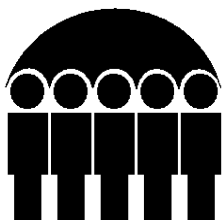


Revised July 6, 1999

Employees' Manual
Title 18
Chapter I

CHILD CARE ASSISTANCE



Iowa
Department
of
Human Services

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OVERVIEW

The Department provides assistance for parents to supplement their care by obtaining care and protection for children in or outside their homes for part of the day. Child care provides experiences for each child's social, emotional, intellectual, and physical development.

Child care services include supervision, food services, program and activities, and may include:

- ◆ Transportation.
- ◆ Comprehensive child development care
- ◆ Services to a child with special needs, such as adaptive equipment, more careful supervision, or special staff training.

Child care assistance is provided to the children of income-eligible parents who are absent for a portion of the day due to employment or participation in academic or vocational training or PROMISE JOBS activities. Assistance is available for a limited period of time to the children of a parent looking for employment or when the parent who normally cares for the child is absent from the home due to hospitalization, physical or mental illness, or death.

Child care services for a child with protective needs are provided without regard to income. To receive protective child care services, the family must meet specific requirements, and child care must be identified in the child's case plan as a necessary service.

Child care services are provided to people participating in activities approved under the PROMISE JOBS program and people who are recipients of the Family Investment Program (FIP) without regard to Child Care Assistance eligibility requirements if there is a need for child care services.

Child care may be provided in a licensed child care center, a registered family or group child care home, a nonregistered child care home, the child's own home, a relative's home, or by a child care facility which is exempt from licensing or registration.

The child care assistance covered in this chapter is funded with state child care assistance and protective funds and the federal Child Care and Development Fund. All requirements, policies, and procedures found in this manual apply, regardless of the funding source.

Legal Basis

The establishment, purpose, and general duties of the Department of Human Services are governed by Iowa Code Chapter 217.

The authority of the Department to regulate child care providers is found in Iowa Code Chapter 237A.

Departmental rules concerning child care assistance are found in 441 Iowa Administrative Code Chapters 170, “Child Care Services” and 130, “General Provisions.”

Chapter Organization

This chapter provides direction to workers with regard to:

- ◆ Determining eligibility, including taking applications and, when funds are determined insufficient, assessing applications for placement on waiting lists.
- ◆ Identifying the eligible child care provider.
- ◆ Establishing payment rates.
- ◆ Authorizing services, including completing the *Child Care Certificate*, developing the *Case Permanency Plan* for protective child care services, and opening the SRS case.
- ◆ Completing and approving provider invoices for payment.
- ◆ Reviewing eligibility.
- ◆ Taking adverse service actions.

Information on child care center licensing is found in XII-E and XII-E-Appendix.

Information on family child care home and group child care home registration is found in 12-F and 12-F-Appendix.

List of Requirements

Actions

Forms

Taking application

Child Care Assistance Application, 470-3624
Voter Registration Information

Determining eligibility and fee

Notice of Decision: Services, SS-1104-0
Documentation that child meets definition for special needs

Identifying eligible provider

Minimum Health and Safety Requirements for Nonregistered Child Care Home Providers, Comm. 95
Payment Application for Nonregistered Providers, 470-2890

Establishing payment rate

Child Care Certificate, 470-2959
For special needs rate, documentation that:

- Child meets special needs definition
- Provider is providing special needs services

Developing plans for protective day care

Case Permanency Plan
Individual program plan

Approving and entering invoices

Purchase of Services Provider Invoice, AA-2241-0

Reviewing eligibility

Child Care Assistance Application, 470-3624
Case Permanency Plan for protective child care
Notice of Decision: Services, SS-1104-0

Taking adverse service actions

Notice of Decision: Services, SS-1104-0

DETERMINING ELIGIBILITY

Legal reference: 441 IAC 130.3(234); 441 IAC 170.2(234)

Eligibility policies and procedures are organized into the following sections:

- ◆ Application, including application to be placed on a waiting list
- ◆ Need for service
- ◆ Financial eligibility
- ◆ Age
- ◆ Acceptance or denial of the application

Application

Legal reference: 441 IAC 130.2(234)

Families apply for child care assistance at the county Department of Human Services office where the family resides using form 470-3624, *Child Care Assistance Application*. The date of application is the date a signed and dated application is received in the county office. Accept applications made by:

- ◆ The applicant,
- ◆ The applicant's authorized representative, or
- ◆ Someone acting responsibly for the applicant, when the applicant is incompetent or incapacitated.

Obtain the applicant's signature. **Exceptions:** The following do not have to sign the application:

- ◆ Parents receiving court ordered services.
- ◆ Participants in PROMISE JOBS approved activities.

The application must be supported by a declaration of income made on form 470-3624.

Exception: Provide child care services to the following people without regard to income:

- ◆ People needing protective child care services.
- ◆ People who are participating in activities approved under the PROMISE JOBS program.
- ◆ People who are recipients of the Family Investment Program (FIP), or whose earned income was taken into account in determining the needs of the FIP recipient.

Note: If the Department has placed a family in FIP on suspension, the family continues to be eligible for child care assistance until their FIP has been canceled. The same applies to FIP families who don't get a grant because the grant amount is under \$10.

The applicant must provide verification of income. To verify income, request supporting documentation, such as pay stubs, employer statements, social security checks, child support payments. Document the income in the case file. Provide the applicant with a copy of the signed application.

Call to the attention of the juvenile court judge the requirements that must be met for a family to be eligible for protective child care services. (See **Need for Service**.) If the requirements are not met, and the court still orders protective care, approve the services and note the order in the case file. Complete an application and indicate "court-ordered" in the signature section.

Families already receiving child care assistance are not required to reapply when the family moves to a different county from the county where their application was approved. Transfer the case file to the county where the family now resides.

The following sections give more information on:

- ◆ Voter registration requirements in connection with child care assistance applications.
- ◆ Priority for child care services.
- ◆ Placement on a waiting list when child care assistance is not available.
- ◆ Administration of child care assistance waiting lists.

Voter Registration Procedures

Legal reference: 721 IAC Chapter 23

The Department is responsible for helping clients complete voter registration forms, and for mailing the forms to the county election office. (The actual voter registration occurs at the election office.) Issue voter registration forms with all *Child Care Assistance Applications*. See 18-Appendix for a copy of the voter registration form.

At each interview, ask if the client wants to register to vote. If the client has not filled out the voter registration form before the interview, have the client complete the form at the interview.

DETERMINING ELIGIBILITY

Application

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Iowa Department of Human Services

Title 18 Child Welfare

Chapter I Child Care Assistance

If the client wants to register, offer to help the client complete the form. Be careful when helping the client that you do not influence the client's voter registration options in any way. Review the client's rights as listed on the form.

If the client chooses not to check yes or no, leave the section blank and consider the client has chosen not to register to vote.

If the client chooses not to sign the form, print the client's name and the date where indicated, and initial the form.

Tear off the voter registration information section and give it to the client. Keep the declination part of the form. Follow your office procedures for handling the form after completion.

For a phone interview, ask the questions and send the form to the client for signature. No follow-up is necessary after the form has been mailed to the client. If the form is returned, follow your office procedures for handling the form.

Priority for Service

Legal reference: 441 IAC 130.2(7); 441 IAC 170.2(3)

The priority groups as established by the Legislature define which families receive services first. The amount of funds available determines the number of priority groups from whom applications will be taken.

The Department has the authority to implement waiting lists for child care assistance when funds are insufficient to serve additional families beyond those already receiving services and those requiring protective child care.

Participants in approved PROMISE JOBS activities and recipients of FIP, or those whose earned income was taken into account in determining the needs of FIP recipients, are eligible for child care assistance notwithstanding the lack of funding.

Note: When the Department determines that sufficient funds are available, neither the waiting list nor the priority group requirements apply.

As funds become available, families are approved for services in the following order of prioritization:

1. Families who are at or below 100 percent of the federal poverty level whose members are employed at least 28 hours per week and parents with a family income at or below 100 percent of the federal poverty level who are under the age of 21 and are participating in an educational program leading to a high school diploma or equivalent.
2. Parents with a family income at or below 100 percent of the federal poverty level who are under the age of 21 and are participating at a satisfactory level in an approved training program or in an education program.
3. Families with an income of more than 100 percent but not more than 140 percent of the federal poverty level whose members are employed at least 28 hours per week.
4. Families with an income at or below 175 percent of the federal poverty level whose members are employed at least 28 hours per week or are participating in an approved training or education program and who have a special needs child as a member of the family.

Note: People whose employment averages 28 hours per week during the month meet the employment requirement. In a two-parent household, both parents must fully meet the conditions of age and of employment or participation in an educational program. See **Financial Eligibility** for the definition of a child with special needs.

The exceptions to placement on the waiting list are as follows:

- ◆ Families who are eligible for protective child care services.
- ◆ Families who are already receiving child care assistance when a newborn arrives. The newborn is approved for services when the family reports the change. (This policy also applies when a change in circumstances for a family already receiving services results in the need for care for a child not previously served.)
- ◆ Recipients of FIP or those whose earned income was taken into account in determining the needs of FIP recipients.
- ◆ Participants in approved PROMISE JOBS activities.

Note: When families lose Transitional Child Care eligibility after July 1, 1999, compare their income against 140% of the federal poverty guidelines. These families are subject to any waiting list requirements in effect. (See **Financial Eligibility**). Approve the family for services if they meet the eligibility requirements.

Application for Placement on a Waiting List

Legal reference: 441 IAC 130.2(7)

When funds are insufficient to serve all families needing services, Central Office will direct county offices to post a notice in a highly visible location in the waiting area that:

- ◆ Informs families that funds are not available for child care services.
- ◆ Describes the requirements that a family must meet to apply to go on a waiting list.

Note: Participants in approved PROMISE JOBS activities and recipients of FIP, or those whose earned income was taken into account in determining the needs of FIP recipients, are not subject to the posting of lack of funding or waiting lists.

Take applications from families who meet the specific requirements of the priority group for which applications are being taken. If a family does not appear to meet the priority group requirements, but requests to make an application, take the application.

Assess eligibility based on the requirements of the priority group:

1. At application to be placed on a waiting list.

Use form SS-1104-0, *Notice of Decision: Services*, to notify the applicant that services are denied because funding is not available. Under explanation of action, inform the applicant whether the family meets the criteria in the priority group and whether the family will be placed on a waiting list. If the family meets the criteria, inform the family on the *Notice of Decision* that they will be notified when funding is available.

2. When funds are available to serve families on the waiting lists.

When funds are available to serve families on the waiting list, notify families to reapply. Assess the new application to determine that the family still meets the priority group requirements. If so, approve the family for services.

Central Office determines that child care funds are insufficient to serve new applicants. The county office posts a notice that applications to be placed on a waiting list are being taken from families who meet the requirements in Priority Group 1.

The J family is a five-member, two-parent household whose combined income is less than 100 percent of the federal poverty guidelines. Mrs. J works an average of 30 hours per week during the month at minimum wage. Mr. J works 32 hours a week at minimum wage. The Js apply for child care assistance for their three children and are placed on the waiting list.

Four months later, funds are determined available to serve families who meet the requirements in the first priority group. The county office notifies families on the waiting list to reapply if they still need services. The J family reapplies. Although Mrs. J's work schedule has become more stable, her work hours have been reduced. She is now working only 20 hours a week.

The Js no longer meet the requirement of Priority Group 1 that both parents in a two-parent household be employed at least 28 hours per week. The application cannot be approved at this time.

Once approved, the family is not required to meet the priority group requirements at the next scheduled review or redetermination. Eligibility continues as long as the eligibility requirements are met. This includes need for service, financial eligibility, and age of the child. (See **DETERMINING ELIGIBILITY**.)

Regional Administration of Waiting Lists

Legal reference: 441 IAC 130.2(7)

Regional offices are responsible for maintaining the region-wide waiting lists. The service worker or the worker's designee must contact the regional office by the end of the second workday after the application is received.

Regional office staff must enter the family on the regional list by the end of the third workday. Enter each family on the list according to the eligibility priority and in the sequence of when the application was date-stamped in the county office.

If more than one application is received at one time in the same priority group, enter the family on the list on the basis of the day of the month of the birthday of the oldest eligible child, lowest number being first on the list. Any subsequent tie is decided by the month of birth, January being month one and the lowest number.

