



CHILD CARE ALTERNATIVE PAYMENT PROGRAM

PARENT & PROVIDER HANDBOOK OF WRITTEN POLICIES



APPROVED BY THE CAPMC BOARD OF DIRECTORS 08/08/2024

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OUR MISSION

Helping people, changing lives, and making our community a better place to live by providing resources and services that inspire personal growth and independence.

OUR VISION

CAPMC will be recognized as a premier social service agency that eliminates the effects of poverty by helping people obtain knowledge and skills to achieve self-reliance and economic stability... one life at a time.

THE PROMISE OF COMMUNITY ACTION

Community Action changes people's lives, embodies the spirit of hope, improves communities, and makes America a better place to live.

We care about the entire community, and we are dedicated to helping people help themselves and each other.

OUR VALUES

Trustworthiness, Respect, Responsibility, Fairness, Caring, Citizenship



Agency Hours of Operation & Contact Information

Monday - Friday
8:00AM - 5:00PM

Closed on all Major Holidays

Community Action Partnership of Madera County, Inc.
Child Care Alternative Payment and Resource & Referral Program
1225 Gill Avenue, Madera, CA 93637

Main Phone (559) 661-0779 ◦ Toll Free (800) 505-0404 ◦ Fax (559) 661-0764

APP/R&R clients will be seen by appointment only.

We encourage parents and providers to access the CAPMC website at <https://www.maderacap.org>

During a Pandemic, Epidemic, and/or Government Shutdown, our agency will be taking measures for our safety and those of our clients. Parent and Providers will be contacted if these changes occur via the United States Postal Service and our agency website.

WELCOME

Welcome to the Community Action Partnership of Madera County (CAPMC) Child Care Alternative Payment and Resource & Referral Program (APP/R&R). We are a private non-profit agency organized for the expressed purpose of helping people become self-sufficient by providing high level, quality services to the children and families of Madera County.

This is accomplished through coordination, advocacy, as well as with direct and indirect services. CAPMC provides assistance on a non-discriminatory basis extending equal treatment and access to services for children, parents and providers of child care without regard to race, color, creed, religion, national origin, ethnicity, ancestry, age, sex, sexual preference or disability.

To offer maximum support for parents and providers, CAPMC will provide access to the following services:

- Resources and referrals for parents to help them make quality child care choices
- Financial assistance with child care expenses for eligible families
- Professional training, technical assistance, and information for providers
- Other social service information, health information and referrals
- Information to parents and providers related to child development

The purpose of this handbook is to give families and providers an overview of the APP/R&R program and provide information about policies and procedures. The APP/R&R program is governed by the California Department of Social Services (CDSS), Child Care and Development Division (CCDD), Title 5 – Education Regulations and specific requirements or clarification can be cited from this code of regulations. These programs, administered by the California Department of Social Services (CDSS) are state and federally funded.



CHILD CARE ALTERNATIVE PAYMENT PROGRAM: AN OVERVIEW

Child care is an important partnership between parents and providers. Parents and caregivers must work together to develop a warm, caring, and responsive relationship as well as a safe environment for children. CAPMC APP/R&R recognizes the importance of their role in helping to provide quality care for children in Madera County.

This CAPMC APP/R&R program is designed to make full or partial child care subsidies available to families who demonstrate a need for assistance based on various eligibility requirements, including family size and income. CAPMC APP/R&R creates an agreement with the child care provider that the eligible family has chosen, as parents are best able to choose and evaluate child care for their own children. CAPMC's goal is to help families find the child care setting best suited to their needs.

CAPMC APP/R&R offers eligible families a choice to work with a license-exempt provider or to enroll in any of the following: Early Head Start/Head Start, California State Preschool Programs, private child care centers, a family child care home network, a licensed family child care home, or sectarian care. R&R can provide individualized referrals to licensed homes or centers and counsel parents on how to choose quality care. We encourage parents to carefully interview providers and check references before placing children in their care, as CAPMC APP/R&R cannot guarantee the quality of any provider.

Quality child care is characterized as a warm, caring, and safe environment that fosters social and emotional experiences, enriched by interactions between children and adults. Licensed family child care homes and center-based programs are licensed by the California Department of Social Services (CDSS) and must meet standards for health, safety, and nutrition. They also provide a nurturing atmosphere that helps meet the multicultural and multilingual needs of children. An appropriate family child care environment allows for emotionally nurturing interactions and facilitates feelings of trust and security. As children grow in the environment, they explore, question and experiment with concepts, thus encouraging problem solving, self-help skills and language development.

The purpose of this handbook is to ensure parents and providers fully understand the subsidized child care and development service provided by CAPMC APP/R&R. **Please read the entire handbook to fully understand the requirements for both the parent and child care provider.**



SECTION I: PARENT INFORMATION & RESPONSIBILITIES

Parental Choice Offerings for Parents Eligible for Services/*Your Child Care Options*

Providers whose purpose is to prepare children for success in school.

These programs operate both full day and part day. They serve preschoolers, infants, and toddlers, and include after-school programs for school-age children directly funded by the state and federal government. They operate in a manner that invests in each child's developmental progress, supporting their future success in school.

These programs include state-funded early education programs such as Head Start, Early Head Start, Migrant Head Start, and other locally administered school readiness programs. They meet licensing health and safety standards and employ trained teachers who use effective, developmentally appropriate teaching strategies monitored by their funding agency. Nutrition services for children are also provided.

Providers that comply with health and safety requirements

These programs are licensed family child care homes and licensed child care centers monitored by the DSS Community Care Licensing Division to ensure health and safety requirements. The advantage of meeting these requirements is that children are supervised and hazards in the environment are minimized. Some of these programs may also contain an educational component. It is the parent's responsibility to evaluate and consider the value of the educational services provided to children.

Providers that are not subject to either educational or licensing standards

License-exempt providers provide flexibility to the parent, a family environment with the same values and culture as the parent, and/or the ability to accommodate non-traditional work schedules. They include but are not limited to some relative caregivers, cooperative child care programs, some afterschool programs, and public recreation programs. While license-exempt providers do not have to adhere to licensing regulations, if they are not a close relative of the child(ren) in their care, they must register with TrustLine and complete a *Health and Safety Self-Verification* form to receive payment from state or federal child care subsidy programs.

Note: The above descriptions are for informational purposes only and not intended to promote the preference for any particular provider.

Parent Involvement and Parent Survey – Program Self-Evaluation

The CDSS – Child Care and Development Division (CCDD) mandates that CAPMC APP/R&R conducts annual Desired Results for Children and Families – Parent Survey. These surveys serve to gather feedback on past experiences with APP/R&R, the quality of information provided by the program, and the overall benefits to families. Parental input is essential to improving the services offered.

Additionally, CAPMC APP/R&R is required to analyze the findings from *Compliance Reviews* and other self-assessments activities to identify areas for improvement. Upon identification, a list of tasks must be created promptly. Procedures for ongoing program monitoring that meet the standards will be continued, while any areas requiring modifications will be addressed promptly and effectively.

CAPMC APP/R&R is expected to submit a summary of their self-evaluation findings to CDSS by June 1st each year. Furthermore, necessary adjustments to the program must be made based on the identified areas for improvement.

GENERAL ADMISSION PROCEDURES (5 CCR 18105)

- **Priority:** Families whose child(ren) receive Child Protective Services or are At-Risk, upon written referral from a legal, medical, or social services agency.
- **Second Priority:** For those not falling under the priority, admission will be based on family monthly gross income. Families with the lowest monthly gross income in relation to their family size as determined by the CDSS's income ranking schedule will be admitted first. Public assistance grants are considered as part of the income.

Program Eligibility Waitlist

CAPMC APP Eligibility Waitlist is a database of parents awaiting assistance through the General Alternative Payment Program for subsidized child care, funded by CDSS-CCDD. It maintains a current list based on admission priorities. Upon application, families are ranked according to family size and monthly gross income, requiring proof of all total countable income. When vacancies occur families with the lowest rank number are contacted first, families are not selected on a first come, first serve basis. All program spaces or certified services are contingent on funding. **To remain active on the waitlist, families must update their need and income every six (6) months and must have a working contact number with a message capability.**

CalWORKs Child Care

CAPMC APP receives funding for CalWORKs families referred by the Madera County Department of Social Services. CalWORKs families entering from Stage one (1), and CalWORKs families who transfer from Stage two (2) Child Care to Stage three (3) Child Care.

For CalWORKs Stage two (2) and three (3), the 24-month eligibility period **does not apply. They will be certified at no less than 12-months.*

Cal-SAFE Child Care

CAPMC APP receives funding for student -parents referred by their high school or equivalent educational institution.

Child is under Child Protective Services (CPS) or At-Risk

CAPMC APP receives a referral for services from qualified or legally certified professionals.

Emergency Child Care Bridge Program for Foster Children

Eligible Foster Families may receive a time-limited child care voucher or payment to help pay for child care costs for foster children birth through 21, children with exceptional needs and severely disabled children up to the age of 21. (Up to six (6) months, and for no more than 12 months, *if eligible*).

GENERAL ELIGIBILITY REQUIREMENTS

To be eligible for subsidized child care, the family must meet all the following:

Be **income eligible** based on "Total Countable Income" guidelines. The parent shall obtain and provide documentation of the family's total countable income for the purposes of determining whether a family is income eligible and/or assessing the appropriate family fee, as applicable. The parent(s) shall provide documentation of total countable income for all the individuals counted in the family size as follows:

- Payroll check stubs, or an independently drafted letter from the employer, or other record of wages issued by the employer from either month of the two (2) month window immediately preceding the initial certification, or the recertification of eligibility for services.

