation of specific policy and a description of any action, if applicable, on behalf of the client that resulted in the negative action. The original Notification Letter (DAY-0177 or DAY-0179) shall be sent to the parent, with a copy saved to PATH and, if a paper file is maintained, a copy put in the correspondence block of the record. The negative action shall also be documented in the PATH Contact screen. Most negative actions affecting the recipients of child care, other than denial of an application, cannot be taken until 13 calendar days after the client has been notified.

6.6.1. If the client disagrees with a negative action, he or she may either:

6.6.1.1. Supply information needed to continue services; or

6.6.1.2. Request a hearing, in writing, within 60 days of the notification. If the client requests a hearing within thirteen (13) days of the notice of negative action, services may be continued or reinstated pending a decision by the State Hearing Officer. Requests made after 60 days will not be considered.

6.6.1.3. Appeals and Fair Hearings can be requested ONLY by the child care client upon which the negative action was taken. A request for Appeal or Fair Hearing submitted by anyone other than the child care client on which the negative action was taken, will not be considered. Child care client cases are subject to DoHS confidentiality rules. No information regarding a client's case may be shared with any other person(s) without written release from the client.

6.6.2. Actions Not Considered Negative

A fee increase is not considered a negative action. The client's status has changed based upon his or her increase in income, but the benefit of child care is not being eliminated. If clients return their status check after the due date but before the closure date, the case manager is to process the review. The case manager will not be able to give 13 days' notice regarding the increased fee. However, the CCR&R case manager must inform the provider and client of the date the fee increase takes place.

6.6.3. Fair Hearing Procedures

All applicants and recipients of child care services are entitled to a fair hearing by a Department of Health & Human Resources Hearings Officer if they are dissatisfied with a decision made on their eligibility for services or with the quality of services provided to them. For more information on Fair Hearings, see Chapter 11.

6.6.3.1. Generally, if a client requests a hearing during the 13-day notice period, the action should not be taken until the hearing is held and the hearings officer has made a decision. However, if a hearing is requested in response to an increase in fees, a notice of closure for exceeding income guidelines, or a denial of application, fees cannot be reduced, nor services continued due to PATH processes.

6.6.3.2. The person requesting the hearing must be told that if services continue and the agency is upheld, then the client will have to enter into a repayment agreement.

6.6.3.3. The case manager shall submit a (IG-BR-29) Hearing/Grievance Record Information Form, copy of the notification of negative action sent to the client, and copy of the client letter requesting a hearing regarding decision.

6.6.3.4. The IG-BR-29 must be submitted to the Hearings Officer within 48 hours of the hearing request.

6.7. Communication between CCR&R Agencies

Child Care Resource and Referral Agencies shall coordinate the transfer of services to maintain case continuity for clients moving between CCR&R regions.

6.7.1. Clients Moving from One CCR&R Region to Another

6.7.1.1. When clients notify their current case manager of a move from one CCR&R Region to another, the case manager shall take the following steps:

A. Within five (5) days of the client notification, the case manager shall notify the new CCR&R agency that the client has moved to their area, either by phone or GroupWise, and ascertain to whom the new CCR&R wishes the case to be assigned to in PATH.

B. Prepare and transfer the case to the new CCR&R by:

1) Changing the old address to the new address in PATH.

2) Changing the old county to the new county.

3) Transferring the case in PATH to the designated case manager in PATH within five (5) days.

4) Making a copy of the paper file to maintain in their records.

5) Transferring the original paper record to the new CCR&R within 14 days.

6) Making a detailed contact in PATH regarding the move, including new and old address, date of move, and any pertinent information regarding the case to assist new case managers in providing case management services to the client.

6.7.1.2. When clients do not notify their previous CCR&R that they have moved, and the new case manager discovers an open, active case for the client in PATH:

A. The worker shall:

1) Change the old address to the new address in PATH.

2) Change the old county to the new county.

3) Transfer the case in PATH to the appropriate case manager in PATH**.**

4) Notify the previous CCR&R by phone or GroupWise that the client has moved, and request that the paper file be mailed to the new CCR&R.

B. The previous CCR&R shall make a copy of the client record for their files, then transfer the original to the requesting CCR&R within fourteen (14) days.

6.7.2. Improper Payment Prevention

CCR&Rs shall cooperate with one another and share information, including payment forms, sign in and out sheets, documents, and records to reduce and/or prevent improper payments, when information is requested by other CCR&Rs for this purpose. CCR&Rs shall respond to these requests for information in a timely fashion, within five (5) days, unless extenuating circumstances exist.

CHAPTER 7: PURCHASE OF CHILD CARE THROUGH CERTIFICATES

7.0. Overview

West Virginia's subsidized child care program is a certificate system. Certificates authorize payment to parents in lieu of cash. Providers are paid directly upon receipt of an invoice called a request for payment. This system provides maximum opportunity for parental choice.

7.1. Parental Choice

When a family is determined to be eligible for child care services, a Provider Notification Letter (DAY-0613) or a Child Care Certificate (DAY-0176) is issued from PATH to the parent. This certificate serves as proof that the Department of Human Services will be responsible for payment and contains pertinent information about the family and the amount of the fee to be paid by the parent. The parent shall use the certificate to purchase care from a child care provider of choice. In all cases of parent-selected unregulated care, before issuing the Certificate or Notification of Eligibility, the CCR&R case manager shall search PATH to determine if the potential provider has been previously denied or terminated as a provider. If the denial or revocation notes that the provider is ineligible to participate in the subsidy system because they are unable to meet regulatory requirements, the parent shall be informed that the provider will not be approved. She/he may select a different provider.

After a family has been determined eligible for child care services, a parent may choose to purchase care from a provider other than the one previously selected. The parent must request a change of provider by notifying the CCR&R within 5 days of the change. Upon receipt of the request, the CCR&R case manager will process the request, ensuring the requested provider is eligible to participate in the subsidy system.

7.1.1. Expulsion

The CCR&R case manager will ascertain the reason for the parent's request for change. If the parent indicates the child was expelled from or "kicked out" of day care, the CCR&R case manager will ask the parent if written notice of the expulsion was received and when. (two week notice is required) The CCR&R Case Manager will notify the Division of Early Care and Education if proper notice was not provided.

7.1.2. In-Home Child Care

Care may be provided in the child's home, only in specific circumstances and only with the approval of the CCR&R case manager. In-home child care is home-based care provided by relatives, a grandparent, aunt, uncle, or sibling of legal age; the provider may not live either inside or outside in close proximity of the home. The provider of in-home child care cannot care for children that do not live in the home. If the provider and children reside in the same home and the provider wishes to care for other children, then the situation is not considered in-home care and the provider must meet registration requirements based on the number of children in care.

7.1.2.1. Regulation of In-Home Child Care

Although in-home child care providers are exempt from West Virginia regulatory requirements, they are required to comply with State of West Virginia regulatory statutes. Background checks are completed by DoHS to determine if staff, providers, or any other adults in a caregiver's home have a history of child/adult abuse or neglect, or a criminal record and meet health and safety standards and training requirements to participate in the certificate system and receive federal funds. The home must meet certain health and safety requirements and the provider must meet certain health and safety requirements including a background check. Background checks include sex offender checks along with the criminal, Adult Protective Services and Child Protective Services checks.

7.1.2.2. Limitations of In-Home Care

A. Minimum Wage Requirement. In-home care is limited to situations where payment will equal or exceed minimum wage. In general, a provider must care for multiple children to meet this requirement. To determine if payment will equal minimum wage, calculate the number of hours the provider will care for the children and multiply by the current minimum wage. Then compute the provider's customary payment using the current daily payment rates for in-home care, including any amounts for non-traditional work hours.

For Example: A provider cares for children for 10 hours a day. At a minimum wage of $8.75 per hour that would be $87.50 daily. There are 6 children in the family – 2 infants at $18.00 per day = $36, and four older children at $16 = $64. Since the total payment would be $100.00, this situation would exceed minimum wage. Staff shall also consider amounts received for non-traditional work hours as part of the daily rate.

B. Exception to Minimum Wage Requirement. In instances where a child has medically documented needs that necessitate in-home care and the payment would not be equal to minimum wage, the CCR&R case manager may submit an exception request to the WV DoHS, Division of Early Care and Education. Written documentation of the need from a qualified health care professional required and must show absolute necessity. Exceptions will be rare and time limited.

7.1.2.3. Required Forms: The parent and provider must complete the following:

A. The parent must complete an Application for Approval for In-Home Care (ECE-CC-12).

B. The potential provider must complete the WV CARES process prior to completing the ECE-CC-12. The WV CARES "clear to hire" letter must accompany the application.

C. The CCR&R case manager shall inform parents who use this type of care that an in-home care provider is an employee of the parent according to laws related to wage and hour requirements and the IRS tax code. The parent may be responsible for paying the employer's share of Social Security and Medicare taxes. The threshold amount before this is required may change in any given year.

D. The parent and provider must complete the ECE-CC-10A-1, Request for Payment of In-Home Child Care Services, and submit the form monthly. The Department will provide a form 1099 to the provider on an annual basis, but the parent is responsible for keeping information and records required for paying federal employment taxes for the in-home provider. The parent and in-home provider need to remember that the parent fee (if any) is part of the rate for which the provider is reimbursed and remains the responsibility of the parent to pay.

E. The CCR&R staff must inform parents and providers of these requirements. However, they are not tax experts or agents, and should not attempt to answer specific questions. The Resource and Referral agency shall direct the parent and provider to the proper agency for information they may need.

7.1.2.4. Procedures for In-Home Child Care

A. CCR&R Responsibilities.

1. The parent who requested in-home child care, must complete the application for in-home child care services (ECE-CC-12) and shall complete an ECE-CC-6E to certify that the home and the in-home provider meet the health and safety requirements and comply with State of West Virginia regulatory statutes. Background checks are completed by DoHS to determine if staff, providers, or any other adults in a caregiver's home have a history of child/adult abuse or neglect or a criminal record. The potential in-home provider must complete the WV CARES background check process and provide a "clear to hire" letter to the CCR&R to forward with the application.

2. The application forms and WV CARES letter are returned to the CCR&R agency.

3. The CCR&R case manager shall inform parents who use this type of care that an in-home care provider is an employee of the parent according to laws related to wage and hour requirements and the IRS tax code. The parent may be responsible for paying the employer's share of Social Security and Medicare taxes. The threshold amount before this is required may change in any given year.

4. The provider must attend payment enrollment and complete a W-9 within 30 days of the parent's request for care.

5. The parent and provider must complete the ECE-CC-10A-1, Request for Payment of In-Home Child Care Services, and submit the form monthly. The Department will provide a form 1099 to the provider on an annual basis, but the parent is responsible

for keeping information and records required for paying federal employment taxes for the in-home provider. The parent and in-home provider need to remember that the parent fee (if any) is part of the rate for which the provider is reimbursed and remains the responsibility of the parent to pay.

6. The CCR&R staff must inform parents and providers of these requirements. However, they are not tax experts or agents, and should not attempt to answer specific questions. The Resource and Referral agency shall direct the parent and provider to the proper agency for information they may need.

7. After the parent and provider have completed the application and the provider has attended provider enrollment, the CCR&R case manager does the intake in PATH under the provider's name.

8. The CCR&R agency will then forward the necessary information to the child care regulatory specialist for approval.

B. Child Care Regulatory Specialist's Responsibilities

1. In-home care situations in which the home fails to meet health and safety standards or in which the provider cannot comply with health and safety standards or background checks, shall be denied approval.

2. If failure to comply is after the issuance of approval, then the child care regulatory specialist shall send a denial notice using the Notification of Provider Approval Status (DAY-0618), and CCR&R staff shall send a 13-day notice terminating the Provider Services Agreement.

C. Renewal Procedures: Approved In-Home Family Child Care Providers must renew their approvals at least every two years. The CCR&R case manager in charge of the parent's case is responsible for sending the renewal packet to the parent. CCR&R case managers should follow the process outlined in A. The child care regulatory specialist should follow the procedure outlined in B.

7.1.3. Family Child Care Homes

Care may be provided in the caregiver's own home in one of three different types of home-based care.

7.1.3.1. Family Child Care Providers caring for four (4) to six (6) children must be registered.

7.1.3.2. Informal Family Child Care Providers who voluntarily register with the DoHS to care for three (3) or fewer children, at least one of whom is not related.

7.1.3.3. Relative Family Child Care Providers who voluntarily register with the DoHS and provide care only to children related to the caregiver. The caregiver must be a grandparent, great grandparent, aunt, uncle, great-aunt, great-uncle, or adult sibling.

7.1.4. Family Child Care Facilities

Parents may select a family child care facility which is licensed to care for 7-12 children.

7.1.5. Child Care Centers

Child Care Centers which are licensed for 13 or more children are another option.

7.1.6. Out of School Time Child Care Programs

Parents may also opt to use a program that provides out of school time services only. These programs must be licensed to receive subsidy payments.

7.1.7. Use Of Out of State Providers

To ensure that parents are given a variety of child care options, Child Care Certificates may be used to purchase care at the following sites located within West Virginia. Parents may not use child care certificates to purchase care from out of state providers.

7.2. General Payment Provisions of the Certificate System

7.2.1. Payment Rates and Definitions

Rates for payment of child care services include a base rate for each type of care as well as incentive rates (See Appendix B). Rates are based on a full day, which is defined as care for at least four (4) hours but less than eighteen (18) hours per day. Providers accepting certificates must agree to accept the applicable rate as full payment of care for up to an eighteen-hour period. However, a parent who leaves a child past the provider's established closing time may be charged a late pick-up fee provided all parents are expected to pay this fee and the parent has left a child past the time indicated on the child care certificate.

7.2.2. Payment Limitations

Payment to a provider for an individual child is limited to one full day in a twenty-four (24) hour period, and to no more than the total number of days in a calendar month. The total number of hours a child can remain in care shall not exceed 18 consecutive hours of care in a 24-hour period regardless of whether the child is with more than one provider for that day. (See exceptions in Chapter 4, Section 1).

7.2.3. Use of Multiple Providers

A family may request payment for more than one provider if circumstances indicate a need, such as the parent works during the day and attends school at night or a child care center closes several hours before the parent's shift ends. The CCR&R case manager should encourage the family to use a primary provider to the maximum extent and explore other options. However, if no other options are possible, the CCR&R case manager shall request approval from the CCR&R supervisor to pay a second provider. The supervisor may approve the situation if she/he determines it is in the best interest of the child and family.

No more than two providers may be approved for the same child. Additionally, both providers shall charge a fee when two providers are used.

7.2.3.1. Paying Multiple Providers

If more than one provider has been requested by the parent(s) and approved by the CCR&R supervisor, both providers will be paid based upon the actual attendance of the child(ren).

7.2.4. Use of Substitutes

When a provider uses a substitute, payment to the substitute provider and collection of the daily fee shall be the responsibility of the provider. The provider may claim days of care provided by the substitute on the payment form and pay the substitute upon receipt of payment, but the agency shall not provide direct payments to substitutes. Providers may not subcontract with another provider on a regular basis but may use substitutes on an infrequent basis for emergencies, planned vacation, training or sick leave. Substitutes in family child care homes shall be used for periods of not more than two consecutive weeks annually or more than an average of 8 hours weekly.

7.2.5. Operation of Multiple Child Care Sites

If a provider operates more than one child care site and a child attends both sites during the same day, the worker must approve linking the child to both sites, and each site must have a valid child care certificate linked to the child before care may be provided at both locations. Each site shall submit a payment request only for the actual hours of care provided at that site. Attendance shall be accurately documented on each site's payment request form. Enrollment-based payment shall not be requested for a child who attends more than one site during the same day.

If the provider moves the child between sites with written permission from the parent, the above requirements shall apply. If the child is signed out of one site and later signed in at another site on the same day, payment shall be made only for the actual hours of care provided.

7.2.6. Eligibility for Provider's and/or Child Care Employee's Children

7.2.6.1. Payment may not be made to a provider to care for their own children. Child care center owners, family child care homes and family child care facility owners are therefore not eligible for subsidized child care assistance when their child attends their parent's facility.

7.2.6.2. Since the provider's own children are considered in the staff/child ratio in family child care homes and family child care facilities, family providers and facility operators are not eligible for subsidized child care for their own children while they care for other children. They also may not send their children to another caregiver to increase their own capacity.

7.2.6.3. Eligibility for Center Employees - Employees of child care centers who are financially eligible for subsidy may use their employer's child care center, as long as the employee does not supervise his or her own child. The center director shall provide a letter verifying this. Although family child care facilities also have employees, due to the limited space and staffing levels in a family child care facility and the difficulties in ensuring supervision will not fall on the parent, children of a family child care facility employee are not eligible to use the employer's child care facility. They may, however, place their children with another provider.

7.2.6.4. Eligibility for employees of the provider in other business endeavors or any of the provider's household members' business endeavors: Children of persons employed by the provider or any of the provider's household members, except for child care center employees meeting the criteria in 7.3.6.2, may not select said provider as their child care provider.

7.2.7. Certificate System Payment Rates

Payment for child care is based on the type of care, age of child, special needs of individual children, hours of care, nontraditional hours, and accreditation status of the provider.

7.2.7.1. Base rates are broken into four age categories:

A. Infants – children aged birth to 24 months.

B. Toddlers – children aged 25 – 36 months.

C. Preschoolers – children aged 37 – 59 months.

D. School Age – children aged 60 months and over.

7.2.7.2. In addition to the base rate, providers may be eligible to receive three types of rate supplements:

A. The Special needs supplement for children with documented special needs and children receiving services based on a CPS safety or treatment plan of $3 extra per day per child.