Need for Service

Legal reference: 441 IAC 170.2(2)“b”

Determine the need for child care assistance by assessing whether the child or parents of the child meet one or more of the following requirements:

- ◆ Training.
- ◆ Employment.
- ◆ Child protection.
- ◆ Parental absence.
- ◆ Seeking employment.
- ◆ Participant in approved PROMISE JOBS activity. (PROMISE JOBS workers determine participants’ child care needs.)

These requirements are described in detail in the following sections: A family must meet at least one of the requirements in its entirety. A parent may meet more than one need for service fully. For example, a parent may be attending school full time and working 28 hours a week. Approve child care for both requirements. See **AUTHORIZING SERVICES** for direction for calculating the units of service.

Training

Legal reference: 441 IAC 170.2(2)“b” and 170.2(4)

Families are eligible for child care assistance when the parent or parents are in either approved vocational or academic training. The academic or vocational training must culminate in a specific goal, such as high school completion, improved English skills, or the development of specific academic or vocational skills.

Training must be on a full-time basis. The training facility defines what is considered full time. Approve a part-time plan only if the number of credit hours to complete training is less than full-time status, the required prerequisite credits or remedial course work is less than full-time status, or training is not offered on a full-time basis.

Approve training for high school completion activities, adult basic education, GED, English as a second language, a college program which leads to an associate of arts degree, and a postsecondary education, up to and including a baccalaureate degree program.

Child care provided while the parent participates in postsecondary education or vocational training has a 24-month lifetime limit. A month is defined as a fiscal month or part thereof. A fiscal month generally has starting and ending dates falling within two calendar months but counts as one month. Example:

Two semesters that are scheduled from August 28 through December 15 and from January 15 through May 10 total eight fiscal months. If the parent does not attend summer school, count no additional fiscal months until the fall semester begins.

Time spent in high school completion, adult basic education, GED, or English as a second language does not count toward the 24-month limit. PROMISE JOBS child care allowances provided while the parent is participating in PROMISE JOBS components in postsecondary education or vocational training count toward the 24-month limit.

Any participant of the Family Investment Program who is in academic or vocational training and on a PROMISE JOBS waiting list for expense allowances including child care is not eligible for subsidy for the hours in academic or vocational training under the Child Care Assistance Program.

Participants in the Family Investment Program who are on the PROMISE JOBS waiting list are provided with form 470-2925, *Notice of Waiting List Placement*. Request this form from the participant to verify their placement on the waiting list.

If the participant does not have a copy of the form, secure this information by following the process established by your county office for communicating with the local PROMISE JOBS office.

Note: When funds are determined unavailable for new applicants, some families must meet the specific requirements of the priority group from which applications are being taken to go on the waiting list. See **Priority for Service**.

Nonapprovable Training

Legal reference: 441 IAC 170.2“b”(1)

The fact that a person requests that child care assistance be paid while attending a specific training program does not mean that you must approve the training program. Use the *Notice of Decision: Services* to inform the client that the request for child care assistance to be paid for training is denied if you are not approving the training program.

Do not approve a training plan in any of the following situations:

- ◆ The course of training is one that the client has previously completed.
- ◆ Completion of the training program results in a job paying less than minimum wage.
- ◆ The client was previously unable to maintain the cumulative grade point average required by the training facility in the same training for which application is now being made. **Note:** This policy does not apply to parents under age 18 who are completing high school.
- ◆ The training is in an occupational area where available labor market statistics indicate that prospects are low for job availability and employment paying enough to lead to self-sufficiency for the family.

When you deny child care assistance for this reason, document the source of your labor market statistics and the basis for your decision. Contact either your local PROMISE JOBS office or Iowa Work Force Development office for current information available on labor market statistics.

You may make exceptions when:

- The client has a job offer before entering the training, or
- The client is willing to relocate after training to an area where there is employment potential.

Clients willing to relocate must provide documentation from an Iowa Workforce Development Center, private employment agency, or employer that jobs in that occupation paying at least minimum wage are available in the locale specified by the client.

- ◆ A client who already possesses a baccalaureate degree or graduate degree wants additional college course work, unless the course work is to obtain a teaching certificate or to complete continuing education units and will not lead to a masters or other advanced degree.

“College course work” is defined as courses which are academic in nature and generally are completed as part of a degree program. Clients who possess such degrees may be approved for services to attend vocational training courses.

“Vocational training” is defined as a program of study generally offered at a community college or a similar training institution that prepares people to perform specific skills, such as auto repair or clerical skills.

Not all courses offered at a community college are considered vocational training. Most community colleges offer associate degree programs that prepare a person to transfer to a four-year institution for completion of a baccalaureate degree. Do not approve such programs for clients who already have a baccalaureate degree.

The location where training is offered, be it a community college or other institution, is not relevant to this determination. Eligibility is based on the nature of training, which must be vocational and not lead to a baccalaureate, postgraduate, or “academic” associate degree.

Employment

Legal reference: 441 IAC 170.2(2)“b”

Families are eligible for child care assistance when the parent or parents are employed 28 or more hours per week or an average of 28 or more hours per week during the month. Assistance may be provided for:

- ◆ The hours of employment of a single parent, or
- ◆ The hours of employment when both parents in a two-parent home are working during the same hours.

If the applicant is a current or former Transitional Child Care (TCC) recipient who is employed, verify through IM which months the person received TCC benefits. If eligibility criteria are met, including income and need for service, approve the family so there is no interruption in services. Expedite the handling of applications from TCC recipients to ensure continuous benefits.

Note: Participants in approved PROMISE JOBS activities and recipients of FIP, or those whose earned income was taken into account in determining the needs of FIP recipients, are eligible for child care assistance regardless of hours of employment, as long as there is a need for child care services.

Note: If the applicant is a foster parent who needs child care services to remain employed, refer to 18-D, **Tangible Goods, Child Care, and Ancillary Services**, for procedures for approval and payment for child care services to foster children.

Child Protection

Legal reference: 441 IAC 170.2(3)“d”

Families are eligible for child care assistance when child care is part of a protective service plan to prevent or alleviate child abuse or neglect. A child is eligible for protective child care when the child has a case plan that identifies protective child care as a required service and is a member of a family with either:

- ◆ A confirmed case of child abuse; or
- ◆ Episodes of family or domestic violence or substance abuse which place the child at risk of abuse or neglect and have resulted in a service referral to family preservation or family-centered services.

This policy requires that a family be referred to a DHS service worker who has:

- ◆ Evaluated the family's need for supportive family preservation or family-centered services, and
- ◆ Made appropriate plans to offer or arrange services.

This policy does not require the family to be receiving family preservation or family-centered services, or that DHS be the purchaser of the supportive services.

If the DHS service worker recommends services that can be provided through another source and these services are adequate to meet the family's needs, the requirements for the protective care are met. Examples include allied services, such as homemaker, and counseling and therapy services available through private insurance or Medicaid.

Document in the file the expected outcome of protective child care services.

Parental Absence

Legal reference: 441 IAC 170.2(2)“b”

Families are eligible for child care assistance when the parent who normally cares for the child is absent from the home due to inpatient hospitalization, or outpatient treatment for chemotherapy, radiation or dialysis because of physical illness, or due to mental illness or death.

Care is limited to a maximum of one month, unless extenuating circumstances are justified and approved after case review by the regional administrator.

Seeking Employment

Legal reference: 441 IAC 170.2(2)“f”

Families are eligible for child care assistance when the parent or parents are looking for employment. Child care for job search is limited to only those hours the parent is actually looking for employment and travel time. Approve a job search plan limiting child care to a maximum of 30 working days in a 12-month period. PROMISE JOBS participants must request additional hours if needed. Those additional hours must be approved by the PROMISE JOBS worker.

Approve child care in two-parent families only during the hours both parents are looking for employment at the same time or during one parent's employment and one parent's looking for employment. Request documentation of job search contacts.

Financial Eligibility

Legal reference: 441 IAC 130.3(234); 441 IAC 170.2(1)

Child care services are provided without regard to income for:

- ◆ Families with a child with protective needs.
- ◆ Participants in PROMISE JOBS-approved activities.
- ◆ Recipients of FIP.
- ◆ People whose income was considered in determining the needs of a FIP recipient.

Other families are financially eligible for child care services when their monthly gross income, according to family size, is no more than the following amounts:

<u>MONTHLY GROSS INCOME</u>		
<u>Family Size</u>	<u>Column A (140%)</u>	<u>Column B (175%)</u>
1 member	\$1002	\$1253
2 members	1355	1693
3 members	1707	2134
4 members	2059	2574
5 members	2412	3014
6 members	2764	3455
7 members	3116	3895
8 members	3469	4336
9 members	3821	4776
10 members	4173	5216
11 members	4526	5658
12 members	4878	6099
13 members	5230	6294
14 members	5583	6417
15 members	5935	6541
16 members	6287	6664
17 members	6640	6788
18 members	6911	6911
19 members	7034	7034
20 members	7158	7158

For column A, add \$352 for each additional person over 10 members.
 For column B, add \$123 for each additional person over 10 members.

Note: See **Fee Schedule** for the assessment of fees.

Documenting Special Needs

Legal reference: 441 IAC 170.1(234)

Before assessing the family's income against Column B, request documentation from the family to substantiate the child needing services meets the definition for special needs. A child with special needs has one or more of the following conditions:

- ◆ The child has been diagnosed by a physician or by a person endorsed for service as a school psychologist by the Iowa Department of Education to have a developmental disability which:
 - Substantially limits one or more major life activities, and
 - Requires professional treatment, assistance in self-care, or the purchase of special adaptive equipment.
- ◆ The child has been determined by a qualified mental retardation professional to have a condition which impairs the child's intellectual and social functioning.
- ◆ The child has been diagnosed by a mental health professional to have a behavioral or emotional disorder characterized by situationally inappropriate behavior which:
 - Deviates substantially from behavior appropriate to the child's age, or
 - Significantly interferes with the child's intellectual, social, or personal adjustment.

Documentation to substantiate that a child meets the definition of child with special needs may include:

- ◆ A copy of an Individual Education Plan.
- ◆ A psychological evaluation.
- ◆ A statement that the child meets the diagnosis from:
 - A physician.
 - A qualified mental retardation professional.
 - A mental health professional.
 - A person endorsed for service as a school psychologist by the Iowa department of Education.

Family Size

Legal reference: 441 IAC 130.1(234)

The family includes the following members:

- ◆ Legal spouses (including common law) who reside in the same household.
- ◆ Natural, adoptive, or step mother or father, and children who reside in the same household.
- ◆ An individual or a child who lives alone or who resides with a person, or persons, not legally responsible for the child's support.

A companion in the home is not considered in determining family size or income, unless there is a common child.

The composition of the family does not change when one or more of the family members is temporarily absent from the household. Persons who meet the definition of temporary absence are considered when determining family size. "Temporarily absent" means:

- ◆ A medical absence anticipated to be less than three months.
- ◆ An absence for the purpose of education or employment.
- ◆ Absence of a family member who intends to return home within three months.

Note: Consider a child residing with a person or persons not legally responsible for the child's support as a family of one. Consider only the child's income when determining financial eligibility.

Excluded Income

Legal reference: 441 IAC 130.3(3)

The following are excluded from the computation of monthly gross income:

- ◆ Certain earnings, including
 - Earnings of a child under 14 years of age. (No inquiry shall be made.)
 - Payments or earnings received by any youth under the Job Training Partnership Act of 1982.
 - The first \$65 and 50% of the remainder of income at a sheltered workshop or work activity center.

- ◆ The income of the parents with whom teen parents reside.
- ◆ The income spent on any regular, ongoing cost that is specific to that child's disability. **Note:** A family must be applying for child care services for the special needs child in order to exclude this income. The family may also be applying for child care services for other eligible children in the family.
- ◆ Money borrowed, and gifts. This includes:
 - Loans and grants, such as scholarships, obtained and used under conditions that preclude their use for current living costs.
 - Any grant or loan to any undergraduate student for educational purposes made or insured under the Higher Education Act.
- ◆ Capital gains and money received from sale of property, such as stocks, bonds, a house, or a car (unless the person was engaged in the business of selling such property, in which case the new proceeds would be counted as income from self-employment).
- ◆ Lump-sum inheritances or insurance payments or settlements. This includes:
 - Per capita payment to, or funds held in trust for, any individual in satisfaction of a judgment of the Indian Claims Commission or the Court of Claims.
 - Payments made pursuant to the Alaska Native Claims Settlement Act to the extent such payments are exempt from taxation under Section 21(a) of the Act.
 - Any payment received under the Uniform Relocation Assistance and Real Property Acquisition Policies of 1970.
 - Agent Orange Settlement payments.
- ◆ Use of personal resources, such as:
 - Withdrawals of bank deposits.
 - Tax refunds.
 - Home produce used for household consumption.