- In cases where the employer refuses or fails to provide requested documentation, or where the parent states that providing such documentation would adversely affect their employment, the parent shall provide alternative verification of income. Acceptable forms of verification may include but are not limited to, the following: a list of clients and amounts paid, the most recently signed and completed tax returns, quarterly estimated tax statements, or other records of income to support the reported income, along with a self-certification of income.
- Self-employed parents shall obtain and provide a combination of documentation necessary to establish current income eligibility from either month of the two (2) month window immediately preceding the initial certification or the recertification of eligibility of services. Acceptable forms of verification may include but are not limited to an independently drafted letter from the source of the income; a copy of the most recently signed and completed tax return with a statement of current estimated income for tax purposes; or other business records, such as ledgers, receipts, or business logs; along with a self-certification of income.
- Other sources of income that shall be reported and counted, may include but are not limited to:
 - Gross wages or salary, commissions, overtime, tips, bonuses, gambling, or lottery winnings
 - Wages for migrant, agricultural, or seasonal work
 - Public Cash Assistance (CalWORKs or TANF)
 - Gross income from self-employment less business expenses with the exception of wage draws.
 - Disability / Unemployment Compensation / Worker's Compensation
 - Spousal support and/or child support from former spouse or absent parent, or financial assistance for housing costs or car payments paid as part of or in addition to spousal or child support.
 - Survivor (i.e., SSA) and retirement benefits
 - Rent for room within the family's residence.
 - Dividends, interest on bonds, income from estates or trusts, net rental income or royalties
 - Foster care grants, payments or clothing allowances for children placed through child welfare services.
 - Financial assistance received for the care of a child living with an adult who is not the child's biological or adoptive parent.
 - Veterans Pension / Pension / Annuities, or Inheritance
 - Allowances for housing or automobiles provided as part of compensation.
 - Insurance or court settlements for lost wages or punitive damages
 - Net proceeds from the sale of property, stocks, or inherited property.
 - Other enterprise for gain
- Meet need criteria for child care that precludes the provision of care and supervision of the family's child(ren) for some of the day. In other words, a parent/guardian in the family is not available to provide care for the child(ren) during the time requested, and supervision of the child(ren) is not otherwise provided by a school, person, or any other entity.
- Need for child care due to employment, self-employed, seeking employment, experiencing homelessness, seeking housing for family stability, vocational training leading directly to a recognized trade/profession, engaged in an educational program, or parental incapacity.
- Work in, or reside in Madera County, California.
- Need for child care for children under the age of thirteen (13) or for children with exceptional needs up to age 21.

NEED REQUIREMENTS

It is the parent's responsibility to provide **all** the information and documentation necessary for CAPMC to determine whether the family meets both need & eligibility qualifications. The Family Services Associate (FSA) will indicate what documentation will be needed based on the criteria for services; the family will be certified for child care services only when it is determined that the documentation meets the criteria. Additional documentation may be requested to verify need & eligibility, only if the parent **voluntarily** reports an update in service.

Child is under Child Protective Services or "At-Risk"

In these cases, a parent/guardian provides a written referral from a county child welfare caseworker certifying that child care services are a necessary component of the family maintenance/preservation plan for not less than 24-months. An "At-Risk" referral can be from a legally certified professional stating that the child is at risk from abuse or neglect, for not less than 24-months.

Emergency Child Care Bridge Program for Foster Children

CAPMC APP/R&R will provide eligible families referred by Madera County Department of Social Services with access to emergency child care and child care navigator services, and a time-limited monthly voucher for child care for up to six (6) months initially, with the possibility of extension for compelling reasons, beyond the 12-months limit if eligible. Child care providers serving children in the Bridge Program will have access to the trauma-informed care training and coaching sessions.

Employment

Documentation shall include the parents/guardian's days and hours of employment. This can include but is not limited to paycheck stubs indicating days and hours worked and an employment verification statement from the employer with an independent telephone and/or fax number to contact the employer to verify hours. *Title 5 – Education Regulations, Section 18081 & 18086, provides additional methods to document non-regular or non-typical employment.*

If a parent's work takes place within the family home or on the property where the family resides, they must provide a written statement explaining the reason they require child care services. This written statement should include details about the nature of their work, the age of the child needing care, and, if the child is over five (5) years old, any specific child care needs. CAPMC APP shall determine and document whether the parent's employment and the identified child care needs preclude the supervision of the family's need.

If the parent is employed as an assistant in a licensed large family day care home under Health and Safety Code Section 1596.78(b), and is requesting services for their own child within the same family day care home, the must provide documentation that substantiates the following:

- A copy of the family day care home license indicating it is licensed as a large family day care home.
- A signed statement from the licensee stating that the parent is the assistant, pursuant to the staffing ratio requirement of California Code of Regulations, Title 22, Section 102416.5.
- Proof that the parent's fingerprints are associated with that licensed family day care home as its assistant, CAPMC APP may verify with the Local Community Care Licensing Office.
- Payroll deductions withheld for the assistant by the licensee, which may be pay stub.

Self-Employment

Documentation for self-employment must include a declaration of need under penalty of perjury that includes a description of the employment, and an estimate of the days and hours worked per week. The following documents are required to provide support for the days and hours of self-employment, including but not limited to appointment logs, client receipts, job logs, mileage logs, a list of clients with contact information, or similar records. You must provide

copies of your business license, business card, website address, and any promotional materials (e.g., flyers, etc....) to validate your business.

Seeking Employment

The period of eligibility is for not less than 12 or 24-months, depending on the program type. Services will be based on stated need with no more than five (5) days per week, less than six (6) hours a day and less than 30 hours per week. The period of eligibility starts on the day authorized by CAPMC APP and will extend for consecutive working days.

Documentation shall include a declaration under penalty of perjury that the parent is seeking employment and shall include the parent's plan to secure, change or increase employment.

Vocational Training

Vocational training (school) must be leading towards a recognized trade or profession. **Services are limited to six (6) years from the initiation of service based on need for vocational training or 24 units after the attainment of a bachelor's degree.** Documentation shall include: a current class schedule printout, or a *Training Verification Form* bearing the registrars' stamp and/or a signature, statement of vocational goal, proof of grades or GPA (a minimum 2.0 is required), or a copy of the most current transcript. For ongoing eligibility for services based on vocational training is contingent upon making adequate progress.

If at recertification the parent has not made adequate progress, the parent shall be recertified for services for another 12 or 24-months, depending on the program type. At the conclusion of this 12 or 24-month certification period, the parents shall have made adequate progress. If the parent has not made adequate progress, and cannot establish another basis of need for services, the family will be:

- Disenrolled from services, and
- The parent shall be ineligible to be certified for services based on enrollment in vocational training for six (6) months from the date of disenrollment.

Engaged in an Educational Program

Documentation for services for an Educational Program must be from a recognized program for English Language Learners / English as a Second Language (ESL) or a program to attain a High School Diploma or General Education Development / High School Equivalency certificate services. Services shall be for not less than 12-months.

Documentation shall include a current class schedule printout, or a *Training Verification Form* bearing the registrars' stamp, and the number of hours needed for the program.

Seeking Permanent Housing

The period of eligibility is not less than 12 or 24-months, depending on the program type. Services shall occur no more than five (5) days per week, less than six (6) hours a day and for less than 30 hours per week. The period of eligibility starts on the day authorized by CAPMC APP and will extend for consecutive working days. Documentation shall include a declaration under penalty of perjury that the parent is seeking permanent housing and shall include the parent's search plan to secure a fixed, regular, and adequate residence along with when services will be needed.

Homelessness

The period of eligibility is not less than 12 or 24-months, depending on the program type. Parents must provide a written referral from an emergency shelter or other legal, medical, social service agency, local educational agency liaison for homeless children and youths.

If the need is for the child identified as homelessness, a written referral from a legal, medical, or social services agency, a local educational agency liaison for homeless children and youth, a Head Start Program or Emergency of transitional shelter must be provided.

Parental Incapacity

Documentation must come from a legally qualified health professional stating why the parent is incapable of providing care and supervision for- the child(ren), the days and hours needed for child care, and the date of incapacitation. Services shall not exceed 50 hours per week.

Family Size

The parent must provide the names of the parents and the names, gender, and birthdates of the children under 18 years old in the family that are living in the home. This information shall be documented on the *Confidential Application for Child Development Services and Certification of Eligibility (Form CCD26)* and used to determine family size. The number of children shall be documented by providing the following: birth certificates, court orders regarding child custody, adoption documents or foster care placement records, school or medical records, or any other reliable document that demonstrates the parent/child relationship or legal guardianship. *If there is a child custody agreement between both parents, a copy should be submitted for accurate approval in child care services.*

Self-Certification, Absent Parent and Single Parent Status

If only one parent has **signed** an application for enrollment and the information provided on the application indicates there is a second parent who has not signed the application. The parent who has signed the application shall self-certify the presence or absence of the second parent under penalty of perjury (Sections I and V *Confidential Application for Child Development Services and Certification of Eligibility (From CCD26)*). The parent who has signed the application shall **not** be required to submit additional information documenting the presence or absence of the second parent.

Child's Exceptional Needs

To apply adjustment factors for exceptional needs, the parent must provide the necessary documentation for their child(ren), including those under age 13 and those aged 13 to 21. This documentation shall include the following:

- A copy of the portion of the active Individual Family Service Plan (IFSP) or the Individualized Education Program (IEP).
- A statement signed by a legally qualified professional that:
 - The child requires the special attention of adults in a child care setting.
 - Includes the name, address, license number, and telephone number of the legally qualified professional who is rendering the opinion.

ENROLLMENT/RECERTIFICATION REQUIREMENTS

State regulations require a formal application and certification for child development services. Parents must sign a *Confidential Application for Child Development Services and Certification of Eligibility (Form CCD26)* and will receive written notice of eligibility no later than 30 days from the date the form was signed. All families shall be recertified for services no later than 50 calendar days following the last day of the certification period (12 or 24 months depending on the program type), which starts with the day the agency's representative signed the last application for services.

Therefore, it is not required to report income changes between recertification, UNLESS your adjusted total family income exceeds eighty-five percent (85%) of State Median Income (SMI). It is the parent's responsibility to report to Alternative Payment Program, within 30 days, if income changes and the family is over eighty-five percent (85%) of SMI.

A parent may at any time voluntarily request a reduction in their service level. A written request needs to be submitted and must include the days and hours of care needed per day, the effective date of a proposed reduction of service needed, and a written acknowledgment that the parent understands they may retain the current certified child care service need until the certified need has been recertified.

A parent may voluntarily request a reduction to their family fee by reporting a change such as family income, days and hours of care needed, or family size to assess the family fee. The parents must provide documentation to support the reported change. If eligible for a family fee reduction, the reduction will take effect on the first of the month following the receipt and approval of the required supporting documentation.

