

Administration of the Child Care Assistance Program

2020-2021 1 County and Tribal Child Care Fund Plan

Administration of the Child Care Assistance Program

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

Print Blank Form

IMPORTANT: If you are not able to complete this form online, clickPrintBlankForm to print the form and complete it by hand.

Minnesota Statute, section 119B.08, subdivision 3

Steps to complete the plan process:

Step One -Review the plan

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

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

Step Two - Draft the plan responses

Step Three – Inform or involve stakeholders

DHSencouragescounties and tribes to develop optional policies for the Child Care Assistance Program incoordination with localchild carestakeholders. This may include: parents, child care providers, culturally specific service organizations, Child Care Awareagencies (formerly known aschild care resource and referral agencies), interagency early intervention committees, potential collaborative partners and agencies involved in the provision of care and education to young children. Consult with other agencystaff such as fraud investigators and income maintenance and employment services staff.

Step Four -Share the draft plan

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

Step Five -Submit the plan by the deadline

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

- Identify all optional county/tribal Child Care Assistance Program policies; see question IX.A.
- Do not answer questions by stating that the reviewershould refer to a previous plan.
- Submit any agency-developed forms that have not been previously submitted and approved. Do not submit DHS and MEC² standardized forms. Refer to the DHS memo announcing this plan for a list of DHS created documents that are required for CCAP.
- Provide an answer to each question. Incomplete plans will be returned.

Amendments to plans

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

MinnesotaRules, part 3400.0150, subpart 3

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

Return completed plans by Friday, August 30, 2019 to:

DHS.CCAP@state.mn.us





Administration of the Child Care Assistance Program

I. Child Care Assistance Program contacts

A. County or tribal agency

| COUNTYORTRIBENAME | GEN | ERALPHONENUMBER | EXTENSION | GEN | NERALFAX | NUMBER |
|---|-----|-----------------|--------------|------|----------|-----------|
| 1 | 612 | 2-348-5937 | | 612 | 2-288-2 | 982 |
| AGENCY'SFULL NAME | | | CCAP INTAKEP | HONE | ENUMBER | EXTENSION |
| Hennepin County Human Serviceshhhh | | | 612-348-5 | 937 | , | |
| MAIN OFFICESTREET ADDRESS | | CITY | | | ZIPCODE | |
| Child Care Assistance-MC718, 300S6th St | | Minneapolis | | | 55487 | -0718 |
| MAIN OFFICEMAILINGADDRESS(if different) | | CITY | | | ZIPCODE | • |
| sameasabove | | | | | | |

B. County or tribal branch office (if applicable)

| 5. County of tribal branch | ` , | | | | | |
|--------------------------------|--------------------|-----------|-------------------|----------------|----------|-----------|
| BRANCH NAME | GENERALPHONENUMBER | EXTENSION | GENERALFAX NUMBER | CCAP INTAKEPHO | NENUMBER | EXTENSION |
| Northwest FamilyService Center | 612-348-5937 | | | | | |
| ADDRESSOFBRANCH OFFICE | I | CITY | 1 | | ZIPCODE | |
| 7051 Brooklyn Blvd | | | klyn Center | | 55429 | |
| BRANCH NAME | GENERALPHONENUMBER | EXTENSION | GENERALFAX NUMBER | CCAP INTAKEPHO | NENUMBER | EXTENSION |
| South Suburban Service Center | 612-348-5937 | | | | | |
| ADDRESSOFBRANCH OFFICE | I | CITY | 1 | | ZIPCODE | |
| 9600 Aldrich AveSouth | | Bloo | mington | | 55420 | |
| BRANCH NAME | GENERALPHONENUMBER | EXTENSION | GENERALFAX NUMBER | CCAP INTAKEPHO | NENUMBER | EXTENSION |
| Central/NEMpls Human Service | 612-348-5937 | | | | | |
| ADDRESSOFBRANCH OFFICE | | CITY | | | ZIPCODE | |
| 525 Portland AveSouth | | Minr | neapolis | | 55415 | |
| BRANCH NAME | GENERALPHONENUMBER | EXTENSION | GENERALFAX NUMBER | CCAP INTAKEPHO | NENUMBER | EXTENSION |
| North Mpls Human Service Cente | 612-348-5937 | | | | | |
| ADDRESSOFBRANCH OFFICE | I | CITY | 1 | | ZIPCODE | |
| 1001 Plymouth Ave N | | Minr | Minneapolis 55411 | | | |
| BRANCH NAME | GENERALPHONENUMBER | EXTENSION | GENERALFAX NUMBER | CCAP INTAKEPHO | NENUMBER | EXTENSION |
| South Mpls Human Service Cente | 612-348-5937 | | | | | |
| ADDRESSOFBRANCH OFFICE | | CITY | | | ZIPCODE | 1 |
| 2215East LakeStreet | | Minr | neapolis | | 55407 | |
| BRANCH NAME | GENERALPHONENUMBER | EXTENSION | GENERALFAX NUMBER | CCAP INTAKEPHO | NENUMBER | EXTENSION |
| West Suburban Human Service C | 612-348-5937 | | | | | |
| ADDRESSOFBRANCH OFFICE | ı | CITY | 1 | 1 | ZIPCODE | 1 |
| 1011 1st Street South | | Нор | kins | | 55343 | |
| | | | | | | Addbranch |

Page 2 of 24

C. Agency contact people

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

1. County or tribal CCAP administrative contact

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

| | | | <u> </u> | | | | | |
|-------------------------------|---------|---------------------------|-------------------|----------|-------------|-----------|-------------------|--|
| | | O | FIRST NAME | | LAST NAME | | | |
| Mr. | ○ Mrs. | ○ Ms. | Jason | Jason | | Hedin | | |
| TITLE | | | | | PHONENUMBER | EXTENSION | FAX NUMBER | |
| Human ServicesProgram Manager | | 612-596-9173 | | | | | | |
| EMAIL AD | DRESS | | | SIREMAIL | IL ADDRESS | | | |
| jason.hedin@hennepin.us X127D | | 27D1S@CTY.DHS.STATE.MN.US | | | | | | |
| ADDRESS CITY | | | | ZIPCODE | | | | |
| Child C | are Ass | istance- | MC629, 300S6th St | Minnea | apolis | | 55407 | |
| | | | | | | | Addcontact person | |