- ◆ Certain public assistance income, including:
 - The value of the coupon allotment in the Food Stamp Program.
 - The value of USDA donated foods.
 - The value of supplemental food assistance under the Child Nutrition Act of 1966 and the special food program for children under the National School Lunch Act, as amended.
 - The value of payments to vendors or vouchers under the pilot FIP diversion program and the statewide Family Self-Sufficiency Grant program.
- ◆ Payments from the Low-Income Home Energy Assistance Program. Stipends received by persons for participating in the Foster Grandparent program under Public Law 93-113, Section 418, Part B.
- ◆ Moneys received under the federal Social Security Persons Achieving Self-Sufficiency (PASS) program or the Income Related Work Expenses (IRWE) program.
- ◆ The income received from a Supplemental Security Income (SSI) recipient who is the parent of a FIP recipient or one whose earned income was taken into account in determining the needs of the FIP recipient.
- ◆ The income of a child who would be in the FIP eligible group except for the receipt of SSI.

Countable Income

Legal reference: 441 IAC 130.3(3)

The nonexempt income of any person included in the family size is used in determining the family's income.

Convert weekly income to monthly income by multiplying by 4.3. Convert biweekly income to monthly income by multiplying by 2.15.

When monthly income fluctuates, use an average of the income for at least three months, but for no more than the past six months.

Determine monthly gross income for a migrant seasonal farm worker by calculating the total amount of income earned in the 12-month period preceding the date of the application and dividing the total amount by 12. Apply this calculation when the applicant:

- ◆ Performs seasonal agricultural work which requires travel so that the applicant is unable to return to a permanent residence within the same day.
- ◆ Derives most of the income from seasonal agricultural work performed during the months of July through October. “Most” means a simple majority of the income.

The monthly gross income is the monthly sum of income received by a person from the following sources that are identified by the U.S. Census Bureau in computing the median income:

- ◆ **Alimony.**
- ◆ **Child support.**
- ◆ **Dividends, interest on savings or bonds, income from estates or trusts, net rental income or royalties:** Dividends from stock holdings or membership in associations, interest on savings or bonds, periodic receipts from estates or trust funds, receipts from boarders or lodgers, and net royalties and net income from rental of a house, store or other property to others. Net rental income is that income remaining after expenses such as: taxes, interest, or borrowed principal to purchase property, insurance and upkeep of the property.
- ◆ **Money, wages or salary:** Total money earnings received from work performed as an employee, including wages, salary, Armed Forces pay, commissions, tips, piece-rate payments, and cash bonuses earned, including sheltered workshop earnings. This is the amount before deductions are made for taxes, bonds, pension, union dues, and similar purposes.
- ◆ **Net income from farm self-employment:** Gross receipts minus operating expenses from a person’s operation of a farm as an owner, renter or sharecropper.

Gross receipts include the value of all products sold, government crop loans, money received from the rental of farm equipment to others, and incidental receipts from the sale of wood, sand, gravel and similar items. Operating expenses include costs of feed, fertilizer, seed and other farming supplies.

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- ◆ **Net income from nonfarm self-employment:** Gross receipts minus expenses from one's own business, professional enterprise or partnership. Gross receipts include the value of all goods sold and services rendered. Expenses include cost of goods purchased, rent, heat, lights, power, depreciation, wages and salaries paid, business taxes (not personal income taxes), and similar costs. The value of saleable merchandise consumed by the proprietors of retail stores is not included as part of net income.
 - ◆ **Pensions and annuities:** Pensions or retirement benefits paid to a retired person or the person's survivors by a former employer or by a union, either directly or through an insurance company; periodic receipts from annuities or insurance.
 - ◆ **Public assistance or welfare payments:** Public assistance payments such as FIP, SSI, State Supplementary Assistance, and general assistance. This includes cash payments received under the pilot FIP diversion program and the statewide Family Self-Sufficiency Grant program.
 - ◆ **Social Security:** Social Security pensions and survivors benefits and permanent disability insurance payments made by the Social Security Administration, before deductions for medical insurance, and railroad retirement insurance checks from the U.S. Government.
 - ◆ **Unemployment compensation:** Compensation received from government insurance agencies or private companies during periods of unemployment and any strike benefits from union funds.
 - ◆ **Workers compensation:** Compensation received periodically from private insurance companies for injuries incurred at work. The cost of this insurance must have been paid by the employer and not by the person.
 - ◆ **Veterans benefits:** All monies paid to, or in behalf of, a person because of veteran's status must be counted as income, irrespective of the purpose of such payments. Included is money paid periodically by the Veterans Administration to disabled members of the armed forces or to survivors of deceased veterans for education and on-the-job training, as well as so-called "refunds" paid to ex-service persons as G.I. insurance premiums.

Age

Legal reference: 441 IAC 170.2(2)

Children are eligible for child care services up to age 13. **Exception:** Children who are part of the FIP household who are 13 years and older may be eligible for child care assistance benefits if there are special circumstances surrounding the child in need of child care. The child's parent or guardian must submit a request for an exception to the PROMISE JOBS coordinator for PROMISE JOBS participants or the service administrator for service cases.

Children with special needs are eligible up to the age of 19 years. Refer to **Financial Eligibility: Documenting Special Needs** for the definition of a child with special needs.

Acceptance or Denial of Application

Legal reference: 441 IAC 130.2(4), 130.5(1), and 170.6(234)

Approve or deny the application for child care services within 30 days from the date the signed and dated application form is received in the county office.

Deny services when:

- ◆ The family does not meet the eligibility requirements, including need for service, financial eligibility, or age of the child needing services.
- ◆ There is another community resource (person, agency, program, or funding source) available to provide the same or similar service free of charge to the family that will meet the family's needs.
- ◆ Funding is not available to provide the service. **Exception:** People participating in approved PROMISE JOBS activities and recipients of FIP, or those whose earned income was taken into account when determining the needs of a FIP recipient, are not subject denial for lack of funding.

Use form SS-1104-0, *Notice of Decision: Services*, to notify the applicant of approval or denial of services. **Exception:** When services are ordered by the court, the court order provided by the court and the *Case Permanency Plan* provided by the Department serve as the notification.

The written notice must be “adequate.” This means that it must include:

- ◆ A statement of what action is being taken;
- ◆ The reason for the intended action;
- ◆ The manual chapter number and subheading supporting the action;
- ◆ An explanation of the applicant’s right to appeal; and
- ◆ The circumstances under which the service is continued when an appeal is filed.

Issue the NOD approving or denying services to the applicant and the child care provider (when care is already being provided) on the date the determination is made.

IDENTIFYING THE PROVIDER

The policies and procedures for identifying eligible providers and the requirements that must be met by a provider are organized into the following sections:

- ◆ Eligible providers
- ◆ Provider requirements
- ◆ Individual program plan (IPP)

Eligible Providers

Legal reference: 441 IAC 170.4(3)

A parent can choose care from:

- ◆ A licensed child care center.
- ◆ A registered family or group child-care home.
- ◆ A nonregistered family child-care home.
- ◆ The child’s own home.
- ◆ A relative’s home.
- ◆ A child care facility which is exempt from licensing or registration.

The only child care facility exempt from licensing or registration which is eligible for payment is a child care program operated by or under contract to a public or nonpublic school accredited by the Department of Education.

The parent indicates the choice of provider on form 470-2959, *Child Care Certificate*. There are three limits to parental choice of provider:

- ◆ When a child is approved for protective child care services, approve the parent's choice of a licensed or registered child care provider when it is determined that choice is in the best interest of the child. Consider the child's needs when child care is part of a protective services plan to prevent or alleviate child abuse or neglect. Example:

The worker determines that a child is in need of social skills and language development and that the child would benefit more from placement in a child care center where the peer group experience is optimal. The parent chooses a registered home, where the child is the only child receiving care besides the provider's own child.

The child care arrangement chosen by the parent is not approved, because it is determined not to be in the best interest of the child.

- ◆ Approve in-home care only when the family has three or more children who require care. If the parent has chosen in-home care, but does not meet the above requirements, the parent must select another type of care.

All of the children in the family requiring child care must receive their care from the in-home provider. However, the children need not all receive the same number of units of service in a 24-hour period. For example, the care may include both before- and after-school care to the school age children in the family and full-day care to the preschool children in the family.

- ◆ Do not approve providers who live outside Iowa, because the Department cannot pay providers who live outside of the state.

Provider Requirements

Legal reference: 441 IAC 170.4(3)

Child care providers must meet specific requirements in order to be eligible for payment. The requirements vary according to the type of provider. Verify the status of the provider to know what forms must be provided for signature.

Do not approve payment until you have verified that the child care provider meets the requirements listed below:

<u>Type of Provider</u>	<u>Requirement</u>
Child Care Center	<ul style="list-style-type: none"> ◆ <i>Certificate of License, 470-0618</i> ◆ <i>Child Care Certificate, 470-2959</i>
Registered Group Child Care Home	<ul style="list-style-type: none"> ◆ <i>Certificate of Registration, 470-3498</i> ◆ <i>Child Care Certificate, 470-2959</i>
Registered Family Child Care Home	<ul style="list-style-type: none"> ◆ <i>Certificate of Registration, 470-3498</i> ◆ <i>Child Care Certificate, 470-2959</i>
In-Home Care	<ul style="list-style-type: none"> ◆ <i>Minimum Health and Safety Requirements for Nonregistered Child Care Home Providers, Comm. 95</i> ◆ <i>Payment Application for Nonregistered Providers, 470-2890</i> ◆ <i>Non-Law Enforcement Record Check Request, Form A, 595-1489</i> ◆ <i>Request for Child Abuse Information, 470-0643</i> ◆ <i>Child Care Certificate, 470-2959</i>

Nonregistered Family Care Home	<ul style="list-style-type: none">◆ <i>Minimum Health and Safety Requirements for Nonregistered Child Care Home Providers</i>, Comm. 95◆ <i>Payment Application for Nonregistered Providers</i>, 470-2890◆ <i>Non-Law Enforcement Record Check Request Form A</i>, 595-1489◆ <i>Non-Law Enforcement Record Check Billing Form</i>, 595-1494◆ <i>Request for Child Abuse Information</i>, 470-0643◆ <i>Child Care Certificate</i>, 470-2959
Exempt Facility	<ul style="list-style-type: none">◆ <i>Child Care Certificate</i>, 470-2959

An exempt facility (a child care program operated by or under contract to a public or nonpublic school accredited by the Department of Education) needs only the *Child Care Certificate*.

Note: A relative who is a registered provider must follow the requirements set forth for registered child care providers. A relative who is a nonregistered provider must follow the requirements set forth for nonregistered family child care providers.

Payment Application for Nonregistered Providers

Legal reference: 441 IAC 170.4(3)“f” and “h”

Any person who provides child care services to a child care assistance recipient, and anyone living in that home or who has access to a child when the child is alone, must have successfully completed a criminal record check and a child abuse registry check.

When a family names a person they wish to have provide child care for them, check to see if the person is already a registered or licensed child care provider.

IDENTIFYING THE PROVIDER

Provider Requirements

Revised June 20, 2000

Iowa Department of Human Services

Title 18 Child Welfare

Chapter I Child Care Assistance

If the family or in-home provider is not registered, issue the provider:

- ◆ The pamphlet Comm. 95, *Minimum Health and Safety Requirements for Nonregistered Child Care Home Providers* (also available in Spanish).
- ◆ Form 470-2890, *Payment Application for Nonregistered Providers*.
- ◆ Form 595-1489, *Non-Law Enforcement Record Check Request Form A* (also available in Spanish).

In-home care and nonregistered child care home providers must sign and return forms 470-2890 and 595-1489 to the county office before payment will be made. (If the person is a relative, only form 595-1489 is required.)