Missed Appointments/Late Arrivals or Incomplete Documentation

CAPMC APP must be notified prior to the appointment if a family is unable to keep an appointment. CAPMC APP staff have voicemail available 24 hours per day seven, (7) days per week for messages. **Failure to keep an appointment without proper notification may result in denial of services.** If you are more than 15 minutes late without prior notification, your appointment will be rescheduled. Note: ALL documentation requested by CAPMC APP must be completed prior to your appointment in blue or black ink and present at the time of your appointment. Failure to do so will result in rescheduling your appointment. ***After the third (3) missed appointment, your child care services will be denied, and a Notice of Action (NOA) Denial of Services will be issued.***

Parents Responsibility to Notify the Agency of Changes to Family Circumstances

It is your responsibility as a parent to report to CAPMC APP if any changes to your family circumstances affect your need and eligibility. These changes can include but are not limited to:

- Report increases to your family's income that exceeds the 85% SMI income thresholds within 30 days.
- Before the last day of the certification period (12 or 24 months depending on the program type), please provide a two (2) week notice to both your child care provider and the agency if you intend to change or terminate child care services.
- Report changes to your address and phone number.

You may also **voluntarily** report income or other changes to:

- Reduce your Family Fees.
- Increase your Family's Child Care service hours.
- Decrease your Family's Child Care service hours.

Reported changes that modify the reimbursement rate and/or family fee will take effect on the first of the month following the receipt and approval of the required supporting documentation.

Notice of Action

A NOA is a legally binding document stating decisions and/or changes to the family's participation in the Program that is issued by an FSA, Supervisor, Program Manager or authorized CAPMC personnel.

Child Care Agreement

The *Child Care Agreement* is the certificate for services based on the certified need and authorized days and hours of child care. Reimbursement rates to the provider are based on the applicable monthly ceiling rate established by regulations for subsidized care. The *Child Care Agreement* must be signed, dated, and returned in order to reimburse your provider. Failure to do so will result in non-payment.

License-Exempt Provider Participation

Regulations require license-exempt providers to register with TrustLine within 30 days of submitting their application. CAPMC APP cannot issue payment until the provider registers. TrustLine is a registry that checks for criminal convictions and the Child Abuse Index for reports of substantiated child abuse. Your provider has been informed that TrustLine requires submission of an application and fingerprints.

A notice will be sent to your provider with information on how to register with TrustLine and the due date by which it must be done. If you wish to select another license-exempt provider not registered with TrustLine, that provider will have 30 calendar days to submit an application and fingerprints and become registered. The telephone number to reach TrustLine is (800) 822-8490.

Note: License-exempt providers who are the grandparent, aunt or uncle of the child(ren) in their care by blood, marriage, or court decree do not have to register with TrustLine to be paid for services. They must complete a *Declaration of Exemption from the Health & Safety Self-Certification*.

FAMILY FEES

The CDSS prepares a family fee schedule based on family income and size, and hours of certified care for the month. The family fee applies to the cost of the family's child care, and it is considered the contribution to their child care services.

Family fees are either a flat monthly full-time fee or a flat monthly part-time fee and are based on the hours of care certified for the month, income, and family size. Fees are based on the child who uses the most hours of care each month. Families with a certified need of less than 130 hours per month will be assessed a part-time fee, while families with a certified need of 130 hours or more per month will be assessed a full-time fee. The family fee is effective immediately upon the authorization of services based on the initial enrollment. **Family Fees may be impacted during a Pandemic, Epidemic, and/or Government Shutdown. Unless the current governor issues an Executive Order stating otherwise regarding Family Fees.**

The parent may **voluntarily** request a reduction to the family fee by reporting a change such as family income, days and hours of care needed, or family size to assess the family fee. The parents must provide documentation to support the reported change. If eligible for a family fee reduction, the reduction will take effect on the first of the month following the receipt and approval of the required supporting documentation. **No adjustments for excused or unexcused absences.**

Fee Collection

The CDSS requires that the family pay their fees to the provider in advance. Therefore, the family is required to pay the provider directly within the first five (5) days of the month. Family fees are found on *NOAs, Attendance Sheets, and Child Care Agreements*.

Providers are responsible for collecting family fees from the family. The provider will fill out the pre-printed receipt on the back of the child's *Attendance Sheet (one receipt per family, written on the Attendance Sheet that has the fee amount printed on the front)* when the fee is collected from the parent. This receipt will show the total paid to the provider. Missing receipts will delay payment to the provider. When CAPMC APP processes reimbursement for a family with family fees, the fee amount will be deducted from the provider's reimbursement check for the month (the fee and reimbursement can be found on the voucher printout).

If services are also being provided by another child care and development program in which the family is required to pay a family fee, a fee credit equal to the amount paid to the other provider may be granted. A receipt of payment to the other service provider must be submitted monthly and the parent will pay the difference. A credit will be applied to the family's subsequent fee billing period and cannot be carried over beyond the subsequent fee-billing period. **Family Fees may be impacted during a Pandemic, Epidemic, and/or Government Shutdown. Unless the current governor issues an Executive Order stating otherwise regarding Family Fees.**

Past due Family Fees

Termination of services can occur if family fees are not paid to the provider. CAPMC APP will contact families who fail to pay their family fees and issue a *NOA* stating a Delinquency of Family Fee. **Fees are delinquent seven calendar days after due date. Services shall be terminated within two (2) weeks unless paid within two (2) weeks. A reasonable repayment plan will be accepted, and the parent must comply with the repayment plan to continue services.**

Co-Payments

You may choose a provider regardless of the provider's rate. However, when a provider's rate and other allowable charges exceed the maximum subsidy amount, the parent is responsible for paying the provider the difference between the provider's rate and the maximum subsidy amount. This shall be considered the parents' co-payment. CAPMC APP is not responsible for collecting co-payments.

ATTENDANCE SHEET

Attendance Sheets for each child enrolled in subsidized child care are mailed to the provider before the beginning of each month. If the *Attendance Sheets* are not received, a temporary document, such as a blank *Attendance Sheet*, may be used to record the days and exact times the child(ren) were in and out of child care. The provider's creation of *Attendance Sheet* and the one received from CAPMC APP must be retained by the provider. At the end of the month, both the parent and provider must sign and date the *Attendance Sheet(s)* under penalty of perjury, affirming the accuracy of the information. Once *Attendance Sheet(s)* are received, they cannot be modified by the provider. However, providers can submit modifications or invoices based on their own *Attendance Sheet*. Reimbursement will occur within 21 calendar days upon receipt of the complete *Attendance Sheet* or *Invoice for Services*. Any necessary adjustments to payments will be made during the following months reimbursements.

Attendance Sheets or invoices will be processed for reimbursement without parents' signature when all the following conditions apply:

- The parent has not communicated with the provider for a minimum of seven (7) consecutive days.
- The provider has notified CAPMC APP (by phone or noted on the *Attendance Sheet*) of the parent's lack of communication in accordance with 5 CCR section 18066.5.
- CAPMC APP has documented the providers unsuccessful attempts to collect a signature.

Attendance Sign-In/Sign-Out Sheet

Parent or the provider are required to sign the child(ren) in and out at the exact clock time in, utilizing pen ink only, on the *Attendance Sheet* every day of care. The provider shall enter the exact clock time of arrival or departure for school age for split schedule children, such as before and after school. Reimbursement for services is dependent on the submission of evidence that care has been given, and this evidence is based on complete and accurate daily sign-in/sign-out *Attendance Sheets* that include the child's name. It is important to follow the *Attendance Sheet* sign-in/sign-out requirements in order to keep services and payment reimbursement intact in a contract year (July 1–June 30).

CAPMC APP will issue a “*Non-Compliance Notice - Incorrect Attendance Sheet and/or Non-Utilization of Certified Child Care Schedule*” when the *Attendance Sheet* sign-in/sign-out requirements are not met:

1. The parent will be contacted by phone and issued a *Non-Compliance* as the first incident.
2. Issue a *Non-Compliance* for the second incident.
3. Issue a *Non-Compliance* for the third incident and set-up an appointment for a one-on-one review with the parent and/or provider.
4. Issue a *NOA-Termination of Services* for the fourth incident and withheld reimbursement (this will be a case-by-case scenario based on the number of *non-compliances* issued).

CERTIFIED HOURS

Parents must follow the contracted hours of the *Child Care Agreement* and the *NOA*. Providers will be reimbursed based on the hours of services provided that are broadly consistent with the certified hours of need stated in the *Child Care Agreement*; any change in the parent’s approved level of service will be done through an *NOA*. Registration fees and other customary fees charged by the provider are payable up to the monthly maximum Regional Market Rate Ceiling (RMR). ***Any other days, hours, late fees, evenings, weekends, vacations, holidays, or miscellaneous charges not certified by CAPMC APP are the parent’s responsibility. Please be Advised - Provider reimbursements may be impacted during a Pandemic, Epidemic, and/or Government Shutdown. Unless the current governor issues an Executive Order stating otherwise regarding provider reimbursements.***

Determination of Child Care Hours

Services are only available if the parent meets a need criterion that prevents a parent from providing care for and supervision of their child for a portion of the day. In a two-parent household, child care services can be approved when neither parent is available to care for the child.

Schedule Types

Schedule types are determined based on verified need documentation:

- Set schedule means the child care schedule is approved when the days and hours of a parent’s need activity are the same each week or have a predictable cycle or pattern.
- Inconsistent and/or unstable hours of employment worked week-to-week (variable schedule). Variable child care schedules are authorized “up to” a maximum number of days and hours per week. The scheduled days and hours are determined by the week with the highest number of hours in the previous month.

Travel Time for Employment, Vocational Training, or an Educational Program

Parents may request child care for travel time to-and-from the location at which child care services are being provided to their place of employment, vocational training, or educational program location. APP will determine the travel time authorized based on the parent’s request and what amount is reasonable, based on the distance and the parents’ method of transportation.

- Travel time for **employment** cannot be more than half of the daily hours authorized, or four (4) hours per day, whichever is less.
- Travel time for **vocational training** or an **educational program** cannot be more than half of the weekly hours authorized for the training or educational program, or four (4) hours per day, whichever is less.