2. County or tribal client accesscontact

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

| contact. | | | | | | |
|---|-------------------|-------------------|--------------|-----------|-------------------|----------|
| 0 0 0 | FIRSTNAME | | LASTNAME | | | × |
| ○ Mr. ○ Mrs. ● Ms. Kathleen | | | Brunelle | | | |
| TITLE | | | PHONENUMBER | EXTENSION | FAX NUMBER | 7 |
| Human ServicesSuper | visor | | 612-348-6914 | | | |
| EMAIL ADDRESS | | SIREMAIL | ADDRESS | l | | 7 |
| kathy.brunelle@henne | pin.us | | | | | |
| ADDRESS | | CITY | | | ZIPCODE | |
| Child Care Assistance- | MC718, 300S6th St | Minnea | polis | | 55487 | |
| 0 0 - | FIRST NAME | | LAST NAME | | | × |
| ○ Mr. ○ Mrs. ● Ms. | Lea | | Bloomquist | | | |
| TITLE | | | PHONENUMBER | EXTENSION | FAX NUMBER | \dashv |
| Human ServicesSuper | vsior | | 612-543-0152 | | | |
| EMAIL ADDRESS | | SIREMAIL | ADDRESS | | | |
| lea.bloomquist@henne | epin.us | | | | | |
| ADDRESS | | CITY | | | ZIPCODE | |
| Child Care Assistance- | MC718, 300S6th St | Minneapolis 55487 | | | 55487 | |
| | FIRST NAME | | LAST NAME | | | × |
| ○ Mr. ○ Mrs. ● Ms. | Leah | | De Carvalho | | | |
| TITLE | | | PHONENUMBER | EXTENSION | FAX NUMBER | |
| Human ServicesSuper | visor | | 612-348-3145 | | | |
| EMAIL ADDRESS | | SIREMAIL | ADDRESS | | | 7 |
| leah.decarvalho@henr | nepin.us | | | | | |
| ADDRESS | | | CITY ZIPO | | | |
| Child Care Assistance-MC718, 300S6th St | | | polis | | 55487 | |
| | | - | | | Addcontact person | n |

Page 3 of 24 DHS-5107-ENG 6-19

3. Management of waiting list contact

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

| O O O | FIRST NAME | | LASTNAME | | | |
|---|------------|------------------|-----------|------------|--|--|
| ○ Mr. ○ Mrs. ● Ms. | Kathy | Cathy | | Brunelle | | |
| TITLE | | PHONENUMBER | EXTENSION | FAX NUMBER | | |
| Human ServicesSupervisor | | 612-348-6914 | | | | |
| EMAIL ADDRESS \$ | | SIREMAIL ADDRESS | | | | |
| kathy.brunelle@hennepin.us | | | | | | |
| ADDRESS | | CITY | | ZIPCODE | | |
| Child Care Assistance-MC718, 300S6th St Minnear | | oolis | | 55487 | | |

4. Provider billing contact

Who isyour lead billing contact person who isable to answer questions about billing and payments? Only identify one provider billing contact.

| | FIRST NAME | | LAST NAME | | |
|---|---------------------------|------------------|--------------|-----------|------------|
| ☐ Mr. ☐ Mrs. ④ Ms. | ○ Mr. ○ Mrs. ● Ms. Sheree | | Handorff | | |
| TITLE | | | PHONENUMBER | EXTENSION | FAX NUMBER |
| Senior Accountant | | | 612-348-3406 | | |
| EMAIL ADDRESS | | SIREMAIL ADDRESS | | | |
| sheree.handroff@henr | epin.us | | | | |
| ADDRESS | | CITY | | | ZIPCODE |
| HSPHD - AccountsPayable - 300South 6th Street | | Minnear | oolis | | 55487-0999 |

5. Provider registration contact

Who isyour lead provider registration contact person who isable to answer questions about provider registrations? Only identify one provider registration contact.

| O., O., O., | Mo | | LAST NAME | | |
|--|----|-----------------------------|--------------|-----------|------------|
| ☐ Mr. ☐ Mrs. ● Ms. | | | Bloomquist | | |
| TITLE | | | PHONENUMBER | EXTENSION | FAX NUMBER |
| Human ServicesSupervisor | | | 612-543-0152 | | |
| EMAIL ADDRESS SIF | | SIREMAIL ADDRESS | | | |
| lea.bloomquist@hennepin.us | | x127g33@cty.dhs.state.mn.us | | | |
| ADDRESS | | CITY | | | ZIPCODE |
| Child Care Assistance - MC718, 300S6th St Minnea | | Minneapolis 55487 | | 55487 | |

6. LNL provider monitoring contact

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

| O O O | FIRST NAME | | LAST NAME | | | |
|--------------------------|---------------|------------|--------------------------|-----------|------------|--|
| ○ Mr. ○ Mrs. ● Ms. | Lea | | Bloomquist | | | |
| TITLE | | | PHONENUMBER | EXTENSION | FAX NUMBER | |
| Human ServicesSupervisor | | | 612-543-0152 | | | |
| EMAIL ADDRESS SIREMAIL | | SIREMAIL A | MAIL ADDRESS | | | |
| lea.bloomquist@henne | pin.us x127g3 | | 7g33@cty.dhs.state.mn.us | | | |

| ADDRESS | CITY | ZIPCODE |
|---|-------------|---------|
| Child Care Assistance - MC718, 300S6th St | Minneapolis | 55487 |

D. Subcontracted services

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

MinnesotaRules, part 3400.0140, subpart 7

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

Doesyour county or tribe contract with an agency for any part of theadministration of CCAP? Oyes No

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

II. Collaboration and outreach

A. How do you share information about the Child Care Assistance Program so that individuals, child care providers, social service agencies, etc. areaware of child careassistance? (MinnesotaRules, part 3400.0140, subpart 2)

Child Care Assistance workers are located in several different community locations where information about the Child Care Assistance program and applications are available to the public. There is an Internet site that describes the Child Care Assistance program, eligibility requirements and helpful information on how to choose a quality child care provider. There is a general intake phone number for all general child care questions. We are frequently involved in community outreach efforts to distribute information about the program. During the year we send informational notices to providers, parents and community agencies as needed. The Child Care area responds to community requests for speakers and information.

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

Hennepin County works with contracted MFIPEmployment Service Providers, ThinkSmall, Parent Aware, MinneapolisSchools, District 287, and Strong Beginnings partners to maximize community resources for families with young children.