Form 470-2890 is completed:

- ◆ When the provider is applying for payment for the first time (new),
- ◆ For the annual renewal, or
- ◆ When there is a change in the information provided on the form.

The forms are to be returned within 15 days of receipt. However, a provider's failure to return the forms within 15 days of receiving them is not cause for denying an application for services. Inform the parent that the provider has not returned the forms. Advise the parent to secure the signed forms from the provider or to select another provider.

Signature on form 470-2890 certifies the provider's understanding of and compliance with the conditions and requirements for nonregistered providers. These include:

- ◆ Minimum health and safety requirements.
- ◆ Limits on the number of children for whom care may be provided.
- ◆ Unlimited parental access to the child during hours when care is provided.
- ◆ Conditions that warrant nonpayment.
- ◆ Prohibitions on persons convicted of a crime or with a founded and registered child abuse providing child care.

When the provider returns the signed form 470-2890, make sure the provider understands that payment will be held until the criminal records check and the child abuse registry checks are returned as all clear, or until the evaluation is completed and gives permission for the person to provide child care.

Complete a separate form 595-1489, *Non-Law Enforcement Record Check Request Form A*, for each last name which needs to be checked, including maiden names and previous married names. This includes the provider, each person in the provider's household who is aged 14 or over, and anyone who has access to a child when the child is alone.

Note: If the provider goes into the child's own home (an in-home provider), the checks need to be performed on the provider only, and not on the provider's family who will have no contact with the children. If the provider's family members will have contact with the children when no one else is around, they do need to have the record checks completed.

At the same time, complete form SS-1606-0, *Request for Child Abuse Information*, for the same people and send it to the county Department worker assigned to do child abuse registry checks. When form SS-1606-0 is completed, the county DHS office will return the form to you.

Send form 595-1489, *Non-Law Enforcement Record Check Request Form A*, to Division of Criminal Investigations at the address given you on the form. Each time you send a *Request*, it must be accompanied by a *Non-Law Enforcement Record Check Billing Form*, 595-1494. The *Request* and the *Billing Form* may also be faxed to DCI at the number given on the *Request* - 515-242-6876.

If you send several *Requests* at the same time, send one *Billing Form*, completed to show how many names you are requesting be checked in that batch of forms.

Note: Send these forms directly to the Division of Criminal Investigations (DCI). If they are sent to ACFS Child Care Unit, they will be returned to you for submission directly to DCI. If you send *Form A*'s without a *Billing Form*, DCI will return them to you, incomplete, and requiring \$13 for each last name requested.

When the criminal records check requested is completed, DCI will return the form **by regular mail** to the office shown in the upper right corner of the form, under "From:_____".

Note: While you may submit the forms by regular mail OR by fax, they will be returned to you by regular mail ONLY.

When both types of checks have been returned and all are clear, proceed with the regular processes.

If any form is returned showing either a criminal conviction or a founded and registered child abuse, send that form to the service team which does the evaluations for registered child care homes and licensed child care centers. (This team varies from region to region.)

The process to be followed by the evaluation team is the same process already being used in the county or regional office. The evaluation team will notify the child care assistance worker of the results of the evaluation.

If the evaluation is returned stating the person is not permitted to provide child care, or is not permitted to reside in a child care home, the provider **is not eligible** for payment. Send a *Notice of Decision* informing the person that the person is not eligible for payment of child care services using public funds or is not permitted to reside in a home providing such child care.

This notice should state that the person is also prohibited from providing any child care or residing in any home which does provide child day care. Use Iowa Code Section 237A.5(6) and 441 Iowa Administrative Code 170.4(3)“h” as the legal reference. Send a copy of the notice to the county attorney and the ACFS Child Care Unit.

Also notify the client that although they are eligible for child care, their provider is not approved due to not meeting health and safety requirements, so they must choose another provider.

Individual Program Plan

Legal reference: 441 IAC 170.4(6)

The Child Care Certificate requires the provider to develop an individual program plan (IPP) when the child needs care as part of a protective service plan to prevent or alleviate child abuse or neglect.

The IPP must be developed in cooperation with the parents of the child receiving services and the service worker within 30 days after services begin.

Assist the provider in the development of the IPP so that it is supportive of the case permanency plan and contains:

- ◆ Goals and objectives to be achieved with the child during the delivery of services.
- ◆ Specific services to be provided to the child.
- ◆ Time frames for review.

Review the provider's IPP along with the *Case Permanency Plan* every six months or more frequently if called for in the *Case Permanency Plan*.

The provider is also responsible for a quarterly progress report and a termination summary.

SAMPLE IPP

A. Description of Service Need

Ann needs protective child day care services daily. Ann needs services which will provide a regular routine and consistent guidance in appropriate behavior. She needs a program that will consist of learning experiences and a secure atmosphere with positive encouragement daily.

B. Goals

1. Short Term

- a. Introduce appropriate social behaviors.
- b. Help Ann feel secure with her new surroundings.
- c. Help Ann learn to play with children her own age.

2. Long Term: Help Ann to:

- a. Use language to express feelings rather than aggressive behavior.
- b. Improve gross and fine motor skills.
- c. Learn acceptable behavior.

C. Objectives and measurable methods of progress.

1. Ann will attend full day care five days a week. Child day care will provide Ann opportunities to take part in learning experiences, free play, and sharing meals with children her own age. She will receive guidance on a one-to-one basis with the staff when necessary.
2. A record will be kept for improved behavior.

D. Service Components

1. Two half-day units per day, Monday through Friday, will be provided.
2. Center staff will be responsible for the provision of these services.

E. Time Frame

The IPP will be reviewed quarterly and submitted to DHS.

ESTABLISHING PAYMENT RATE

Legal reference: 441 IAC 170.4(7)

The child care rate tables for basic and special needs care (see **Maximum Payment Rates**) represent statewide maximum rate ceilings derived from a market rate survey of child care providers.

Payment policies are organized into the following sections:

- ◆ Method for calculating a half-day rate
- ◆ Rate of payment
- ◆ Other payment policies
- ◆ Appeal of rate calculation

Method for Calculating a Half-Day Rate

To establish the provider's rate of payment, first determine if the provider already has a rate with the Department. Verify the rate by checking the POSP screen of the Purchase of Service System (POSS). This can be done by provider number, name, or county. Refer to the Third Edition of the *Purchase of Service System Handbook* or the Purchase of Service System HELP screen for complete instructions.

There may be circumstances when a provider does not have a rate. Examples:

- ◆ A provider who has never provided services to a child whose care is subsidized by the Department.
- ◆ A provider who has a rate for one age group, but is now expanding to cover additional age groups.

First establish whether the provider has a half-day rate. If the provider does not have a half-day rate, calculate a half-day rate by dividing the provider's full-day rate by 2. If the provider has neither a half-day nor full-day rate, calculate a half-day rate by multiplying the provider's hourly rate by 4.5.

Use this method for establishing the half-day rate for basic and special needs care. However, refer to **Special Needs Rate** for the conditions that must be met before the special needs rate can be approved.

Exception: In-home care is paid at the minimum wage amount. The half-day rate is \$25.75 (the current hourly rate of \$5.15 times five hours).

Approve the half-day rate providing the following policies are met:

- ◆ No rate can be approved that is above the maximum rate applicable to the type of care, the provider, and the age group.
- ◆ No rate can be approved that exceeds the rate the provider charges a private pay individual.
- ◆ No more than one rate is approved per provider for each age group for basic and for special needs care.

Maximum Payment Rates

The following definitions apply in the use of the rate tables:

“**Child care center**” means a licensed child care center or a child care facility exempt from licensing or registration (a child care program operated by or under contract to a public or nonpublic school accredited by the Department of Education).

“**Registered group home**” means a group child care home that has received a certificate of registration from the state.

“**Registered family home**” means a home that has received a certificate of registration from the state.

“**Nonregistered family home**” means a family child care home (including relative care) that is not registered with the state.

“**Infant and toddler**” means a child aged two weeks to two years.

ESTABLISHING PAYMENT RATE**Maximum Payment Rates**

Revised June 20, 2000

Iowa Department of Human Services

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“**Preschool**” means a child aged two years to school age.

“**School aged**” means a child in attendance in full-day or half-day classes, including kindergarten.

Basic Care Rate

Legal reference: 441 IAC 170.4(7)“a”

The maximum rate of payment by age of child and type of provider for a half-day of basic care is shown in Table I below:

Table I. Half-Day Rate Ceilings for Basic Care				
Age Group	Child Care Center	Registered Group Home	Registered Family Home	Nonregistered Family Home
Infant and Toddler	\$12.45	\$9.00	\$10.00	\$8.19
Preschool	\$ 10.50	\$ 8.55	\$ 9.00	\$7.19
School Aged	\$ 9.00	\$ 8.33	\$ 9.00	\$7.36

Special Needs Rate

Legal reference: 441 IAC 170-4(7)“a”

The maximum rate of payment by age of child and type of provider for a half-day of special needs care is shown in Table II below:

Table II. Half-Day Rate Ceilings for Special Needs Care				
Age Group	Child Care Center	Registered Group Home	Registered Family Home	Nonregistered Family Home
Infant and Toddler	\$48.00	\$12.38	\$15.75	\$10.24
Preschool	\$28.13	\$12.38	\$14.63	\$ 8.99
School Aged	\$28.04	\$11.25	\$13.50	\$ 9.20

Approve a special needs rate only when you have received documentation from the child care provider that the child meets the requirements for a special needs rate. The parent may assist the provider in the collection of the required documentation.

The documentation must substantiate both of the following:

- ◆ The child has been assessed by a qualified professional to meet the definition of a “child with special needs.” (See **Financial Eligibility**.)
- ◆ The child care provider is responding to those special needs with (but not limited) to adaptive equipment, more careful supervision, or special staff training.

Note: Child care funds are for child care services and not for specialized services provided during the program day. Do not approve a special needs rate for therapeutic services that are provided in the child care setting. This includes, but is not limited to, services such as speech, hearing, physical and other therapies; individual or group counseling; therapeutic recreation; and crisis intervention.

A licensed or registered child care provider serving a child determined eligible for protective child care services may receive payment up to the special needs rate, providing that child also meets the definition for a child with special needs and the required documentation has been secured.

In-Home Rate

Legal reference: 441 IAC 170.4(7)“d”

In-home care is paid at the minimum wage amount. At the current rate of \$5.15 an hour, this calculates to a half-day rate of \$25.75.

The in-home half-day rate is not a per-child amount. It is the maximum amount paid for all of the children in a family receiving in-home care.

Note: Approve in-home care only when the family has three or more children who require child care services. See **Eligible Providers** for a complete description of the limits on in-home care.

Under the Child Care Certificate, the child care provider has the status of an independent contractor. If parents wish to discuss any obligations they may have regarding taxes on payment to the in-home care provider, refer them to the appropriate agencies, including the Social Security Administration and the Internal Revenue Service.

Other Payment Policies

Days of Absence

Legal reference: 441 IAC 170.4(7)“b”

Payment may be made to a provider for a child not in attendance at the child care facility not to exceed four days per calendar month, providing that the child is regularly scheduled on those days and the provider also charges a private individual for days of absence.

Multiple Children in a Family

Legal reference: 441 IAC 170.4(7)“c”

When a provider reduces the charges for the second and any subsequent children in a family with multiple children whose care is unsubsidized, reduce the rate of payment made by the Department similarly.

See **AUTHORIZING SERVICES** for direction on completing the *Child Care Certificate* when this happens.

Limits on Payment

Legal reference: 441 IAC 170.4(7)“e”

Do not approve payment for child care provided out of state.

Do not approve payment for nonregistered providers until the *Non-Law Enforcement Record Check Request*, 595-1489, and the *Request for Child Abuse Information*, SS-1606-0, are returned as all clear, or until the evaluation is completed and gives permission for the person to provide child care.

Do not approve special needs payment for therapeutic services that are provided in the child care setting. These include (but are not limited to) services such as:

- ◆ Speech, hearing, physical and other therapies.
- ◆ Individual or group counseling.
- ◆ Therapeutic recreation.
- ◆ Crisis intervention.

Child care assistance can be paid for travel time only between the child care provider's home and the parent's place of employment or school.

Do not approve a separate payment for transportation. Any charge for transportation included as part of the child care service is payable only when it is included as part of the provider's established rate.

Do not approve payment for child care provided during the sleep time of the parent or guardian.