Sleep Time for Employment

Parents may request child care for sleep time if they work anytime between 10:00pm and 6:00am, not to exceed the number of hours authorized for employment and travel between those hours. Sleep time hours start immediately after the parents work shift. Sleep time will be less than or equal to the amount of hours worked between 10:00pm and 6:00am.

Sleep time will **not** be provided when:

- There is a parent in the family available and capable of providing care for the family's child(ren) during the time care is requested; or
- Supervision of the family's child(ren) is (are) otherwise being provided by:
 - Scheduled time in a public educational program available to school-age child(ren)
 - A private school in which the child(ren) is (are) enrolled and attending; or
 - A time when a child(ren) is (are) receiving any other early learning and care services.

Policy on Utilization of Certified Child Care Schedule

When a parent has a day of non-utilization (i.e. their child is absent from child care on a certified day of child care) s/he shall **write the specific reason for the absence (*illness, best interest day, family emergency, etc....*) on the *Attendance Sheet* under the appropriate date and column marked absence reason.**

When utilization of the certified child care schedule falls below the eighty percent (80%) threshold for broadly consistent, CAPMC APP will:

1. Issue a *Non-Compliance* for the first incident.
2. Issue a *Non-Compliance* for the second incident.
3. Issue a *NOA - Termination of Services* for the third incident (absences due to illness or emergency will be considered prior to issuing a *NOA - Termination of Services*).

Compliance Verification: *Attendance Sheet* Review for Certified Child Care Hours

CAPMC APP will review the *Attendance Sheet* to ensure that the days and hours of services provided are provided with the certified need for care as documented in the *Child Care Agreement* and *NOA*.

The FSA shall explain the process of submitting a written request that includes the days and hours of care needed per day, the effective date of the proposed reduction of service, and a written acknowledgment that the parent understands that they may retain their current certified child care hours until the end of their approved certification date.

If there is a **notable pattern** in the utilization of care for each week of the month that is consistent with the child(ren)'s certified schedule, the FSA will contact the parent by phone. The parent will then be notified that the utilized hours reflected on the submitted monthly *Attendance Sheets* (minimum two (2) months), demonstrates the child care is being utilized on a Set-Schedule of (Pt-Hourly, Pt-Weekly, Pt-Monthly, Ft-Weekly, Ft-Monthly) and no longer as an Unpredictable/Variable Schedule. A *Child Care Agreement* and *Notice of Action* will be issued following the parent's approval via-phone and the FSA will case note the conversation in the family file.

Submitting *Attendance Sheets* and *Statement of Services* for Reimbursement

Attendance Sheets must be submitted by the third day of the following month. Reimbursement will occur within 21 calendar days upon receipt of the complete *Attendance Sheet* or *Invoice for Services*. If CAPMC APP is unable to make payment within 21 calendar days due to extenuating circumstances, the impacted provider will be notified within a

reasonable timeframe. Extenuating circumstances include, but are not limited to, an emergency or payment system malfunction.

Resolution for Overpayments and Underpayments

Overpayments and underpayments will be identified through regular reconciliation of provider invoices with payment records. Providers will be promptly notified in writing of any identified overpayments or underpayments. This notification will include details of the discrepancy and the proposed resolution process. This will be resolved within the current fiscal year (July 1 – June 30). Providers must provide written consent for the recovery of overpayments. This consent should specify the amount to be recovered and propose a repayment schedule. Overpayments may be recovered through deduction from future reimbursements or alternative repayment arrangements agreed upon by both parties.

Fraudulently Completed Attendance Sheets/Withheld Reimbursements

The parent and provider must sign at the end of the month in ink pen, attesting under the penalty of perjury, that the information on the *Attendance Sheet* or *Invoice* is accurate. CAPMC APP will disallow reimbursement for the month of service in which inauthentic *Attendance Sheets* are submitted and the parent will be responsible for payment to the provider. The parent shall receive a *NOA* informing them of the decision to withhold reimbursement to their provider and possible termination for misrepresentation or fraud. The provider will also be informed of the decision to withhold reimbursement. *If a mistake is made on the Attendance Sheet, line out the mistake, correct, and initial. Please do not scratch out or use whiteout.*

Provider Holidays/Facility Non-Operational Days

CAPMC APP will provide payment for ten (10) non-operational days documented on the licensed facility's contract and policy statement in a contract year (July 1-June 30). Examples of commonly chosen non-operational days are federal holidays and provider vacations. CAPMC APP does not provide reimbursement when the provider is unavailable to provide services (e.g. due to illness or any day elected by the provider to not provide services that exceeds the ten (10) non-operational days). Families with a family fee will continue to pay their provider, no exceptions. Families with no fees will need to contact their FSA for additional information. **Please be Advised: Provider reimbursements may be impacted during a Pandemic, Epidemic, and/or Government Shutdown. Unless the current governor issues an Executive Order stating otherwise regarding provider reimbursements.**

Provider Policies/Parent and Provider Relationship

Each Child Care Provider sets policies for their program, not CAPMC APP. It is the parent's responsibility to obtain these policies and follow them to establish effective communication with the provider.

Notice to Self-Terminate/Change Providers

Parents must notify CAPMC APP if they wish to self-terminate from the program or would like to change providers. The parents are responsible for giving their current provider a minimum of two (2) weeks' notice of said change. This notice will be the responsibility of the parent and not the agency. Services with the current provider will terminate immediately following the change of service to parent's request and the **two (2) weeks' notice and/or reimbursement will no longer be the responsibility of CAPMC APP; it will be parent's responsibility.**

Commencing July 1, 2020, APPs shall provide notice to a child care provider of a change in reimbursement amounts for child care services, a change in the hours of care, rates, or schedules, an increase or decrease in parent fees, or a termination of services. For purposes of this section, the notice shall occur electronically, if requested by the child care provider, or via the United States Postal Service. APP shall provide the notice, as well as the effective date of any changes described above, on the same day a notice of action is issued to a family. *AB2883, Sec.3 8227.7*

Families shall not change providers more than once in a contract year unless the change is due to serious and compelling reasons. The Program Manager, on a case-by-case basis, will consider requests for more than one (1) change per year.

Multiple Providers

Parents are limited to one (1) provider except under the following conditions:

1. The primary provider is unable to accommodate all hours of certified care;
2. One (1) provider is a licensed center for the purpose of providing preschool; or
3. The child is ill or the child's primary provider is closed (in this case an eligible alternate provider can be reimbursed by CAPMC APP for services provided and is **limited to 10 days per child per fiscal year**).
 - o Payment may be extended beyond the 10 days if the parent provides a physician verification. (Extension only applies when the child is ill)

**An alternate provider is only approved when the regular provider has a paid day of non-operation in their contract and/or the child is ill, and a parent must obtain an alternate provider to meet the certified need for child care services. 5 CCR 18076.2.*

CAPMC APP may reimburse more than one (1) provider per child when the hours of operation of the primary provider cannot accommodate the certified need for child care services. 5 CCR 18076.

Provisional Child Care Provider

- A family may select a provisional child care provider as defined in Implementation Guidance, Section 18078 (o), if there is an immediate need for child care.
- A family may use a provisional child care provider during a single 30 calendar day period. The first day on which child care services are provided marks the beginning of this 30-day period.
- At the conclusion of 30 consecutive calendar days, the provisional child care provider must become Trustline Registered and, if so, may be reimbursed for child care services performed or the parent shall select an eligible provider who can meet the parents need for care.

Abandonment of Care Policy

When the family has not communicated with the provider for seven (7) consecutive days (unexcused absence) without notifying the provider of the reason for the lapse in service usage. The following will take place:

- The provider must notify CAPMC APP when there has been no communication from the family for seven (7) consecutive days.
- CAPMC APP will then attempt to contact the parent with the current contact information in the family file. Various methods of communication will consist of but are not limited to contacting the family by phone, non-compliance notices, email, or text message (if consented by the parent).
 - o At least one (1) communication attempt will be documented either in writing or electronically.
- The parent will be informed in writing that failure to communicate with either CAPMC APP or provider may lead to termination of services.
- If there has been no communication with either party for a total of 30 consecutive calendar days, CAPMC APP will issue a Notice of Action for Termination of Services due to the abandonment of care.

Regarding excused absences, they are defined as either a family emergency or time spent with a non-custodial parent or other relative as mandated by a court order. A copy of the court order must be provided to CAPMC APP at initial certification/recertification.

CAUSES FOR TERMINATION

Termination from the Program may occur for the following reasons:

- Failure to meet subsidy requirements.
- Knowingly misrepresenting eligibility.
- Providing incorrect or inaccurate information to obtain a benefit that the parent would otherwise not be entitled to receive.
- Violating CAPMC's policies and procedures.
- Federal and/or state contract funding ends; or
- Non-utilization of certified child care schedule resulting in three or more non-compliances issued (this will be a case-by-case scenario based on the number of non-compliances issued).

FAMILY RIGHTS & GRIEVANCE PROCESS

Parental Choice

CAPMC APP is a parental choice subsidy program which supports the parent's rights and responsibility to select the most appropriate child care provider for their child(ren). State funding prohibits payment to providers who provide non-secular instruction or worship; therefore, parents who choose a facility offering religious instruction or worship may only do so if funding is available from federal sources.

Parents Rights/Family Child Care Homes and Child Care Centers

Parents/Authorized Representatives have the right to:

1. Enter and inspect the family child care home or child care center without notice whenever child(ren) are in care.
2. File a complaint against the licensee with the Community Care Licensing Office.
Complaint Hotline: (844) 538-8766
3. Review the licensee's public file kept by the Community Care Licensing Office.
Web Facility Search: <https://www.cclcd.dss.ca.gov/carefacilitysearch/>
4. Review reports of licensing visits and substantiated complaints against the licensee made during the last three (3) years at the family child care home or child care center.
5. Complain to the Community Care Licensing Office and inspect the family child care home or child care center without discrimination or retaliation against them or their child(ren).
6. Be notified and receive, from the licensee, a written notice that lists the name of any person not allowed in the family child care home or child care center while children are present. (NOTE: This notice is only required when the Department of Social Services has excluded someone in writing from the family child care home or child care center on or after January 1, 2001).
7. Make a written request that the non-custodial parent is not allowed to visit their child(ren) or take their child(ren) from the family child care home or child care center when a certified copy of a court order has been shown.
8. Receive from the licensee the name, address, and telephone number of the local licensing office.