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

Weareactively involved in responding to community agencies and the public. Each year we fulfill speaking requests by giving presentations. Our program staff are located in numerous community sites and they work collaboratively with community agencies to coordinate services for families. Weattend community meetings and arealso involved in teen parent meetings. Weshare dataabout the families who use our program in an effort to work collaboratively with community agencies.

Page 5 of 24 DHS-5107-ENG 6-19

D. Copies of the proposed plan must be made reasonably available to the public, including those interested in child care policies such as parents, child care providers, culturally specific service organizations, Child Care Aware of Minnesotagencies (child care resource and referral), interagency early intervention committees, potential collaborative partners and agencies involved in the provision of care and education to young children. You must allow time for public review and comment prior to submitting this plan to DHS for approval. (MinnesotaStatute, section 119B.08, subdivision 3 (2)). 1. Describe your procedures and methods to make copies of the **draft plan** reasonably available to the public. Hennepin County's proposed Child Care Assistance Plan will be posted for public review on the Hennepin County Child Care Assistance web site (http://www.hennepin.us/residents/human-services/child-care-assistance) under Statutory Information. 2. When wasyour draft plan available for public review? Prior to DHSsubmission. E. After your plan isapproved by DHS, do you post your approved county/tribal plan on your website? Yes \(\) No III. Eligibility A. Education plansoutside an Employment Plan Prior to completing thissection, please review MinnesotaRules, part 3400.0040 and MinnesotaStatutes 119B.10Subdivision 3 in their entirety to ensure your policies are in compliance. 1. High school diploma/GED high school equivalency diploma **1a.** Do you approve all high school and GED programs? Yes \(\cap \) No 2. Remedial and basicskillscourses (includes Adult Basic Education and English as a Second Language) **2a.** Do you approve all remedial and basicskillscourses? ○ Yes • No If no, what program(s) would you deny? We follow the same training criteria used by MFIPEmployment Services as part of assisting aclient in becoming employed full-time: * ESL training would only approved if client is below the equivalent of Spoken Language Proficiency (SPL) of 6 (MFIP EMPLOYMENTSERVICESMANUAL 9.30). Client would be denied if at an SPL of 6 or above asaSPL above of 6 or above is deemed employable. * ABE/Remedial training would only beapproved if client does not have a high school diploma or GED or is needing

* ABE/Remedial training would only beapproved if client does not have a high school diploma or GED or is needing this training for college course enrollment to improve employability (MFIPEMPLOYMENTSERVICESMANUAL 9.24). Client would be denied if they have a high school/diploma or GED and do not have plans to attend post-secondary training as they would be considered employable.

2b.Explain why you would deny a program. Include dataand facts that support whystudents should not receive CCAP while attending.

| • | |
|------------------------------|--|
| Denial reasons listed above. | |

3. Post-secondary programs

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

- 1) Clients must complete an Education Plan (Attachment S-1) listing information on training program, training institution, education history, training goals and employment goals.
- Post-secondary clients must beattending a training institution that meets one of the following:
- Approved by the Higher Education Coordinating Board Institution of Higher Education
- Approved by the Minnesota Department of Human Services through a funding agreement

Page 6 of 24 DHS-5107-ENG 6-19

- HasState and Federal related financial aid available tostudents
- 2) At application (if client is an ongoing student) and at redetermination the student must verify that they are making satisfactory progress as determined by the institution
- 3) Training program would result in marketableskills in an available, full-time job.
- 4) If client iscurrently working or had been working in the past 12 months, anticipated starting wageafter training must beat least 125% of wage during time client wasemployed.
- **3b.** Identify the factors that contribute to the above criteria (for example: the availability of jobs where family resides or intends to reside, wage data, job placement rates in field of study).

Factors used in education plan approval include:

- The plan must lead to marketableskills resulting in an available full-time job (through information gathered from www.iseek.org, www.bls.gov, or job placement/salary from training institution)
- For parents that have worked in the last 12 months or are currently working, theanticipated starting wage must be at least 125% of the wageat the time the parent was or isemployed

4. Changes to education plansoutside an Employment Plan

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

B. Basic Sliding Fee Waiting List management

1. Priorities forservice

Have you established sub-priorities for the fifth priority BasicSliding Fee waiting list beyond those required in MinnesotaStatute, section 119B.03, subdivision 4?

○Yes ● No

2. Six month review of Basic Sliding Fee Waiting List

CCAP Policy Manual, Chapter 4.3.12.12 Minnesota Statute, section 119B.03, subdivision 2

2a. Statute requires that you review and update your waiting list

at least everysix months. How are families notified of thissix month review? Describe your agency's process for reviewing and updating the waiting list. Please include your agency's six month review letter in Section IX.B. If your agency does not currently have a waiting list, describe your process in the event your agency does start a waiting list.

All families that are currently on the waiting list are sent a questionnaire everysix months (Attachment A-1). They are told about this questionnaire when they are first added to the waiting list, and again with theactual questionnaire. The family's information is updated based on information reported on returned questionnaires.

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

Families are not removed from the waiting list if they do not respond to questionnaire. Family's information remains as is until they report any changes via questionnaire or phone/in-person inquiry.

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

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

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

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

Page 7 of 24 DHS-5107-ENG 6-19

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

MinnesotaRules, part 3400.0040, subpart 17

MinnesotaRules, part 3400.0060, subpart 6

Are there exceptions to the 90 day policy that extends the timeframe for a family who has reached the top of the waiting list and is temporarily ineligible? ○ Yes • No C. Child care for school release days 1. How do case workers authorize care for school release days in your agency? **CCAP Policy Manual,** Chapter 9.1.3 O Authorize actual hours needed and increase or decrease hours based on known school release days. Authorize the hours care is needed when there are no school release days. • Authorize the highest number of hours care is needed with the provider. Other method. How do you authorize child care for school release days? Child Care Assistance workers add comments to authorization notices for parents and providers regarding amount of careauthorized for school-release days, and an Inter-Departmental case note isadded to inform billing workers about maximum hours to pay for school release days. 2. How do you communicate scheduled and authorized hours to parents, providers and billing workers? Seeabove D. Child care for families with flexibleschedules How do case workers authorize care for families with flexible schedules in your agency? **CCAP Policy Manual,** Chapter 9.1.6 Authorize the typical number of hours needed and when the schedule requires additional care, the provider bills for the additional care. O Authorize the minimum number of hours care is needed and when the schedule requires additional care, the provider bills for theadditional care. Payment is made by increasing the number of hours listed in the "total hours of care authorized" field on the billing window or by creating a new Service Authorization. O Authorize the highest number of hours care is needed with the provider. The provider is expected to bill only for the time that care is needed. Other method. 2. How do you communicate scheduled and authorized hours to parents, providers and billing workers? Notify byservice authorizations and notices E. Authorizing care for clients with Employment Plans Job counselors and CCAP workers must communicate child care needs for clients with Employment Plans. Guidance is found in CCAPPolicy Manual, Chapter 9.1.5. CCAP workers must obtain an activity schedule or the daysand times that child care is needed. Who is responsible for obtaining the schedule information from the client? Job counselor providesschedule or daysand times that child care is needed to CCAP worker. CCAPworker obtains schedule from client. Other method.