B. The Tiered Reimbursement supplement, which is based on the level of quality in a child care program. Registered family homes, child care facilities and child care centers may volunteer to document that they either meet higher quality standards or are nationally accredited. Programs that meet licensing standards are Tier 1 and receive base payment rates. Programs that meet Tier II standards receive $3 extra daily and programs that are accredited receive $6.00 per full day per child. Part days are converted to full days before the supplement is calculated. This amount is added for actual days of care only. Monthly rates do not apply to rate supplements.

C. The shift differential rate supplement, which is based on the family's need for care during non-traditional work hours, is $6.00 daily per child and is available for all types of providers for any days of care that meet the following definitions. Parents shall supply documentation for the need for non-traditional child care hours at the time of application and each status check.

D. Non-traditional child care hours are defined as:

1. Approved care for four (4) hours 0 minutes, either before 6:00 am or after 7:00 pm Monday through Friday.

2. Approved care for four (4) hours 0 minutes on a Saturday or Sunday; or

3. Any 12-hour work/school shift or split shift which equals twelve or more care hours (including transportation) in a 24-hour period.

7.2.7.3. The **Per Day Rate** is used if the child attends less than 13 days or more than 20 days.

7.2.7.4. The **Monthly Rate** will be used for base rates only when a child is in care between 13 to 20 days. Monthly rates are equal to 20 times the daily rate.

7.2.7.5. Full Day: A full day is considered care for at least four (4) hours zero (0) minutes but less than eighteen (18) hours per day from the time the child enters care to the time the child leaves**.**

7.2.7.6. Part Day for 2 to 4 Hours: A part of day of care if paid for when a child is in care at least 2 hours but not more than 3 hours 59 minutes per day. Part days submitted by the provider are converted by PATH to full days using the Conversion Chart, Appendix C. Payment is made for 2/3 of the total part days. After converting part days to full days, PATH will calculate the monthly rate for 13-20 days or per diem rate for fewer than 13 or more than 20 days.

7.2.7.7. Part Days Less than 2 Hours: Another part day payment is made for care provided less than 2 hours per day. For those situations in which care is provided for children less than 2 hours per day, payment will be one-third the amount paid for full child care. These days will be converted to full days using the conversion chart in Appendix C. After converting part days to full days, use monthly rate for 13-20 days or per diem rate for fewer than 13 or more than 20 days.

7.2.8. Enrollment-Based Payment:

Enrollment-based payment is a method of payment in which the provider is paid for a child's authorized enrollment rather than the number of days the child is in attendance, up to the maximum number of billable days for the service month. Billable days are established by the Division of Early Care and Education based on the child's authorization period and the

conversion procedures in Sections **7.2.7.6**, **7.2.7.7** and Appendix C. Providers utilizing enrollment-based payment must also comply with licensed capacity requirements outlined in section 7.2.10.

For purposes of this section, "billable days" means the maximum number of days in a service month that may be paid at the monthly rate for an enrolled child after conversion of part days to full days.

7.2.8.1. Conditions for Use of Enrollment-Based Payment

A childcare provider may bill for enrollment when all of the following conditions are met:

A. **Attendance requirement**. The child attends at least one (1) full day during the service month; defined as four (4) or more hours in a single calendar day as described in section 7.2.7.5. When public school is in session, a school -age child must attend at least two and one-half (2.5) hours within one calendar day during the service month.
B. **Availability.** The provider is open and available to provide care for the billable days in the month, except for allowable closures defined in Section 7.2.9.
C. **Documentation**. The Provider maintains required attendance, and parent/guardian verification as described in Section 7.2.8.4.
D. **Billable-day limitation.** The number of billable days claimed under enrollment-based payment shall not exceed the number of days the provider was open and available to provide child care services during the service month, except for allowable closures under Section 7.2.9.

7.2.8.2. Minimum Attendance Requirement

A. Except as required in subsection B, to qualify for enrollment-based payment, the child must attend at least one full day during the service month. A full day is at least four (4) hours but less than eighteen (18) hours within one calendar day, as defined in Section 7.2.7.5 (Full Day).
B. When school is in session, a school-age child must attend at least two and one-half (2.5) hours within one calendar day during the service month to qualify for enrollment-based payment.
C. Time in Care begins when the provider assumes supervision and responsibility for the child. This includes care beginning when a child is dropped off by a school bus and care provided during transportation by the provider.
D. When the applicable minimum attendance requirement is not met during the service month, the provider shall bill on actual attendance, consistent with Sections 7.2.7.6 and 7.2.7.7.

7.2.8.3. Partial Day / Before-and-After-School Care

A. For school-age children receiving care before-and/or after-school, the total time in care for that calendar day shall be combined to determine whether the two and one half hour minimum is met.

B. If the combined before-and after-school time equals at least two and one half hours (2.5) in one calendar day, the day may satisfy the monthly attendance condition for enrollment-based payment.
C. If the child does not attend at least two and one half (2.5) hours within one calendar day during the service month, the provider shall bill based on actual attendance using the definitions and conversion procedures in Sections **7.2.7.6** and **7.2.7.7**.

7.2.8.4. Documentation Requirements for Enrollment-Based Payment

Providers using enrollment-based payment shall:

A. Maintain daily sign-in and sign-out records for each child, which include at a minimum:
   1. The child's name;
   2. The date; and
   3. Actual time in and time out for each day of care; and
B. Obtain monthly parent/guardian verification of attendance in which the parent/guardian reviews and signs a statement confirming the days and general hours of care provided for the month.
C. If a digital attendance or time-tracking system is used, (e.g. Brightwheel or similar platforms), the provider shall print a monthly attendance report and obtain a wet signature from the parent/guardian verifying the accuracy of recorded attendance. Digital-only signatures or electronic acknowledgements are not sufficient for subsidy monitoring purposes.

   Documentation shall be retained for documentation and auditing purposes in accordance with Section 7.7. Failure to maintain the required documentation may result in denial or recovery of payment.

7.2.8.5. When Actual Attendance Must Be Billed

The provider shall bill based on actual attendance rather than enrollment-based payment when:

A. Minimum Attendance Condition Not Met. The child does not meet the applicable minimum attendance condition during the service month. The applicable minimum is one full day of at least (4) hours, except that, when public school is in session, a school-age child must attend at least two and one half (2.5) hours within one calendar day.

B. Multiple Providers. The child receives care from more than one provider, in accordance with Section 7.2.3.1**.**

C. Attendance Exceeds Billable Days. The child's attendance exceeds the number of billable days generated by PATH for the service month. The provider shall claim enrollment-based payment for the allowable billable days and bill any additional days using the applicable per-day rate based on actual attendance.

7.2.8.6. Prohibition Against Denial of Care

A provider participating in the Child Care Subsidy Program shall not deny, discontinue, or reduce care to an eligible child solely because the child is authorized for, or reimbursed using the Child Care Subsidy Program. Policies regarding admission, attendance and withdrawal shall be applied consistently to all children.

7.2.8.7. Attendance Exceeding Billable Days

A. When a child's total attendance in a service month exceeds the number of billable days generated in PATH for that month, the provider may:

1. Claim the enrollment-based payment for the allowable billable days; and
2. Bill any additional days attended at the applicable per day rate based on actual attendance, only if the child's authorization supports care on those days.

B. All additional days requested shall be supported by the documentation required in Section 7.2.8.4.

7.2.9. Provider Closures and Billable Day Eligibility

Providers may experience temporary closures for a variety of reasons. This section establishes how closures affect the number of billable days a provider may claim under enrollment-based payment and sets standards for provider communication with families.

Providers shall maintain their posted operating schedule and remain open for care on all scheduled business days except in circumstances described in this section.

A. Closures may be classified as allowable and non-allowable for purposes of enrollment-based payment.
B. Allowable closures do not reduce billable days. Non-allowable closures require the provider to bill based on actual attendance.

Providers using enrollment-based payment must meet all documentation requirements in Sections 7.2.8.4 and 7.7 regardless of closure type.

7.2.9.1. Allowable Closures That Do Not Reduce Billable Days

The following closures are considered allowable and do not reduce the number of billable days a provider may claim under enrollment-based payment.

A. Health and safety-related closures, including but not limited to:
   1. Facility utility failures (heat, power, water).
   2. Structural or environmental hazards
   3. Maintenance or repair issues that affect safe operation
B. Communicable disease outbreaks requiring temporary closure.
C. Inclement weather closures, including snow, flooding, or other hazardous conditions that make operation unsafe.
D. Reasonable staff training or professional development closures, limited to no more than two (2) days per calendar year, when families are notified in advance.

Providers remain eligible to claim billable days during allowable closures, provided they meet all requirements in Section 7.2.8.

7.2.9.2. Non-Allowable Closures That Reduce Billable Days

The following closures are not allowable and shall reduce the number of billable days a provider may claim. These days must be billed according to actual attendance:

A. Closures due to insufficient staffing not related to emergency illness;
B. Vacation closures exceeding the two (2) allowable training days described in 7.2.9.1 (D);
C. Closures for personal appointments, errands, or non-emergency reasons;
D. Closures for holidays not recognized in the provider's posted operating schedule;
E. Any closure not falling within the allowable categories listed in 7.2.9.1.

7.2.9.3. Required Communication to Families

Providers shall notify families in writing of all planned closures, including:

A. The date(s) of closure; and
B. The reason for closure;

Emergency closures must be communicated to families as soon as possible by phone, text message, email or posted notice.

7.2.10. Enrollment-Based Payment and Licensed Capacity

7.2.10.1. Purpose

To ensure compliance with federal equal access requirements and maintain program integrity,enrollment-based payments must reflect a provider's licensed capacity to deliver care.

7.2.10.2. Enrollment Capacity Limitation

Providers receiving payment by enrollment may not bill for a number of children that exceeds their licensed capacity at any given time, except as permitted under an approved operating schedule.

Providers may serve additional children during a service period only when enrollment reflects distinct, non-overlapping care schedules that comply with licensed capacity at all times.

7.2.10.3. Definition of Licensed Capacity

Licensed capacity is defined as the maximum number of children a provider is authorized to care for at any given time, as determined by the West Virginia child care licensing agency.

7.2.10.4. Operating Schedule and Shift Care

Providers operating multiple shifts, (e.g. day, evening, overnight, or weekend care) may serve additional children during different time periods, provided that:

A. The number of children in care at any given time does not exceed licensed capacity.
B. The provider maintains documentation of operating hours and scheduling practices

C. Each child receiving enrollment-based payment reflects a reserved slot and is not limited to specific daily attendance hours, provided care is used within the provider's operating schedule.

Enrollment-based payment shall not be made for children in excess of a provider's ability to reasonably provide care within their licensed capacity and operating schedule.

7.2.10.5. Documentation Requirements

Upon request, providers must verify:

A. Operating hours, including shift schedules
B. Daily attendance records
C. That each child enrolled has access to care consistent with subsidy authorization
D. For mixed-use providers, documentation must distinguish the provider's allowable child care hours from instructional, educational, or other non-child care service hours.

7.2.10.6. Payment Adjustments and Corrective Action

If a provider's enrollment exceeds what is reasonable based on licensed capacity and operating schedule, the Department may:

A. Limit payment to the provider's licensed capacity;
B. Require billing based on attendance rather than enrollment;
C. Recoup improper payments;
D. Implement corrective action in accordance with program policies .

7.2.10.7. Enrollment-based Access to Care

When a payment is made based on enrollment, the child's certificate reflects authorization for care but does not limit attendance to specific daily hours. Providers must ensure that enrolled children have access to care that is consistent with the provider's operating schedule and available capacity.

7.3. PATH Payment Process

To receive payment, a provider must submit the "Request for Payment Form" (ECE-CC-10A) with copies of sign in and out sheets to the CCR&R agency no earlier than the last day of the calendar month and no later than the third working day of the next month. Payment requests may be submitted electronically through the designated CCR&R payment request email address, by mail, or in person. Electronic submission is an additional submission method and does not change the existing billing deadlines, payment calculations, attendance documentation, or payment-processing requirements.

An electronic payment request is considered received on the date and time it is received in the designated CCR&R payment request email mailbox. Mailed and hand-delivered payment requests shall continue to be considered received under existing CCR&R procedures. The CCR&R case manager shall process a properly completed payment request within three (3) to five(5) days of receipt. If the submission contains errors or omissions, the CCR&R shall make reasonable efforts to notify the

provider of the corrections or additional documentation needed. The provider remains responsible for timely submission of complete and accurate billing documentation. Staff shall not alter a payment form once they have been signed by a provider, even upon provider request.

The CCR&R case manager shall process payment in PATH according to the following procedures:

7.3.1. Select Child Care Payments from the drop-down menu, then select the New Child Care Invoice icon. PATH brings up the childcare payment screen allowing the case manager to find a childcare provider and enter payment details.

7.3.2. Click on the search icon (magnifying glass) under provider details. This brings up the provider search screen where the worker will enter the name of the provider, as indicated at the top of the ECE-CC-10A Request for Payment, select the provider's name from the list.

7.3.3. Enter the service month indicated on the payment form.

7.3.4.Select the add client button under client details. This brings up a client search screen. Click Search, this brings up a picklist of children attached to the childcare provider during the selected service month.

7.3.4.1.If the child's name is available in the picklist, select the child, the approved days and hours will be displayed under the client details section. Check the approved days and hours against those claimed by the provider. Payment shall not be made for days claimed more than the approval unless a statement is entered in the comment box. Note: The child's daily fee will populate from the childcare assessment and the daily fee amount will be deducted from the provider's payment. If the family is using two providers, the fee will be deducted from both providers' payments. Fees will be deducted only for the three youngest children.

7.3.4.2. If the child's name is not available in the picklist, the CCR&R case manager shall:

A. Investigate: The CCR&R case manager shall investigate why the child is not available in the picklist – i.e., case closure, application denial, worker error in processing case, client failed to notify of provider change, etc.

B. Correct the problem: If the child is unavailable due to worker error, the CCR&R shall make every effort to correct the error and process the payment in a timely fashion.

C. Notify the provider: If payment cannot be made because of case closure, denial of application or client's failure to notify the agency of provider change, the provider must be notified in writing that payment cannot be made. If payment cannot be completed by the CCR&R due to worker error and must be submitted to the Division of Early Care and Education for manual payment, the provider shall be notified in writing that manual payment will be processed.

7.3.5. Enter the actual number of days on the client details screen by following the columns listed on the payment form, sorting by part, full and non-traditional days. After entering the days in all fields click the calculate button. PATH will calculate the total number of days. When the Payment details tab is selected, the total payment for the child will be displayed. To process the child's payment, click on save client then continue to add all children listed on the payment from.

7.3.6. When all children are entered, click on submit for approval. This sends the payment request to the CCR&R supervisor who approves the payment.

7.3.7. CCR&R Review Requirements Prior to PATH Entry

Before entering any payment into PATH, CCR&R staff shall complete the following standardized review to ensure accuracy and compliance with policy requirements:

A. Review the Request for Payment Form (ECE-CC-10A) for completeness, accuracy, and required signatures.

B. Audit attendance documentation to ensure:

1. Parent/guardian wet signatures are present;
2. Sign-in and sign-out times are complete and accurate
3. The attendance documentation demonstrates that the applicable minimum attendance requirement for enrollment-base payment was met during the service month. Digital attendance systems include printed monthly reports with parent/guardian wet signatures.

C. Confirm allowable versus non-allowable closures in accordance with Section 7.2.9.

D. Determine whether payment shall be billed as billable days or actual attendance based on authorization, attendance, and closure type.

E. Issue correction letters for incomplete, inaccurate, or non-compliant submissions and return forms to the provider for correction prior to payment processing.

F. Mixed-Use Provider Review.
For a mixed-use provider, CCR&R staff shall verify that the payment request reflects only allowable child care services and is consistent with the child's authorization and the provider's

documented child care service schedule. Instructional, educational, or other non-allowable service periods shall not be included in determining payable child care services.

G. Supervisor-level verification shall occur for:
   A. Any payment involving closures;
   B. Payments exceeding typical attendance patterns.
   C. Any instance in which billable days may be affected.

5. Documentation Upload Requirement All payment forms and supporting attendance records shall be uploaded to the provider's electronic case file in PATH within two (2) weeks of payment processing.

7.3.8. Electronic Submission of Payment Requests

Providers may submit Child Care Payment Request Forms and required supporting documentation electronically through the designated payment request email address established by the local CR&R agency, by mail, or in person. Except as specifically provided in this section, all other provider payment requirements remain in effect.

7.3.8.1. Provider Responsibilities

Providers choosing to submit payment requests electronically shall:

A. Complete all required payment request forms and supporting documentation in accordance with Child Care Subsidy policy.
B. Submit payment requests to the designated CCR&R payment request email address.
C. Ensure all documents are complete, legible, and contain all required information and original signatures.
D. Providers shall maintain original signed billing documentation on file and make such documentation available to the CCR&R upon request for monitoring, audit, quality assurance or payment review purposes.
E. Providers receiving enrollment-based payment must ensure that enrollment remains consistent with the provider's licensed capacity and approved operating schedule. Documentation supporting enrollment, attendance, operating hours, and scheduling practices shall be maintained and made available to the CCR&R upon request.
F. Submit payment requests within established billing deadlines.
G. Monitor the email address used to submit payment requests and respond promptly to requests for corrections or additional documentation.

7.3.8.2. CCR&R Responsibilities

CCR&R Staff Shall:

A. Maintain a designated email mailbox for receipt of electronic payment request submissions.
B. Monitor the email mailbox each business day.
C. Print electronically submitted payment request forms and supporting documentation for processing.