Do not approve payment to two providers for the same period of time.

Appeal of Rate Calculation

Legal reference: 441 IAC 170.4(7)“f”

A provider who is in disagreement with the calculation of the half-day rate may request a review. Instruct the provider to send a written request for review to the human services area administrator (HSAA) within 15 calendar days of notification of the rate. The request should identify the specific rate in question and the methodology used by the provider to calculate the rate.

The HSAA will provide a written response within 15 calendar days of receipt of the request. When dissatisfied with the response from the HSAA, the provider may request a review by the chief of the Bureau of Individual and Family Support Services. within 15 calendar days of the response.

Instruct the provider to submit the original request, the response received, and any additional information desired to the bureau chief. The bureau chief will render a decision in writing within 15 calendar days of receipt of the request.

The provider may appeal that decision to the director of the Department or the director's designee within 15 calendar days of the decision. The director or designee will issue the final Department decision within 15 calendar days of receipt of the request.

Note: Rate ceilings found in **Maximum Payment Rates** are not appealable.

AUTHORIZING SERVICES

The policies and procedures for authorizing child care services are organized into the following sections:

- ◆ Unit of service
- ◆ Fee schedule
- ◆ Child Care Certificate
- ◆ Case Permanency Plan

Unit of Service

Legal reference: 441 IAC 130.4(3)“F”; 441 IAC 170.1(234)

The unit of service is a half day. A half day is defined as up to 5 hours of service per 24-hour period.

Interview the parent by phone or face-to-face to assess the number of half-day units needed for the parent to work, attend training, or look for work. You will need this information to calculate the total monthly cost and to complete the *Child Care Certificate* and the *Notice of Decision*.

Use the academic or vocational training or employment schedule of the parent and actual travel time to determine the number of half-day units needed. Actual travel time includes the time spent between the child care facility and the place of employment or training. When in-home care is approved, actual travel time includes the time spent between home and the place of employment or training.

Ms. S is a full-time student with an 18-month-old daughter. She attends classes three days per week from 11:00 a.m. to 2:00 p.m. and two days per week from 9:00 to 11:00 a.m. Including actual travel time, she is approved for one half-day unit for each of the five workdays that she is in classes. Her estimated monthly usage is 22 half-day units (1 half-day unit times 5 days a week times 4.3 weeks).

When a parent meets more than one need for service, combine the daily school and work schedule of the parent and actual travel time to determine the number of half-day units needed.

Ms. S, the full-time student in the example above, has accepted a retail job where she is scheduled weekdays from 5:00 to 9:00 p.m. and Saturday from 8:00 a.m. to 4:00 p.m.

The hours of care needed on days when she attends classes from 11:00 a.m. to 2:00 p.m. and works from 5:00 to 9:00 p.m., including actual travel time, total 9. The hours of care needed for the two days she attends classes from 9:00 to 11:00 a.m. and works from 5:00 to 9:00 p.m., including actual travel time, total 8. The hours of care needed to work on Saturday total 9.

Ms. S is approved for two half-day units for each of the five weekdays that she is in class and works and two half-day units for Saturday. Her estimated monthly usage is 52 half-day units (2 half-day units times 6 days a week times 4.3 weeks).

When a change in schedule occurs, but the change does not affect the total number of half-day units already approved, it is not necessary to amend the Child Care Certificate to reflect the new work or school schedule.

Supervisory approval is required when more than two units are approved per 24-hour period. Document the need for service beyond two units in the case file.

Mr. J is employed full time and requires child care for his two children, ages 4 years and 16 months. He works from 7:30 a.m. to 4:00 p.m. He has arranged for child care for both children with a group child care home provider. He also wants to enroll his 4-year-old in preschool three mornings a week from 9:00 until 11:30 a.m.

The worker uses Mr. J's work schedule plus actual travel time to determine the units of service and approves two half-day units per child per workday.

The worker is not able to approve a third half-day unit for the 4-year-old to attend preschool, because the third unit is not required for Mr. J to remain employed, and because approving a third unit would mean that payment would be made to two providers for the same period of time.

When before- and after-school care is required for a school-age child, count the total number of hours needed in the 24-hour period and then convert the total hours to the number of half-day units needed.

Ms. M is a working single parent with a two-year-old who requires a full day of child care and two school-age children who require before- and after- school care. Her work hours are 8:00 to 4:30. She drops her children off at the child care provider's home on her way to work.

The school-age children are in care in the morning from 7:40 until almost 9:00, when the family home provider takes them to school. The two-year-old remains in the provider's care for the entire day. The provider picks the school-age children up after school, along with her own child, and provides after-school care from 3:15 until almost 5 p.m.

The M family is approved for the following half-day units:

- for the two-year-old, two half-day units per workday;
- for each school-age child, one half-day unit per workday.

The M family is approved for a total of four half-day units per workday.

Fee Schedule

Legal reference: 441 IAC 130.4(3); 441 IAC 170.4(2)

Fees are assessed in accordance with the single unit of service, the half-day unit.

Exception: Do not assess a fee to:

- ◆ Families at or below 100% of the federal poverty guidelines (income increment level A).
- ◆ Families with a child with protective needs where services are provided without regard to income.
- ◆ Participants in approved PROMISE JOBS activities other than paid employment.

When more than one child in a family is receiving child care services, base the fee on the child who receives the most care (the most units of service). Do not assess an additional fee for each child.

Assess the amount of the fee by determining the gross monthly income according to family size.

MONTHLY INCOME INCREMENT LEVELS ACCORDING TO FAMILY SIZE											
Income Levels	1	2	3	4	5	6	7	8	9	10	Half-Day Fee
A	680	919	1158	1397	1636	1875	2115	2354	2593	2832	.00
B	716	968	1219	1471	1723	1974	2226	2478	2729	2981	.50
C	756	1022	1287	1553	1819	2085	2350	2616	2882	3148	1.00
D	798	1079	1360	1640	1921	2201	2482	2763	3043	3324	1.50
E	843	1139	1436	1732	2028	2325	2621	2917	3214	3510	2.00
F	890	1203	1516	1829	2142	2455	2768	3081	3394	3707	2.50
G	940	1270	1601	1931	2262	2592	2923	3253	3584	3914	3.00
H	993	1342	1691	2040	2389	2738	3087	3436	3785	4134	3.50
I	1048	1417	1785	2154	2522	2891	3259	3628	3996	4365	4.00
J	1107	1496	1885	2274	2664	3053	3442	3831	4220	4609	4.50
K	1169	1580	1991	2402	2813	3224	3635	4046	4457	4868	5.00
L	1234	1668	2102	2536	2970	3404	3838	4272	4706	5140	5.50
M	1304	1762	2220	2678	3137	3595	4053	4511	4970	5428	6.00

To use the sliding fee schedule:

1. Move across the monthly income table to the column headed by the number of people in the family that was used in determining service eligibility.
2. Move down that column to the first row with an amount greater than the monthly family income. Use the row above that row to determine the fee. (Example: Income at or above level B but less than level C is level B fee, \$.50 per half day.)
3. When a family has more than 10 members, find the income levels by multiplying the figures in the 4-member column by 0.03. Round the answers to the nearest dollar and multiply by the number in the family in excess of 10. Add the result to the amount in the 10-member column.

Include documentation in the case file to support the fee.

Nonpayment of Fees

Legal reference: 441 IAC 130.5(2)

The provider is responsible for collecting fees and maintaining records of fees collected. Those records must be available for audit by the Department or its representative.

When a parent does not pay the fee, the provider must demonstrate that a reasonable effort has been made to collect the fee. Reasonable effort means an original billing and two follow-up notices of nonpayment.

Child care assistance may be terminated when the Department determines that no payment or partial payment of fees has been received within 30 calendar days following the issuance of the last billing.

Terminate services unless the client establishes inability to pay. (See below.) Notify the client of any adverse action using form 470-0602, *Notice of Decision: Services*.

Inability to Pay Fees

Legal reference: 441 IAC 170.4(234)

When the family continues to need service but reports the inability to pay the fee, assess the family's situation and verify whether it is due to the existence of one or more of the following conditions:

- ◆ Extensive medical bills for which there is not payment through Medicaid, Medicare, or other insurance coverage.
- ◆ Shelter costs in excess of 30% of the household income.
- ◆ Utility costs, not including the cost of a telephone, in excess of 15% of the household income.
- ◆ Additional expenses for food resulting from diets prescribed by a physician.

If one or more of the above conditions exist, continue services without a fee until the condition no longer exists and the family is able to participate in the current cost of service. Document nonpayment and the inability to pay in the case record.

Assess each "inability to pay" case to determine whether the family can be charged a reduced fee. Charge the reduced fee until full participation in fees is possible.

Child Care Certificate

Legal reference: 441 IAC 170.4(234)

The *Child Care Certificate*, form 470-2959, is the agreement between the eligible parent, the child care provider, and the Department. The front of the *Certificate* lists the children receiving services, the units of service needed, the type of care and hours provided, any applicable parent fee, and the allowable payment. The back of the *Certificate* sets forth the terms to which all parties agree, as indicated by their signature on the form.

The *Certificate* provides that payment may be made to a provider for a child not in attendance for a maximum of four days per calendar month. Allow this payment when the child is regularly scheduled on those days and the provider also charges a private customer for days of absence.

In the *Certificate*, the provider agrees to accept payment through the Department's payment system and not to request additional payment from the parent, except for the fees noted on the front of the form.

However, the cost of care provided beyond the approved hours which is not covered by the number of approved units of service is the responsibility of the parent. This includes late charges when care exceeds the hours approved, resulting in a late charge by the facility which remained open beyond the normal hours of operation, and the child care program's registration or application fees.

Seven days advance notice are required to terminate the *Certificate*, so that if care must be terminated, parents have adequate time to secure other child care arrangements. The failure of a parent to provide seven days' notice does not, however, authorize a provider to bill the Department for services on days that no services were provided.

The Department may refuse to enter into or may revoke a *Child Care Certificate* if:

- ◆ The Department finds there to be a hazard to the safety and well-being of a child and the provider cannot or refuses to correct the hazard; or
- ◆ The provider has submitted claims for payment for which the provider is not entitled.

Issue the *Child Care Certificate* to the parent to secure the signature of the child care provider. Issue more than one *Certificate* to a parent when more than one provider is needed to meet the family's child care needs. When multiple *Certificates* are issued, pay close attention to the hours that care is needed and the total units of service approved.

In many situations, parents will have already selected the child care provider by the time they apply for child care services. If the parent needs assistance in choosing a provider, refer the parent to the child care resource and referral agency serving the county, or provide the parent with a list of providers which is found in each county office.

Assignment of Certificate Number

Assign one certificate number to each provider, regardless of the number of certificates prepared with that provider.

The provider certificate number is composed of a two-digit program identifier (38), followed by the county number, followed by a three-digit sequential number (001-999). An example of a certificate number for a provider in Buena Vista County is 38-11-001.

If a county requires certificate numbers beyond 38-XX-999, the program identifier number becomes 39 and the sequential number begins at 001. **Note:** Do not reassign a certificate number to a new provider until all payments have been made to the first provider, and that provider decides not to serve any more Department clients.

Completing the Certificate

Prepare form 470-2959:

- ◆ At least annually,
- ◆ When the eligible parent selects a different child care provider, and
- ◆ When there is a change in circumstances that requires a change to the form.

Enter fields 1 through 11 as requested.

In field 12, the first two digits of the four-digit service code represent the provider type and the type of care (basic or special needs). **Note:** PROMISE JOBS workers do not need to fill in this section.

14xx = Registered group home, basic rate

15xx = Child care center, basic rate

16xx = Registered and nonregistered family home, basic rate

17xx = In-home care, basic rate

61xx = Registered group home, special needs rate

62xx = Child care center, special needs rate

63xx = Registered and nonregistered family home, special needs rate

64xx = In-home care, special needs rate

The last two digits of the four-digit service code represent the age group. Providers are allowed only one rate for each age group for basic care and one rate for each age group for special needs care. Therefore, the only possible suffix codes are:

xx01 = Infant and toddler

xx02 = Infant and toddler (Use only when care is provided by a nonregistered family child care home.)

xx16 = Preschool

xx17 = Preschool (Use only when care is provided by a nonregistered family child care home.)

xx46 = School age

xx47 = School age (Use only when care is provided by a nonregistered family child care home.)