Page 8 of 24 DHS-5107-ENG 6-19

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

The Child Care Plan communicates information from the Employment Counselor to the child care worker. The Employment Counselor reviews the child care provider's hours of operation, the children's school schedule and the hours of activity for both parents before recommending amount of care on the Child Care Plan.

IV. Provider compliance policies

A. Reasons for closing a provider's registration

<u>MinnesotaStatutes, section 119B.13, subdivision 6(d)</u> allows counties and tribes to refuse to issue achild careauthorization, revoke an existing authorization for a provider, stop payment, or refuse to pay a bill under circumstances described in thesix clauses below. Counties and tribes must indicate which clauses they will include in their plan, and must apply the policies consistently to providers.

CCAP PolicyManual, Chapter 9.3

CCAP PolicyManual, Chapter 14

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

Doesyour agency plan to disqualify providers for reasons listed in MinnesotaStatutes, section 119B.13, subdivision 6(d)? ● Yes ○ No

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

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

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

When enforcing this clause, you have the option to use MEC² generated notices or DHS optional notices to notify providers and/or families. The DHS optional notice to families communicates they are still eligible for CCAP. The DHS optional notice to providers gives specific information on why their registration closed and, according to policy, does not include provider appeal rights. Contact your CCAPPolicySpecialist for samples of the DHS optional notices and instructions on how to use the notices.

| What type of notice will you send to families? | MEC² generated notices | O DHS optional notices |
|---|---|------------------------|
| What type of notice will you send to providers? | MEC ² generated notices | O DHSoptional notices |

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

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

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

Page 9 of 24 DHS-5107-ENG 6-19

| | and/or families. The DHS optional notice to families communicates they are still eligible for CCAP. The DHS optional notice to providers gives specific information on why their registration closed and, according to policy, does not include provider appeal rights. Contact your CCAPPolicySpecialist for samples of the DHS optional notices and instructions on how to use the notices. |
|-------------|--|
| | What type of notice will you send to families? |
| | What type of notice will you send to providers? |
| | Note: If your agency uses DHS optional notices, add the optional notice(s) to Section IX.Band if the document(s) have not yet been approved by DHS, submit with this plan for review and approval. You must also close the provider's registration in MEC ² . Contact your CCAPPolicySpecialist for system instructions. |
| \boxtimes | Clause 3: A provider is in violation of Child Care Assistance Program rules, until theagency determines the violations have been corrected. |
| | What CCAP rules are you choosing to implement under this clause? |
| | Mail is returned as undeliverable and agency has not received a response/verification from provider to request regarding change in address (usually LNL, but could be licensed providers) by 15 day deadline. Provider must submit verification of address change and documentation that provider has met state requirements for new address (if provider is a licensed family, licensed center, or a licensed exempt program), before county will consider reopening registration. County has received information that conflicts with information on file for rates/payment policies, business hours, site contact or payment contact, and provider has failed to provide requested information by the 15 day deadline. Provider will need to provide updated information before county will consider reopening registration. |
| | Hennepin County will close registration with a 15 day notice in above situations. |
| | How will your agency determine the provider hascorrected the condition? |
| | Once provider submits required verification to determine whether registration can be reopened or to clarify changes that affect payments |
| | Your agency may withhold payment for a period of up to three months beyond the time the condition has been corrected. |
| | Will you apply a penalty period beyond when the condition iscorrected? ○ Yes ● No |
| | When enforcing this clause, you have the option to use MEC ² generated notices or DHSoptional notices to notify providers and/or families. The DHSoptional notice to families communicates they are still eligible for CCAP. The DHSoptional notice to providers gives specific information on why their registration closed and, according to policy, does not include provider appeal rights. Contact your CCAPPolicySpecialist for samples of the DHSoptional notices and instructions on how to use the notices. |
| | What type of notice will you send to families? |
| | What type of notice will you send to providers? |
| | Note: If your agency uses DHS optional notices, add the optional notice(s) to Section IX.Band if the document(s) have not yet been approved by DHS, submit with this plan for review and approval. You must also close the provider's registration in MEC ² . Contact your CCAPPolicySpecialist for system instructions. |
| | Clause 4: A provider is operating after receipt of a licensing order of suspension or revocation (this occurs when providers are appealing the revocation or suspension) or a final order of conditional license, for as long as the conditional license is in effect. |
| | Note: Agencies do not have the option to close registrations of providers operating with conditional licenses. |
| | If you choose this option, DHS will send you a list once a month to inform you of providers in this category. You may act sooner if you learn of this licensing status through your licensors, etc. Contact your CCAPPolicySpecialist if you are planning |

Page 10 of 24 DHS-5107-ENG 6-19

to takeaction prior to receiving the monthly DHS listing.