D. Process payment requests in the order they are received, regardless of whether they were submitted electronically, by mail, or in person.
E. For electronically submitted payment requests, the date and time the submission is received in the designated CCR&R payment request mailbox shall serve as the official receipt date and time. Mailed and hand-delivered payment requests shall continue to be considered received using existing CCR&R procedures.
F. Review electronically submitted payment requests using the same procedures and policy requirements applicable to all payment requests.
G. Return incomplete or incorrect submissions to the provider email when corrections are needed.
H. If deficiencies or omissions are identified during the billing review process, the CCR&R should make reasonable efforts to notify the provider of any corrections needed. However, the provider remains responsible for the timely submission of complete, accurate billing documentation.
I. Upon receipt of corrected documentation, continue processing the payment request in accordance with existing policy.

7.4. Payment Processing

Generally, on Thursdays a computer file with information on all entered payments is sent to the State Auditor's Office.

7.4.1. Paper Check Processing: The Auditor's office writes the checks and returns them to the DoHS Finance office for mailing. Checks are generally mailed within 3 to 5 days after the tape is submitted to the Auditor's office. State holidays may delay checks.

7.4.2. New providers who attend orientation are urged to apply to the State Auditor's office for Direct Deposit of payments Providers whose payments are made through Direct Deposit will not receive a check stub with details of payment but may access detail on payments at the PATH website at:

7.5. Direct Deposit

CCR&R staff shall inform all new providers about the process for Direct Deposit of their child care payments into a checking or savings account. Providers shall be given a copy of the ECE-CC-27, which contains information about Direct Deposit and PATH Plus and a Direct Deposit Authorization form. Providers apply using their eight-digit PATH provider identification number. Providers with multiple identification numbers must submit an application for each ID number. Completed authorization forms are to be sent to the:

WV State Auditor's Office
Electronic Payments Division
Building 1, Room W-125
Charleston, WV 25305
OR
Faxed to 304-558-4376

If providers have questions about Direct Deposit, they may contact the WV State Auditor's Office at: 1-800-500-4079 or 1-304-558-2251.

7.6. Responding to Payment Inquiries and PATH

7.6.1. Payment Inquiries

CCR&R staff shall respond promptly to providers who inquire about payments. Staff shall review PATH data and provider files and discuss with the provider any reasons for the delay and action needed/planned to correct the problem. If the delay is not the result of provider or worker error, the CCR&R shall contact Division of Early Care and Education clerical or field consultant staff. The Division of Early Care and Education will investigate and notify CCR&R and DoHS staff about any problems. The CCR&R staff shall relay this information to any providers who inquire about payment delays.

7.6.2. PATH Plus

CCR&R staff will inform all providers about the availability of PATH PLUS. PATH PLUS is a free internet service that allows providers to view information about child care payments made through PATH, including child information and processing dates. Authorized persons have access 24 hours a day. Providers can access their information using any computer that has Internet Explorer Browser 6.0 or higher. A provider may request a PATH PLUS account by going to https://www.wvPATH.org/PATHplusnet/ Individual providers (informal, relative, and family child care providers) complete the Individual Provider Application Form. Staff persons in child care centers or family child care facilities complete the Agency/Facility Application, which must be signed by the Director or Owner/Operator. An additional authorization on agency letterhead is necessary for someone other than the Director to access the PATH PLUS Account. Providers who have questions may contact the PATH Help Desk.

7.7. Child Care Attendance Sheets (ECE-CC-10-G)

All Child Care Providers are required to maintain accurate daily sign-in and sign-out records for all children in care. These records confirm attendance and justify all days and hours of care are claimed, including eligibility for enhanced rates for non-traditional work hours. Providers shall maintain attendance documentation in accordance with the requirements of this section. Child Care Attendance Sheets may be submitted with the monthly Request for Payment form electronically through the designated CCR&R payment request email address, by mail, or in person. Providers shall retain original attendance records in the provider's files for five (5) years and make them available upon request for review by DoHS Staff, CCR&R Staff, or auditors. Child Care Providers shall be given a supply of Child Care Attendance Sheets (ECE-CC-10-G). All types of child care providers, except for child care centers, are required to use the prescribed form. While centers are not required to use the same format, they may be asked to do so. If the CCR&R Staff has concerns about consistent errors on the center's chosen format, the CCR&R and the center shall work together to decide upon a format that reduces errors in submission, including use of the Child Care Attendance Sheets. Centers with electronic sign in and out systems may substitute reports generated by their systems if parents sign off at the end of each month. Copies of the forms shall be retained in the provider's files for five years and shall be available for review by DoHS staff.

7.7.1. Completion of Attendance Sheets

The provider shall enter the names of all children in care on the form. Child care clients shall mark each child's time in and out, designated AM or PM, daily in the box provided. The client's original signature on the signature line of the form verifies that the times shown accurately reflect their children's attendance. Times must be shown as AM or PM. Children who attend in the morning, leave, and return in the afternoon must be signed in and out both times. Caregivers shall not sign as the client, as this is considered misrepresentation and can result in negative action.

7.7.2. Signing In and Out

Children shall not be allowed to sign themselves in and out. In cases where a child is transported to and from child care by bus or van, a teacher, aide, driver, director, or caregiver may sign the child in and out if the client signs off on the attendance sheet at the end of the month verifying that their child was in care before and after school on those dates. However, if the client is available, he or she must be responsible for signing the children in and out; a client may not request that the caregiver sign a child in or out as a matter of convenience.

7.7.3. Accuracy of Records

The provider's original signature on the sign in and out forms is certification that this is an accurate record of the attendance of all children in care. Failure to keep accurate records may result in negative action, to include corrective and/or legal action, referral for misrepresentation, and/or requests for repayment of any funds received by the provider as payment for subsidized children. If there is substantiated misrepresentation by the provider, the provider shall be prohibited from future participation in the Certificate Program. However, if the provider makes full restitution, a one-time waiver may be considered. The provider must request the waiver in writing, and the CCR&R shall forward the request to the Division of Early Care and Education for approval/denial.

7.7.4. Frequency of Submission

All childcare providers, including child care centers, family child care homes, family child care facilities, informal providers, and relative providers shall submit copies of their monthly sign-in and out forms with each Request for Payment Form (ECE-CC-10A)

Attendance forms must accompany every monthly payment request and may be submitted electronically through the designated CCR&R payment request email address, by mail, or in person. Providers shall maintain original records in accordance with Section 7.7.

If a provider uses digital attendance or time-tracking system (E.g., Brightwheel, Procare, Workday, etc.), the provider shall:

1. Print a monthly attendance report, and
2. Obtain a wet signature from the parent/guardian certifying the accuracy of the recorded attendance.

Digital-only signatures or electronic acknowledgements are not sufficient for subsidy payment documentation.

This monthly submission requirement shall remain in effect until further notice from the Division of Early Care and Education. The CCR&R may require more frequent or additional submissions of attendance irregularities, errors, or concerns are identified.

If an audit of the submitted billing forms and sign-in and sign-out sheets identifies discrepancies or errors, the CCR&R agency shall require the provider to correct the identified issues and resolve any improper payments in accordance with established policy and procedures.

7.8. Lost and Returned Checks

Child care provider checks are occasionally mailed to the wrong address, lost in the mail, or stolen. Many are returned to the Check Control office within the Division of Finance. However, some checks are never located or are cashed by someone other than the provider. Procedures for Lost and Returned Checks:

7.8.1. Returned Checks:

When checks are returned to the Check Control office, the office notifies the CCR&R agency that the check has been returned. The CCR&R agency takes the following steps:

7.8.1.1. The CCR&R case manager shall mail or FAX a memo to the Check Control Division asking that the check be released to the provider at the correct address. The memo shall contain the provider's name, new/correct address, check number, provider number, and amount of check.

7.8.1.2. The CCR&R agency shall notify the DoHS Child Care Case manager or licensing specialist by e-mail that the address is incorrect in PATH.

7.8.1.3. DoHS staff shall change the address in PATH. If the provider has moved, a new W-9 form must be completed before future payments can be made.

7.8.2. Lost, Stolen and Misplaced Checks:

7.8.2.1. If the provider's check does not arrive within 10 days of the date mailed, a designated staff person shall contact the WV State Check Control Division to see if the check has been returned.

7.8.2.2. If it has not been returned to the WV State Division of Finance or if it is lost, misplaced, or stolen, the CCR&R agency shall schedule an appointment with the provider to sign a Lost Check Affidavit (DF-38). The provider shall sign three original copies of the affidavit.

7.8.2.3. These forms must be notarized and forwarded to the WV State Division of Finance.

7.8.2.4. A stop payment request is then sent to the WV State Treasurer's Office.

A. If the check has not been cashed, a check will be reissued.

B. If the check is cashed, a photocopy of the signed check is sent to the CCR&R case manager. The provider shall view the copy of the check to verify if it is his/her signature. If the provider indicates that this is not his/her signature, a memo with the signed statement to that effect is sent to the Division of Finance.

C. After the WV State Treasury collects reimbursement for DoHS from the person/business that cashed the check, another check is issued to the provider.

7.9. Wage Garnishment Requests

Occasionally CCR&Rs will receive requests for garnishment of child care provider subsidy payments.

The person or agency seeking the garnishment is to email a copy to: DOHSFinanceAR@wv.gov

The original should be sent to:
WV DoHS
Accounts Receivable
1 Davis Square Suite 403
Charleston, WV 25301

CHAPTER 8: Improper Payments: Prevention, Identification, Measurement and Recoupment

8.0. Improper Payments Overview

The Federal Improper Payments Act of 2002 has created special concern about improper payments and their recovery in all federally funded programs. An improper payment occurs when the funds go to the wrong recipient, the recipient receives the incorrect amount of funds, or the recipient obtains or uses the funds in an improper manner. By strengthening financial management controls so that Federal agencies can better detect and prevent improper payments, the Federal Government can better ensure that taxpayer dollars are spent wisely and efficiently.

Everyone involved in the administration of the child care subsidy program should understand what can be done to maintain program integrity; what constitutes misrepresentation; what action should be taken in cases where misrepresentation is suspected; and the methods and procedures for performing these functions.

8.1. Maintaining Program Integrity

It is the responsibility of every Child Care Resource and Referral employee and every DoHS employee to minimize the opportunity for improper payments by performing his duties as outlined in this Child Care Policy Manual. It is essential that the case manager fully understands these policies and procedures. The primary burden for the prevention of misrepresentation rests on the CCR&R case manager. The case manager must make sure that the application, status check forms, and supporting verifications have been fully completed, properly signed, dated, and any conflicting or missing information brought to the attention of the client for clarification or completion. Reviewing the case record and verifications thoroughly prior to issuing a certificate to the client will aid the case manager in reducing errors and preventing misrepresentation.

Clients can be expected to give information only in relation to their understanding of program requirements. Case managers should ensure that clients and providers fully understand their rights and responsibilities as subsidy program participants, and that this be documented in the PATH record. Great care should be taken to ensure that:

- Clients and providers understand their respective application and status check forms.
- They are aware of their responsibility to report any changes in circumstances.
- Clients and providers are aware that attempts to obtain assistance through misrepresentation will be subject to legal penalties.

Although the client is the primary source of information and is fully responsible for it, the case manager should not hesitate to verify questionable or inconsistent information any time there is doubt about a client's situation. The signature page of the child care application and status check gives the case manager the authority to investigate discrepancies and suspicions.

8.2. Improper Payment Prevention Strategies

West Virginia uses a variety of means to prevent errors that result in improper payments. The PATH system is designed to take the information entered in the system by the CCR&R case manager and use it to determine eligibility. This eliminates many of the errors, except for errors in the data entry itself. As part of the required Quality Assurance plan, each CCR&R agency shall have a process to internally monitor eligibility determinations, payment processing, and PATH data entry. In addition, state level staff work with CCR&R agencies to identify problem policies, procedures and forms that may lead to errors. Solutions are developed by committee and supported in the field through training and technical assistance supplied by the child care consultants.

Strategies developed to prevent and reduce errors and improper payments include the following:

8.2.1. CCR&R agencies must use the State's management information system, the Family and Children's Tracking System (PATH), to determine financial eligibility and calculate payment amounts due. The system also has controls to limit payments to eligible days and children only.

8.2.2. CCR&R agencies must use State developed child care policy and procedures.

8.2.3. CCR&R agencies must develop and implement Quality Assurance Plans to review and oversee eligibility determinations, case maintenance, and payment processing.

8.2.4. All child care providers must submit sign-in and sign-out sheets with each billing form to verify child attendance.

8.2.5. CCR&R agencies must audit all sign-in and out sheets by comparing them to corresponding billing forms and verifying parent signatures against those on the Provider Services Agreement. Any discrepancies or billing errors shall be addressed in accordance with established policy and procedure.

8.2.6. Child care providers who submit incorrect or improper billing forms must attend a retraining session on proper billing procedures. After attending two retraining sessions, if the provider fails to comply with appropriate billing procedures, the provider can be denied participation in the certificate system.

8.2.7. Subsidy clients must submit verifications for activities and income. For example, adult learners receiving services must provide school schedules and grades. Employed clients must submit pay stubs for one month's period and work schedules. Case managers review pay stubs carefully, reviewing for unreported overtime, bonuses, and incentives in the year-to-date columns.

8.2.8. CCR&R case managers can implement a thirty-day penalty closure for clients who violate subsidy policy rules and responsibilities. If a parent fails to fulfill these responsibilities, the case manager shall give a written warning regarding specific problems, noting that subsequent abuses may result in a 30-day penalty closure.

8.2.9. In addition to the above requirements, two state level Child Care Consultants provide oversight and technical assistance to the CCR&R agencies. They perform the following activities:

8.2.9.1. Quarterly sampling of CCR&R cases to ensure compliance with appropriate procedures and policies.

8.2.9.2. Training and technical assistance to CCR&R agencies on Child Care Policy, procedures, and the use of PATH.

8.3. Types of Improper Payments

Improper payments include misrepresentation on the part of the parent or provider; worker error in determining eligibility, authorizing, or paying for care; and programmatic infractions by parents or providers.

8.3.1. Worker Error

Improper payments due to worker error are defined as payments that should not have been made, or that were made in an incorrect amount due to worker error in determining and verifying eligibility, and/or calculation and input of information into the Family and Children's Tracking System (PATH). Incorrect amounts include overpayments, underpayments, and inappropriate denials of payment.

8.3.1.1. Examples of worker error:

A. The child care regulatory specialist enables the "accreditation" box, allowing the provider to receive an extra $4 per day, when the provider has not achieved accreditation, and is not entitled to the enhanced rate.

B. The case manager enters an incorrect number of days when entering information from the payment form into PATH.

C. The case manager enters more time on the child care assessment than the client's work or school schedule supports.

D. The case manager fails to verify income, school enrollment, or special needs status.

8.3.1.2. Repayment of an improper payment due to CCR&R worker error is not mandatory regardless of the amount.

8.3.2. Misrepresentation

Misrepresentation occurs when a specific child care policy section is violated because of the information not having been reported by the client or reported falsely. If the CCR&R Agency becomes aware that the client/provider is attempting to or has received services/payments to which they are not entitled, the CCR&R case manager must take corrective action to prevent further payments from occurring. Improper payments made because of misrepresentation shall be referred to Investigations and Fraud Management (IFM) when the amount exceeds

$1,000.00. If the amount does not exceed $1000.00, the CCR&R shall initiate repayment procedures. A willfully false statement is one that is deliberately given, with the intent that it be accepted as true, with the knowledge that it is false. It is an essential element in a misrepresentation charge that the client/provider knew his statement was false.

8.3.2.1. Examples of a willfully false statement include the following:

A. The client states that he does not receive child support when he really does.

B. The child care provider bills for days when the child was not in their care.

C. The client states that she/he is employed when she/he is not.

8.3.2.2. Misrepresentation can also consist of the suppression of what is true. For example, the client omits child's biological father when listing household members on her status check, or the client fails to report bonuses received on the application.

8.3.2.3. When a parent continues to use child care services when the need no longer exists (e.g., parent has lost job or quit school, non-working/non-school attending biological parent has moved into the home), the case will be closed, and no further payment made. As soon as the CCR&R case manager is aware that the client is using services when the need no longer exists, the case manager should:

A. Immediately call the child care provider and tell them that effective the next business day, the agency will no longer be responsible for payment.

B. Send an immediate closure notice to the parent(s), advising them of the status of their case and the need for repayment.

C. The Recipient shall repay to the agency any child care monies paid on their behalf during the period of ineligibility. If the amount is under $1000.00, the CCR&R should collect the funds. If the amount is over $1,000.00, the case should be referred to IFM.

8.3.3. Programmatic Infractions

There are times when it is difficult to discern whether an improper payment occurred due to willful misrepresentation or is simply the result of a client/provider's genuine confusion over subsidy program rules and responsibilities. When the case manager believes that improper payment is the result of the client's failure to understand, it is a programmatic infraction. It is the CCR&R's responsibility to collect improper payments in this instance, regardless of the amount.

8.3.3.1. Examples of Programmatic Infractions:

A. The child's parent gives the provider permission to sign the children in and out on the sign in sheets. This is a violation of sign in and out procedures, but it is not forgery.

B. The client gets married during his certificate period and does not report the household addition until the next status check. The client could reasonably argue that he failed to understand program rules requiring the reporting of changes within five days.

8.3.3.2. If the case manager is ever in doubt of whether the improper payment is a programmatic infraction or misrepresentation, and the improper payment amount is less than $1000, the case manager should discuss the case with the CCR&R supervisor who will consult with the CCR&R Program Director, and together, make the decision to pursue repayment.

8.4. Referrals to Investigations and Fraud Management

8.4.1. Procedure for Referrals

If the overpayment is $1000 or greater and is due to misrepresentation by the client or provider, the case manager should prepare a memo explaining the circumstances, the time period, and an estimate of the amount involved.