Note: PROMISE JOBS workers do not need to fill this section in.

For example, the service code for basic care provided in a licensed child care center to a three-year-old is coded 1516. Before- and after-school care to a special-needs school-age child in a registered family home is coded 6346.

Also, in field 12, enter the one-letter funding code:

P = Protective

F = Nonprotective

A = At risk “matching”

Note: PROMISE JOBS workers do not need to fill this section in.

In field 13, enter the half-day rate in effect. All financial entries must be carried two decimal places (e.g. \$7.00).

When the provider charges a reduced rate for multiple children in a family, enter the provider's regular unit cost (rate in effect) for each child, but note on the certificate that the provider's invoice will reflect the reduced rate for the second and subsequent child.

When the family is receiving in-home care, list the three or more children receiving care, but enter the unit cost only for the first child listed on the form.

In field 13a, enter the projected monthly number of units for each of the children.

In field 13b, enter the projected monthly cost for each of the children. Calculate the monthly cost by first calculating the number of half-day units per a 24-hour period, then the total number of half-day units in a week, multiplied by 4.3 weeks in a month. Then multiply the number of half-day units in a month by the unit cost to arrive at a monthly cost.

When making this calculation, look at a "typical" month of care, knowing that in the time span covered by the certificate, the occurrence of school holidays, for example, can significantly alter the total monthly cost.

A school holiday may require a child to receive two units per day for a week in a month of care rather than the single unit per day for before- and after-school care approved on the certificate. Consider whether school holidays are a factor in the month of service when reviewing the invoice for payment.

In field 13c, enter the projected total monthly cost of child care for all of the children listed on the certificate.

In field 13d, enter the projected total monthly fees from line 15. If there are no fees, enter 0.

In field 13e, enter the projected monthly Department payment, which is the result of 13c minus 13d.

In field 14, enter the information requested, including the type of child care provider and the hours of care. The type of provider checked serves to alert you to the forms that must be secured before the certificate may be approved. (See **Provider Requirements**.) The hours of care indicated provide the basis for calculating the units of service.

In field 15, enter the monthly fee amount to be paid by the parent. See **Fee Schedule** for procedures to establish the parent fee.

The signature of the child care provider, parent, and worker are entered in fields 16-22. The signature of the parent is required, even when there is no parent fee. The *Certificate* is not valid unless all three signatures are present on the form.

When all signatures have been secured, return one copy to the child care provider. Give one copy to the parent, and keep one copy in the child's case record. When multiple children are included on the *Certificate*, place a copy in each child's case record.

Transmit the white copy of the *Child Care Certificate* to the staff person in the county office authorized to enter information from the *Certificate* to the POSP screen. Refer to the *Purchase of Service System Handbook*, Third Edition (3/8/94) or the Purchase of Service System "HELP" screen for complete instructions for entering certificates.

Note: PROMISE JOBS workers do not enter certificate information into the POSP screen. They enter the certificate information into their data management system.

Case Permanency Plan

Legal reference: 441 IAC 130.7(234); 441 IAC 170.4(1)

A case plan is required when the child needs care as part of a protective service plan to prevent or alleviate child abuse or neglect.

If the child qualifies for protective child care services on the basis that the child is a member of a family with a confirmed case of child abuse, determine whether another Department service worker is involved. If another worker is involved, ensure that protective child care is incorporated in the case plan and monitored. If no other worker is involved, complete a *Case Permanency Plan* for the child care service.

If the family qualifies on the basis that the family is receiving family-centered or family preservation services, the Department worker responsible for developing the case plan for those services incorporates child care into that case plan.

When the family has been referred to family-centered or family preservation services, but is not receiving services because the service is not available, the family has refused services, or the family is receiving comparable services, complete a *Case Permanency Plan* for the child care service.

Refer to 18-A for complete instructions for developing the *Case Permanency Plan*.

SRS Entry

Enter data to open a case on the Services Reporting System (SRS), using form RS-1120. Open an SRS in the name of the child. Complete the SRS form on accordance with instructions contained in XIV-A.

Use the service code that was entered on the *Child Care Certificate*.

Valid goal codes for child care services are:

- 1 Achieving or maintaining economic self-support
- 2 Achieving or maintaining self-sufficiency
- 3 Preventing or remedying neglect, abuse, or exploitation of children and preserving, rehabilitating, or reuniting families

The corresponding objective codes are:

- C Supportive services for employment
- E Child care services for training
- L Treatment for children who have been, or have a potential of being abused, neglected, or exploited
- N Preserving, rehabilitating, or reuniting families

Identify a protective case in SRS by using goal 3 and objective code L.

Children are eligible for at-risk funding when the family:

- ◆ Needs child care in order to accept employment or to remain employed; and
- ◆ Is not receiving Family Investment Program assistance or has lost eligibility for Transitional Child Care due to the time limit.

Identify an at-risk case in SRS by using goal 2 and objective N.

Identify all other nonprotective cases in SRS by using goal 1 and objective C or E.

Note: PROMISE JOBS workers do not enter information into the SRS.

APPROVING INVOICES

Policies for approving invoices are organized into two sections:

- ◆ Provider billing instructions
- ◆ Entering invoices

Provider Billing Instructions

Instruct providers to bill for child care services using the *Purchase of Service Provider Invoice*, form AA-2241-0. Form AA-2241-0 is prepared monthly for services provided from the first to the last day of the month.

Note: PROMISE JOBS providers do not bill for child care services on the *Purchase of Service Provider Invoice*. PROMISE JOBS providers will bill for child care services on the locally approved form that is provided to them.

The time limit for the submission of original invoices is 90 days from the first date of service. However, invoices that remain unpaid 60 days after June 30 (the end of the state fiscal year) will be returned to the provider unpaid. The provider may then file the unpaid claim against the state through the State Appeal Board in the Department of Management.

Errors on invoices can be reduced if certain information is emphasized to the provider. At minimum, provide the following instruction to the provider to complete the form:

- ◆ For each case, advise the provider of the correct code for entry in the State/Local field. The codes are as follows:
A = At-risk
P = Protective
F = Nonprotective
- ◆ Use a separate invoice for each county purchasing the service and for each funding source (state/local field). Multiple cases can be entered on the same invoice, as long as the case has the same state/local code and is for the same county.
- ◆ Enter the information on the invoice to match all identifying information exactly as on the *Child Care Certificate*, or an error will occur and no payment will be made.
- ◆ Enter dates in six digits as month, day, and year (for example, 12/20/98 or 12-20-98).
- ◆ Enter dollar amounts to include the decimal point followed by two digits (for example, \$7.00).

Specific instructions for the completion of the invoice are included in XVIII-Appendix.

Supply providers with form, AA-2241-0, which is printed in NCR carbon sets. Instruct the provider to keep the yellow copy and send the white and pink copies to the county office purchasing the service.

Keep the white (original) and pink copy in the county office, after on-line entry. Retain original for a period of five years beyond the date of the invoice.

Note: PROMISE JOBS workers will not use the POS form.

Entering Invoices

Review all provider invoices to verify that the units billed are within the maximum amount authorized or that any amount over the units authorized is a product of a school holiday.

Note: PROMISE JOBS workers do not enter POS invoices.

Transmit the invoice to the staff person in the county office who handles POS invoices. The person responsible must have a terminal access code that allows access to the Purchase of Service On-Line System. Refer to the *Purchase of Service System Handbook*, Third Edition (3/8/94), or the Purchase of Service System “HELP” screen for complete instructions for entering invoices.

REVIEWING ELIGIBILITY

Legal reference: IAC 441 130.2(5)

Review eligibility, including eligibility for protective child care, in the same manner as an application at least every six months or when changes are reported. Review the parent fee when completing the review of eligibility.

Note: Recipients of FIP, or those whose earned income was taken into account in determining the needs of FIP recipients and persons who are participating in activities approved under the PROMISE JOBS, will be eligible notwithstanding eligibility redetermination requirements.

A family no longer eligible for protective child care is not automatically eligible for child care assistance. If a family no longer meets the requirements for protective services, but still needs child care, take an application following the procedures in **Application**. The family is subject to all waiting list and eligibility policies.

Families who, because of waiting lists, were required to meet specific requirements of a priority group at the time of application (see **Application for Placement on a Waiting List**) are not required to meet the priority group requirements at review or redetermination. Eligibility continues as long as the family meets the need for service, financial guidelines and the child needing services is under age 13 or under 19 if special needs. (See **DETERMINING ELIGIBILITY**.)

Issue Form SS-1104-0, *Notice of Decision: Services*, to reflect the action on the case or if there is a change in the parent fee. The notice must be given at least ten calendar days before the date the action would become effective. The timely notice period begins on the day after the notice is mailed.

For protective cases, review the *Case Permanency Plan* at least every six months.

ADVERSE SERVICE ACTIONS

Legal reference: 441 IAC 130.5(234); 441 IAC 170.5(234)

The following sections describe procedures for:

- ◆ Reduction of services.
- ◆ Termination of services.
- ◆ Notification of action.
- ◆ Appeals.

Reduction of Services

Legal reference: 441 IAC 130.5(3)

Child care services may be reduced when it is determined that:

- ◆ Continued provision of service at its current level is unnecessary; or
- ◆ Another community resource (person, agency, program, or funding source) is available to provide the same or similar service free of charge to the family that will meet the family's needs; or
- ◆ Funding is not available to continue the service at the current level.

Reassess the family to determine the level of service to be provided.

Exception: Recipients of FIP, or those whose earned income was taken into account in determining the needs of FIP recipients, and persons who are participating in activities approved under PROMISE JOBS are not subject to reduction.

Termination of Services

Legal reference: 441 IAC 130.5(2)

Child care services may be terminated at the request of the applicant or when the Department determines that:

- ◆ The specific need to attain goals and objectives toward which service was directed has been achieved; or
- ◆ After repeated efforts, it is evident that the family is unwilling to accept further service; or
- ◆ The family no longer meets the eligibility requirements, including need for service, financial eligibility, and age of the child needing services; or
- ◆ No payment or partial payment of parent fees has been received within 30 days following the issuance of the last billing; or
- ◆ Another community resource (person, agency, program, or funding source) is available to provide the same or similar service free of charge to the family that will meet the family's needs; or
- ◆ The applicant refuses to allow documentation of eligibility requirements; or
- ◆ Funding is not available to provide the service.

Notification

Legal reference: 441 IAC 170.6(234)

Give timely and adequate notice whenever it is proposed that a service be reduced or terminated.

“Timely” means the notice is mailed at least ten calendar days before the action would become effective. The timely notice period begins on the day after the notice is mailed.

ADVERSE SERVICE ACTIONS

Notification

July 6, 1999

Iowa Department of Human Services

Title 18 Child Welfare

Chapter I Child Care Assistance

“Adequate” means the written notice includes:

- ◆ A statement of what action is being taken;
- ◆ The reason for the intended action;
- ◆ The manual chapter number and subheading supporting the action;
- ◆ An explanation of the applicant’s right to appeal; and
- ◆ The circumstances under which the service is continued when an appeal is filed.

Send the original to the applicant, with a copy to the provider and for the case record.

Appeals

Legal reference: 441 IAC 170.6(234)

Notify the applicant of the right of appeal at the same time the applicant is notified of any adverse action. Form SS-1104-0 contains the notice of appeal rights.

When an applicant wishes to appeal a decision, encourage the applicant to complete PA-3138-0, *Appeal and Request for Hearing*, but accept any written request.

Proceed according to I-E, **DEPARTMENT’S RESPONSIBILITIES**. Immediately submit the appeal form PA-3138-0 and the notice of adverse action to the Appeals Section in the Bureau of Policy Analysis. Forward a summary of the basis for the action to the Appeals Section within 10 days.



TERRY E. BRANSTAD, GOVERNOR

DEPARTMENT OF HUMAN SERVICES

CHARLES M. PALMER, DIRECTOR

June 18, 1996

GENERAL LETTER NO. 18-I-5

ISSUED BY: Bureau of Individual and Family Support Services,
Division of Adult, Children, and Family Services

SUBJECT: Employees' Manual, Title 18, Chapter I, *Child Care Assistance*, pages 5, 6, 14,
and 37, revised.

Summary

Pages 5 and 6 are revised to incorporate the waiting list priority groups specified in the fiscal year 1997 appropriations bill for the Department.

