



October 22, 2019

Child Care Manual Transmittal Letter No. 148

TO: All Child Care Manual Holders

FROM: Kimberly Hall, Director

SUBJECT: 2019 Publicly Funded Child Care Rules Re-numbering and Five-Year Review

Background:

The Ohio Department of Job and Family Services (ODJFS) is required to review rules every five years. The following Publicly Funded Child Care rules contained in Chapter 5101:2-16 of the Ohio Administrative Code (OAC) have been rescinded and rewritten due to the five-year review. The rules have been re-numbered consecutively and topics grouped for clarity purposes.

Rescinded Rules:

5101:2-16-07 "County agency responsibilities for the administration of publicly funded child care" was rescinded and replaced with new rule, 5101:2-16-08 of the OAC.

5101:2-16-30 "Eligibility requirements for receipt of publicly funded child care benefits" was rescinded and replaced with new rules, 5101:2-16-02 and 5101:2-16-06 of the OAC.

5101:2-16-34 "Income eligibility requirements for publicly funded child care benefits" was rescinded and replaced with new rule, 5101:2-16-03 of the OAC.

5101:2-16-35 "County agency responsibilities for determining eligibility for publicly funded child care benefits" was rescinded and replaced with new rule, 5101:2-16-08 of the OAC.

5101:2-16-35.1 "Caretaker eligibility requirements to qualify for publicly funded child care benefits" was rescinded and replaced with new rules, 5101:2-16-04 and 5101:2-16-06 of the OAC.

5101:2-16-36 "County agency responsibility for annual re-determination of eligibility for publicly funded child care" was rescinded and replaced with new rule, 5101:2-16-08 of the OAC.

5101:2-16-37 "Caretaker requirements for annual re-determination of eligibility for publicly funded child care" was rescinded and replaced with new rule, 5101:2-16-02 of the OAC.

5101:2-16-39 "Copayment for publicly funded child care benefits" was rescinded and replaced with new rule, 5101:2-16-05 of the OAC.

Appendix A "Copayment Calculation Table" was replaced with appendix A to rule 5101:2-16-05 of the OAC.

5101:2-16-41 "Payment rates and procedures for providers of publicly funded child care" was rescinded and replaced with new rule, 5101:2-16-10 of the OAC.

Appendix A "Payment Rates for Providers of Publicly Funded Child Care" was replaced with Appendix A to rule 5101:2-16-10 of the OAC.

5101:2-16-42 "Payment rates for children with special needs" was rescinded and replaced with new rule, 5101:2-16-09 of the OAC.

5101:2-16-43 "Approval for Ohio department of education (ODE) programs to provide publicly funded child care" was rescinded and replaced with new rule, 5101:2-16-09 of the OAC.

5101:2-16-44 "Provider agreement for payment of publicly funded child care" was rescinded and replaced with new rule, 5101:2-16-09 of OAC.

5101:2-16-70 "Caretaker improper payments or misuse of publicly funded child care" was rescinded and replaced with new rule, 5101:2-16-07 of the OAC.

5101:2-16-71 "Provider improper payments or misuse of publicly funded child care" was rescinded and replaced with new rule, 5101:2-16-11 of the OAC.

5101:2-16-72 "Publicly funded child care program integrity review" was rescinded and replaced with new rule, 5101:2-16-12 of the OAC.

Amended Rule:

5101:2-16-01 "Definitions for eligibility for publicly funded child care benefits" was amended with the following changes:

- Amended the definition for "Eligible Provider" to reference rule 5101:2-16-09 of the OAC.
- Added the McKinney-Vento definition for "Homeless children" as required by the Child Care and Development Block Grant Act of 2014.
- Amended the definition for "School not in session" to add "including a delayed start time or early dismissal time."
- Updated the definitions for "Child care," "School-age," "School hours" and "Special needs" to align with system functionality and budget language from Am. Sub. H.B. 166 of the 133rd General Assembly.
- Added the definition of "School year" to this rule for clarity.

New Rules:

5101:2-16-02 "Application and qualification process for receipt of publicly funded child care benefits" replaced in part rules 5101:2-16-30, 5101:2-16-35.1, 5101:2-16-36 and 5101:2-16-37 of the OAC and outlines the application process and qualification

requirements for receipt of publicly funded child care (PFCC) benefits. The following changes were made:

- Combined the caretaker application and redetermination rules.
- Clarified "homeless child care" to specify eligibility requirements.
- Removed the requirement that homeless child care eligibility is limited to once in a twelve-month period.
- Clarified the requirements for caretakers and counties when indicating a child in need of care has special needs.
- Clarified that eligibility may include applicants as well as recipients of Ohio Works First (OWF).
- Clarified the application received date for a valid PFCC application and the requirements for the application to be considered complete.
- Clarified that participation in a verified qualifying activity is not required for the application to be complete. An application with enough information to determine that activities are not qualifying is still considered a complete application.
- Clarified that when there is no income in the family, a statement is required of how the family is meeting basic living expenses pursuant to rule 5101:2-16-03 of the OAC.
- Clarified that the application must be a considered a valid PFCC application to start the thirty-calendar day application process for the caretaker.
- Clarified that if the Head Start program year extends beyond the current eligibility period the caretaker must still complete the redetermination process.
- Added "An apprenticeship program approved by the Ohio State Apprenticeship Council and registered with ApprenticeOhio" to the vocational and job skills training approved activities listed in Appendix A to the rule.