8.4.1.1. Indicate person (s) who can verify the information and attach copies of all documentation including ECE-CC-10-A (Payment Form) and attendance sheets ECE-CC-10-G, that help support the complaint. The memo should also state what corrective action the case manager has taken on the case. The memo and supporting documents should be sent to:

Department of Health & Human Resources
Office of Inspector General
Investigations and Fraud Management
Attention: Chief Investigator
Capitol Complex, Building 6
Charleston, West Virginia 25305

8.4.1.2. The client/provider is NOT to be advised that a referral has been made. If questioned, advise the client/provider that the matter has been referred to another unit for evaluation. DO NOT indicate that fraud is suspected.

8.4.2. When Not to Refer to Investigations Fraud Management

There are times when cases should not be referred to Investigations and Fraud Management regardless of the amount of the improper payment. It is the CCR&R's responsibility to recover payments in this instance. Referrals should not be made when:

8.4.2.1. More than two years have passed since the misrepresentation period ended.

8.4.2.2. The case manager did not collect appropriate case verifications or process the case correctly.

8.4.2.3. Information affecting eligibility was previously reported and the agency did not take corrective action.

8.4.2.4. If the case manager believes the client/provider is not mentally competent or did not understand his responsibilities to report changes in his circumstances.

8.5. Recovery of Improper payments

8.5.1. When an improper payment or misrepresentation of $1000 or less is discovered, either to/by a client or provider, the CCR&R case manager should immediately notify the supervisor.

8.5.2. When willful misrepresentation is not clear, the CCR&R case manager will notify the CCR&R supervisor who will consult with the CCR&R Program Director, and together, make the decision to pursue repayment.

8.5.3. Supervisors are responsible for negotiating repayment schedules with providers and/or clients and completing a Repayment Agreement (ECE-CC-19) to include the amount to be recovered, the period of recovery, the monthly recovery amount, and the procedure for repayment. When a Child Care Benefit Repayment Agreement (ECE-CC-19) is entered into, the CCR&R shall send a copy of the completed and signed agreement to:

Division of Accounting and Reporting
Office of Operations
WV DoHS Bureau for Family Assistance
350 Capitol Street Suite 730
Charleston WV 25301-3711

8.5.4. If intentional misrepresentation may have occurred and the provider/client remains active, it is recommended that the CCR&R case manager try to collect the payment in full. If this is not feasible, it is suggested that the CCR&R case manager request that the client or provider be asked to repay the amount in monthly installment payments of approximately 10% of the amount due.

8.5.5. Payment schedules should be sufficient to recover the amount due within a reasonable period but should not pose an undue hardship to a client. The amount of payment should not exceed living costs. Payments must be made by money order.

8.5.6. When a check needs to be cancelled or an overpayment/repayment submitted, the CCR&R agency shall submit the payment/check and form (ECE-CC-68) to the closest DoHS District Office.

8.5.7. If a payment is more than forty-five (45) days late (15 days past the due date), the entire unpaid balance becomes due and must be paid in full. Failure to repay the requested amount shall result in case closure for clients or denial of participation in the certificate

system for child care providers. Client services will not be reinstated until full payment is received.

8.6. Subsidy Participation and Improper Payments

8.6.1. Clients

8.6.1.1. Clients who owe repayment are not eligible to participate in the subsidy system as providers until the balance is paid in full.

8.6.1.2. Clients who have been notified of the need to enter repayment, but fail to respond within 13 days, are not eligible to participate in the subsidy system until the full amount due is paid.

8.6.2. Unresolved Fraud Referrals and New Applications

If a client whose case has been referred to fraud reapplies, the case manager should accept the application and process it as usual. A client's circumstances may have changed since the alleged misrepresentation occurred. Pending criminal action has no bearing on current eligibility, unless more recent verification indicates misrepresentation still exists.

8.6.3. Providers

Providers owing repayment, who apply as clients must enter into a repayment agreement before receiving a certificate.

8.6.4. Substantiated Misrepresentation in Child Care or other DoHS Programs

If there is substantiated misrepresentation by a person in any DoHS administered program (TANF, Child Care, Food Stamps, etc.), that person shall be prohibited from participation in the subsidy program as any type of child care provider, including Registered Family Child Care, Registered Informal or Relative Family Child Care, Family Child Care Facility, Approved In-Home Child Care, Unlicensed School-Age Programs and Licensed Child Care Centers. This means that the person cannot:

8.6.4.1. Have contact with child care children.

8.6.4.2. Be involved in the child care business or day to day operations.

8.6.4.3. Be employed or used as a substitute in the child care program.

8.6.4.4. However, if the person makes full restitution of the total amount of the misrepresentation, a one-time waiver may be considered. The person must request the waiver in writing, and the CCR&R shall forward the request to the Division of Early Care and Education for approval/denial.

8.6.4.5. Child care providers of any type, with substantiated misrepresentation in any DoHS program, may continue to operate as unsubsidized child care providers, and serve only private pay children. Certificates of Registration and/or Licenses shall not be

revoked for substantiated misrepresentation. Neither WV Code nor promulgated child care regulations prevent the issuance of Certificate of Registration or Licensure based solely on substantiated misrepresentation.

8.6.5. Exceptions for WV Works Participants

WV Works participants are subject to the same Recovery of Improper payment efforts as non-TANF Child Care recipients. However, when making repayment arrangements, the supervisor or case manager should consider the impact of payment schedules and amounts on very low-income WV Works clients. When possible, graduated repayment arrangements can be considered, such as increasing the amount due per month as the client's income increases. If a WV Works client fails to make repayment arrangements, or becomes delinquent, case managers should consult with WV Works supervisors and case managers to see if a joint counseling session with the client can be scheduled to reinforce program requirements. If no agreement can be reached, and the client fails to repay amounts due the agency, services will be closed.

8.7. Billing Form Discrepancies

8.7.1. Using Critical Thinking

As the CCR&R case manager compares billing forms and sign in and out sheets to the parent's need for care in PATH, discrepancies may appear. The CCR&R case manager should use critical thinking techniques to determine whether the payment should be authorized. Critical thinking is a disciplined process of arriving at logical conclusions from available information. This means that the case manager should analyze information, evaluate alternatives, and select the best conclusion based on information that is known. Conclusions should be based upon PATH, be free of personal biases and preconceived thoughts and reflect a rational position. Case managers should also remember that child care providers rely on child care reimbursements to keep their businesses viable.

For example:

Sally works at Bob's Grocery Store. Since she has been with her employer for a long time, she receives the perk of a regular schedule, and has reported that she works 7 AM to 4 PM, Tuesday through Saturday.

However, in January, you receive a billing form and sign in and out sheets that show that Sally has used care on Saturday nights from 8 PM to 12 PM, and on Mondays from 3 PM to 9PM, in addition to her usual 6:30 – 4:30, Tuesday through Saturday.

Sally has been a client for two years, and this is the first time you have ever seen any discrepancy occur.

Should the case manager:

A. Send the billing form back to the provider.

B. Authorize the entire payment.

C. Authorize partial payment and send a letter to Sally requesting verification of need for care on additional days.

D. Hold the entire bill until clarification is received.

The correct answer is C - authorize payment for the days that match Sally's regular work schedule and request additional information regarding the other days. There are many potential explanations for the odd days: Sally could be filling in for a sick co-worker, or her employer could have required her to attend training. The case manager should remind Sally of her responsibility to inform her case manager of any changes in the work schedule or need for care.

However, the answer could be different if the case manager has previously had issues with Sally's provider. If the case manager has reason to suspect the provider of attempting to over bill, the correct answer would be to call Sally and ask her if she did indeed use care on those days. The correct answer could be different still if both Sally and her provider have a history of failure to follow program guidelines. Case managers should base payment authorization decisions on known client history, known provider history, and available case data and verifications, in conjunction with supervisory input.

8.7.2. How to Address Use and Billing for Unauthorized Days and Times

8.7.2.1. If most of the time billed matches the client's reported activity schedule, and authorizing the payment at this time will not interfere with the 13-20-day monthly payment calculation, the case manager should:

A. Authorize and process payment for all days that match the reported activity schedule.

B. Send a letter to the provider, reminding the provider to refer to the time and schedule limits on the child care certificate when preparing billing forms. Remind the provider that days of care provided outside of times allowed on the certificate are considered private pay days unless the client has received approval from the case manager to use additional days of care. Advise the provider that the client will have 13 days to provide verification of the need for care during the days/times that do not match the reported schedule. If such verification is not received, the client will be responsible for payment for the remaining days.

C. Send a 13-day notice to the client requesting verifications that support the need for care on the additional days and advising the client that if such verifications are not received, that the client will be responsible for payment to the provider. The client should also be reminded at this time of the responsibility to report changes in activity schedules as soon as possible to avoid payment delays for their provider and to avoid possible thirty-day penalty closures for failure to comply with program requirements.

D. If the client provides documentation of eligible activity participation for the excess days within the allotted time frame, the case manager should authorize and process the additional payment. The case manager should also document the additional payment in the client's PATH contact screen.

8.7.2.2. If most of the time billed matches the client's reported activity schedule, but authorizing the payment at this point would interfere with the 13-20-day monthly payment calculation, OR if the time billed does not match the client's reported activity schedule at all, the case manager should:

A. Send a letter to the provider, reminding the provider to refer to the time and schedule limits on the child care certificate when preparing billing forms. Remind the provider that days of care provided outside of times allowed on the certificate are considered private pay days unless the client has received approval from the case manager to use additional days or an altered schedule of care. Advise the provider that the client will have 13 days to provide verification of the need for care during the days/times that do not match the reported schedule. If such verification is not received, the provider will be paid for the total number of days that match the client's reported schedule, and that the client will be responsible for payment for the remaining days. The provider should be advised that she may call and request payment for the authorized days, exchanging quicker payment for the full monthly rate. The case manager should authorize and process payment for schedule matching days at the provider's request, making sure to remind the provider of any potential lost funds due to the loss of the 13 – 20-day monthly rate.

B. Send a 13-day notice to the client requesting verifications that support the need for care on the additional days and advising the client that if such verifications are not received, that the client will be responsible for payment to the provider. The client should also be reminded at this time of the responsibility to report changes in activity schedules as soon as possible to avoid payment delays for their provider and to avoid possible thirty-day penalty closures for failure to comply with program requirements.

C. If the client provides documentation of eligible activity participation for the unauthorized days/times, the case manager should authorize and process the entire payment. The case manager should also document the payment delay and reasons for any additional authorizations in the client's PATH contact screen.

D. If the client does not provide documentation of eligible activity participation for the unauthorized days/times with the required time frame, the case manager should authorize and process the payment only for days that match the reported activity schedule, if any.

8.7.2.3. Clients who fail to notify staff of changes in activity schedules after previously being notified of their responsibility to do so shall be given a thirty-day penalty closure for each offense after the second warning.

8.7.2.4. Providers who repeatedly bill for days more than the certificate allowance shall be called in for retraining on the child care certificate provisions after the second warning.

8.8. Corrective Action Plans

A Corrective Action Plan is used when a subsidy program non-compliance exists. This type of corrective action plan is issued by the CCR&R agency. Child Care Providers will from time to time make errors in completing Requests for Payment or accidentally breach the service agreement. Occasional minor mistakes are not grounds for closure. However, consistent unwillingness or inability to comply with appropriate Request for Payment and Sign in and Out procedures, or the terms of the service contract should be addressed with a corrective action plan.

8.8.1. Elements of a Corrective Action Plan

A corrective action plan states how the provider will correct the violation(s), how the provider will assure it will not recur, and who is responsible for implementing and monitoring the plan. A corrective action plan must contain the following information:

8.8.1.1. A statement indicating what correction(s) needs to be made. This could be either in a physical area of the home, or, in the case of subsidy system violations, in the areas of billing or breaches of the provider contract.

8.8.1.2. A statement as to how the corrective action will be accomplished, to remedy the violation(s).

8.8.1.3. A statement as to what measures will be put into place or systematic changes made to ensure that the violation(s) will not recur; or

8.8.1.4. A statement as to what interim measures will be put in place until systematic changes are made to ensure that the violations will not recur.

8.8.1.5. A statement indicating when the specific corrections and systematic changes will be made (within a reasonable period, relative to the seriousness of the violation).

8.8.1.6. A statement as to who (name, title of position) is responsible for monitoring the corrective actions.

8.8.1.7. A statement as to who (name, title of position) is responsible for completion of the corrective action plan and what systems will be put in place to ensure that the violation(s) are corrected and will not recur.

8.8.2. Procedures for Corrective Action for Child Care Resource and Referral Staff

When child care providers participating in the subsidy program violate the terms and conditions of the provider service agreement, other agreements, and/or billing requirements, it may be necessary to place the provider on a Corrective Action Plan.

8.8.2.1. First Offense – Strike One

A. Billing Errors.
The first time a provider submits an incorrect Request for Payment Form (ECE-CC-10-A) and attendance sheet (ECE-CC-10-G), the CCR&R case manager shall send a letter to the provider indicating the payment request is incorrect. A Corrective Action Plan is not done for the first occurrence. The CCR&R case manager shall have the provider submit another request for payment with the appropriate corrections made. Corrections on Request for Payment forms or Child Care Attendance records shall not be made with "white out" or any corrective medium/method other than as described as follows: Parents and/or Providers, as appropriate, shall strike through incorrect information, make corrections, and initial them. If corrections need to be made to original Child Care Attendance sheets (ECE-CC-10G) – parents shall also lace their initials to verify the corrections. If the Child Care Attendance sheets are incorrect, clients should also be notified of their responsibility for appropriately completing sign in and out procedures.

B. Provider Services Agreement Violation
The first time a provider violates the Provider Services Agreement, or any other agreement signed by the provider, the case manager should notify the provider of the violation and remind the provider of the terms of the agreement. A Corrective Action Plan is not done for the first occurrence. However, Federal Regulations may require a program suspension or ineligibility determination at the "Strike One" level which indicates the provider is not in "good standing" with the DoHS.

8.8.2.2. Successive Occurrence – Strike Two

For successive occurrences, the CCR&R case manager shall take the following steps:

A. Create a Corrective Action Plan addressing each of the items in Section II of this chapter.

B. The case manager/supervisor will schedule a conference with the provider to discuss the Corrective Action Plan.

1. Billing Issues: If the provider submits a second incorrect Request for Payment form (ECE-CC-10-A), the CCR&R case manager shall contact the provider by telephone or letter to schedule an individual training session on the payment process. At this time, the case manager will develop a Corrective Action Plan. The additional training must be documented, and the provider notified in writing that any future incorrect billing forms will result in termination from the Certificate system.

2. Provider Services Agreement violations: The second time the provider violates the service agreement, the CCR&R case manager shall contact the provider

by telephone or letter to schedule an individual training session on the service agreement. At this time, the case manager will develop a Corrective Action Plan.

C. If the provider refuses to sign the corrective Action Plan, the provider's service contract shall be canceled within thirteen (13) days, and the provider shall no longer be permitted to participate in the subsidy program.

D. If, during the thirteen days, the provider agrees to sign and complete the corrective action plan, the closure notice shall be rescinded.

E. Providers refusing to sign and/or agree to corrective action plans shall be denied future participation in the subsidy program until the corrective action plan is signed and completed.

8.8.2.3. Follow-Up on Corrective Action – Strike Three:

A. CCR&R case managers must follow up on Corrective Action Plans to determine whether corrective action is achieved by the date on the plan.

B. Providers who fail to achieve the corrections required by the corrective action plan, submit a third incorrect payment form, or violate the service agreement for a third time shall be subject to the "Three Strikes Rule – strike three – you're out." The CCR&R case manager shall send the provider a 13-day cancellation notice using Cancellation Notice for Child Care Provider Services Agreement. Families using the provider shall also receive notification to select a new provider.

C. Providers prohibited from participation in the subsidy system due to "striking out" may reapply after 12 months.

D. The CCR&R supervisor should confer with their child care program specialist in the Division of Early Care and Education prior to approving the provider to participate in the subsidy system.

E. Providers with a history of multiple non-compliance issues with the subsidy system policy and procedures or provider services agreement will not be approved to participate in the subsidy system.

F. Providers owning multiple sites who have had their Provider Services Agreement revoked at one site shall also have all other subsequent site Provider Services Agreements revoked.

8.8.2.4. PATH Documentation.

The CCR&R case manager shall import the Corrective Action Plan into the PATH provider case file and document the action taken in the PATH Contact screen.

CHAPTER 9: CHILD CARE RESOURCE AND REFERRAL PROVIDER ORIENTATION AND PAYMENT ENROLLMENT

9.0. General Provisions

Since Child Care Centers and Family Child Care Facilities are required by law to be licensed prior to accepting either private-pay or subsidized children for care, they generally come into the child care system because of regulation. Some home-based providers also enter the child care system for regulation because they care for children privately or want to be placed in the Child Care Resource and Referral's (CCR&R) provider referral system or wish to participate in the Child and Adult Care Food Program. These regulated programs/providers do not participate in enrollment unless and until they accept certificates. Upon initial contact with the CCR&R office to inquire about becoming a Child Care Provider, the potential provider will be given a general overview of the child care provider application process, including information regarding WV CARES, and WV STARS, child care payment training and other CCR&R resources. The CCR&R staff will take the opportunity to register the individual for an upcoming Provider Orientation and Payment Enrollment training.

All potential child care providers will be referred to a local Child Care Resource and Referral Agency.

A child care provider will not be eligible for payment until the successful completion of the Provider Payment Training and has been issued a license or certificate of registration from the Child Care Regulatory unit.

Unregulated providers such as in-home providers, come into the system when they agree to accept certificates. Parents who are eligible for subsidy will not be permitted to select a provider who has not been issued a provider certificate of registration or Licensure.

9.1. Overview: Enrolling Providers in the Subsidy System

A potential child care provider who seeks to be reimbursed through the child care certificate system must attend Provider Orientation and Payment Enrollment through their local CCR&R. Enrollment consists of two distinct parts: Provider Orientation and Payment Enrollment. Potential providers need to attend Provider Orientation and Payment Enrollment in only one county even if they care for children from more than one county.