Licensing Office Name: Community Care Licensing Fresno Regional Office

Licensing Office Address: 1314 E Shaw Ave., Fresno, CA 93710

Licensing Office Telephone: (559) 243-8080

9. Upon request, be informed by the licensee of the name of any adult granted a criminal record exemption, and the type of association to the family child care home or child care center (the name of the person may also be obtained by contacting the Community Care Licensing Office).
10. Receive from the licensee the *Caregiver Background Check Process* form.

11. Be informed, by the licensee, whether the facility has liability insurance or bond that covers injury to clients due to the negligence of the licensee or employees of the facility.

Note: California state law states that the licensee may deny access to the family child care home or child care center to a parent/authorized representative if the behavior of the parent/authorized representative poses a risk to child(ren) in care.

For the Department of Justice Registered Sex Offender database go to www.meganslaw.ca.gov

Uniform Complaint Procedure

Individuals, agencies, organizations, students, and interested third parties have the right to file a complaint regarding the Community Action Partnership of Madera County, Inc. alleged violation of Federal and/or State laws. This includes allegations of unlawful discrimination (ED Code, sections 200 and 220 and Government Code, Section 11135) in any program or activity funded directly by the State or receiving Federal or State Financial Assistance.

Complaints must be signed and filed in writing with the California Department of Social Services:

California Department of Social Services
Child Care and Development Division
Attn: Appeals Coordinator
744 P Street, MS 9-8-351
Sacramento, CA 95814
Phone: (916) 322-6233 Fax: (916) 654-1048
Email: CCDDAppeals@cdss.ca.gov

If the complainant is not satisfied with the final written decision of the California Department of Social Services, remedies may be available in Federal or State court.

Complaint or Grievance against a CAPMC Staff Member

First attempt to resolve the issue within 30 days of the incident by discussing it with the FSA or CAPMC APP&RR personnel. If the issue is not resolved, request a *CAPMC Parent/Community Complaint Form* and submit it within seven (7) days to the staff member's Supervisor, who will schedule a meeting to discuss the matter and submit a written resolution. If a satisfactory resolution is not reached, request a meeting with the Program Manager. The Program Manager will issue a written response to the complainant within five (5) days after the meeting.

If a satisfactory resolution has not been reached, request a meeting with the Executive Director within five (5) days after the meeting with the Program Manager, stating the problem and desired solution. The complainant will receive a written response within ten (10) days of the meeting. If a satisfactory solution is still not met, the complainant has five (5) days after receipt of the Executive Director's decision to request a hearing with the Executive Committee of the CAPMC Board of Directors. Upon conclusion of the hearing, the Executive Committee will issue a written response. If the complainant is still dissatisfied, s/he may request the issue be brought to the full CAPMC Board of Directors by submitting a written request to the Chairperson of the Board within three (3) days of receiving the Executive Committee's decision. The Board of Directors will hear the complaint and render a final decision within five (5) days of the hearing.

Report Concerns

Any incident that is suspected to be a breach of ethics or in violation of Federal, State, or Local laws should be reported immediately to one of the following sources:

- Executive Director (559) 675-5749

- Ethics Hotline (877) 453-7244 or reportlineweb.com/capmc

The Ethics Hotline is available 24 hours a day, seven (7) days a week. Translators are available. The Ethics Hotline is operated by an independent company that specializes in handling calls of this type.

Complaints against Licensed Providers

Parents may contact R&R to register a complaint. The complaint will be documented in writing and the parent will be advised to contact the California Department of Social Services - Community Care Licensing Complaint Hotline at (844) 538-8766 or call the office in Fresno, California; R&R will be notified if the complaint is substantiated.

Complaints against License-Exempt Providers

Parents may make complaints of non-compliance of health and safety issues against license-exempt providers by providing a written and signed complaint. CAPMC APP will inform the provider of the complaint and advise the provider of their right to a written rebuttal. CAPMC APP will notify the parent and provider that child care payments will cease in two (2) weeks unless both the parent and provider submit a written declaration stating that the health and safety deficiency is complete.

APPEAL PROCESS

Families have the right to appeal decisions made by CAPMC APP that affect their participation in the program. The procedure for the appeal process is detailed on the back of every *NOA* and must be followed to protect appeal rights. Please visit <https://www.cdss.ca.gov/inforesources/child-care-and-development/parent-resources/parent-appeals> to read the *Parent Appeal Information Pamphlet*. In addition, a *Parent Appeal Information Pamphlet* is given to the parents at the time of their initial enrollment process.

Parents have the right to have an authorized representative (AR) act on their behalf at the local appeal hearing. An authorization form to request an AR is available and should be submitted with the appeal request, but any written or oral notice that an AR has been duly authorized by a parent is sufficient. Services can continue throughout the appeal process.

To appeal to an *NOA*, file a request for a hearing within 14 days from the date the *NOA* was received. The request can be made in writing, in person, by faxing (559) 661-0764 or by emailing appchildcare@maderacap.org. Notification of the time and place of the appeal hearing will be sent out within ten (10) calendar days; the appellant and/or their AR are required to attend the hearing. Failing to attend results in the abandonment of the right to appeal (**postponement of an appeal hearing with prior notice is allowed one (1) time**). A written decision will be sent to the appellant within ten (10) calendar days following the hearing.

If the appellant disagrees with the written decision, s/he has 14 days to appeal to the CDSS. The CDSS will issue a written decision within 30 calendar days after receiving the appeal. If the appeal is denied, services will terminate immediately on the date of the written notice.

CONFIDENTIALITY

Authorized CAPMC APP representatives, fiscal auditors, legal/court ordered persons; CDSS and CDSS are allowed access to family and child care provider files. The disclosure or release of any information that pertains to child care services is restricted to purposes directly related to the administration and delivery of our services. FSAs and other CAPMC/APP personnel do not provide information to outside sources.



SECTION II : PROVIDER INFORMATION & RESPONSIBILITIES

CAPMC APP requires that all child care providers participating with eligible parents in our program submit documentation before payment for child care services can begin. Therefore, if a parent begins using child care services before an authorized start date for subsidized payment or uses services after services have been terminated, the parent is responsible for payment of child care services.

LICENSED PROVIDER PARTICIPATION REQUIREMENTS

Licensed providers are required to:

- Provide a copy of their child care license(s) from the California Department of Social Services - Community Care Licensing Office and adhere to all regulations.
- Provide a statement of current fees and/or rates that are normal, customary, and charged to all families (private pay and subsidized). Updated rates shall be effective within 60 days of submission of the updated information pursuant to subdivision (c) and (e). *(Assembly Bill 131, Welfare Institution Code (WIC) 10228 (f)).*
- Provide a copy of their contract and policies; contracts can be updated once per contract year (July 1-June 30) during their annual re-certification period. The policies can be modified once per contract year (July 1 – June 30). The policies modification will be effective following the new month when the new contract has been approved. *A 30-day notice is required for any modifications for the FSA to make changes to the family file if requested by the parent/provider.*
- Provider contract must have the days and hours of operation, and the scheduled vacation days, and the list of holidays per contract year (July 1 to June 30). If your vacation days are not specified in your contract, you must submit your request in writing 30 days in advance.
- Provide a copy of their valid California Driver License or state issued ID bearing the current address being used for child care.
- Provide proof of residence. *Acceptable documents: Rental/Lease Agreement, Utility Bill and/or Bank Statement. Documents must be current within the last 30 days. No advertisement or “junk mail” will be accepted.*
- Provider must complete the W-9 form with either their social security number or Federal Employer Identification Number (FEIN).
- Allow CAPMC APP/R&R staff to make site visits to the home or facility during any contract hours.
- Complete and sign a tax identification form (W-9) annually.

- Read the *CAPMC APP - Parent & Provider Handbook of Written Policies* submit a signed and dated *Acknowledgement of Receipt of Written Polices*.
- Operate the child care facility on a non-discriminatory basis, providing equal treatment and services without regard to race, color, creed, religion, sex, national origin, ancestry, physical or mental disability or any other category prohibited by law.
- Provide parents with unlimited access to their child(ren) during normal hours of operation and whenever children are in care.
- If the provider is currently employed and/or attending school. The provider must submit a completed *Employment Verification form and/or Vocational Training (school) form* provided by CAPMC APP/R&R to demonstrate availability for subsidized child care services.

LICENSED-EXEMPT PROVIDER PARTICIPATION REQUIREMENTS

A license-exempt provider is defined as a family member or friend 18 years of age or older in good health who cares for child(ren) from only one (1) family other than their own. Exempt providers are required to:

- Provide a copy of their valid California Driver License or State issued ID bearing the current address being used for child care.
- Provide proof of residence. *Acceptable documents: Rental/Lease Agreement, Utility Bill and/or Bank Statement. Documents must be current within the last 30 days. No advertisement or "junk mail" will be accepted. *If residing with someone, a handwritten, signed, and dated Declaration Statement from homeowner stating current family's address along with proof of residence will need to be submitted. (Ex. Utility Bill, PG&E Bill, etc...*
- Complete and sign a *Health and Safety Self Certification Form (CCP1 or CCP4)*.
- Provider must complete the *W-9* form with their social security number.
- Complete and sign a tax identification form (*W-9*) annually.
- Obtain a current *CPR/First Aid Certificate* within 30 days of enrollment.
- Have a current working phone number for contact and emergencies.
- Allow CAPMC APP/R&R staff to visit the home or facility any time during contract hours.
- Provide parents with unlimited access to their child(ren) during normal hours of operation and whenever child(ren) are in care.
- If the Provider is currently employed and/or attending school. The Provider must submit a completed *Employment Verification form and/or Vocational Training (school) form* provided by CAPMC APP/R&R to demonstrate availability for subsidized child care services.
- Read the *CAPMC APP/R&R - Parent & Provider Handbook of Written Policies* submit a signed and dated *Acknowledgement of Receipt of Written Polices*.

- Complete the TrustLine fingerprint background check and receive clearance **within 30 days** after submitting the application. CAPMC APP cannot issue payment until the provider has registered. TrustLine is a registry that checks for criminal convictions and the Child Abuse Index for reports of substantiated child abuse. (For relative exemption, see “Note: License-Exempt...” below).