Appendix A "Qualifying Activities for the Publicly Funded Child Care Program" is a new appendix that lists the approved qualifying activities for caretakers in the PFCC program and how to document them.

Appendix B "Verification of Citizenship for Children in the Publicly Funded Child Care Program" is a new appendix that lists the verification requirements to document U.S. citizenship of children receiving PFCC services.

5101:2-16-03 "Income eligibility requirements for publicly funded child care benefits" replaced rule 5101:2-16-34 of the OAC and outlines the income eligibility requirements for the PFCC program. The following changes were made:

- Changed to question and answer format.
- Added the requirement that a person on unpaid leave from employment must provide written verification documenting how they are meeting basic living expenses to align with the requirement for others with no reported income.

- Clarified the verification process for a family's income.
- Clarified that gross self-employment income is determined first, then self-employment expenses are deducted from the total gross income to determine gross monthly income for self-employment.
- Clarified that the standard fifty percent deduction is taken from total gross self-employment income.
- Added to the list of unallowable self-employment deductions to align with the Supplemental Nutrition Assistance Program.
- Clarified that monthly earned and unearned income must be rounded down by dropping all cents for income calculations.
- Clarified when cents are dropped and when conversion factors are used for income calculations.
- Added language stating that the county agency must assist caretakers in obtaining verification of income anytime other than when the caretaker has refused to cooperate.

5101:2-16-04 "Caretaker responsibilities to maintain eligibility in the publicly funded child care program" replaced in part rule 5101:2-16-35.1 of the OAC and outlines the caretaker responsibilities to remain eligible for PFCC once they are in the program. The following changes were made:

- Changed to question and answer format.
- Added the requirement that a caretaker must review attendance changes made by a provider in the automated system and approve appropriate changes.
- Clarified caretaker requirements for copayments and payment agreements.
- Added that a caretaker must notify the county agency when a preschool child begins attending elementary school and when a child stops attending a child care program.
- Clarified caretaker reporting requirements regarding child care programs, including when a child stops attending a program or wishes to switch programs.
- Clarified caretaker reporting requirements when there are changes in the number of hours needed for care.
- Clarified caretaker requirements around program integrity review requests.

5101:2-16-05 "Copayment for publicly funded child care benefits" replaced rule 5101:2-16-39 of the OAC and outlines the copayment requirements for PFCC benefits. The following changes were made:

- Clarified that families may be assigned a copayment based on income level and must pay the copayment directly to the child care provider based on established written agreements between families and the provider.
- Clarified when copayments may be reduced or increased.

- Removed the requirement that a family copayment amount may increase if a change occurs within the first thirty days of eligibility.

Appendix A "Copayment Calculation Table" replaced appendix A to rescinded rule 5101:2-16-39 of the OAC and lists the copayment multipliers used to determine copayment amounts based on income level.

5101:2-16-06 "Authorizations for publicly funded child care services" replaced in part rules 5101:2-16-30 and 5101:2-16-35.1 of the OAC and clarifies what child care authorizations are and how they are used. The following changes were made:

- Grouped all policies and procedures on child care authorizations into one new rule and put in question and answer format.
- Added wording to clarify that authorizations are per child and authorize payment to a provider for a specific number of hours of care.
- Clarified child care categories of authorization and how they are determined.
- Added that child care shall not exceed forty-eight consecutive hours for each child.
- Added language regarding a valid application for consistency with rule 5101:2-16-02 of the OAC.
- Removed the requirement that an authorization not used for thirty-one days will be ended.

5101:2-16-07 "Caretaker improper payments or misuse of publicly funded child care benefits" replaced rule 5101:2-16-70 of the OAC and defines and outlines procedures for caretaker improper payments or misuse of PFCC. The following change was made:

- Clarified the definition of a child care improper payment.