The potential provider shall be informed that no payment will be made to any person or facility operating an unlicensed center, an unlicensed family child care facility or an unregistered family child care home.

9.1.1. When the parent selects a new child care provider or one who has been closed:

- The provider must have received a Certificate of Registration prior to the parent's application for child care services or notification of a change in provider.

- The provider payment eligibility shall begin on the date shown on the License, or Certificate of Registration, as issued by the West Virginia DoHS Licensing or Regulatory unit.

9.1.2. If the application for redetermination approval is denied:

- The child care regulatory specialist will inform the CCR&R case manager that the provider's redetermination has been denied. The CCR&R case manager will send the appropriate notices to the parent.

- Generally, the CCR&R case manager will issue a 13-day termination notice to the parent(s) to enable the parent(s) to locate a new provider.

- Should the provider become compliant within an allotted period, the child care regulatory specialist will notify the CCR&R case manager who will notify the parent that the provider is now in compliance with WV Child Care Regulations and will be issued a certificate of registration and will continue to be eligible for payment.

- The provider will be paid during this period unless the child care regulatory specialist determines that immediate removal from the provider's home is necessary to ensure safety of children.

- Additionally, the child care regulatory specialist and the CCR&R case manager may jointly decide to deny payment for the period of child care already provided. However, this action should be taken with caution and only after considering the impact on the parent who may then be responsible for the payment.

- If the provider has had a certificate of registration revoked, no payment will be made until an approval is given or a certificate of registration is issued.

9.1.3. Notifications to Parents and Providers

- The DAY-0179 is used by CCR&R staff to notify parents of issues regarding the provider's status, i.e., when they must find a new provider because of enrollment or regulatory problems with a current provider. The CCR&R case manager shall also offer assistance with locating other providers who are available and accessible to the parent.

- The CCR&R case manager uses the Provider Notification – Parent Eligibility (DAY-0613) to inform providers of any action regarding client eligibility/fees.

- The CCR&R case manager will use the Cancellation of Provider Services Contract Notice (DAY-0504) to cancel the provider contract.

9.2. Use of Providers in Other Counties and States

9.2.1. When a parent selects a family child care provider in another county, the CCR&R in the provider's county of residence should complete enrollment for funding and forward the necessary payment information to the parent's case manager. Registration and monitoring shall be done by a child care regulatory specialist covering the provider's home county. Client intake and payment will be completed by the CCR&R agency operating in the client's home county.

9.2.2. Child care programs from other states may not enroll for Child Care Subsidy funding in WV.

9.3. Child Care Provider Orientation

Orientation components are intended to disseminate information necessary to assist with a smooth registration process of child care providers, and to provide technical assistance and information on topics such as available training, and referral procedures.

The orientation should be completed during individual office interviews or during group provider orientation. For potential providers and those providers who have been closed over twelve months, the CCR&R should make every effort to schedule a Provider Orientation, at least once, every calendar month, with no more than 45 days between sessions. The CCR&R will forward the Provider Orientation schedule, and any changes to the schedule, to the Division of Early Care and Education.

CCR&Rs should add additional information, including CCR&R agency services, supportive websites, resource sheets, zoning requirements, etc. to cover specific local community requirements as needed.

9.3.1. Best Practices for Provider Orientation

- The local child care regulatory specialist will be notified of the Provider Orientation schedule so that the regulatory specialist will have the opportunity to attend and provide technical assistance, explain regulatory requirements, and give potential providers an overview of a monitoring visit.

- Only registered providers may choose to attend orientation if the CCR&R has an open slot. The CCR&R may give priority to those registered only providers wishing to receive child care referrals.

9.3.2. The CCR&R will review the following and assist with completion where necessary:

- ECE-CC-8 Application *(copy to be maintained by the CCR&R)*

- BCF-PSRC Authorization & Release for Protective Services Record Check (*one for each adult in the home*) *(returned to the CCR&R for processing)*

- ECE-CC-7 Provider Information *(copy maintained by the CCR&R)*

- IRS Form W-9 Request for Taxpayer Identification Number and Certification. *(Copy maintained by the CCR&R)*

- Day-0564 Child Care Provider Services Agreement *(original maintained by the CCR&R)*

Following the completion of Provider Orientation, the 5 forms, listed above, will be mailed, via U.S. Postal Service, by the CCR&R Staff, to the Regulatory Unit Secretary at the address below:

Child Care Regulatory Secretary
Division of Early Care and Education
WV DoHS
350 Capitol Street Room B-18
Charleston, WV 25301

The provider application data will be entered into PATH, by the Regulatory Unit Staff, after the provider applicant completes the WV CARES process.

- Description and regulations for each child care provider type

- Guide to WV CARES document

- West Virginia STARS information document

- West Virginia Child and Adult Food Program information document

- Form ECE-CC-10B Child Care Payment Form Instructions.

- Form ECE-CC-10G Child Care Attendance Sheet (*The provider should be given a supply of attendance sheets).*

- Form ECE-CC-10A Request for Payment Child Care Services. *(The provider should be given a supply of payment form requests).*

- Form ECE-CC-10C Instructions for Collecting Child Care Daily Fees

- Form ECE-CC-10D Child Care Parent Fee Notices. *(The provider should be given a start-up supply of Child Care Parent Fee Notices*).

- Form ECE-CC-10F Provider Notice to Agency *(The provider should be given a start-up supply of Provider Notice to Agency).*

- Appendix B – Payment Rates/Tiered Reimbursement

- Day-0176 Child Care Certificate
- PATH Direct Deposit Setup
- WV PATH PLUS Application Confidentiality Statement
- ECE-CC-10H Child Care Payment Form Quiz
- ECE-CC-6A Payment Process Training Certificate (Addendum to the Child Care Provider Services Agreement)
- ECE-CC-14A FCC Home Provider Information Packet, and Guide to Providing Family Child Care in WV
- The CCR&R case manager shall inform the providers of the following:

A. Providers must be at least eighteen (18) years of age.

B. Providers shall not be paid for child care if they are the child's parent, stepparent, legal guardian, or another member of the family as defined by child care policy.

C. Informal, Relative and Registered family child care providers may not operate more than eighteen consecutive hours in a twenty-four-hour period.

D. Caregivers who also provide other services such as foster care, or adult care must contact their regulatory specialist to discuss whether they are eligible to become a child care provider.

E. The provider application process will not progress until the WV CARES process has been completed. Once the criminal history and background check is completed, the potential provider will be contacted by the Regulatory Staff to continue the application process.

9.3.3. WV CARES Registration Process

A criminal history background check is required of the potential provider and all adult household members aged 18 and over. The CCR&R case manager will provide information regarding the initial registration for WV CARES process and provide a guide document.

9.3.4. WV STARS Registry Account

The CCR&R case manager will provide information regarding the initial registration process. A member of the agency's Professional Development Team will make every effort to assist with the delivery of the WV STARS information.

- The CCR&R Staff will notify the potential provider that additional required Health & Safety Training will be delivered via WV STARS.

9.3.5. Child and Adult Care Food Program

The CCR&R case manager will provide information regarding the Child and Adult Care Food Program. The CCR&R will notify the Child and Adult Care Food Program Representative so they will have the opportunity to be present to explain the program.

9.3.6. WV Birth to Three

The worker should provide information on WV Birth to Three. Birth to Three is a statewide system of services and support for children under age three who have a delay in their development, or may be at risk of having a delay, and their family. The Department of Human Resources, through the Bureau for Public Health and the Office of Maternal, Child and Family Health, WV Birth to Three, as the lead agency for Part C of the Individuals with Disabilities Education Act (IDEA), assures that family centered, community-based services are available to all eligible children and families.

9.3.7. WIC

The worker should provide information on WIC. WIC is the Special Supplemental Nutrition Program for Women, Infants and Children. WIC was established in 1972, as a pilot project following a national survey that found anemia and inadequate growth to be common among American children in low-income families. In 1974, WIC was established as a discretionary program, available throughout the United States. WIC is primarily funded through the United States Department of Agriculture. It is administered by the West Virginia Bureau for Public Health, Office of Nutrition Services.

9.3.8. Zoning

The CCR&R should add zoning information and contacts to the orientation session as applicable by area.

9.3.9. List of Child Care Regulatory Specialists

The CCR&R should include a list of local child care regulatory specialists and contact numbers.

9.3.10. CCR&R resources:

A. Training.

B. Behavior Support Consultant.

C. TRAILS.

D. Infant Toddler Specialist.

E. Newsletter.

F. Website.

G. Grants

9.3.11. Discussion of Regulations:

- The worker shall refer the provider to the assigned child care regulatory staff person to discuss regulatory requirements.

- Training Requirements: Family child care providers must attend 8 hours training based on provider type.

A. Registered family child care providers are required to attend eight (8) hours training annually.

B. Registered informal and relative family child care providers and approved in-home family child care providers must attend two (2) hours of health and safety training and perform one (1) hour of self-study annually.

C. A variety of training opportunities will be offered to all providers on a statewide basis through the CCR&R agencies and through a statewide early childhood training calendar and resource initiative. The West Virginia State Training and Registry System (STARS) offers a calendar of training opportunities; providers may call 1-855-822-7827 or wvstars@rvcds.org for more information.

D. The discussion should also cover special regulatory concerns such as the provision of foster care or adult care (See Chapter 10, Section 3, Dual Provider) and background check requirements.

E. The worker should also discuss the implications of becoming a child care provider as it relates to the mandated reporting of child abuse and neglect.

F. The worker should discuss the importance of responsible pet and hand out the Pet Acknowledgement Form (ECE-CC-10J) to those providers who own pets.

9.3.12. Resource Information for Providers

In addition to the subjects listed in previous paragraphs, the CCR&R case managers should present child care providers with information on the following topics:

- **Records Maintained by the Provider**

The case manager should inform the provider that it is their responsibility to maintain their own business records. Records should be kept on both the provider and the child care children and contain:

A. Provider's Record:

1. ECE-CC-3C: Medical Report for Child Care Provider

2. A copy of the Provider Service Agreement (DAY – 0546.)

3. ECE-CC-10J: Pet Acknowledgement Form.

4. ECE-CC-22: Family Child Care Provider Training Record, and/or verification of training attendance, i.e., WV STARS Registry

5. ECE-CC-23: Fire Escape Plan.

6. ECE-CC-24: Emergency Phone List.

7. ECE-CC-33: Emergency Plan.

B. Children's Records:

1. Emergency Information Forms (ECE-CC-10-E). *The provider shall require a completed and notarized form before a child is placed in their care.*

2. Child Health Assessment Forms (ECE-CC-3):

a. The provider is required to keep current medical information on each child placed for care who has not yet reached a sixth (6^{th}) birthday. (*Physician's office document is acceptable if it contains the same information as the ECE-CC-3*) (See Chapter 2, Section 2.2.2.1.)

b. The provider shall inform the parent that care will be terminated if the medical form is not returned.

c. Providers must notify the CCR&R agency when the parent does not return the form(s) within thirty (30) days of placement.

d. The CCR&R case manager will then send 13-day closure notices.

3. ECE-CC-10E: Emergency Information/Permission Form.

4. ECE-CC-25: Medication Permission Slips if needed.

5. Child Care Certificate (DAY-0176), if applicable.

C. Other forms to have on hand:

1. ECE-CC-30: Periodicity Schedule, to give to parents.

2. ECE-CC-26: Incident Report Form, to complete and return in the event of an accident.

D. Business and billing records.

E. File for correspondence from or to agencies, parents, etc.

- **Information on Working with Parents**

The CCR&R case manager should emphasize the importance of communication and cooperation between the provider and parents.

A. If problems occur, the CCR&R case manager will not routinely become an arbitrator to enforce the provider's rules.

B. A provider must accept responsibility for the operation of their business, including dealing with a parent's failure to meet their expectations and rules.

C. The provider retains the option of terminating services if parents fail to cooperate.

D. Providers are encouraged to establish written rules or develop a handbook so that parents are fully aware of the provider's expectations.

- **Taxes**

The provider is responsible for paying Social Security and Federal and State taxes.

A. The case manager shall inform providers that they are employed neither by the State of West Virginia nor the local Child Care Resource & Referral agency. Child care providers are self-employed.

B. The case manager shall inform providers that DoHS is required to submit payment information to the Internal Revenue Service and provide them with a 1099 form as specified on the payment instruction form (ECE-CC-10B). The state does not withhold taxes from the child care provider's reimbursement.

C. The case manager shall refer all tax-related questions or problems to the appropriate federal or state agency.

D. Providers are exempt from payment of consumer sales tax on funds paid by DoHS but may be responsible for these taxes on parent fees.

E. Case managers should inform providers of the Earned Income and Child Tax Credits.

9.4. Provider Payment Training (detail)

All child care providers, including in-home child care providers, family child care homes, informal and relative family child care homes, family child care facilities, licensed centers and

out of school time child care programs, who have subsidized children must complete the payment enrollment process before reimbursement is made. The CCR&R case manager shall explain the payment process, including:

9.4.1. Discussion of Billing Procedures and Forms

The case manager should provide a detailed discussion of billing procedures and required forms.

- Request for Payment (ECE-CC-10-A). The provider should be given a supply of payment form requests.

- The provider shall be given a copy of the ECE-CC-10B (Payment Instructions.)

- Fee Collection Procedures (ECE-CC-10C)

  A. Information on Collecting Fees**:** The CCR&R case manager should explain the fee collection process as outlined in Chapter 6, Parental Child Care Fees Section, and give the provider a copy of Instructions for Collecting Fees (ECE-CC-10-C). The provider shall collect any applicable fees from the parent. The provider should also be informed that:

  1. Fee amounts will be deducted from the provider's payment.

  2. The provider shall be responsible for billing the parent for this fee, and for providing receipts upon request.

  3. Upon request, the CCR&R shall provide copies of Parent Fee Notices (ECE-CC-10D) a billing and receipt form.

- Child Care Attendance Sheets (ECE-CC-10G.) The CCR&R case manager shall also give the provider a supply of Child Care Attendance Sheets. These forms shall be used by providers to verify attendance of all children in care, including private children. A copy shall be mailed with the provider's payment form and a copy shall remain in the provider's file for use by child care regulatory staff to verify compliance with staff/child ratios and for review by any auditors or DoHS investigators. Child care centers may choose to use this form or another of their own design.

- The Child Care Provider Services Agreement (DAY-0546) – The DAY-0546 is a form that shall be signed by the case manager and provider once the form has been thoroughly discussed. In the case of Child Care Centers, the Child Care Provider Services Agreement (DAY-0546) must be signed by the Child Care Center Director.

  A. The provider must be willing to comply with each requirement. Failure to comply with all elements of an agreement will result in a violation.

B. The provider is given a copy of this form for record keeping and a signed copy is filed in the provider record.

C. The provider may be asked to renew this agreement every two years, or more often if changes are made to the program or if a staffing change has been made in the Child Care Center Director position.

- Child Care Certificate (DAY-0176) – The CCR&R case manager shall explain the Certificate in full to the child care provider, stating:

A. Certificates are valid for no longer than a twelve (12) month period.

B. The expiration date is noted on the Certificate.

C. A new Certificate must be received before the expiration date in order for payment to continue.

D. The provider should not accept a child for care without a Child Care Certificate or Provider Notification Letter – Parent Eligibility (DAY-0613).

E. If a provider does not have a Certificate, they will not be paid for care.

F. A Certificate must stay with the provider as long as he or she provides care.

G. Certificates shall be kept on file for the period of eligibility.

H. A provider will not be paid for care beyond the expiration date of the certificate.

9.4.2. Quality Tier Standards

The CCR&R agency's Quality Tier Specialist should make every effort to attend the Provider Orientation and introduce the Child Care Tiered Reimbursement System.

9.4.3. Payment Rates and Tiered Reimbursement

The provider's payment rate shall be determined using charts in Appendix B, Provider Payment Rates. Providers should be informed of the ability to receive higher reimbursements for achieving higher standards of quality through the Child Care Tiered Reimbursement System. Three different rates are available based on the level of quality. Programs that are licensed as a center or facility and registered family child care homes are currently receiving Tier I rates through the child care subsidy program. Programs that meet additional standards called Tier II Quality Standards receive $3 extra per actual day of service. Programs that are accredited by an approved accrediting agency currently receive Tier III rates of $6 extra daily.

9.4.4. Payment Training Quiz (ECE-CC-10H)

Once the provider has been trained to correctly complete payment request forms, the CCR&R case manager should administer the Payment Training Quiz. Providers should

complete the quiz, then self-score the quiz as the CCR&R case manager discusses the correct answers (Payment Training Quiz Answer Sheet, ECE-CC-10I) with the group.

CHAPTER 10: GENERAL PROVIDER REGULATION INFO FOR CCR&R AGENCIES

10.1. Complaint Response and Procedures

Complaints about a variety of issues and situations may be received on child care providers from parents and the public.

The Child Care and Development Block Grant (CCDBG) Act of 2014, section 658E(c)(2)(C) requires that the State respond to all complaints and maintain a record of those complaints. (See: https://www.acf.hhs.gov/sites/default/files/documents/occ/ccdbgact.pdf)

10.1.1. Who Handles Complaints?

10.1.1.1. Child Care Center Complaints.

Regulatory complaints about child care centers shall be referred to the Child Care Center Licensing Director or Licensing Specialist. CCR&R staff member who receive a complaint of standards violations regarding a child care center shall refer the complainant to the appropriate licensing specialist and inform the complainant that they may also email their complaint to ECEComplaints@wv.gov The CCR&R staff member shall also request the provider's name and the complainant's name and phone number and e-mail the information to the appropriate licensing specialist indicating that this person would like to file a complaint. Child or adult abuse and neglect shall be referred to the Institutional Investigations Unit using the Adult/Child Abuse Hotline at 1-800-352-6513. The complainant should be encouraged to also contact Protective Services.