Information on how to get fingerprinted and the due date by which it must be done will be provided during the provider enrollment appointment. The telephone number to reach TrustLine is (800) 822-8490.

Note: License-exempt providers who are the grandparent, aunt or uncle of the child(ren) in their care by blood, marriage, or court decree **do not** have to register with TrustLine to be paid for services, must complete a *Declaration of Exemption from the Health & Safety Self-Certification form*.

PROVIDER EXCLUSIONS

A provider **cannot**:

- Be the guardian of the child who is in the program as a child care provider.
- Reside in the same household as another provider who is receiving payment from the program for child care services.
- Be under 18 years of age.
- Be a program participant as a child care provider if they do **not** provide all required forms or documents.
- Be a provider whose child care license has been suspended or revoked cannot continue as a license exempt provider.
- Be denied TrustLine.
- Commit to a parent's full certification of child care needs if they have another job, are in school, or have other commitments that prevent them from being physically present.

Termination of payment will occur if CAPMC APP receives notification from Community Care Licensing (CCL), that a facility's license has been revoked or received a Temporary Suspension Order (TSO). No payment will be made for care after the effective date of the CCL action. APP will notify the provider and families (utilizing the provider) in writing and no payment will be made beyond the effective date of CCL license suspension or revocation and the reason for termination.

CHILD CARE AGREEMENT – CERTIFICATE FOR SERVICES

A *Child Care Agreement* is issued after the parent and provider have completed the requirements. The *Child Care Agreement* is the *Certificate for Services* based on the certified need and authorizes the days and hours of child care. Reimbursement rates are based on certified need not to exceed the provider's full-time monthly rate or applicable monthly ceiling rate established by regulations for subsidized care, whichever is lower. Changes to the *Child Care Agreement* may occur periodically due to modifications in the parents' schedule and need. In such cases, providers will be issued an update to the *Child Care Agreement* and the parents will be issued a *NOA* indicating the change. The *Child Care Agreement* must be signed, dated, and returned in order to reimburse the provider. *Failure to do so will result in non-payment.*

ATTENDANCE SHEET

Attendance Sheets for each child enrolled in subsidized child care are mailed to the child care provider before the beginning of each month. If the *Attendance Sheets* are not received, a temporary document, such as a blank *Attendance Sheet*, may be used to record the days and exact times the child(ren) were in and out of child care. The provider's creation of *Attendance Sheet* and the one received from CAPMC APP must be retained by the provider. At the end of the month, both the parent and provider must sign and date the *Attendance Sheets(s)* under penalty of perjury, affirming

the accuracy of the information. Once *Attendance Sheet(s)* are received, they cannot be modified by the provider. However, providers can submit modifications or invoices based on their own *Attendance Sheet*. Reimbursement will occur within 21 calendar days upon receipt of the complete *Attendance Sheet* or Invoice for Services. Any necessary adjustments to payments will be made during the following months reimbursements.

Attendance Sign-In/Sign-Out Sheet

Parent or the provider are required to sign the child(ren) in and out at the exact clock time in, utilizing ink pen only, on the *Attendance Sheet* everyday of care. The provider shall enter the exact clock time of arrival or departure for school age for split schedule children, such as before and after school. Reimbursement for services is dependent on the submission of evidence that care has been given, and this evidence is based on complete and accurate daily sign-in/sign-out *Attendance Sheets* that include the child's name. It is important to follow the *Attendance Sheet* sign-in/sign-out requirements in order to keep services and payment reimbursement intact in a contract year (July 1 – June 30).

CAPMC APP will issue a "*Non-Compliance Notice - Incorrect Attendance Sheet and/or Non-Utilization of Certified Child Care Schedule*" when the attendance sign-in/sign-out requirements are not met:

1. The parent will be contacted by phone and issued a *Non-Compliance* as the first incident.
2. Issue a *Non-Compliance* for the second incident.
3. Issue a *Non-Compliance* for the third incident and set-up an appointment for a one on one review with the parent and/or provider.
4. Issue a *NOA – Termination of Services* for the fourth incident and withheld reimbursement (this will be a case-by-case scenario based on the number of *non-compliances* issued).

Certified Hours

Parents must follow the contracted hours of the *Child Care Agreement* and the *NOA*. Providers will be reimbursed based on the hours of services provided that are broadly consistent with the certified hours of need stated in the *Child Care Agreement*; any change in the parent's approved level of service will be done through an *NOA*. Registration fees and other customary fees charged by the provider are payable up to the monthly maximum Regional Market Rate Ceiling (RMR). ***Any other days, hours, late fees, evenings, weekends, vacations, holidays, or miscellaneous charges not certified by CAPMC APP are the parent's responsibility. Please be Advised - Provider reimbursement may be impacted during a Pandemic, Epidemic, and/or Government Shutdown. Unless the current governor issues an Executive Order stating otherwise regarding provider reimbursement.***

Policy on Utilization of Certified Child Care Schedule

When a parent has a day of non-utilization (i.e. their child is absent from child care on a certified day of child care) s/he shall **write the specific reason for the absence (*illness, sick, best interest day, family emergency, etc....*) on the *Attendance Sheet* under the appropriate date and column marked *absence reason*.**

When utilization of the certified child care schedule falls below the eighty percent (80%) threshold for broadly consistent, CAPMC APP will:

1. Issue a *Non-Compliance* for the first incident.
2. Issue a *Non-Compliance* for the second incident.
3. Issue a *NOA - Termination of Services* for the third incident (absences due to illness or emergency will be considered prior to issuing a *NOA - Termination of Services*).

Compliance Verification: Attendance Sheet Review for Certified Child Care Hours

CAPMC APP will review the *Attendance Sheet* to ensure that the days and hours of services provided are with the certified need for care as documented in the *Child Care Agreement* and *Notice of Action*.

The FSA shall explain the process of submitting a written request that includes the days and hours of care needed per day, the effective date of the proposed reduction of service, and a written acknowledgment that the parent understands that they may retain their current certified child care hours until the end of their approved certification date.

If there is a **notable pattern** in the utilization of care for each week of the month that is consistent with the child(ren)'s certified schedule, the FSA will contact the parent by phone. The parent will then be notified that the utilized hours reflected on the submitted monthly *Attendance Sheets* (minimum two (2) months), demonstrates the child care is being utilized on a Set-Schedule of (Pt-Hourly, Pt-Weekly, Pt-Monthly, Ft-Weekly, Ft-Monthly) and no longer as an Unpredictable/Variable Schedule. A *Child Care Agreement* and *Notice of Action* will be issued following the parent's approval via-phone and the FSA will case note the conversation in the family file.

Fraudulently Completed Attendance Sheets Withheld Reimbursements

The parent and provider must sign at the end of the month in ink pen, attesting under the penalty of perjury, that the information on the *Attendance Sheet* or *Invoice* is accurate. CAPMC APP will disallow reimbursement for the month of service in which inauthentic *Attendance Sheets* are submitted and the parent will be responsible for payment to the provider. The parents shall receive a *NOA* informing them of the decision for a reduction of reimbursement to their provider and possible termination for misrepresentation or fraud. The provider will also be informed of the decision to withhold reimbursement. *If a mistake is made on the Attendance Sheet, line out the mistake, correct and initial. Please do not scratch out or use whiteout.*

Provider Holidays/Facility Non-Operational Days

CAPMC APP will provide payment for ten (10) non-operational days documented on the licensed facility's contract and policy statement in a contract year (July 1-June 30). Examples of commonly chosen non-operational days are federal holidays and provider vacations. CAPMC APP does not provide reimbursement when the provider is unavailable to provide services (e.g. due to illness or any day elected by the provider to not provide services that exceeds ten (10) non-operational days). Families with a family fee will continue to pay their provider, no exceptions. Families with no fees will need to contact their FSA for additional information. Please be Advised: **Provider reimbursement may be impacted during a Pandemic, Epidemic, and/or Government Shutdown. Unless the current governor issues an Executive Order stating otherwise regarding provider reimbursements.**

Provider Policies/Parent & Provider Relationship

Each Child Care Provider sets policies for their program, not CAPMC APP. It is the parent's responsibility to obtain these policies and follow them to establish effective communication with the provider.

Notice of Termination/Change in Providers

Parents must notify CAPMC APP if they wish to self-terminate from the program or would like to change providers. The parent is responsible for giving their current provider a minimum of two (2) weeks' notices of said change. This notice will be the responsibility of the parent and not the agency. Services with the current provider will terminate immediately following the change of service to parent's request and the **two (2) weeks' notice and/or reimbursement will no longer be the responsibility of CAPMC APP; it will be parent's responsibility.**

Commencing July 1, 2020, APPs shall provide notice to a child care provider of a change in reimbursement amounts for child care services, a change in the hours of care, rates, or schedules, an increase or decrease in parent fees, or a termination of services. For purposes of this section, the notice shall occur electronically, if requested by the child care

provider, or via the United States Postal Service. APP shall provide the notice, as well as the effective date of any changes described above, on the same day a notice of action is issued to a family. *AB2883, Sec.3 8227.7.*

Families shall not change providers more than once in a contract year unless the change is due to serious and compelling reasons. The Program Manager, on a case-by-case basis, will consider requests for more than one (1) change per year.

Multiple Providers

Parents are limited to one (1) provider except under the following conditions:

1. The primary provider is unable to accommodate all hours of certified care;
2. One (1) provider is a licensed center for the purpose of providing preschool; or
3. The child is ill or the child's primary provider is closed (in this case an eligible alternate provider can be reimbursed by CAPMC APP for services provided and is **limited to ten (10) days per child per fiscal year**).
 - Payment may be extended beyond the ten (10) days if the parent provides a physician verification. (Extension only applies when the child is ill).

*An alternate provider is only approved when the regular provider has a paid day of non-operation in their contract and/or the child is ill, and a parent must obtain an alternate provider to meet the certified need for child care services. 5 CCR 18076.2

CAPMC APP may reimburse more than one provider per child when the hours of operation of the primary provider cannot accommodate the certified need for child care services. 5 CCR 18076.