| What licensing violations are subject to this clause? | | | | | | |
|--|--|--|--|--|--|--|
| Providers with asuspended license? • Yes O No | | | | | | |
| When applying this clause for a provider with asuspended license, what provider types will you apply the clause to? \(\text{Licensed family child care} \text{Licensed centers} \text{Both} \) | | | | | | |
| Providers with a revoked license? • Yes O No | | | | | | |
| When applying this clause for a provider with a revoked license, what provider types will you apply the clause to? \(\text{Licensed familychild care} \) \(\text{Licensed centers} \) \(\text{\text{Both}} \) Both | | | | | | |
| When enforcing this clause, you have the option to use MEC ² generated notices or DHS optional notices to notify providers and/or families. The DHS optional notice to families communicates they are still eligible for CCAP. The DHS optional notice to providers gives specific information on why their registration closed and, according to policy, does not include provider appeal rights. Contact your CCAPPolicySpecialist for samples of the DHS optional notices and instructions on how to use the notices. | | | | | | |
| What type of notice will you send to families? | | | | | | |
| What type of notice will you send to providers? | | | | | | |
| Note: If your agency uses DHS optional notices, add the optional notice(s) to Section IX. Band if the document(s) have not yet been approved by DHS, submit with this plan for review and approval. You must also close the provider's registration in MEC ² . Contact your CCAPPolicySpecialist for system instructions. | | | | | | |
| Clause 5: A provider submits falseattendance reports or refuses to provide documentation of the child's attendance upon request. How will your agency determine the provider hascorrected the condition? ATTENDANCERECORDS Determining Compliance: When the county/agency determines that the provider hassubmitted false attendance records, or the provider has refused to provide documentation of the child's attendance records upon request, theagency will send a 15 day adverseaction notice to both the provider and the family, indicating that the provider will no longer beauthorized asaChild Care Assistance Program provider. During the 15 day adverseaction period, the provider will be required to submit the following: Accurate attendance records through the 15 day adverseaction period. Asigned Provider ComplianceStatement - AttendanceRecords (Attachment P-2) to the county/agency, stating how provider is assuring compliance with the attendance record keeping requirements. A copy of an updated attendance record template that will be used. Details on how both employees and clients will be notified of the attendance record requirements. | | | | | | |
| Your agency may withhold payment for a period of up to three months beyond the time the condition has been corrected. | | | | | | |
| Will you apply a penalty period beyond when the condition iscorrected? • Yes • No | | | | | | |
| How long will payment be withheld once the condition has been corrected (not to exceed three months)? Withholding Payments: The provider will serve a 30, 60 or 90 daysuspension once compliance has been established: • First violation: 30 days • Second violation: 60 days • Third violation and subsequent violations: 90 days | | | | | | |
| Once it is determined that a provider hascomplied with the CCAPPolicy, and the provider hasserved their penalty period, the provider must complete new registration paperwork and re-register. | | | | | | |

When enforcing this clause, you have the option to use MEC² generated notices or DHS optional notices to notify providers and/or families. The DHS optional notice to families communicates they are still eligible for CCAP. The DHS optional notice to providers gives specific information on why their registration closed and, according to policy, does not include provider appeal rights. Contact your CCAPPolicySpecialist for samples of the DHS optional notices and instructions on how to use the notices.

Page 11 of 24 DHS-5107-ENG 6-19

| | What type of notice will you send to families? MEC ² generated notices DHSoptional notices | | | | | | |
|--|--|--|--|--|--|--|--|
| What type of notice will you send to providers? MEC2 generated notices DHSoptional notices | | | | | | | |
| | Note: If your agency uses DHS optional notices, add the optional notice(s) to Section IX.Band if the document(s) have not yet been approved by DHS, submit with this plan for review and approval. You must also close the provider's registration in MEC ² . Contact your CCAPPolicySpecialist for system instructions. | | | | | | |
| \boxtimes | Clause 6: A provider gives false child care price information. | | | | | | |
| | How will your agency determine the provider hascorrected the condition? | | | | | | |
| | CHILDCAREPRICEINFORMATION Determining Compliance: When the county/agency determines that the provider has given false child care price information, theagency will send a 15 day adverseaction notice to both the provider and the family, indicating that the provider will no longer beauthorized asaChild Care Assistance Program provider. During the 15 day adverseaction period, the provider will be required to submit the following: • Accurate child care price information to the Child Care Assistance Program of each county with which provider is registered. • A copy of the document that is distributed/displayed to the publicshowing accurate child care price information • Asigned Provider Compliance Statement - Child Care Pricing (Attachment P-3) to the county/agency, stating | | | | | | |
| | how provider isassuring compliance with providing accurate child care price information | | | | | | |
| | Your agency may withhold payment for a period of up to three months beyond the time the condition has been corrected | | | | | | |
| | Will you apply a penalty period beyond when the condition iscorrected? ● Yes ○ No | | | | | | |
| | How long will payment be withheld once the condition has been corrected (not to exceed three months)? | | | | | | |
| | Withholding Payments: The provider will serve a 30, 60 or 90 daysuspension once compliance has been established: • First violation: 30 days • Second violation: 60 days • Third violation and subsequent violations: 90 days Once it is determined that a provider hascomplied with the CCAPPolicy, and the provider hasserved their penalty period, the provider must complete new registration paperwork and re-register. | | | | | | |
| | When enforcing this clause, you have the option to use MEC ² generated notices or DHS optional notices to notify providers and/or families. The DHS optional notice to families communicates they are still eligible for CCAP. The DHS optional notice to providers gives specific information on why their registration closed and, according to policy, does not include provider appeal rights. Contact your CCAPPolicySpecialist for samples of the DHS optional notices and instructions on how to use the notices. | | | | | | |
| | What type of notice will you send to families? | | | | | | |
| | What type of notice will you send to providers? | | | | | | |
| | Note: If your agency uses DHS optional notices, add the optional notice(s) to Section IX. Band if the document(s) have not yet been approved by DHS, submit with this plan for review and approval. You must also close the provider's registration in MEC ² . Contact your CCAPPolicySpecialist for system instructions. | | | | | | |
| | Clause 7: A provider fails to report decreases in achild's attendance. A provider must report to the county on the billing form when achild's attendance in child care falls to less than half of the child's authorized hours or days for a four-week period. | | | | | | |

Page 12 of 24 DHS-5107-ENG 6-19

B. Notification toproviders

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

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

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

Providers are notified of this information in a document regarding Important Information for Child Care Providers (Attachment P-1) which issent in registration approval packets.

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

V. Policiesapplicable to legal nonlicensed (LNL) providers

A. Unsafe care

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

The department has identified that when substantiated maltreatment occurred in a legal nonlicensed caresetting related to an incident whereachild died or wasseriously injured, the child caresetting isconsidered unsafe care. A serious injury is one that requires treatment by a physician.