Page 14 is revised to update the income guidelines used to determine financial eligibility for child day care services consistent with the federal poverty guidelines for 1996.

Page 37 is revised to update the fee schedule for the fees parents pay for child day care services, based on their gross monthly income.

Review the parent fee when completing the review of eligibility or when the parent reports a change. Issue form SS-1104-0, *Notice of Decision: Services*, if there is a change in parent fee.

Effective Date

July 1, 1996

Material Superseded

Remove from Employees' Manual, Title 18, Chapter I, and destroy pages 5 and 6, dated August 2, 1994; page 14, dated June 13, 1995; and page 37, dated October 17, 1995.

Additional Information

If you have any questions, please contact your regional office.



July 30, 1996

GENERAL LETTER NO. 18-I-6

ISSUED BY: Bureau of Individual and Family Support Services,
Division of Adult, Children, and Family Services

SUBJECT: Employees' Manual, Title 18, Chapter I, *Child Care Assistance*, Contents
(page 1), revised; pages 5 through 8, 14, 15, 16, and 47, revised; and page 14a,
new.

Summary

Pages 5, 7, 14, and 15 are revised to include a new Column B on the Monthly Gross Income Chart and to specify which income guideline applies to families applying for or receiving assistance.

Page 6 is revised to incorporate the new waiting list priority group 3, as specified in Senate File 2442, the fiscal year 1997 appropriations bill for the Department.

Pages 8 and 47 reflect a change in policy for families approved on or after August 1, 1996. Previously, families who because of waiting lists were required to meet requirements of a priority group at the time of application were not required to meet the priority group requirements at review or redetermination. Families were reviewed against the general eligibility requirements found in **Need for Service**.

These pages are revised to require that families approved on or after August 1 must, at review or redetermination, meet the specific requirements of the priority group under which they were approved. Include documentation in the file that verifies the priority group under which the family was approved.

Effective Date

August 1, 1996

Material Superseded

Remove from Employees' Manual, Title 18, Chapter I, and destroy Contents (page 1), dated June 28, 1994; pages 5 and 6, dated June 18, 1996; pages 7 and 8, dated August 2, 1994; page 14, dated June 18, 1996; pages 15, 16, and 47, dated June 28, 1994.

Additional information

If you have any questions, please contact your regional office.



June 24, 1997

GENERAL LETTER NO. 18-I-7

ISSUED BY: Bureau of Individual and Family Support Services,
Division of Adult, Children, and Family Services

SUBJECT: Employees' Manual, Title 18, Chapter I, *Child Care Assistance*, Contents
(page 1), revised, pages 5, 6, 8, 11 through 20, 28 through 31, 33, 37 through 41,
and 47, revised.

Child Care Rate Changes

Maximum payment rates used for all DHS child care programs have been revised.

The new rates were derived from a market rate survey conducted in November 1996 through contract with Iowa Agricultural Statistics Service, a federal-state organization that conducts mail and telephone surveys for state departments, universities, and other public agencies. Rate information was requested from a randomly selected sample of nearly 1,500 child care providers.

Surveyors collected information only on rates charged to families whose child care is not subsidized by the Department (private pay). Reimbursement rates previously set by the Department were not collected nor considered in the calculation of the local market rates. Half-day unit rates were established for basic and special needs care by provider types and three age groupings.

The age groups of the children in care have been changed to eliminate the kindergarten age group. The age groups are now as follows:

- **Infant/toddler** means children aged two weeks to two years.
- **Preschool** means children aged two years to school age.
- **School age** means a child in attendance in full-day or half-day classes, beginning with kindergarten.

Apply the school-age rate ceiling when approving a rate for a child in half-day or full-day kindergarten classes.

Note that the new rate tables now divide family homes into two categories:

- **Registered family homes:** homes that have received a *Certificate of Registration* from the state.
- **Nonregistered family homes:** homes that provide care but do not have a *Certificate of Registration* from the state. Relative care is paid at the nonregistered family home rate.

Because family home providers are not mandated to be state-registered, the Child Care Work Group of the Welfare Reform Advisory Group and the State Child Day Care Advisory Council recommended a rate differential in favor of state-registered family homes.

They believe it is important to the welfare of children to encourage family home child care providers to become registered. Registration enables providers to access services, including the Child and Adult Care Food Program, that can improve the circumstances of children in day care. Registration gives parents the assurance that a child abuse and criminal records check have been completed.

The nonregistered family home category uses the rate that was formerly used for all family homes. The new rates developed through the market rate survey are used for registered homes and licensed centers.

Page 41 expands the usage of codes that represent the provider type and type of care. Both registered and nonregistered family homes will continue to use codes “16” and “63” as the first two digits of the four-digit service code. Three new codes (“02,” “17,” and “47”) have been added to represent age groups for care provided in a nonregistered home. The service code for the kindergarten age group is eliminated.

In addition, pages 28, 29 and 30 remove the “rate in effect” language that froze a provider’s rates, once established with the Department. Providers will now be able to increase rates during the year, providing the new rate does not exceed the private pay rate or the maximum rate ceiling.

Page 31 is revised to change the minimum wage amount to \$4.75 per hour.

You may use a copy of the rate table from the manual or a copy of the May 19, 1997, letter to State Child Care Assistance providers to explain the change in maximum rates to parents and child care providers. Send a copy of the May 19, 1997, letter to providers who did not receive a child care payment before May 7, 1997. These new providers did not receive the letter through the DHS mass mailing.

Income Guidelines

On an annual basis, the income eligibility guidelines are updated to be consistent with guidelines published by the United States Department of Health and Human Services. This change requires that fee scales also be adjusted annually to continue the policy that no fee is assessed to families at or below 100% of the federal poverty guidelines. All *Child Care Certificates* completed for families with income above 100% should reflect a fee, except those for families receiving protective child care.

Pages 6, 14, 15, and 17 are revised in accordance with the fiscal year 1998 appropriations bill for the Department, to raise income guidelines for working families to 125% of the federal poverty guidelines and to specify to which families the different income guidelines apply.

In addition, page 15 removes the provision that families who were eligible on the basis of income maintenance status as of November 30, 1993, remain eligible until they no longer have income maintenance status. At review, determine financial eligibility by applying the column on the Monthly Gross Income Chart appropriate to whether the family is working, in school, or has a child with special needs.

Page 37 is revised to update the fee schedule for the fees parents pay for child care services based on their gross monthly income.

Application for Services

Until further notified, continue to take and approve applications from families who meet the requirements in one of the top four priority groups. Applications may be approved for families who are:

- At or below 125% of the federal poverty level (Column B on the Monthly Gross Income Chart) and working at least 30 hours a week; or
- At or below 100% of the federal poverty level (Column A on the Monthly Gross Income Chart), under age 21, and in an education or training program.

Revise the posting in your county office to reflect the increase in income for priority group 3 from 110% to 125%.

Page 5 is revised to remove the policy that eligible families must reapply and be subject to waiting list policies when they move to a new county.

Pages 8 and 47 reflect a return to earlier policy. Families approved when applications were being taken for specific priority groups are no longer required to meet the specific requirements of a priority group at review of redetermination. To continue eligibility, families must meet the need for service, financial guidelines and the child needing services cannot exceed the age limit.

Other Changes

Pages 6 and 11 are revised to be consistent with current policy for the Transitional Child Care program. As of March 1, 1996, all families eligible for Transitional Child Care are eligible for 24 months of service.

Effective Date

July 1, 1997

Material Superseded

Remove the following pages from Employees' Manual, Title 18, Chapter I, and destroy them:

<u>Page</u>	<u>Date</u>
Contents (page 1)	July 30, 1996
5, 6, 8,	June 28, 1994
11, 12, 13,	June 28, 1994
14, 14a, 15, 16	July 30, 1996
17, 18	June 28, 1994
19, 20, 20a	June 13, 1995
28-31, 33	June 28, 1994
37	June 18, 1996
38-41	June 28, 1994
47	July 30, 1996

Additional information

If you have any questions, please contact your regional office.



TERRY E. BRANSTAD, GOVERNOR

DEPARTMENT OF HUMAN SERVICES

CHARLES M. PALMER, DIRECTOR

October 7, 1997

GENERAL LETTER NO. 18-I-8

ISSUED BY: Bureau of Individual and Family Support Services
Division of Adult, Children and Family Services

SUBJECT: Employees' Manual, Title 18, Chapter I, *Child Care Assistance*, pages 18, 20, 29, and 31, revised.

Summary

This general letter transmits revisions to pages 29 and 31 to update the hourly minimum wage amount which went into effect September 1, 1997. Complete a new *Child Care Certificate* with the corrected unit cost for families with in-home care providers.

This general letter also transmits revisions to pages 18 and 20 to clarify policy with regard to payments under the pilot FIP diversion program in Cass, Pottawattamie, and Woodbury Counties and the statewide Family Self-Sufficiency Grant program. Under these programs, cash payments to families are included as countable income in determining financial eligibility for child care assistance. Payments to vendors or vouchers are excluded from the calculation of monthly gross income.

Effective Date

October 1, 1997

Material Superseded

Remove pages 18, 20, 29, and 31, all dated June 24, 1997, from Employees' Manual, Title 18, Chapter I, and destroy them.

Additional Information

If you have any questions, please contact your regional office.



November 25, 1997

GENERAL LETTER NO. 18-I-9

ISSUED BY: Bureau of Individual and Family Support Services
Division of Adult, Children and Family Services

SUBJECT: Employees' Manual, Title 18, Chapter I, *Child Care Assistance*, pages 1, 5, 6, 9 through 16, 23, 31, 35, and 43, revised.

Changes in the Approval of Applications

Effective December 1, 1997, applications for child care assistance will no longer be approved through the use of priority groups. Approve families for services when the child needing services is under age 13 (or under 19 if special needs) and the family:

- ◆ Meets financial eligibility guidelines, either:
 - At or below 125% of the federal poverty level, or
 - At or below 155% of the federal poverty level if the family has a child with special needs or has received Transitional Child Care for 24 consecutive months.
- ◆ Has one or more of the following needs for service:
 - In full-time academic or vocational training.
 - Working at least 28 hours per week or an average of 28 hours per week during the month.
 - Needing protective services to prevent or alleviate child abuse or neglect..
 - Absent due to hospitalization, physical or mental illness or death.
 - Seeking employment.

Note: The age limit of 21 for training is a priority group requirement which does not apply until you are further notified by Central Office.

Revisions to the monthly gross income charts are found on page 14.

Pages 5 and 14 are also revised to remove the provision that allowed families receiving services as of June 30, 1993, to be eligible at income up to 155% of the federal poverty level. With this change, families who were receiving services as of June 30, 1993, are eligible at 155% of federal poverty only when they are requesting child care for a child with special needs.

Increase in Work Hours

Pages 6, 9, 11, and 35 are revised to reflect the increase in the number of hours an employed parent must work to be eligible for services from 20 to 28 hours per week. Raising the hours a parent must work is more reflective of the hours of employment necessary to attain or maintain self-sufficiency.

This change does not alter the work requirements found in the priority groups. The number of work hours required when applications are being approved in accordance with priority groups remains at 30 until changed by the Legislature.

In addition, page 13 removes language that gave workers the option of requesting documentation of job search activities. Parents must now provide documentation of job search activities to be approved for services. Job search is not approved when priority groups are in place.

Limit on Child Care While in Training

Page 10 implements the new 24-month lifetime limit on child care while the parent participates in a full-time academic or vocational training program. This limit is supportive of FIP policy and helps gain consistency between the PROMISE JOBS and the Child Care Assistance program. The limit does not apply to time spent in high school completion, adult basic education, GED or English as a second language. Time spent by parents participating in FIP and receiving PROMISE JOBS child care allowances while participating in PROMISE JOBS components in postsecondary education or training counts toward the 24-month limit.

Count December 1997 as the first month toward the 24-month limit.

Page 10 is also revised to reflect a change in policy regarding applications received by families on a PROMISE JOBS waiting list. Deny subsidy under the Child Care Assistance program to families on a PROMISE JOBS waiting list for the hours in academic or vocational training. Since both child care programs are now funded under the federal Child Care and Development Fund, it is illogical to continue a policy that previously resulted in shifting the cost from one program to the other.