Provisional Child Care Provider

- A family may select a provisional child care provider as defined in *Implementation Guidance, Section 18078(o)*, if there is an immediate need for child care.
- A family may use a provisional child care provider during a single 30 calendar day period. The first day on which child care services are provided marks the beginning of this 30-day period.
- At the conclusion of 30 consecutive calendar days, the provisional child care provider must become TrustLine Registered and, if so, may be reimbursed for child care services performed of the parent shall elect an eligible provider who can meet the parents need for care.

Abandonment of Care Policy

When the family has not communicated with the provider for seven (7) consecutive days (unexcused absence) without notifying the provider of the reason for the lapse in service usage. The following will take place:

- The provider must notify CAPMC APP when there has been no communication from the family for seven (7) consecutive days.
- CAPMC APP will then attempt to contact the parent with the current contact information in the family file. Various methods of contacting will consist of but are not limited to contacting the family by phone, non-compliance notices, email, or text message (if consented by the parent).
 - At least one (1) communication attempt will be documented either in writing or electronically.
- The parent will be informed in writing that failure to communicate with either CAPMC APP or provider may lead to termination of services.
- If there's been no communication with either party for a total of 30 consecutive calendar days, CAPMC APP issues a Notice of Action for Termination of Services due to abandonment of care.

Regarding excused absences, they are defined as either a family emergency or time spent with a non-custodial parent or other relative as mandated by a court order. A copy of the court order must be provided to CAPMC APP at initial certification/recertification.

PAYMENT/REIMBURSEMENT PROCEDURES

Providers are chosen by enrolled families to provide child care services. Providers contracted with CAPMC APP are **not employees** of CAPMC and are responsible for their own tax reporting and liabilities (CAPMC will issue a *1099 Miscellaneous Income Statement* for all payments totaling \$600.00 or more in a tax year).

Providers are paid based on the rates they charge parents who pay privately (non-subsidized parents). **It is fraudulent to charge different rates to parents on subsidized child care programs and to parents who pay privately.** A family/child is eligible for reimbursement when they are certified for child care services. Child care reimbursement is based on the need for care, the child's age, the type of care, and the pay rate based on the Regional Market Rate (RMR) and the required provider *Invoice*; in which the lesser of the two will be paid out. The *Statement of Services* will be reviewed with the authorized *Child Care Agreement* hours of care and the *Attendance Sheets*. Providers may be reimbursed the amount requested in their *Statement of Services*, up to the maximum which is allowed by the State. Additional information for the Regional Market Rate Ceiling (RMR) and/or the California Code of Regulations can be found in the following websites:

<http://government.westlaw.com/linkedslice/default.asp?SP=CCR-1000> Select: Title 5.

Education>Division 1. California Department of Education>Chapter 19. Child Care and Development Programs>Subchapter 2.5. Utilization of the Regional Market Rate Ceiling>Article 1. General Provisions

<https://rcscm.dss.ca.gov> Select the following: "Effective": choose the current year services are being provided/ "County": the county in which you are providing services. www.maderacap.org Select: Resources>Forms>Regional Market Rate.

A copy of the RMR can be requested from the program or accessed from our website.

*Assembly Bill 131 – Welfare Institution Code (WIC) 10228 (f) - Each licensed child care provider may alter rate levels for subsidized children, as needed, and shall provide the Alternative Payment Program and Resource & Referral agency with the updated information pursuant to subdivisions (c) and (e), to reflect any changes. **Updated rates shall be effective within 60 days of submission of the updated information pursuant to subdivision (c) and (e).***

REIMBURSEMENT RATE CATEGORIES

Method to Determine Applicable Reimbursement Ceiling on the Child Care Agreement for Licensed Providers

5 CCR § 18075. Reimbursement Rate Categories

- **Hourly**, which shall only be used for the following:
 - A child’s certified need for child care or fewer than **25 hours per week and fewer than five hours on any day**; or
 - An unscheduled but documented need of fewer than **five (5) hours per occurrence**, such as the parents need to work overtime, that exceeds the certified need for child care.
- **Daily**, which shall only be used for the following:
 - A certified need for child care of **six (6) hours or more per day**; or
 - An unscheduled but documented need of **six (6) hours or more per occurrence**, such as the parents need to work on a regularly scheduled day off, that exceeds the certified need for child care.
- **Part-time weekly**, which shall only be used when a certified need for child care **less than 25 hours** per week.
- **Full-time weekly**, which shall only be used when a certified need for child care is **25 hours or more** per week.
- **Part-time monthly**, which shall only be used for the following:
 - A certified need for child care for **fewer than 25 hours per week** and that need occurs in every week of the month; or
 - A certified need for child care averages **fewer than 25 hours per week** when calculated by dividing the total number of hours of need in the month by 4.33, and that need occurs in every week of the month.
- **Full-time monthly**, which shall be used for the following:
 - A certified need for child care of **25 hours or more per week** and that need occurs in every week of the month; or
 - A certified need for child care averages **25 hours or more per week** when calculated by dividing the total number of hours of need in the month by 4.33, and that need occurs in every week of the month.

Reimbursement for License – Exempt Providers

Hourly Rate up to Full-time Monthly maximum.

Evening/Weekend Rate for Licensed Providers

Rate adjustments for after hour care apply to license providers when “after hour” services include 10% or more of the total hours of care used, when services occur between the hours of 6:00 pm and 6:00 am and/or weekends.

SUBMITTING ATTENDANCE SHEETS & STATEMENT OF SERVICES FOR REIMBURSEMENT

Attendance Sheets and *Statement of Services* are the primary source for child care reimbursement and auditing purposes. *Attendance Sheets* must be submitted by the third (3) day of the following month, no more than two (2) months after the due date for the month to be reimbursed, and no more than seven (7) days after the due date for the last month of the fiscal year (June). Late reimbursements will **not** be made for the last month of the fiscal year.

Attendance Sheets and the *Statement of Services* can be faxed to (559) 661-0764, delivered to CAPMC APP during business hours Monday – Friday, 8:00am – 5:00pm, delivered to the APP drop box located outside on the east side of the CAPMC building, or mailed to 1225 Gill Avenue, Madera, CA 93637 (must be postmarked before or on the 3rd of the following month of service). **If Attendance Sheets and Statement of Services are faxed or emailed, originals MUST be mailed and received for payment to be processed on time.**

Provider Reimbursement

Submission of request for reimbursement must include *Attendance Sheets* and *Statement of Services* for each child served. *Attendance Sheets* must be completed, signed, and dated in ink at the bottom of the form with full signature by the Parent and Provider. The *Statement of Services* must be sent to the CAPMC APP Office with *Attendance Sheets* and include the following:

- A. Provider and/or Business Name
- B. Contact information
- C. Service month and year
- D. First and last name of the family
- E. First and last name of the child
- F. Age of the child
- G. Number of units
- H. Type of Unit/Care Type
- I. Rate per Unit
- J. Grand total you are invoicing the family.

You are welcome to use the *Statement of Services* located behind our pre-printed *Attendance Sheets*:

Statement of Services - For Provider Use

| # of Units | *Type of Unit/**Care Type | ***Rate per Unit | Total |
|------------|---------------------------|------------------|-------|
| | | | |
| | | | |

*Type of Unit: hour, day, week, month, annual

**Care Type: holiday, registration fee, drop notice fee, evening, or weekend adjustment, etc.

***Rate per Unit: dollar and cents amount Grand Total \$ _____

Payment Scheduled and Late Attendance Sheets

Payment is processed monthly on the third (3) Friday via mailed check or direct deposit (pay dates available on the *Attendance Sheet* and *Payment Schedule*, available at the office or on our website at www.maderacap.org.) CAPMC APP recommends providers to choose direct deposit for optimal timeliness and secure reimbursements. Checks cannot be retrieved from the CAPMC office.

Reimbursement will occur within 21 calendar days upon receipt of the complete *Attendance Sheet* or *Invoice* for services. If CAPMC APP is unable to make payment within 21 calendar days due to extenuating circumstances, the impacted provider will be notified within a reasonable timeframe. Extenuating circumstances include, but are not limited to, an emergency or payment malfunction.

Please note that any late *Attendance Sheets* submitted after the end of the fiscal year (July 1 – June 30), will not be eligible for reimbursement.

Funding Sources

CAPMC APP reserves the right to alter the *Attendance Sheet* and *Payment Schedule* in the event of a delayed allocation from its funding source. CAPMC APP will notify parents and providers in case of such an event.

Lost Checks

Payment will be stopped and CAPMC APP will reissue checks, ten (10) working days after the date the checks were originally mailed.

Resolution for overpayments and underpayments

Overpayments and underpayments will be identified through regular reconciliation of provider invoices with payment records. Providers will be promptly notified in writing of any identified overpayments or underpayments. This notification will include details of the discrepancy and the proposed resolution process. This will be resolved within the current fiscal year (July 1 – June 30). Providers must provide written consent for the recovery of overpayments. This consent should specify the amount to be recovered and propose a repayment schedule. Overpayments may be recovered through deduction from future reimbursements or alternative repayment arrangements agreed upon by both parties.

FAMILY FEES

The CDSS prepares the family fee schedule based on family income and size, and hours of certified care for the month. The family fee applies to the cost of the family's child care, and it is considered the contribution to their child care services.

Family fees are either a flat monthly full-time fee or a flat monthly part-time fee and are based on the hours of care certified for the month, income, and family size. Fees are based on the child who uses the most hours of care each month. Families with a certified need of less than 130 hours per month will be assessed a part-time fee, while families with a certified need of 130 hours or more per month will be assessed a full-time fee. The family fee is effective immediately upon the authorization of services based on initial enrollment or return from a temporary suspension of services.

The parent may **voluntarily** request a reduction to the family fee by reporting a change such as family income, days and hours of care needed, or family size to assess the family fee. The parents must provide documentation to support the reported change. If eligible for a family fee reduction, the reduction will take effect on the first of the month following the receipt and approval of the required supporting documentation. **No adjustments for excused or unexcused absences.**

Fee Collection

The CDSS requires that the family pay its fees to the provider in advance. Therefore, the family is required to pay the provider directly within the first five (5) days of the month. Family fees are found on *NOAs*, *Attendance Sheets* and *Child Care Agreements*.