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

Providers may also be disqualified from registration if any of the following safety conditions are present in the child carearrangement, based on evidence from social service agencies, law enforcement personnel, medical personnel, or other credible evidence. (Attachment B)

- Dangerous, or uncontrolled animals (such as Pit bull or Rottweiler dogs, or cocks bred for fighting),
- Substandard sanitation (such asclutter that inhibits free movement in the home, undisposed pet or other urine or feces, or uncontained garbage),
- Lack of age-appropriatesupervision (such as inadequatesupervision of young children),
- Child access to drugs or guns
- Illegal activities that may place the child in a harmful situation (such as prostitution, drug sales or production, or access to firearms),
- Presence of aknown sex offender
- •Care provider has aknown physical or emotional impairment that inhibits their ability to appropriately care for the child(ren), or interferes with their ability to respond promptly to an emergency situation (such as a provider who has their own Personal Care Attendant for a disabling condition)
- Substantiated child protection reports involving any household members
- Listed as a "multi-state offender" on BCA results until FBI report is submitted showing offenses that would not disqualify a provider

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

Page 13 of 24 DHS-5107-ENG 6-19

B. Imminent risk

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

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

Providers may also be disqualified from registration if any of the following safety conditions are present in the child carearrangement, based on evidence from social service agencies, law enforcement personnel, medical personnel, or other credible evidence. (Attachment B)

- Dangerous, or uncontrolled animals (such as Pit bull or Rottweiler dogs, or cocks bred for fighting),
- Substandard sanitation (such asclutter that inhibits free movement in the home, undisposed pet or other urine or feces, or uncontained garbage),
- Lack of age-appropriatesupervision (such as inadequatesupervision of young children),
- Child access to drugs or guns
- Illegal activities that may place the child in a harmful situation (such as prostitution, drug sales or production, or access to firearms),
- Presence of aknown sex offender
- Care provider has aknown physical or emotional impairment that inhibits their ability to appropriately care for the child(ren), or interferes with their ability to respond promptly to an emergency situation (such as a provider who has their own Personal Care Attendant for a disabling condition)
- Substantiated child protection reports involving any household members
- Listed as a "multi-state offender" on BCA results until FBI report is submitted showing offenses that would not disqualify a provider

C. Annual monitoring

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

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

| _ ' | |
|--|--|
| Run internal reports using the data warehouse. | |
| | |

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

Hennepin County's licensing area will be notified of LNL providers due for annual monitoring visits. The licensing area will perform monitoring visits and notify child care registration of outcome of visit. Child care registration will takeactions to approve or close registration based on findings.

| B. If a provider does not show compliance with an annual monitoring visit, under what conditions can they receive CCAP payments in the future? |
|--|
| Only if the provider is licensed |
| The provider must show compliance with another monitoring visit |
| Other |
| |

Page 14 of 24 DHS-5107-ENG 6-19

D. Complaints and incidents

1. Records of substantiated parental complaints

Within 24 hours of receiving acomplaint concerning the health or safety of children under the care of a legal nonlicensed (LNL) provider, an agency must relay the complaint to theagency's child protection agency, county public health agency, local law enforcement, and/or other agencies with jurisdiction to investigate complaints. Information regarding substantiated complaints must be released following applicable data privacy laws. See MinnesotaStatutesChapter13. When a report is substantiated, see MinnesotaRules, part 3400.0140, subpart 6, for record retention and provider payment policies.

When complaints are substantiated how do you:

1a. Maintain these records?

Theagency takescomplaints regarding all providers. Follow-up is taken to determine if the complaint is well founded and warrants a termination of the Legal Nonlicensed Provider's registration. If so, information to that affect is retained in theagency file and madeavailable to the public when requested. If the complaint does not result in the termination of the registration, Hennepin County would not keep the information and it would not beavailable upon request.

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

See 1a.

2. Aggregate reporting of incidents

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

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

| Intarnal | monitoring | ranart |
|----------|------------|---------|
| писпа | | IGLANI. |

VI. Special needs rates

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

Minnesota Statute, section 119B.13, subdivision 3 MinnesotaRules, part 3400.0130, subpart 3

CCAP Policy Manual, Chapter 9.54

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

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

1. Do you pay aspecial needs rate for at-risk populations? ● Yes ○ No

If yes, identify which at-risk populationsyou pay aspecial needs rate

Children of teens enrolled in specialized Teen Parent Programs and children from low income communities that attend Strong Beginnings Centers.

Page 15 of 24 DHS-5107-ENG 6-19

2. If you have chosen to payspecial needs rates for at-risk populations, include information for each child care provider that providesspecialized services for theat-risk populations identified above. You must have DHSapproval for special needs rates to be paid. If you have acontract or agreement with the identified child care provider, submit the contract or agreement as an attachment to this plan. Attach a rateschedule for each at-risk child care provider or populationserved that identifies the rate begin date, rate end date, and rate amount.

| Organization name/ | Provider name | License or certification number | At-risk population served | Documentation that supportsspecialized services by provider to the at-risk population | Documentation inclient file that supports that the child isincluded in the at-risk population |
|--|---|---------------------------------|---------------------------------|---|---|
| 1. A Baby's Space -Tatonka Academy | 1. A Baby'sSpace - Tatonka Academy 2. Anew Dimension 3. Center of Excellence 4. Four Directions Family Center 5. LaCreche AppletreeEarly Childhood Center 6. LaCrecheEarly Childhood Center 7. LaCreche II Early Childhood Centers, Inc. 8. Multicultural Therapeutic Children's Program 9. Northside Child Development Center 10. Turnquist Child Enrichment Center 11. YWCA Minneapolis Children's Center | 1. 1044125, 2. 8 | | 1. Attachment E 2. Attachment F 3. Attachment G 4. Attachment H 5, 6,& 7 Attachment I 6. Attachment I 7. Attachment J 9. Attachment K 10. Attachment L 11. Attachment M | Client lists use of particular provider in application or redetermination |
| 1, 2,3 & 4 Minneapolis PublicSchools Special District #15 & 6 Intermediate District 287 7. Anoka | 1.Teen Parent Service – LONGFELLOW 2.Teen Parent Service – North high 3.Teen Parent Service – | 1. 801711 2. 801 | Children of tee | 1, 2, 3,& 4 Attachment O Attachment N Attachment N Attachment R | |

Page 16 of 24 DHS-5107-ENG 6-19

| Hennepin District #11 | ROOSEVELT / WELLSTONE | | |
|--------------------------|-----------------------|--|----------|
| | | | Addgroup |

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

B. Special needs rates for care of sickchildren

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

MinnesotaRules, part 3400.0110, subpart 8

| Do you pa | yaspecia | I needs rate fo | or care of sic | k children? |
|-------------------------------|----------|-----------------|----------------|-------------|
|-------------------------------|----------|-----------------|----------------|-------------|

VII. Payment policies

A. Provider registration renewal

How often do you renew a provider's registration?