10.1.1.2. Complaints on Other Child Care Types.

All other complaints are handled by the child care regulatory specialist unless the complaint alleges child abuse or neglect. CCR&R staff members who take a regulatory complaint on types of care other than child care centers shall complete the Information and Referral screens in PATH. The intake shall be assigned to the regional child care supervisor in PATH. Regional Child Protective Service (CPS) workers investigate complaints of child abuse or neglect.

10.1.2. Complaint Intake Process

When a complaint is received, the child care regulatory specialist shall complete the following steps:

10.1.2.1. Obtain information from the complainant, including the complainant's name, relationship to the provider and contact information.

10.1.2.2. Inform the complainant that, although the Department would attempt to ensure anonymity if the reporter wished to remain anonymous, in a non-abuse or neglect complaint, there is no guarantee that his identity will remain concealed, should there be a resulting administrative or judicial action.

10.1.2.3. Obtain as much specific information about the complaint as is possible from the complainant, including names and addresses of any other individuals involved, names and addresses of potential witnesses, time frames, and location.

10.1.2.4. Determine if the complaint has been made to any other person or agency and if any action was taken.

10.1.2.5. Determine if the complaint is within the authority of the child care regulatory specialist. If not, determine if the complainant can be directed to any other person or agency.

10.1.2.6. Determine if the information indicates a non-compliance, illegal operation, violation of Chapter §49-2B, an area for concern warranting further investigation, and/or there is a need to refer the information to Child or Adult Protective Services. If a complaint needs to be referred to Protective Services for possible investigation, it is done immediately.

10.1.2.7. Enter information on the Information and Referral screens in PATH and, for providers with a PATH record, make a note in the contact screen.

10.1.3. Special Circumstances – Child Abuse and Neglect Allegations

The Child Protective Services staff is responsible for investigating allegations of child abuse and neglect in Informal, Relative Family Child Care Homes, and In-home providers. The Institutional Investigations Unit (IIU) is responsible for investigating allegations of child abuse and neglect in registered family child care homes, licensed family child care facilities and child care centers. If requested, child care regulatory specialists may assist Protective Services (CPS) and/or IIU with interviewing children. However, to maintain impartiality or the ability to conduct regulatory activity prior to the end of the CPS and/or IIU investigation, child care regulatory specialists who work with the provider should have a very limited role in the investigation. DoHS and CCR&R Child Care staff may be involved in following up with families and providers in the following circumstances:

10.1.4. Parental Requests for Complaint Record

If a parent requests a list of substantiated complaints on a child care provider, the local DoHS or CCR&R child care staff shall supply the requested information. Information shall be available in PATH which lists standards violations as well as corrective action taken and completed. When a request for the information is made, the CCR&R or DoHS Child Care Worker shall print a history of non-compliance report (DAY-0616) from the PATH record and provide information to the parent based on the results of that report. The History of Non-compliance Report may be sorted by dates or by concerns identified during licensing review, monitoring visits or because of an investigation or a complaint investigation. However, due to the confidential nature of Child Protective Service records, information on CPS complaints may not be made available.

10.2. Communication with Providers, Department Staff and CCR&Rs

Communication with clients, providers, and agency staff is one of the basic functions of both. CCR&R and DoHS staff. Program goals cannot be met without clear, effective, cordial communication.

10.2.1. Communication between the CCR&R and the Department

Throughout the Child Care Policy there are specific circumstances noted which require communication between the CCR&R and the child care regulatory specialist. When any information received, or action taken by the CCR&R requires a change in the provider type or provider record, the child care regulatory specialist must be notified. Likewise, the CCR&R staff must be notified when the child care regulatory specialist takes action that affects or should affect the Provider Services Agreement. E-mail communications, if used, should be saved to the Provider Record in PATH.

10.2.2. Notice to Child Care Resource and Referral Agencies

Child care regulatory specialists shall send a copy of any notice of negative action via-e-mail to the CCR&R agency, if the provider is enrolled and has a Provider Services Agreement (DAY-0546). The following guidelines shall be used by the child care regulatory specialist and the CCR&R case manager to coordinate terminating payment and closing a provider record when negative regulatory action is taken:

10.2.2.1. Generally, payment to the provider shall cease 13 days after the date the application is denied, or the certificate revoked. This allows the CCR&R the ability to send out notices and help parents locate a new provider.

10.2.2.2. If the provider has serious areas of non-compliance and there is notification of immediate revocation, the child care regulatory specialist may inform the CCR&R case manager to cease payment immediately and not require a 13-day notice to parents. In making this decision, the child care regulatory specialist shall confer with the Regional Child Care Supervisor. Consideration needs to be given to the immediate risk of harm to children in care. The CCR&R shall include the last date of payment for the provider in the Provider Notice (DAY-0613).

CHAPTER 11: ADMINISTRATIVE HEARINGS

11.0. Overview

The West Virginia Public Welfare Law and subsequent administrative actions have guaranteed an applicant for or a recipient of Social Services the right to a hearing concerning an action taken by the Department.

11.0.1. Child care providers have the right to file a grievance, which is different from the guarantee to a hearing. A grievance is any complaint by a client or recipient of services of the agency who is receiving special services regarding:

11.0.1.1. His/her treatment by agency personnel, (a worker or supervisor), or

11.0.1.2. any other concern about his/her situation related to the service programs of the agency which the client or recipient of services would like to have resolved.

11.0.1.3. The child care provider is not permitted to request an Appeal or Fair Hearing in response to an action taken on a client's case. Likewise, a child care client cannot request an Appeal for Fair Hearing in response to an action taken on a provider's status. Child care client cases are subject to DoHS confidentiality rules. No information regarding a client's case may be shared with any other person(s) without written release from the client.

11.0.2. Grievances by providers of service are different from grievances by clients of the agency in that they relate to the agency's decision not to use the service a person is willing to offer. By way of example:

11.0.2.1. The grievance would usually relate to the agency's decision not to use a home because it does not meet basic standards, or the closure of a home formerly used.

11.0.2.2. Another group to which it would pertain would be those who provide services to clients of the Department of Human Services in their own homes, e.g., In-Home day or chore service.

11.0.3. Individuals or families who apply to become providers of service should be afforded the opportunity to initiate a grievance hearing at any point in their contact with the agency should they feel their situation is not being understood and assessed fairly by the case manager.

11.0.4. Grievances should not be confused with the client's or recipient of services right to appeal his/her exclusion from or inclusion in a service program against his/her will or the agency's failure to consider the recipient's choice of service. Procedures regarding the clients or recipients of services right to this type of Fair Hearing is explained in Chapter 700 of the Common Chapters Manual. Every child care client and provider have the right to request a hearing concerning actions taken by the Department or CCR&R case managers.

11.0.5. Appeals and Fair Hearings can be requested ONLY by the person(s) upon whom the negative action was taken. A request for Appeal or Fair Hearing submitted by anyone other than the person(s) upon whom the negative action was taken, will not be considered. Child care client cases are subject to DoHS confidentiality rules.

11.0.6. The WV State Board of Review is designated by WV State Law as the body through which a client or provider may present his/her case to a higher authority. The State Hearing Officer is an impartial official who has not been directly involved in any determination of the action in question.

11.1. Reasons for Hearings

Reasons for hearings fall generally into four categories: denial, reduction, closure, and delay.

11.1.1. Denial –Any time a provider or client claims he or she was excluded from providing or receiving services, including:

11.1.1.1. Denial of the right to apply.

11.1.1.2. Denial of services.

11.1.1.3. Denial of adequate services (i.e., not enough time on the child care certificate, etc.)

11.1.1.4. Denial of benefits due to race, color or national origin, age, sex, religious creed, political beliefs, or disability.

11.1.2. Reduction – Any time the level of service is reduced or limited.

11.1.3. Closure – Any time services are discontinued.

11.1.4. Delay – Any inaction or failure to abide by established timeframes to approve/deny a provider's or client's application or redetermination.

11.2. Adequate and Timely Notice of Decisions

Adequate notice of a decision affecting benefits shall be mailed or provided in writing in face-to-face contact to the applicant. Notice shall be mailed at least thirteen (13) days before the effective date of any action or decision which may be averse to the applicant.

11.2.1. Required Notice Information

The notice must include the following information:

11.2.1.1. The action or proposed action to be taken.

11.2.1.2. The reasons for the action provided in terms readily understandable by the applicant.

11.2.1.3. Citation of relevant policy sections supporting the action taken or proposed.

11.2.2. Exceptions to Thirteen (13) Day Notice

There are certain exceptions to the 13-day notice.

11.2.2.1. When a mass change is initiated, i.e., changes in provider reimbursement levels or income eligibility levels, a 13-day notice is not necessary.

11.2.2.2. When the fee is increased because of redetermination. A fee increase is not considered a negative action. The client's status has changed based upon his or her increase in income, but the benefit of child care is not being eliminated. If clients return their status check after the due date but before the closure date, the case manager is to process the review. (See section 6.1.2) The case manager will not be able to give 13 days' notice regarding the increased fee. However, the CCR&R case manager must inform the provider and client of the date the fee increase takes place.

11.2.2.3. When there is a safety concern. In certain situations, such as allegations of serious child abuse or massive structural damage to the child care home, immediate closure may be necessary to protect the health and safety of the children.

11.3. Pre-Hearing Conferences

Any person requesting a hearing shall have the right to a pre-hearing conference with the employee(s) of the Agency involved in the decision-making process on the person's case. Pre-hearing conferences are encouraged, as many issues can be resolved in this manner, without resorting to a hearing. At no time shall the applicant be discouraged from pursuing his or her right to a fair hearing.

11.3.1. Release of Information

For the fair hearing process, the applicant shall have access to his or her entire case record, including, but not limited to, all documents that pertain to the change in the applicant's case that is the subject of the fair hearing. With written authorization from the applicant, the applicant's attorney or representative may review the record. The review of the record shall take place during normal business hours at the location where the record is housed. Additionally, the applicant or his attorney/representative may request and receive, free of charge, a copy of the entire case record and a copy of any policy section that may be used in the hearing. If the case manager has a question about whether certain confidential documents should be released, the case manager should consult with the DoHS's regional attorney.

11.3.2. Critical Timelines Regarding Hearings or Pre-Hearing Conferences

11.3.2.1. Applicants shall be allowed 13 days from the date of the notification letter to request a hearing or pre-conference hearing.

11.3.2.2. If after 13 days no response has been received from the applicant, the action as proposed shall be taken.

11.3.2.3. However, child care recipients may still submit a request for a hearing or pre-hearing conference up to 60 days after the action was taken. Child care providers may request a hearing or pre-hearing conference up to 30 days after the action is taken.

11.3.2.4. Recipients of Services.

A. If a client requests a hearing during the 13-day notice period, the action should not be taken until the hearing is held and the hearings officer has made a decision.

B. If a hearing is requested in response to an increase in fees, a notice of closure for exceeding income guidelines, or a denial of application, fees cannot be reduced, nor services continued due to PATH processes.

11.3.2.5. Providers of Services: If a hearing is requested in response to negative action taken due to health and safety concerns regarding child care children, services will not be continued.

11.4. Procedures for Handling Request for a Hearing

11.4.1. Requests must be made in writing, using the hearing request form included with the notification letter. Hearings can be requested ONLY by the child care client or provider upon which the negative action was taken. A request for Appeal or Fair Hearing submitted by anyone other than the child care client or provider on which the negative action was taken, will not be considered. Child care client cases are subject to DoHS confidentiality rules. No information regarding a client's case may be shared with any other person(s) without written release from the client.

11.4.2. A pre-hearing conference shall be offered, and scheduled, if accepted.

11.4.3. The person requesting the hearing must be told that if services continue and the agency is upheld, then the client will have to reimburse the agency for any amounts paid after the effective date of the closure.

11.4.4. The case manager shall submit a (IG-BR-29) Hearing/Grievance Record Information Form, copy of the notification of negative action sent to the client, and copy of the client letter requesting a hearing regarding decision.

11.4.5. The IG-BR-29 must be submitted to the Board of Review within 48 hours of the hearing request.

11.4.6. The CCR&R case manager shall send an email notice to their ECE technical assistance specialist whenever a client or provider requests a hearing.

11.5. Hearing Preparation

11.5.1. The hearings officer will mail notice of the hearing to both parties.

11.5.2. Before attending the hearing, the case manager shall place the evidence in chronological order. Evidence should be clear and concise, and show what actions were taken in the case, and when, step by step.

11.5.3. The case manager should make at least 3 copies of all documents supporting the decision, one for the hearings officer, one for the client/provider, and one for the case manager.

11.5.4. The case manager should be familiar with child care policy sections relevant to the decision and be able to cite policy and law, if applicable.

11.6. During the Hearing

11.6.1. Be punctual, professional, and prepared. Never make the hearings officer wait.

11.6.2. Before the hearing begins, the case manager should request that exhibits/supporting documents be numbered.

11.6.3. The case manager has the right to request that witnesses be removed from the room so that their testimony will not be tainted.

11.6.4. The case manager will present to the hearings officer first, as the agency bears the burden of proof for the action taken. Always address the hearings officer and speak clearly and loudly enough for the tape recorder.

11.6.5. The case manager is their own lawyer. They should introduce themself: "My name is _____I work for _____. I represent the Department/Child Care Resource Referral Agency. I have worked for the Department/CCR&R for _____ years/months/days." The case manager should also introduce any witnesses on their side.

11.6.6. If the agency or case manager made an error, admit it.

11.6.7. Once the case manager is finished, the client or provider who filed the hearing request will have the opportunity to present his or her side.

11.6.8. The client or provider may also choose to cross examine the case manager. The case manager should answer questions directly, but do not answer questions on which he/she has no personal knowledge or on actions which he/she did not take.

11.6.9. The case manager should object to any misrepresentations by the client or provider – if the client makes a statement that the case manager knows is false or a misstatement, make sure that it is addressed when the case manager cross examines the client. The case manager will be given the opportunity to present rebuttal testimony.

11.6.10. Closing statements – the case manager may make a closing statement summarizing the agency's position and requesting that the agency's decision be upheld. In contentious hearings, the case manager may choose to skip this step.

11.6.11. The hearings officer may then end the hearing. In rare cases, and only for good cause, a continuance may be granted.

11.6.12. The hearings office will render a decision within 90 days.

11.6.13. Both the agency and the applicant have the right to appeal the hearings officer's decision.

11.7. Denial or Dismissal

Hearings may be denied or dismissed if either of the following occurs:

11.7.1. Withdrawal – The Hearing Officer may dismiss a request for hearing if the client or provider withdraws the request in writing.

11.7.2. Abandonment – The Hearing Officer may dismiss a request for a hearing if the client or provider fails to appear at a scheduled hearing without good cause.

11.7.3. The request for a hearing is based solely upon policy or regulation. (i.e., A client may request a hearing because he feels the income guidelines are unfair. However, the Hearings Officer may dismiss the request because the disputed issue is a matter of policy which is not subject to interpretation.)

11.7.4. The CCR&R case manager shall send an email notifying ECE technical assistance staff of the disposition of the hearing.

CHAPTER 12: PROVIDER RESOURCES

12.0. Overview

CCR&R and DoHS staff both share a responsibility for resource development to increase and improve the availability of child care services. It is important to develop and maintain an adequate number of providers to offer choices to parents. While an CCR&R agency may conduct recruitment campaigns, the child care regulatory specialist is responsible for regulation of providers and shall inform providers of their ability or potential to accept referrals of additional children. Leads to potential child care providers may also be secured through existing approved homes or parents. As requirements for WV WORKS participation increase, the need for providers may increase. All child care regulatory specialists shall provide support and technical assistance to parties interested in providing child care and refer providers to other resources, as needed.

The West Virginia Department of Human Resources, Division of Early Care and Education has implemented initiatives designed to increase the availability of child care. Both CCR&R and DoHS staff are encouraged to work with other early childhood programs to coordinate resources.

The development of a strong foundation for child care requires the development of resources. A strong foundation will enable local communities and the State of West Virginia to better accommodate growing child care demands and fluctuations in demand. Therefore, it is important to coordinate DoHS child care services with existing programs operated by both the public and private sector.

12.1. Kindergarten

It is important to evaluate the placement of kindergarten age children carefully. Kindergarten attendance is mandatory and public kindergarten classes, funded by the WV Department of Education and County Boards of Education, are available to all children. DoHS, therefore, will not pay for children to attend private kindergarten programs in child care centers. Parents and centers should be made aware that payment will be approved only for the time the child(ren) attends the child care program. Since centers can require parents to pay the additional cost of kindergarten, it may be necessary to assist parents with making alternate arrangements which are more affordable.

12.2. Head Start and Early Head Start

Head Start, Title 1 and Pre-School Special Needs programs are operated through county school system and/or non-profit agencies. They offer excellent services for pre-school and children with special needs. These programs receive federal and/or state funds for services provided. They generally operate part time and do not meet the child care needs of working parents. They have therefore not typically been eligible to participate in the child care certificate system. Many Head Start programs have chosen to become licensed as child care centers. Some offer services for working parents either before or after normal Head Start hours. In these instances, licensed Head Start facilities can receive child care subsidies for care during extended hours that are not eligible for federal Head Start reimbursement. Child care subsidies may be used for any child whose care is not eligible for the Head Start program. Subsidies may be used for

that portion of the day, week, or year when the Head Start part of the program is not in operation. Head Start programs shall not be reimbursed for care provided during the hours of operation that federal Head Start funds are available to cover the cost of the program for a particular child. However, Head Start centers can receive payment for full days for any child who is in care for more than four hours, either before and/or after normal Head Start hours.