Providers are responsible for collecting family fees from the family. The provider will fill out the pre-printed receipt on the back of the child's *Attendance Sheet* (*one receipt per family, written on the Attendance Sheet that has the fee amount printed on the front*) when the fee is collected from the parent. This receipt will show the total paid to the provider. Missing receipts will delay payment to the provider. When CAPMC APP processes reimbursement for a family with family fees, the fee amount will be deducted from the provider's reimbursement check for the month (the fee and reimbursement can be found on the voucher printout).

If services are also being provided by another child care and development program in which the family is required to pay a family fee, a fee credit equal to the amount paid to the other provider may be granted. A receipt of payment to the other service provider must be submitted monthly and the parent will pay the difference. A credit will be applied to the family's subsequent fee billing period and cannot be carried over beyond the subsequent fee-billing period. **Family Fees may be impacted during a Pandemic, Epidemic, and/or Government Shutdown. Unless the current governor issues an Executive Order stating otherwise regarding Family Fees.**

Past Due Family Fees

Termination of services can occur if family fees are not paid to the provider. CAPMC APP will contact families who fail to pay their family fees and issue a *NOA* stating a Delinquency of Family Fee. Fees are delinquent seven (7) calendar days after due date. Services shall be terminated within two (2) weeks unless paid within the two (2) weeks. A reasonable repayment plan will be accepted, and the parent must comply with the repayment plan to continue services.

Co-Payments

When the provider's rate and other allowable charges exceed the maximum subsidy amount, the parent is responsible for paying the difference. The difference is considered the parent's co-payment. CAPMC APP is not responsible for collecting co-payments.

PROVIDER RIGHTS & GRIEVANCE PROCESS

Complaint or Grievance against a CAPMC Staff Member

First attempt to resolve the issue within 30 days of the incident by discussing it with the FSA or CAPMC APP/R&R staff person involved. If the issue is not resolved, request a *CAPMC Parent/Community Complaint Form* and submit it within seven (7) days to the staff member's Supervisor, who will schedule a meeting to discuss the matter and submit a written resolution. If a satisfactory resolution is not reached, request a meeting with the Program Manager. The Program Manager will issue a written response to the complainant within five (5) days after the meeting.

If a satisfactory resolution has not been reached, request a meeting with the Executive Director within five (5) days after the meeting with the Program Manager, stating the problem and desired solution. The complainant will receive a written response within ten (10) days of the meeting. If a satisfactory solution is still not met, the complainant has five (5) days after receipt of the Executive Director's decision to request a hearing with the Executive Committee of the CAPMC Board of Directors. Upon conclusion of the hearing, the Executive Committee will issue a written response. If the complainant is still dissatisfied, s/he may request the issue be brought to the full CAPMC Board of Directors by submitting a written request to the Chairperson of the Board within three (3) days of receiving the Executive Committee's decision. The Board of Directors will hear the complaint and render a final decision within five (5) days of the hearing.

Limits of Provider Participation Minimum Wage Law

Since child care providers are independent contractors and not employees of CAPMC, CAPMC is not responsible for federal and state tax obligations. Please note that in California, parents may be considered to be the employer of the child care provider (domestic service worker) and as such, may be responsible for minimum wage, social security taxes, state workers compensation requirements, and unemployment taxes for in home care. If necessary, CAPMC will require a minimum number of children in care at the same time by an in-home (child's home) license-exempt provider to comply with the Fair Labor Standards Act (FLSA). The number of children is subject to change based on the current minimum wage plus rates allowed for the payment.

If the parent chooses to be the employer, the parent must submit copies of employer documents filed with the appropriate federal and state agencies, copies of check stubs to the provider, and copies of any required withholding tax

payments for an amount that is in conjunction with the reimbursement, inclusive of any parent fees, that equals or exceeds minimum wage.

Rejection of Provider Participation

Providers may be denied an agreement for services if a child care setting is deemed a health and/or safety threat, or consideration, to children or provider has a criminal record that would be detrimental to the provision of child care services.

Termination of Provider Participation

A provider's agreement for services will be terminated for any of the following:

- If the license-exempt provider is denied clearance by TrustLine,
- For non-conformity with licensing regulations,
- If the license is under a temporary suspension order or has been revoked,
- For submission of false information,
- For failure to provide pertinent information,
- For threatening or inflicting of physical/verbal abuse on staff, parents or child(ren),
- In case of refusal to provide access to CAPMC staff or parents, or
- For failure to comply with the laws, rules or regulations established by the State of California or the federal

Confidentiality

Authorized CAPMC APP representatives, fiscal auditors, legal/court ordered persons; CDSS and CCDD are allowed access to family and child care provider files. The disclosure or release of any information that pertains to child care services is restricted to purposes directly related to the administration and delivery of our services. FSAs and other CAPMC APP personnel do not provide information to outside sources.



SECTION III: CAPMC/APP FRAUD PREVENTION

FRAUD DEFINED

Fraud is defined as:

- Intentionally providing false or misleading information on participant agreements and/or eligibility and need documentation (e.g. employment verification forms, check stubs, training verification forms, provider contract agreements, provider rate sheets, family size, increased income that exceeds the eighty-five percent (85%) SMI not reported, other parent related to child in home, no need for care, care is being done by person other than provider of record, child not dependent of parent).
- Intentionally failing to report an increase to your family's income that exceeds the eighty five percent (85%) SMI income thresholds within 30 days.
- Alteration or forgery of any eligibility or need documents.
- Claiming to have received child care services that you know your family has not received and/or that your provider of record has not given.
- In any way, intentionally providing misleading information, documentation and/or statements regarding your child care eligibility or need.

FRAUD POLICY

- If services are received by willful and intentional misrepresentation or withholding of pertinent eligibility or need information, CAPMC will hold the parent accountable and immediately terminate the family from the Program.
- CAPMC collaborates with the Madera County District Attorney's office and other law enforcement agencies to investigate and prosecute fraudulent activity.
- If substantiated, intentional misrepresentation is found against a provider, the provider will be permanently ineligible to receive subsidized child care reimbursements.
- CAPMC will act to recover any misappropriated funds, including those services provided during any appeal process. Parents are responsible for reimbursing CAPMC for costs of services fraudulently obtained. CAPMC will issue an overpayment letter to collect the money directly from parents who it determines have obtained services fraudulently. If parents dispute the amount of the overpayment, CAPMC will provide the opportunity for review of the overpayment, but CAPMC does not re-hear the original termination issues.
- Limit of Future Services:
 - **CAPP & CalWORKs Stage three (3) Families:** After repayment of funds for services obtained through fraud, parents in either CAPP or CalWORKs Stage three (3) contracts are prohibited from future services for a period of one (1) year from the date of the receipt from CAPMC indicating repayment was made in full.
 - **CalWORKs Stage two (2) Families:** In agreement with the Madera County Department of Social Services, after repayment of funds for services obtained through fraud has been made, parents in CalWORKs Stage two (2) contracts are eligible for future services with no probation period.

HARASSMENT POLICY

Any person who makes threats against, harasses, uses profane language, destroys property, verbally or physically abuses, or endangers the safety of any child(ren), parent, provider, CAPMC staff member or representative will be immediately terminated from the Program and will be permanently ineligible to receive subsidized child care reimbursements. *This includes but is not limited to social media, Facebook, Instagram, LinkedIn, YouTube, Snap Chat, and other sources of communications.*

DISCRIMINATION STATEMENT (5 CCR 18107(d))

The determination of eligibility shall be without regard to the immigration status of the child(ren) or the child(ren) parent(s) unless the child(ren) or the child(ren) parent(s) is under a final order of deportation from the United States Department of Homeland Security.

CONFIDENTIALITY & USE OF INFORMATION

Information provided from applicants or participants in programs operated and administered by Community Action Partnership of Madera County, Inc. such as Head Start, Migrant Head Start, Victim Services, Drought Assistance, etc... is confidential and used only in connection with determining eligibility and participation in CAPMC programs. It is not and cannot be used for any other purpose without your permission. Such information is not provided or available to other government agencies or programs including, but not limited to, Department of Homeland Security, Immigration and Customs Enforcement (ICE) or other law enforcement agencies such as the police or sheriff's department. Additionally, all CAPMC employees agree to keep all information regarding CAPMC clients in the most secure manner.

UNIFORM COMPLAINT & GRIEVANCE PROCEDURE

The California 5CCR, Section 4610 authorizes the CDSS responsibility over Uniform Complaint Procedures (UCP) and Child Care and Development Programs are covered under UCP, which includes Alternative Payment, CalWORKs Stage two (2) and Stage three (3), Exceptional Needs, Family Child Care Homes, General, Migrant, Protective Services, complaints under the UCP procedures. For additional general information on Uniform Complaint Procedures, contact Categorical Programs:

Complaint Management Office, CDE, Legal and Audits Branch
1430 "N" Street, Suite #5408
Sacramento, CA 95814
Phone: (916) 319-0929
Website: <http://www.cde.ca.gov/re/cp/uc>

ACKNOWLEDGEMENT OF RECEIPT OF WRITTEN POLICIES

Parents/Providers who participate in a subsidized child care program administered by Community Action Partnership of Madera County are issued this handbook so they may comply with program policies and procedures. Signing below indicates receipt of the handbook and applicable policies and agreement to comply with Program requirements.

I, (Print Name) _____ under penalty of perjury of the State of California and the County of Madera, do hereby attest that I have read, understand and agree to abide by the policies and procedures of the CAPMC Alternative Payment Program as outlined in the Parent & Provider Handbook.

Parent or Provider Signature

Date

ELECTRONIC COMMUNICATION & TEXT MESSAGING AUTHORIZATION

I CONSENT for Community Action Partnership of Madera County, Inc. Child Care Alternative Payment and Resource & Referral Program to contact me via-text using this cell phone number.
Message and data rates may apply.

Cell Phone Number: _____

I CONSENT for Community Action Partnership of Madera County, Inc. Child Care Alternative Payment and Resource & Referral Program to contact me through electronic communication (email) by using this email address.

Email Address: _____

I DO NOT CONSENT for Community Action Partnership of Madera County, Inc. Child Care Alternative Payment and Resource & Referral Program to contact me via-text message or via-email.

Parent or Provider Signature

Date