Minnesota Statute, section 119B.125, subdivision 1

B. Payment to two providers when achild issick

When achild issick and being cared for by asecond provider, do you pay both the regular provider that charges an absent day and the second provider that iscaring for the child?

Minnesota Statutes, secton 3400.0110, subpart 8

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

Page 17 of 24 DHS-5107-ENG 6-19

C. Submission of invoices

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

Minnesota Statute, section 119B.13, subdivision 6

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

MNStatutes 119B.13, Subd 6Brequires that all bills for current or past services must be submitted within 60 days from the date that billing form was initially generated OR the last day of services indicated on that form, whichever is later. Statuteallows for good cause.

| fc | ennepin County haschosen a 30 day grace period for all submitted bills, regardless of reason. The 60 day deadline or billing is outlined in the DHSProvider Guide, each billing form generated off of MEC2, and with initial Registration opproval packets. |
|----|---|
| 2 | Doesyour agency haveany providers using MEC ² PRO? • Yes |
| | 2a. DHSstatesCCAPagencies can decide which providers are granted access to submit bills using MEC ² PRO. How do you decide which providers are granted access? |
| | Centers are only granted access to MEC2PRO. |
| | 2b. When would you deny or revoke MEC ² PRO access to any of these providers? |
| | If a center's registration is intact, Hennepin County would not deny access to MEC2PRO. Only deny if registration ends. |
| 3 | When is a provider signature not needed on a billing form? |
| | Hennepin County considered the electronic submission of a bill the equivalent of the provider's signature. Hennepin County always requires a provider signature on paper billing forms. |
| 4 | Do you require the parent signature on the billing form? ○ Yes |
| | . Underpayments you have underpaid according to Child Care Assistance Program policies, do you make corrective payments? |

Yes \(\cap \) No

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

- 1) When underpayment is due to agency error, corrective payments will be considered within the one year from when the billing form was generated or last date of service, whichever is later.
- 2) When underpayment was due to provider's error in billing, corrective payment will be considered within 90 days from when the form was generated or last date of service, whichever is later.

E. Provider rates

Doesyour agency enter provider rates on MEC²? • Yes ONo

Page 18 of 24 DHS-5107-ENG 6-19

F. Absent day policy

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

Minnesota Statute, section 119B.13, subdivision 7

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

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

List the providers and provide the following information:

| Provider name | License or certification number | How does provider document the services they provide? | How are these requests reviewed by your county/tribe? |
|--|---------------------------------|--|---|
| Brooklyn Center BabySteps | 1060749 | Through CCARegistration paperwork every two years | Reviewed as part of renewing registration |
| East Creek Child Care | 800278 | same | same |
| CAPECenter | 830831 | same | same |
| North Education Center Alternative (NECA) | 801864 | same | same |
| South Education Center Alternative (SECA) | 801863 | same | same |
| Teen Parent Services- Longfellow School | 801711 | same | same |
| North Teen Parent Services | 801732 | same | same |
| Teen Parent Services-Roosevelt/ Wellstone | 802274 | same | same |
| Teen Parent Services-South High | 802268 | same | same |
| Turnquist Child Enrichment Center | 1000642 | same | same |
| | | | Addprovider |

VIII. Program integrity

A. Agency case management reviewscan be used to determine causes of errors and identifyspecific policies needing review.

| 1. | Do you conduct case management reviews of CCAP? | Yes | \bigcirc No |
|----|---|-----------------------|---------------|

Page 19 of 24 DHS-5107-ENG 6-19

If yes, describe the process, including:

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

Human Services Supervisors review active cases that are randomly selected on a quarterly basis. MEC2, PRISM, MAXISand Electronic Case files are reviewed to verify eligibility factors, income, activity, provider, and payment information. Hennepin County uses information from the DHS review forms to conduct reviews. Errors are communicated with the worker by e-mail and corrections are made within 14 days.

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

If yes, describe the process, including:

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

AHuman Services Supervisor reviews active registered provider files that are randomly selected on a quarterly basis. MEC2 and Electronic Provider Filesare reviewed to verify eligibility. Hennepin County uses information from the DHS review forms to conduct reviews. Errors communicated with the worker by e-mail and corrections are made within 14 days.

IX. Other information

A. Additional agency optional policies

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

GENERALGUIDELINESON IDENTIFYINGANDREFERRINGPOSSIBLEFRAUD

Client Eligibility Fraud Referrals:

- 1. Whenever case file information exhibits characteristics of possible misrepresentation or omission of relevant facts as it pertains to program eligibility, the Child Care Assistance worker will send a Fraud Prevention Investigation (FPI) referral to the Hennepin County Fraud Investigations Unit. No actions will be taken on acase pending outcome of the investigation or subsequent actions by the Fraud Investigations Unit.
- Theassigned Fraud Investigator will act on referral and complete an investigative summary on findings
- The Child Care Assistance worker will then take necessary actions based on findings.

Provider Fraud Referrals:

- 1. Whenever it appears that a provider is withholding, concealing, or misrepresenting information related to registration asa provider or payments on behalf of aCCAPclient, the Child Care Assistance Program and the Fraud Investigations Unit will make referrals to the DHSOffice of Inspector General (OIG) using the Child Care Provider CommunicationsForm (DHS-6811)
- 2. Once the Hennepin County Fraud Investigation Unit makesa referral, staff will collaborate with the OIG, local law enforcement agencies and county attorneys to address referral of possible fraud.
- 3. If internal investigation isconducted, Hennepin County Fraud Investigation Unit will follow procedures listed in Attachment Q.
- 3. The Child Care Assistance program will take necessary actions based on findings of investigations, including those done by OIG, Hennepin County and/or other law enforcement agencies. Further details on internal investigations

Page 20 of 24 DHS-5107-ENG 6-19

| are listed in Attachment Q. |
|--|
| RatesPaid to At-Risk Programs listed in Section VI.A. |
| For Strong Beginnings Providers that currently have a Parent Aware 4 star rating |
| RatesEffective July 1, 2014: |
| Infant Toddler Preschool School-age |
| Hourly \$12.00 \$10.80 \$9.60 \$9.00 |
| Daily \$103.49 \$76.98 \$69.41 \$64.49 |
| Weekly \$517.45 \$384.90 \$347.05 \$322.45 |
| For Teen Parent School Based Programs with Parent Aware 4 star rating: |
| RatesEffective 11/1/14: |
| Infant Toddler Preschool School-age |
| Hourly \$12.00 \$10.80 \$9.60 \$9.00 |
| Daily \$103.49 \$76.98 \$69.41 \$64.49 |
| Weekly \$517.45 \$384.90 \$347.05 \$322.45 |

B. Agency developed forms

- All agency developed forms and notices used for CCAP must reflect current policy and beapproved by DHS.
- Counties and tribes must use forms developed by DHS for administration of CCAP.
- Agency developed forms must not duplicate or replace DHS forms.
- Local agencies may create supplemental forms subject to DHSapproval.
- Forms must be written using plain language standards and meet other communication guidelines.
- Review forms, notices and documents at least every two years to ensure they reflect current CCAP policy and laws.