In recent years, the Federal Administration for Children and Families has encouraged Head Start to collaborate with child care programs to offer full-day, full-year services, blending and braiding funds in programs that offer the quality of Head Start with child care's longer hours of services. To encourage such blending of resources, child care and Head Start resources may be used jointly in some situations. If a Head Start program enters into an agreement with a licensed child care center to pay for enhancements to a child care program to provide additional services (family support, health and safety, teacher certification, curricula, or equipment) needed to meet higher standards under Head Start Performance Standards or WV Pre-K requirements, then the center may continue to receive child care reimbursement for eligible children. Parent co-payment will continue to be deducted from the center's payment regardless of Head Start policy on collection of fees.

Each CCR&R shall maintain a list of Head Start, Title I and Pre-school Special Needs programs. The CCR&R case manager shall contact these agencies to determine the location of programs, hours/days of operation and availability of transportation. Child care applicants shall be referred to the program, when appropriate. The CCR&R case manager shall assist the parent in locating child care for the portion of the day or week when part-time programs are not in operation. The child care arrangement may be in a center or family child care home near the program or along the transportation route. In some instances, the child care provider may be willing to provide transportation. If existing child care providers are not available or convenient, the CCR&R case manager shall attempt to recruit family child care homes. The Head Start or Public-School programs may assist with recruitment efforts by identifying potential providers among parents of children attending the programs.

To facilitate child care's participation in the Early Head Start program and assist families and children, licensed child care centers that are participating in the Early Head Start program or contracting with Head Start may continue receiving child care payments during the hours considered as Early Head Start, if certain conditions are met. Those conditions are as follows:

12.2.1. The child care center must be licensed and offer full-day care of at least 10 hours per day.

12.2.2. Payment may only be made for children eligible for child care subsidies.

12.2.3. Payments from Early Head Start are designed to cover additional services. Additional services include but are not limited to certified teachers, curricula materials, payment for absent days or hours not covered by child care, and additional equipment to meet Early Head Start requirements. These are considered enhancements to the program, not payment for the basic cost of care for that child.

12.2.4. The center may not charge the parent a fee for the hours considered to be Early Head Start hours. However, fees will continue to be deducted from the center's check. This may result in a difference in payment if the child is not in the program before and after school for at least four hours but will not outweigh the financial benefits to the center.

12.2.5. The family must use the center to the maximum extent possible. Second providers shall not be approved if the child care center is available to provide care. To facilitate child care participation in Early Head Start, families may use child care for all regular Early Head Start hours. For example, Early Head Start hours may be 9-3 Monday through Wednesday, but the parents may not need to use child care on Tuesday. The center may still bill for Early Head Start hours used on Tuesday on the monthly payment form.

12.3. West Virginia Pre-k Program

To facilitate child care's participation in the WV Pre-k program and assist families and children, licensed child care centers that are participating in the WV Pre-k program or contracting with Head Start may continue receiving child care payments during the hours considered as WV Pre-k, if certain conditions are met. Those conditions are as follows:

12.3.1. The child care center must be licensed and offer full-day care of at least 10 hours per day.

12.3.2. Payment may only be made for children eligible for child care subsidies.

12.3.3. Payments from the public-school system are designed to cover additional services. Additional services include but are not limited to certified teachers, curricula materials, payment for absent days or hours not covered by child care, and additional equipment to meet WV Pre-k requirements. These are considered enhancements to the program, not payment for the basic cost of care for that child.

12.3.4. The center may not charge the parent a fee for the hours considered to be WV Pre-k hours. However, fees will continue to be deducted from the center's check. This may result in a difference in payment if the child is not in the program before and after school for at least four hours but will not outweigh the financial benefits to the center.

12.3.5. The family must use the center to the maximum extent possible. Second providers shall not be approved if the child care center is available to provide care. To facilitate child care participation in the WV Pre-k, families may use child care for all regular Pre-k hours. For example, Pre-k hours may be 9-3 Monday through Wednesday, but the parents may not need to use child care on Tuesday. The center may still bill for the Pre-k hours used on Tuesday on the monthly payment form.

12.4. Grants

Grants may be available, depending on the availability of federal and state funds, to assist family child care providers with start-up costs, meeting regulatory requirements, and/or improving the quality of care. Priority for grants should first go to providers participating in the subsidy system.

Family Child Care providers who cannot afford the cost of complying with health and safety standards shall be referred to the grant programs sponsored by the CCR&R agency. Grants shall be available for providers for a variety of needs, including start up assistance to meet health and safety requirements, pay operating permits, attend training, or become accredited. While federal rules will not allow grant funds to be used for major improvements, grants may be approved for minor remodeling to meet health and safety requirements. Each CCR&R has individual grant application policy and procedures. In addition, the CCR&R agency sets limits for grant amounts and covered items and may establish policies that require repayment of grant funds if the home closes within two years of receiving funds for a capital improvement. A provider shall complete an application form and shall be notified in writing of the disposition within 30 days. All applications are confidential and are retained in the CCR&R agency for three years.

12.5. Child and Adult Care Food Program

The Child and Adult Care Food Program (CACFP) is an important resource for child care providers. The program not only reimburses providers for meals served to children but completes onsite inspections and supplies nutrition training. Child care staff in the CCR&R agency will be responsible for informing new providers about the Child & Adult Care Food Program.

12.5.1. Cooperative Agreements

Each DoHS child care unit and CCR&R agency shall enter into a cooperative agreement with the sponsor(s) of the Child and Adult Care Food Program (CACFP) in their area of operation. The cooperative agreement should include exchange of information, and resolution of problems which may arise. The cooperative agreement will help assure a good working relationship between agencies for the benefit of child care providers, parents, and children. The agreement should be discussed periodically and at any time problems arise. Information shall be shared among agencies, as legally permitted, particularly when there is an investigation for suspected fraud.

12.5.2. Exchange of Information

To maintain confidentiality, payment forms (ECE-CC-10A) should not be shared unless the sponsoring agency wishes to obtain them directly from the providers. By signing the child care application, the parent agrees that information may be released to the Child & Adult Care Food Program. Therefore, child care staff can provide the agency with names and number of children open or closed in the home of each provider who participates in the program. It then becomes the Child & Adult Care Food Program sponsoring agency's responsibility to obtain other necessary information directly from the provider and parent. The Child Care Case manager shall insure that the Child Care Food Program is notified of changes that occur with providers monthly.

12.5.3. Regulation of CACFP Providers

Family home child care providers interested in receiving CACFP reimbursements must volunteer to register.

CHAPTER 13: CHILD CARE STAFF RESPONSIBILITIES

13.0. Overview

Child care services designed to make child care more affordable, more available and of higher quality are provided through multiple agencies. Staff from the West Virginia Department of Human Resources, Division of Early Care and Education, DoHS Child Care Regulatory Staff, and six Child Care Resource and Referral Agencies all contribute to the overall effectiveness of the program. Each of these entities has specific responsibilities and assignments. In addition, the agencies coordinate their efforts through the regional Child Care Quality Teams located in each of the six service delivery areas established for resource and referral territories.

13.1. Division of Early Care & Education – Child Care & Quality Initiatives Staff

The West Virginia Department of Human Resources, Division of Early Care & Education staff is responsible for overall administration of the child care program including:

13.1.1. Management of federal and state funds.

13.1.2. Development and interpretation of policy.

13.1.3. Policy training and technical assistance.

13.1.4. Coordination with other state and local early childhood programs.

13.1.5. Development/implementation of quality initiatives.

13.1.6. Development of standards for child care programs.

13.1.7. Establishing provider payment rates and income guidelines.

13.1.8. Development of forms and computer support systems.

13.1.9. Communication/collaboration with federal, state, and local level agencies involved in child car or related early childhood programs.

13.1.10. Legislative responsibility for program.

13.1.11. Development of contracted services and monitoring.

13.1.12. Case consultation upon request.

13.1.13. Coordination of WV Pre-k program with Department of Education.

13.1.14. Approval of county WV Pre-k plans; and

13.1.15. Staffing the PIECES Advisory Council.

13.2. Division of Early Care and Education – Child Care Center Licensing Staff

WV child care center licensing staff are responsible under WV state law for the licensing and regulation of child care centers. This includes the investigation of complaints of standards violations, and illegal operations for programs caring for 13 or more children. The following list indicates responsibilities of WV child care center licensing staff that relates to child care:

13.2.1. License, investigate and inspect child care centers.

13.2.2. Collaborate with early childhood professionals and programs.

13.2.3. Promote quality, developmentally appropriate care in child care centers and related programs including promotion of and assistance in accreditation.

13.2.4. Enter all pertinent information regarding licensed child care centers into PATH.

13.2.5. Provide technical assistance to the child care community.

13.2.6. Coordinate the licensing process with other regulatory agencies including the WV State Fire Marshal, Environmental Health, and Pest Management.

13.2.7. Identify need for changes in regulations.

13.3. DoHS Child Care Regulatory Specialists

Child care regulatory specialists in county offices regulate informal and relative family child care homes, family child care homes, and family child care facilities, and ensure that programs that are legally exempt from regulation by WV state law meet health and safety standards required for receipt of federal funding. The following is a partial listing of those responsibilities.

13.3.1. Investigate reports of illegal operations, when 12 or fewer children are in care.

13.3.2. Report complaints of over 12 children to the child care center licensing specialist.

13.3.3. Monitor legally exempt school-age child care programs using checklists and annual visits to ensure compliance with health and safety standards.

13.3.4. Register relative and informal family child care and family child care homes through review of applications, on-site inspections, annual visits as appropriate, per policy for each type of care.

13.3.5. Approve in-home child care home providers through a review of the Child Care Provider Services Requirements Checklist (ECE-CC-6A).

13.3.6. Answer policy questions of providers regarding regulatory issues.

13.3.7. Identify the need for changes in regulations.

13.3.8. Case reviews with supervisory and/or Protective Services staff.

13.3.9. Linkage to Community Service Managers, (CSMs), WV Works staff and Economic Service Staff, if needed.

13.3.10. Investigate complaints of standards violations on family child care homes and facilities, implement corrective action and monitor compliance.

13.3.11. Refer Protective Services complaints to the Protective Services supervisor.

13.3.12. Registration of family child care homes and provision of technical assistance.

13.3.13. Licensure of family child care facilities and provision of technical assistance.

13.3.14. Background checks on providers, including Crime Identification Bureau (CIB) and Protective Services record check.

13.3.15. Work with Fire Marshal and Environmental Health in regulation of family child care facilities.

13.3.16. Identify training needs of providers and report them to training staff at the CCR&R.

13.3.17. Entry of all provider information in PATH.

13.3.18. Communications with CCR&R agencies, Child & Adult Food Program, and providers.

13.3.19. Requests to DoHS supervisor for waivers, variances, and policy exceptions for family child care and exempt programs.

13.3.20. Assist family child care facilities to apply for grant funds and monitor to ensure funds are used for approved activities and according to the plan submitted as part of the grant application.

13.3.21. Refer providers to other resources such as the food program, grants, training, associations, etc. to improve quality of care; and

13.3.22. Encourage providers to offer high-quality child-care programs.

13.4. Child Care Resource and Referral Agencies (CCR&R)

The Department of Health & Human Resources has contracted with community agencies to provide child care resource and referral services and to determine eligibility for subsidized child care services in all areas of West Virginia. Parents not in need of financial assistance or services

may contact the CCR&R agency for information about standards, how to select quality care, or referral to registered, licensed, and approved facilities. Resource and Referral agencies are responsible for the following core services:

13.4.1. Promoting consumer education and parental choice:

13.4.1.1. Assisting parents to select child care arrangements and become quality-conscious consumers of child care.

13.4.1.2. Encouraging parents to review all consumer information materials prior to selecting care for their children and to constantly monitor and evaluate the child care situation once children are placed.

13.4.1.3. Informing parents to be sensitive to changes in their children's behavior or attitude toward child care, which could be a sign of problems with the situation.

13.4.1.4. Reminding parents that they should report any concerns about licensed or approved care and any suspicion of child abuse or neglect to the DoHS or CCR&R agency office.

13.4.1.5. Reminding parents of the importance of consistency and continuity of providers and how changing providers too often can be detrimental to children.

13.4.1.6. Helping parents to avoid potentially dangerous or inadequate child care situations.

13.4.2. Recruitment of child care providers.

13.4.3. Assisting child care providers through support activities, training, provision of information regarding age-appropriate care, and encouragement of practicing professional standards.

13.4.4. Operation of the Traveling Resource and Information Library Service.

13.4.5. Eligibility Determination: Managing the subsidy certificate program using policies and forms required by the DoHS:

13.4.5.1. Determine family eligibility and complete a status check at least every twelve months, or more often if family circumstances change. Assist families in selecting care as well as consumer education.

13.4.5.2. Accept referrals of WV WORKS participants from the DoHS. CCR&R staff shall utilize WV WORKS Referral Forms to determine and process eligibility status checks for TANF recipients.

13.4.5.3. Issue certificates to all eligible families, based on parental choice.

13.4.5.4. Enroll providers for payment and refer providers to DoHS for registration and/or health and safety checks.

13.4.5.5. Process provider payment forms on an ongoing basis.

13.4.6. Provide training and technical assistance to providers and the early care and education community.

13.4.7. Consumer education.

13.4.8. Work with community resources to improve the availability and quality of child care.

13.4.9. Operation of a grant program for family child care providers.

13.5. Quality Rating and Improvement System Specialist State Lead

This staff person is responsible for assisting providers in achieving higher quality standards. The QRIS Specialist:

13.5.1. Establishes forms, policies and procedures for the WV Quality Rating and Improvement System.

13.5.2. Develops application and renewal forms, agreements, certificates, notification letters, grievance forms, data entry and tracking forms and any other necessary forms to support the QRIS and related financial incentives.

13.5.3. Accepts applications from providers and determines approval or denial of quality related funding.

13.5.4. Reviews applications and supporting documentation from providers to verify program quality rating level.

13.5.5. Completes and maintains data entry and tracking on numbers of applications received, approved, and denied.

13.5.6. Works with providers on grievances related to the QRIS and quality funding.

13.5.7. Facilitates advisory groups and committees relevant to program projects.

13.5.8. Promotes the QRIS through presentations, newspaper and magazine articles, and provider conferences.

13.5.9. Develops constructive and cooperative working relationships with stakeholder organizations, agencies, and providers and maintains them over time.

13.5.10. Develops consumer education materials for parents and providers to promote the QRIS.

13.6. Cooperative Agreements between the DoHS and the CCR&R

DoHS and CCR&R agencies shall enter into a written cooperative agreement regarding the exchange of information and on-going communication. The agreement should be developed between local staff and supervisors and signed by the Regional Director and the Executive Director of the Resource and Referral agency.

CHAPTER 14: RECORDING PROCEDURES

14.0. Introduction

Information on clients and providers shall be recorded in PATH and on forms prescribed by the West Virginia Department of Human Resources, Division of Early Care and Education. For information that cannot be stored in PATH or for information that requires an original signature or third-party letters or verifications, the CCR&R agency shall maintain case records for client and abbreviated case records on providers participating in the subsidy system. DoHS shall maintain records related to provider regulation in DoHS files. All significant contacts made with providers and clients are to be entered into the PATH record.

14.1. Filing Procedures

Client and provider files shall be saved to PATH. If a form is created or completed by the DoHS staff or CCR&R staff, then it shall be imported into the PATH file cabinet. All paper documents shall be noted in Document Tracking, maintained and forms filed into the following sections of the case records:

14.1.1. Client Case Record

14.1.1.1. Core Eligibility Block

A. Proof of identity for client.

B. Proof of citizenship for children needing care.

C. Proof of WV Residency.

14.1.1.2. Application/Documentation Block

A. DAY-0614 (ECE-CC-1) Application for Services/Signature Page, and supporting documentation.

B. DAY-0617 Status Check Report and supporting documentation.

C. DAY-0177 Notification to New Applicants

D. DAY-0179 Child Care Parent Notice of Denial or Closure

E. DAY-0612 Child Care Parent Notification of Redetermination

F. ECE-CC-1B Employment Verification Form

G. ECE-CC-1C Self-Employment Ledger Form

H. ECE-CC-0612B Change of Information Notification

I. DAY-0613 Provider Notification Letter – Parent Eligibility

J. Other correspondence with client

14.1.1.3. Policy Exception and Special Needs Documentation Block

A. Documentation for Policy Exception Requests.

B. Court Documents for court-ordered care.

C. Documentation of Special Needs for children.

14.1.1.4. Legal Block

A. DAY-0162 Child Care Services Parent Services Agreement

B. DAY-0176 Child Care Certificate

C. ECE-CC-19 Child Care Repayment Agreement

D. IG-BR-29 Hearing/Grievance Request Form

14.1.2. Child Care Provider Files Maintained by the CCR&R Agency

14.1.2.1. Narrative Block

A. ECE-CC-4 Child Care Provider File Cover Sheet

B. ECE-CC-7 Information on Child Care Provider (copy)

C. ECE-CC-8 Application to Operate a Child Care Home (copy)

D. ECE-CC-15 Application to Operate a Family Child Care Facility (copy)

14.1.2.2. Legal Block

A. DAY-0546 Child Care Provider Services Agreement (original)

B. ECE-CC-19 Repayment Agreement

C. W-9 Provider Tax Identification Reporting Form (copy)

14.1.2.3. Payment Block

A. ECE-CC-10A Request for Payment-Child Care Services

B. ECE-CC-10G Child Care Attendance Sheets

C. The payment block may be filed separately, with files cross referenced.

14.1.2.4. Correspondence Block

A. ECE-CC-10F Provider Notices to Agency

B. All correspondence with or about provider

14.2. Record Retention and Disposal

The current Retention and Disposal Schedule indicates that child care records (client and provider) shall be retained for seven years after closure. However, if any litigation, claim, negotiation, audit, disallowance action, or any other action involving the record has been started before the end of the seven-year retention period, the record shall be retained until completion of the action and resolution of all issues that arise from it, or until the end of the seven-year period, whichever is later.