5101:2-16-08 "County agency responsibilities for the administration and determination of eligibility for publicly funded child care" replaced rules 5101:2-16-07, 5101:2-16-35 and 5101:2-16-36 of the OAC and outlines the requirements for county agencies to administer the PFCC program. The following changes were made:

- The rules have been combined and put in question and answer format.
- Added language regarding a valid application for consistency with rule 5101:2-16-02 of the OAC.
- Clarified that if an initial application is received from a caretaker who owes an overpayment from a previous PFCC benefit period, the application must be denied unless the caretaker enters into an agreement with the county agency or ODJFS to repay the overpayment.
- Removed the requirement that child care may be terminated if the caretaker does not use child care services for a period of thirty-one consecutive days.
- Clarified that a family does not qualify for continuing eligibility pursuant to rule

5101:2-16-02 of the OAC for child care benefits if the county agency determines the family is no longer eligible.

5101:2-16-09 "Provider responsibilities for publicly funded child care" replaced rules 5101:2-16-42, 5101:2-16-43, and 5101:2-16-44 of the OAC and outlines the requirements for eligible providers to sign a provider agreement with ODJFS to provide PFCC services. The following changes were made:

- Grouped all requirements for providers into one new rule and put in question and answer format.
- Created a definition of who is eligible to sign a provider agreement.
- Updated Step Up To Quality requirements and exemptions for publicly funded child care providers as a result of new budget language in Am. Sub. H.B. 166 of the 133rd General Assembly.
- Updated the process for deducting school-age hours in the automated system due to changes in system functionality.
- Removed the definition of "school year" and clarified that the definition may be found in rule 5101:2-16-01 of the OAC.
- Added the requirement for a provider to have a written and signed copy agreement with the caretaker.
- Clarified that providers may submit a request for a payment enhancement when accommodations must be made to care for a child with special needs.

5101:2-16-10 "Payment rates and procedures for providers of publicly funded child care services" replaced rule 5101:2-16-41 of the OAC and sets forth the payment rates and procedures for providers of PFCC services. The following changes were made:

- Changed to question and answer format.
- Clarified how rates for providers are established.
- Clarified how providers are compensated for caring for children with special needs.
- Clarified that categories of authorization are based on the total number of weekly child care hours approved for PFCC.
- Clarified that payment is made based on the total number of child care hours provided in a week, not to exceed the child's category of authorization.
- Added requirements for ODJFS payment of registration fees for children in care.
- Clarified that for approved day camps to receive registration fees, the camp shall have had a valid provider agreement as of August thirtieth of the previous year.
- Removed the definition of "school year" and clarified that the definition may be found in rule 5101:2-16-01 of the OAC.

Appendix A "Weekly Payment Rates for Providers of Publicly Funded Child Care" replaced Appendix A of rescinded rule 5101:2-16-41 of the OAC and was updated to reflect new provider categories and rates.

5101:2-16-11 "Provider improper payments or misuse of publicly funded child care benefits" replaced rescinded rule 5101:2-16-71 of the OAC and defines a provider improper payment, misuse and fraud and outlines the process for recoupment of funds. The following changes were made:

- Clarified the procedure when a provider improper payment is the result of a county error.
- Clarified repayment procedures for improper payments or misuse of PFCC funds.

5101:2-16-12 "Publicly funded child care program integrity review" replaced rescinded rule 5101:2-16-72 of the OAC and outlines the requirements to participate in record reviews conducted by ODJFS as part of the program integrity process.

- Removed provider agreement suspension language due to new budget language in Am. Sub. H.B. 166 of the 133rd General Assembly.
- Clarified what happens if ODJFS determines misuse of PFCC as a result of a Program Integrity Review.
- In paragraph (E) the word "either" was changed to "both" for clarification.

Amended Forms:

JFS 01126 "Request for Reinstatement of Child Care Benefits" (rev. 10/2019) was revised to change "County Department of Job and Family Services" to "county agency" throughout the form.

JFS 01151 "County Notice of Child Care Benefit Repayment Requirements for Caretakers" (rev. 10/2019) was revised to change "County Department of Job and Family Services" to "county agency" throughout the form, and to remove an inactive web address for the Ohio State Legal Association.

JFS 01231 "Request for Payment Rate for Special Needs Child Care" (rev. 10/2019) was revised to update changes in required information and changes regarding the submission of the form and supporting documentation. The following changes were made:

- Added a section for caretaker information regarding the special needs of the child.
- Added a signature line for the caretaker.
- Added specific questions to the provider about how the child care program has increased costs to accommodate the child with special needs.
- Updated the submission process to require the form and supporting documentation be sent to the new special needs child care e-mail address.

Implementation:

Requests for new special needs payment rates or renewals submitted after October 20, 2019 must use the new JFS 01231 "Request for Payment Rate for Special Needs Child Care" (rev. 10/2019).

If you have any questions, please contact the Child Care Policy Help Desk at 1-877-302-2347, option 4.

5101:2-16-01

Definitions for eligibility for publicly funded child care benefits.