Formsinventory for your agency

Use this table to list all agency developed forms, notices, and documents your agency uses to administer child careassistance.

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

Note: Refer to the DHS memo announcing this plan for a list of DHS created documents required for CCAP. Do not list or submit DHS created documents.

| Name of agency developed form | Form reflectscurrent CCAP policy | Statusofcurrent form | |
|---|----------------------------------|--|---|
| Child Care Plan - Attachment Z | ⊠Agency assures compliance | □ DHS previously approved - no changes □ DHSpreviously approved - revised and needs DHSapproval □ New form - needs DHSapproval | × |
| Waiting List Questionnaire (Attachment A-1) | ⊠Agency assures compliance | ☑ DHS previously approved - no changes ☑ DHSpreviously approved - revised and needs DHSapproval ☑ New form - needs DHSapproval | × |
| Notice sent with Waiting List Application (Attachment A-2) | ⊠Agency assures compliance | □ DHS previously approved - no changes □ DHSpreviously approved - revised and needs DHSapproval □ New form - needs DHSapproval | × |
| Hennepin County Unsafe Care Criteria for Legally Non- License Providers (Attachment B) | ⊠Agency assures compliance | ☑ DHS previously approved - no changes ☐ DHSpreviously approved - revised and needs DHSapproval ☐ New form - needs DHSapproval | × |
| Absent DayExemption Request (Attachment D) | ⊠Agency assures compliance | □ DHS previously approved - no changes □ DHSpreviously approved - revised and needs DHSapproval □ New form - needs DHSapproval | × |

Page 21 of 24 DHS-5107-ENG 6-19

| Name of agency developed form | Form reflectscurrent CCAP policy | Statusofcurrent form | |
|---|----------------------------------|--|---|
| Absent DayExemption Request (Attachment D) | Agency assures compliance | ☑ DHS previously approved - no changes☑ DHSpreviously approved - revised and needs DHSapproval☑ New form - needs DHSapproval | × |
| Important Information for Child Care Providers (Attachment P-1) | ⊠Agency assures compliance | ☑ DHS previously approved - no changes ☑ DHSpreviously approved - revised and needs DHSapproval ☑ New form - needs DHSapproval | × |
| Provider Compliance Statement - Attendance Records (Attachment P-2) | ⊠Agency assures compliance | ☑ DHS previously approved - no changes ☑ DHSpreviously approved - revised and needs DHSapproval ☑ New form - needs DHSapproval | × |
| Provider Compliance Statement - Child Care Pricing (Attachment P-3) | ⊠Agency assures compliance | ☑ DHS previously approved - no changes☑ DHSpreviously approved - revised and needs DHSapproval☑ New form - needs DHSapproval | × |
| Education Plan (S-1) | ⊠Agency assures compliance | ☑ DHS previously approved - no changes ☑ DHSpreviously approved - revised and needs DHSapproval ☑ New form - needs DHSapproval | × |
| Special NeedsRateRequest (Attachment C-1) | ⊠Agency assures compliance | ☑ DHS previously approved - no changes ☑ DHSpreviously approved - revised and needs DHSapproval ☑ New form - needs DHSapproval | × |
| | | Add form | , |

X. County and tribal assurances

Check the designated boxes below to assure compliance.

A. The county or tribe is informing parents about the following as required under Minnesota Rules, part 3400.0035, subpart 1.

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

County or tribe assurescompliance

In addition, theagency uses the following:

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

• Families rights and responsibilities when choosing a provider

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

- Federal and state child and dependent care tax credits
- · Earned income credits
- Otherservices for families with young children required bystateand federal laws
- Child Care Awareservices
- Child Care Assistance Program eligibility requirements
- Family copayment fees and how computed
- Information about how to choose a provider

Page 22 of 24 DHS-5107-ENG 6-19

- Availability of special needs rates
- The family's responsibility for paying provider charges that exceed county maximum payments in addition to the family copayment fee
- County or tribe assurescompliance and uses DHS-5367 and DHS-3551

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

MinnesotaRules, part 3400.0140, subpart 5.

Use of "<u>Health and SafetyResource List for Parentsand Legal Nonlicensed Providers"</u> (DHS-5192A) assures compliance with the following:

- Child immunization requirements
- Child nutrition
- Child protection reporting responsibilities
- Health and safety information required by federal law
- Child development information
- Referral to Child Care Aware; and
- •Resources and training options to meet federal and/or state-required health and safety topics
- County or tribe assurescompliance by use of DHS-5192A

C. Child Care Assistance Program (CCAP) Tasksand Timeframes

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

- Assessing CCAPeligibility
- Registering child care providers
- Processing payments

These tasksand timeframesare required under the Child Care and Development Fund (CCDF), 98.11(a)(3) Administration under Contracts and Agreements, MinnesotaStatutes 119B, MinnesotaRules 3400, CCAPPolicy Manual, and MEC² User Guide.

County or tribe assurescompliance

D. Child Care Assistance Program (CCAP) Funding

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

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

County or tribe assurescompliance

Page 23 of 24 DHS-5107-ENG 6-19

E. Child Care Assistance Program (CCAP) Reporting

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

- BasicSliding Fee waiting list
- Override monitoring
- BasicSliding Fee adjustments

| \times | County | or tribe | assurescompliance |
|----------|--------|----------|-------------------|
| 1/ N | | | |

F. Limited English Proficiency Plan

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

County or tribe assurescompliance

SUBMITBYEMAIL

Page 24 of 24 DHS-5107-ENG 6-19