Case records pertaining to ongoing or completed fraud investigations shall be retained until seven years after the conclusion of the investigation and the resolution of any action that arises from it.

Case records which have met the required retention period shall be destroyed. Destruction of case records will be accomplished by shredding. Document destruction will be suspended immediately, upon any indication of an official investigation or when a lawsuit is filed or appears imminent.

14.3. Child Care Forms and PATH Reports for Subsidy Clients

14.3.1. DAY-0614 (ECE-CC-1) Application for Child Care Services

The DAY-0614 shall be completed at time of application. The application shall be completed by the parent during an intake interview scheduled within 5 days of original contact for clients served in main offices. The application shall be completed by the parent during an intake interview scheduled within 10 days for clients served at outreach offices, only when approval to visit outreach sites less often than weekly has been granted by the Division of Early Care and Education. The parent shall contact the CCR&R agency for an office appointment where the application and other forms will be completed. Case managers may either: (1) complete the application form for parent's original signature; or (2) complete the necessary intake screens in PATH and print the signature page for parent's original signature. A PATH generated, and populated form may also be printed as needed. (See application process). A copy of the original application shall be stored in PATH.

14.3.2. ECE-CC-1B Employment Verification Form

The ECE-CC-1B should be given to applicants who, due to new employment status, do not have 1 months' worth of pay stubs to provide as proof of employment.

14.3.3. ECE-CC-1C Self-Employment Ledger Form

The ECE-CC-1C is used to assist self-employed applicants track income and expenses for self-employment.

14.3.4. ECE-CC-1E Status Review Form

The Status review form shall be completed at least every twelve (12) months by clients due for review.

14.3.5. DAY-0617 Status Review Letter

The Day – 0617 will be used to notify parents of the semi-annual status checks.

14.3.6. DAY-0613 Provider Notification Letter - Parent Eligibility

This PATH generated letter is sent to the child care provider to notify the provider of information regarding client's eligibility, changes in fees and/or payment enrollment procedures.

14.3.7. ECE-CC-3 Child Health Assessment Form

This form must be completed upon initial placement of children aged 6 years and under receiving child care services and every two years thereafter. Completed forms are to be maintained by the child care provider.

14.3.8. DAY-0162 Child Care Parent Services Agreement

Once it has been determined that the children need child care and the family is eligible, the Parent Services agreement should be completed as a PATH generated form and the client shall sign an original and one (1) copy. The original is filed in the legal block of the client case record, a copy is given to the parent and a copy is saved to PATH. The case manager should carefully explain to the parent their responsibility to keep the agency informed of changes in income or circumstances.

14.3.9. ECE-CC-0162B Change of Information Notification Clients can use this form to report any changes as outlined in Section IV.A of the Day-0612.

14.3.10. ECE-CC-5 (DAY-0176) Child Care Certificate

Upon approval of the family for child care services, the Child Care Certificate shall be printed via PATH for the parent in an original with a copy saved to the PATH record. The original is given or mailed to the parent who may use it to purchase care according to the terms of the Certificate. The parent is to give the Certificate to the selected provider as proof of payment. The provider is to retain the Certificate as long as he/she provides care or until the Certificate expires. Certificates are issued initially at the time of application and are valid for no more than twelve (12) months. A new certificate shall also be issued after completion of the client's status check if the client remains eligible. The provider must receive a new certificate from the parent by the expiration date to continue child care payment.

Certificates will be populated by PATH to indicate name and address of parent and provider, information on children needing care, child's daily fee and payment rates. The certificate shall be effective as of the date of application and shall expire no more than twelve (12) months after date of application. The CCR&R case manager shall sign the Certificate and shall remind the parent that they must sign the certificate prior to giving it to the provider. Renewal certificates shall be sent directly to the parent who shall sign and give the certificate to the provider who shall sign and keep the form in their records.

14.3.11. ECE-CC-10E Emergency Information

Enrolled providers shall be given a supply of emergency forms during the payment enrollment process. Providers shall request that parents complete, notarize, and return emergency forms on all children prior to placement.

14.3.12. Parent Notification Letter

This letter is sent to child care parents to notify them of information regarding their eligibility for child care services. The original is sent to the parent, with a copy saved to PATH. PATH will generate and populate three versions of this notification letter including:

- **DAY-0177** – Used for new applicants and child care certificate approvals.
- **DAY-0179** – Used for case closure or child care certificate denials; and
- **DAY-0612** – Used for case reviews and status checks.

14.4. Child Care Forms and PATH Reports for Providers

14.4.1. DAY- 0503 Notification of Provider Regulatory Status

This PATH generated letter is sent to registered and licensed child care providers to notify them of information regarding the regulatory and/or monitoring process.

14.4.2. ECE-CC-3B Statement of Good Health

This form shall be completed by an approved health care provider for informal and relative child care providers at the time of registration and every two years thereafter. In-home child care providers are also required to obtain a Statement of Good Health at the time of their approval.

14.4.3. ECE-CC-3C Medical Report for Child Care Provider

This form shall be completed by registered family child care providers at the time of registration and every two years thereafter.

14.4.4. ECE-CC-4 Child Care Provider File Cover Sheet

CCR&R case managers use this form to notify regulatory specialists of any concerns with child care provider applications taken during orientation.

14.4.5. DAY-0546 Child Care Services Agreement with Provider

The CCR&R case manager must be certain that the provider clearly understands all aspects of the PATH generated Provider Services agreement. The CCR&R case manager should have the provider sign an original and two (2) copies. The original copy shall be retained in the legal block of the provider file, a copy shall be given to the provider and a copy shall be sent to the DoHS Child Care Worker. The contract may be cancelled by either party, with or without cause, upon notice. The contract should be updated every 2 years. CCR&R agencies should set up internal processes to ensure that agreements are renewed every two years.

14.4.6. ECE-CC-6A Payment Processing Training Certification

This form shall be signed by all child care providers who go through training on the payment process to confirm that they not only received the training but understand it and agree to keep accurate records.

14.4.7. ECE-CC-6E Health and Safety Requirements for In-Home Child Care Providers

This form is a checklist and shall be completed by in-home family child care providers to receive child care certificate program funds. These standards are part of the Provider Services Agreement (DAY-0546). West Virginia does not license or certify this type of child care provider.

14.4.8. ECE-CC-6IR Health and Safety Checklist for Informal and Relative Family Child Care Providers

This checklist shall be given to applicants for registration as an informal or relative family child care provider. The form shall be completed and returned within 30 days to the child care regulatory specialist. Checklists shall also be completed by the worker during monitoring visits and filed in the provider record.

14.4.9. ECE-CC-6 Registration Requirements for Informal and Relative Family Child Care – Legislative Rule.
These rules apply to the registration of informal and family child care providers and all providers must meet them. A copy of the full set of rules shall be given to all informal and relative family child care providers for their own records.

14.4.10. ECE-CC-8 Application to Operate a Family Child Care Home.
This form shall be completed by individuals applying to operate a registered family child care home, informal family child care home or a relative family child care home.

14.4.11. ECE-CC-9 Family Child Care Home Regulations Checklist.
Regulations shall apply to all registered family child care providers. Checklists shall be given to applicants for completion and returned within 30 days to the child care regulatory specialist. Checklists shall also be completed by the worker during monitoring visits and filed in the provider record.

14.4.12. ECE-CC-9C Abbreviated Checklist for Registered FDC Homes.
This abbreviated form of the ECE-CC-9 is to be used at mid-certification monitoring visits, except for situations where material changes in the provider's child care environment have occurred.

14.4.13. ECE-CC-9R Family Child Care Home Registration Requirements.
The ECE-CC-9R is the set of legislative rules that have been promulgated for family child care homes caring for 4 (four) to six (6) children, including the provider's own children under the age of six (6). A copy of the legislative rules shall be given to all registered family child care providers, along with the Checklist (ECE-CC-9).

14.4.14. DAY-0577 Certificate of Registration.
A PATH generated Certificate of Registration shall be given to all registered family child care providers and informal and relative family child care providers upon completion of the necessary requirements and again at time of renewal of the certificate. The Certificate shall indicate the type of care, address, type of registration (regular or provisional), approved capacity, issuance date and end date.

14.4.15. ECE-CC-10A Request for Payment – Child Care Services.
The ECE-CC-10A is initiated by the child care provider. The form must be completed and submitted monthly in order for the provider to be reimbursed for child care services following items of information should be completed before the provider submits the form.

14.4.16. ECE-CC-10B Payment Instructions.

This form shall be given to all enrolled providers and provides directions on completion of form ECE-CC-10A.

14.4.17. ECE-CC-10C Fee Collection Instructions.
This form shall also be given to enrolled providers and provides instructions on how to collect fees from parents.

14.4.18. ECE-CC-10D Fee Notices.
Providers shall be given this form at time of payment enrollment. The form is optional but may be used by providers who opt to use a formal billing and receipt procedure.

14.4.19. ECE-CC-10E Emergency Information.
Enrolled providers shall be given a supply of emergency forms during the payment enrollment process. Providers shall request that parents complete, notarize, and return emergency forms on all children prior to placement.

14.4.20. ECE-CC-10F Provider Notice to Agency.
Providers shall be given a supply of these forms. The form is used to supply the CCR&R case manager with information on parental fees and to request supplies of needed forms.

14.4.21. ECE-CC-10G Child Care Attendance Sheets.
Providers shall be given a supply of these forms. The provider shall enter the names of all children in care. All parents (or the persons responsible for the child) shall sign each child's time in and out daily. The parent(s) original signature on the form each day shall verify that the times accurately reflect their child's attendance. These forms are required monthly for all types of child care providers participating in the child care certificate program, except for child care centers and unlicensed school-age care, which must submit them every six (6) months.

14.4.22. ECE-CC-10H Payment Training Quiz
Providers shall be given this short quiz at the end of payment training to assist child care providers in understanding payment submission concepts and rules.

14.4.23. ECE-CC-10I Payment Training Quiz Answer Sheet
Answer sheet for the payment training quiz. CCR&R case managers should cover the correct answers with providers who have completed the Payment Training Quiz.

14.4.24. ECE-CC-10J Pet Acknowledgement Form
Child care providers with pets in the home shall have all parents of child care children read and sign the acknowledgement form.

14.4.25. ECE-CC-10K Child Care and Responsible Pet Ownership
A booklet covering the types of animals allowed in the child care setting, as well as safety tips for safe child/pet interactions.

14.4.26. ECE-CC-11 Health and Safety Checklist for Unlicensed School Age Child Care Programs.
This one-page checklist shall be given to unlicensed school age child care programs that provide before and after school care at the time of enrollment for payment. The child care regulatory specialist shall monitor the facility within 60 days to ensure compliance with the health and safety requirements and shall place the completed checklist in the facility's file.

14.4.27. ECE-CC-14 Family Child Care Facility Information Packet.
This packet is sent to applicants who are interested in opening a family child care facility. It provides sufficient information to screen out applicants who are not able or willing to comply with requirements and includes a letter of intent, which applicants are requested to complete and return.

14.4.28. ECE-CC-15 Application to Operate a Family Child Care Facility.
This application is to be completed by the owner/operator of a facility at the time of original application and at the time of renewal. The renewal application should be completed and sent to the local DoHS office at least sixty (60) days prior to expiration of a license.

14.4.29. ECE-CC-12 Application for the Approval of In-Home Care.
This application is to be completed by the parent receiving the care and by the caregiver. The parent is responsible for returning the application packet to the CCR&R agency. West Virginia does not license or certify this type of child care provider.

14.4.30. ECE-CC-16 Family Child Care Facility Regulations.
These rules are to be sent to all applicants who wish to operate a family child care facility once a completed letter of intent is received. Applicants shall notify the DoHS Child Care Worker when they are ready for on-site evaluation of the facility. Rules are also available online at https://DoHS.wv.gov/bfa/ece/Documents/CHILD%20CARE%20POLICY_Final_04262022.pdf

14.4.31. ECE-CC-16A Family Child Care Facility Checklist.
This checklist shall be completed during an on-site visit by the child care regulatory specialist during the initial visit to approve the facility and upon renewal of the license. All facilities shall be monitored annually.

14.4.32. DAY-0576. License to Operate a Family Child Care Facility.
This PATH generated certificate shall be provided to owner/operators of family child care facilities as verification of licensure. Certificates shall be initial, regular, or provisional. Regular certificates are valid for up to two (2) years unless revoked. Provisional licenses are good for up to six months and may not be consecutively reissued unless the WV State Fire Marshal recommends it. An initial certificate is issued only to new facilities and can be issued for six months. Certificates shall indicate the approved number of children fewer than 24 months and over 24 months, issuing date and expiration date and are signed by the child care regulatory specialist.

14.4.33. ECE-CC-22 Family Child Care Provider Training Record.
Providers may use this form to record their training attendance and keep track of hours and core competencies covered,

14.4.34. ECE-CC-23 Fire Escape Plan.
Providers may use this form to assist in preparing fire escape routes and record fire drills.

14.4.35. ECE-CC-24 Emergency Phone List.
Providers may use this form to compile an emergency phone list.

14.4.36. ECE-CC-25 Medication Permission Slip.
Providers may use these permission forms with parents to record medication dosages and times.

14.4.37. DAY-0615 Corrective Action Plan.
This report may be generated by PATH whenever completion of a regulatory checklist reveals areas of non-compliance. The corrective action plan shall be sent to the provider as a formal notice that the provider is out of compliance and listing the steps that must be taken for the provider to correct areas of non-compliance.

14.4.38. W-9 Tax Identification Form.
This form will be completed at provider application/enrollment and signed by the provider. The CCR&R case manager will send the original to the DoHS Child Care Worker, who shall enter the appropriate information on the PATH tax information screen. The PATH provider case number shall be added to the top of the form and the form forwarded to Bureau for Family Assistance. A revised form will need to be completed by the provider whenever there is a name or address change, even if the provider moves out of West Virginia.

14.4.39. DAY-0618 Notification of Provider Approval Status.
This is a PATH-generated notice for in-home and unlicensed school-age child care providers who are exempt from regulation under WV Code, Chapter 49-2B, but must meet requirements to participate in the child care certificate program.

14.4.40. ECE-CC-26 Incident Report Form.
Providers may use this form to record and report incidents the result in injury to a child. Incidents must be verbally reported within 24 hours. Providers are requested to follow up in writing within 72 hours.

14.4.41. ECE-CC-27 Direct Deposit Information/Application.
CCR&R staff shall provide this form to all new providers enrolled for payment. The form explains the process for direct deposit and includes the application form that is to be returned to the Auditor's Office.

14.4.42. ECE-CC-30 Periodicity Schedule.

Child care providers are required to give a copy of this form, which contains a recommended schedule of health check-ups and immunizations, to each child care parent.

14.4.43. ECE-CC-31 Guide to Family Child Care

Child care regulatory specialists and CCR&R case managers may send this booklet to potential providers interested in becoming family child care providers.

14.5. Miscellaneous Forms and PATH Reports

14.5.1. DAY-0616 History of Non-Compliance Report

This report shall be generated by PATH upon request of a parent who requests information on substantiated complaints against the provider that are a matter of public record. The History of Non-compliance Report may be sorted by dates or by concerns identified during licensing review, monitoring visits or because of an investigation or a complaint investigation. Information on child abuse and neglect complaints shall not be included for distribution.

14.5.2. ECE-CC-20 IIU Referral Interview Guide

CCR&R and DoHS staff can use this form as a guide for recording child abuse and neglect complaints on child care centers.

14.5.3. ECE-CC-21 Protective Services Referral Interview Guide

CCR&R and DoHS staff can use this form as a guide for recording child abuse and neglect complaints on any type of child care provider other than child care centers.

14.5.4. IG-BR-29 Hearing/Grievance Record Information Form

This form is to be completed by the case manager when a client requests a hearing regarding a negative action decision on a case. The request is to be sent within 48 hours to the WV DoHS Office of OIG with the appropriate documentation.

14.5.5. ECE-CC-19 Child Care Repayment Agreement.

This form shall be completed whenever a provider or client is determined to have received services or payments to which they were not entitled, and the CCR&R is negotiating for repayment. The form shall be signed in duplicate, with one copy given to the client or provider and the other retained in the appropriate record. A copy shall also be sent to:

Division of Accounting and Reporting
Office of Operations
WV DoHS Bureau for Family Assistance
350 Capitol Street Suite 730
Charleston WV 25301-3711

14.5.6. ECE-68 Remittances to Local DoHS Offices

CCR&R staff shall complete this form on any returned checks or any re-payments that come into the CCR&R office. All items shall be completed. To enter the fund code, please look

at the client payment history in PATH which shows one of two fund types indicated below. The fund code for that type is in the right-hand column in the chart below.

Fund Type	Fund Code
Child Care & Development	5096-2020-2572-099-084
Title XX	5096-2020-2570-099-084

**Please note that the only change in codes is in the third number sequence (2572 or 2570). Also, the second sequence of numbers refers to the State of West Virginia fiscal year- 2020. As of July 1st, of each year, the fiscal year changes, so the fund code changes to reflect the fiscal year. As of July 1, 2020, please change to 2021 and change it each following year while we continue to do this by hand. Once completed, the form and the appropriate returned check or payments shall be submitted to the closest DoHS office.

14.5.7. BCF-PSRC Authorization and Release for Protective Services Record Check
This form will be given to the potential child care provider for completion. *(One copy for each member of the household over the age of 18.)* The form is to be returned to the CCR&R office for processing.