Eligible Providers of Protective Child Care Services

Pages 23 and 31 are revised to reflect new policy that requires that children eligible for protective child care services receive their care from a licensed child care center or registered family or group day care home.

Other Changes

Page 1 is revised to reflect the changes in federal funding for this program.

Page 16 removes a reference in the “Note” to a child in foster care which was overlooked in an earlier manual edit. Child care services for foster parents who need the service to remain employed are paid out of the foster care budget.

Page 43 amends language to conform with current child abuse terminology.

Effective Date

December 1, 1997

Material Superseded

Remove the following pages from Employees’ Manual Title 18, Chapter I, and destroy them:

<u>Page</u>	<u>Date</u>
1	June 28, 1994
5, 6	June 24, 1997
9, 10	June 28, 1994
11-16	June 24, 1997
23	June 28, 1994
31	October 7, 1997
35, 43	June 28, 1994

Additional Information

If you have any questions, please contact your regional office.



June 23, 1998

GENERAL LETTER NO. 18-I-10

ISSUED BY: Bureau of Individual and Family Support Services,
Division of Adult, Children and Family Services

SUBJECT: Employees' Manual, Title 18, Chapter I, *Child Care Assistance*, pages 14 and 37, revised.

Summary

Changes in Eligibility Requirements

Effective July 1, 1998, approve families for services when the child needing services is under age 13, (or under 19 if special needs) and the family:

Meets financial eligibility guidelines, either:

- ◆ At or below 140% of the federal poverty level, or
- ◆ At or below 155% of the federal poverty level if the family has received Transitional Child Care for 24 consecutive months.
- ◆ At or below 175% of the federal poverty level if the family has a child with special needs.

Revisions to the monthly gross income charts are found on page 14.

Effective Date

July 1, 1998

Material Superseded

Remove the following pages from Employees' Manual, Title 18, Chapter I, and destroy them:

<u>Page</u>	<u>Date</u>
14	November 25, 1997
37	June 24, 1997

Additional Information

If you have any questions, please contact your regional office.



TERRY E. BRANSTAD, GOVERNOR

DEPARTMENT OF HUMAN SERVICES

CHARLES M. PALMER, DIRECTOR

August 4, 1998

GENERAL LETTER NO. 18-I-11

ISSUED BY: Bureau of Individual and Family Support Services
Division of Adult, Children and Family Services

SUBJECT: Employees' Manual, Title 18, Chapter I, *Child Care Assistance*, Contents (page 1), revised; pages 24 through 26, revised; and pages 26a and 26b, new.

Summary

This general letter transmits revisions to the process of determining eligible providers. Any person who receives public funds for providing child day care and who is not a registered child care home or a licensed child care center must have both a criminal record check and a child abuse registry check completed.

This includes all relatives who provide care only to relative's children. Also, anyone living in the provider's home and anyone who has access to a child when the child is alone must have a criminal record check and a child abuse registry check completed.

If any of these persons have a criminal conviction or a founded and registered child abuse, they are eligible for an evaluation following the procedures used for registered child care homes and licensed child care centers.

If any person has a criminal conviction or founded and registered child abuse, and the evaluation process does not permit them to be providers of child care or to live in a child care home, no payment of public funds may be made. In addition, such persons may not provide any child care under possible penalty, and may have a temporary or permanent injunction filed against them.

A desk review of nonregistered providers is not required. Complete the record check process for all new providers, at regular review time for current participants, or when there is a change of providers.

Effective Date

Upon receipt.

Material Superseded

Remove the following pages from Employees' Manual, Title 18, Chapter I, and destroy them:

<u>Page</u>	<u>Date</u>
Contents (page 1)	June 24, 1997
24 through 26	June 28, 1994

Additional Information

Refer questions about this general letter to your regional office.



TERRY E. BRANSTAD, GOVERNOR

DEPARTMENT OF HUMAN SERVICES

CHARLES M. PALMER, DIRECTOR

September 22, 1998

GENERAL LETTER NO. 18-I-12

ISSUED BY: Bureau of Payments and Receipts
Division of Fiscal Management

SUBJECT: Employees' Manual, Title 18, Chapter I, *Child Care Assistance*, pages 45 and 46, revised.

Summary

This general letter transmits revisions to the process of handling invoices for child care assistance. Since child care invoices are entered on the POS system in the county office, original invoices will be kept in the county offices. This new procedure will:

- ◆ Improve payment turnaround to providers.
- ◆ Eliminate the expense of mailing the invoices to central office.
- ◆ Eliminate problems with the invoices disappearing in the mail system and never being received in the Bureau of Payments and Receipts.

Effective Date

Upon receipt.

Material Superseded

Remove from Employees' Manual, Title 18, Chapter I, pages 45 and 46, dated June 28, 1994, and destroy it.

Additional Information

Refer questions about this general letter to your regional office.



December 8, 1998

GENERAL LETTER NO. 18-I-13

ISSUED BY: Bureau of Individual and Family Support Services
Division of Adult, Children and Family Services

SUBJECT: Employees' Manual, Title 18, Chapter I, *Child Care Assistance*, pages 5, 6, 24, 25, 26, 26a, 26b, and 27, revised.

Summary

This general letter transmits revisions to:

- ◆ The process of performing criminal records check for non-registered child care providers applying to receive payment from public funds.
- ◆ The priority levels on the waiting list for applications.

Effective Date

Priority list changes are effective November 1, 1998.

Records check billing changes are effective December 22, 1998

Material Superseded

Remove the following pages from Employees' Manual Title 18, Chapter I, and destroy them:

<u>Page</u>	<u>Date</u>
5, 6	November 25, 1997
24-26b	August 4, 1998
27	June 28, 1994

Additional Information

If you have any questions, please contact your regional office.



THOMAS J. VILSACK, GOVERNOR
SALLY J. PEDERSON, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES
CHARLES M. PALMER, DIRECTOR

February 16, 1999

GENERAL LETTER NO. 18-I-14

ISSUED BY: Bureau of Individual and Family Support Services
Division of Adult, Children and Family Services

SUBJECT: Employees' Manual, Title 18, Chapter I, *Child Care Assistance*, pages 5, 6, 15, and 39 through 43, revised.

Summary

This general letter transmits:

- Clarification of the policy on prioritizing persons on a waiting list to match exactly the legislative language in 1998 Iowa Acts, Chapter 1218, Section 12, Subsection 4.
- A correction to the income chart reference on page 15.
- Changes in instructions due to revisions to the *Child Care Certificate*, form 470-2959.

Effective Date

Upon receipt.

Material Superseded

Remove the following pages from Employees' Manual, Title 18, Chapter I, and destroy them:

<u>Page</u>	<u>Date</u>
5, 6	December 8, 1998
15	November 25, 1997
39-41	June 24, 1997
42	June 28, 1994
43	November 25, 1997

Additional Information

If you have any questions, please contact your regional office.



THOMAS J. VILSACK, GOVERNOR
SALLY J. PEDERSON, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES
CHARLES M. PALMER, DIRECTOR

March 16, 1999

GENERAL LETTER NO. 18-I-15

ISSUED BY: Bureau of Individual and Family Support Services
Division of Adult, Children and Family Services

SUBJECT: Employees' Manual, Title 18, Chapter I, *Child Care Assistance*, page 41,
revised.

Summary

This general letter transmits A = At Risk "Matching" to the list of changes in instructions to the *Child Care Certificate*, form 470-2959, to add funding codes.

Effective Date

Upon receipt.

Material Superseded

Remove from Employees' Manual, Title 18, Chapter I, page 41, dated February 16, 1999, and destroy it.

Additional Information

Form 470-2959, *Child Care Certificate*, is available as a template on the State Approved Folder on Exchange.

If you have any questions, please contact your regional office.



THOMAS J. VILSACK, GOVERNOR
SALLY J. PEDERSON, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES
JESSIE K. RASMUSSEN, DIRECTOR

July 6, 1999

GENERAL LETTER NO. 18-I-16

ISSUED BY: Bureau of Individual and Family Support Services
Division of Adult, Children and Family Services

SUBJECT: Employees' Manual, Title 18, Chapter I, *Child Care Assistance*, Title page, revised; Contents (pages 1 and 2), revised; pages 1 through 49, revised; and pages 50, 51, and 52, new.

Summary

This general letter transmits:

- ◆ Changes necessary as a result of the merging of the Family Investment Program child care disregard, PROMISE JOBS child care, Transitional Child Care, and Child Care Assistance into a seamless system of child care.
- ◆ Changes in income tables based on the changes in the federal poverty guidelines.
- ◆ Incorporation of the voter registration procedures into the chapter.

Effective Date

July 1, 1999

Material Superseded

Remove the entire from Chapter I Employees' Manual, Title 18, and destroy it. This includes:

<u>Page</u>	<u>Date</u>
Title page	June 28, 1994
Manual Letter XVIII-I-1	December 6, 1994
Contents (page 1)	August 4, 1998
Contents (page 2)	June 13, 1995
1	November 25, 1997
2-4	June 28, 1994
5-6	February 16, 1999
7	July 30, 1996
8	June 24, 1997

9-13	November 25, 1997
14	June 23, 1998
15	February 16, 1999
16	November 25, 1997
17	June 24, 1997
18	October 7, 1997
19	June 24, 1997
20	October 7, 1997
21, 22	June 28, 1994
23	November 25, 1997
24-26, 26a, 26b, 27	December 8, 1998
28	June 24, 1997
29	October 7, 1997
30	June 24, 1997
31	November 25, 1997
32	June 28, 1994
33	June 24, 1997
34	June 28, 1994
35	November 25, 1997
36	June 28, 1994
37	June 23, 1998
38	June 24, 1997
39, 40	February 16, 1999
41	March 16, 1999
42, 43	February 16, 1999
44	June 28, 1994
45, 46	September 22, 1998
47	June 24, 1997
48, 49	June 28, 1994

Additional Information

Refer questions about this general letter to your regional office.



THOMAS J. VILSACK, GOVERNOR
SALLY J. PEDERSON, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES
JESSIE K. RASMUSSEN, DIRECTOR

June 20, 2000

GENERAL LETTER NO. 18-I-17

ISSUED BY: Bureau of Family and Community Support
Division of Adult, Children and Family Services

SUBJECT: Employees' Manual, Title 18, Chapter I, **CHILD CARE ASSISTANCE**,
Contents (pages 1 and 2), revised; pages 5, 11, 14, 24, 25, 26, 32, and 39,
revised; and pages 10a and 10b, new.

Summary

This general letter transmits:

- ◆ Changes to the monthly gross income chart on page 14.
- ◆ Corrections to provider requirements on pages 24 and 25.
- ◆ Changes to the basic care rates and special needs rate for child care providers on page 32.
- ◆ Changes to the chart of monthly income increment levels according to family size on page 39.
- ◆ A change page 5 on eligibility determination specifying that applicants must provide verification of income to receive Child Care Assistance.

Clients must participate in an approvable training or education program in order to receive child care assistance. A section is added on pages 10b and 11 detailing types of training or education that are not approvable.

Effective Date

Training requirements are effective May 1, 2000.
All other changes are effective July 1, 2000.

Material Superseded

Remove from Employees' Manual, Title 18, Chapter I, Contents (pages 1 and 2), and pages 5, 11, 14, 24-26, 32, and 39, all dated July 6, 1999, and destroy them.

Additional Information

If you have any questions, please contact your regional office.



STATE OF IOWA

THOMAS J. VILSACK, GOVERNOR
SALLY J. PEDERSON, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES
JESSIE K. RASMUSSEN, DIRECTOR

August 7, 2001

GENERAL LETTER NO. 18-I-18

ISSUED BY: Bureau of Family and Community Support,
Division of Adult, Children and Family Services

SUBJECT: Employees' Manual, Title 18, Chapter I, *CHILD CARE ASSISTANCE*, pages
14, 39, and 40, revised.

Summary

This chapter is revised to:

- ◆ Update the gross income limits with the federal poverty level for the determination of eligibility for child care assistance.
- ◆ Update the fee assessment schedule with the revised gross income limits.
- ◆ Update form numbers.

Effective Date

July 1, 2001

Material Superseded

Remove the following pages from Employees' Manual, Title 18, Chapter I, and destroy them:

<u>Page</u>	<u>Date</u>
14, 39	June 20, 2000
40	July 6, 1999

Additional Information

Refer questions about this general letter to your regional service administrator.