- (A) "Absent day" means any day that a child is authorized and scheduled to be in the care of the provider, but is not in attendance, and child care would have been provided had the child been present with the provider.
- (B) "Adult" means an individual who is age eighteen or older.
- (C) "Authorization" means the hours that a county agency determines that a child may receive publicly funded child care from an eligible provider chosen by the caretaker. The authorization shall be reasonably related to the number of hours of the caretaker's qualifying activities.
- (D) "Automated child care system" means the automated electronic child care system that tracks attendance and calculates payments for publicly funded child care.
- (E) "Border state child care provider" means a child care provider who is licensed, certified, or otherwise approved by the border state to provide child care services. A border state child care provider may provide publicly funded child care only to a recipient who resides in an Ohio county.
- (F) "Caretaker" means the father or mother of a child, an adult who has legal custody of a child, an adult who is the guardian of a child, or an adult who stands in loco parentis, as defined in this rule, with respect to a child and whose presence in the home is needed as the caretaker of the child. Caretaker has the same meaning as "caretaker parent" as defined in section 5104.01 of the Revised Code.
- (G) "Child" means an infant, toddler, preschool child, or school-age child up to age eighteen.
- (H) "Child care" per section 5104.01 of the Revised Code means all of the following:
- (1) Administering to the needs of infants, toddlers, preschool-age children and school-age children outside of school hours;
 - (2) By persons other than their parents, guardians, or custodians;
 - (3) For ~~any~~ part of the twenty-four-hour day; and
 - (4) In a place other than a child's own home, except that an in-home aide provides child care in the child's own home;
 - (5) By a provider required by Chapter 5104. of the Revised Code to be licensed or approved by the Ohio department of job and family services (ODJFS), certified by a county department of job and family services, or under contract with

the department to provide publicly funded child care as described in section 5104.32 of the Revised Code.

(I) "Designee/Sponsor" means the individual designated by the caretaker to record attendance for a child receiving publicly funded child care at an authorized provider.

(1) The caretaker shall not designate a child who is an infant, toddler or preschool child.

(2) The caretaker shall not designate the authorized provider or anyone acting in any capacity for the provider.

(3) A school-age child that is a designee/sponsor may only track attendance for themselves and other school-age children authorized on the same case and to the same provider.

(J) "Eligibility period" means a period of at least twelve months that a family is determined eligible for publicly funded child care benefits, or the period until the family no longer meets eligibility requirements or requests termination. The family's eligibility period shall end on the first Saturday after the last day of the twelfth month of eligibility unless the last day of the month is a Saturday.

(K) "Eligible provider" means a child care provider who is eligible to receive public funds in accordance with Chapter 5104. of the Revised Code, ~~has completed the provider agreement with the Ohio department of job and family services (ODJFS) and has entered all required information in the provider portal. An eligible provider includes all of the following:~~ and rule 5101:2-16-09 of the Administrative Code.

~~(1) A licensed child care center.~~

~~(2) A licensed type A child care home.~~

~~(3) A licensed type B child care home.~~

~~(4) A certified in-home aide.~~

~~(5) A licensed school child care center.~~

~~(6) A licensed preschool program.~~

~~(7) A licensed school child program.~~

~~(8) An approved child day camp as defined in rule 5101:2-18-01 of the Administrative Code.~~

~~(9)~~ A border state child care provider.

(L) "Head Start program" means a comprehensive child development program that receives federal funds distributed under the "Head Start Act" 95 Stat. 499 (1981) which includes early head start.

(M) "Homeless children" as defined in 42 U.S.C. 11434a(2)(2015) means individuals who lack a fixed, regular, and adequate nighttime residence (within the meaning of 42 U.S.C. 11302(a)(1)(2014), and includes all of the following:

(1) Children who are sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason; are living in motels, hotels, trailer parks, or camping grounds due to the lack of alternative adequate accommodations; are living in emergency or transitional shelters; or are abandoned in hospitals.

(2) Children who have a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings (within the meaning of 42 U.S.C. 11302(a)(2)(C).

(3) Children who are living in cars, parks, public spaces, abandoned buildings, substandard housing, bus or train stations, or similar settings.

(4) Migratory children (as such term is defined in section 1309 of the Elementary and Secondary Education Act of 1965) who qualify as homeless for the purposes of this subtitle because the children are living in circumstances described in paragraphs (M)(1) to (M)(3) of this rule.

~~(M)~~(N) "Income" means gross income, as defined in rule ~~5101:2-16-34~~5101:2-16-03 of the Administrative Code.

~~(N)~~(O) "Infant" means a child under eighteen months of age.

~~(O)~~(P) "In loco parentis" means an adult who is the caretaker of a child, including a relative, foster parent or stepparent, who is charged with the rights, duties and responsibilities of a parent and whose presence in the home is needed to perform these rights, duties and responsibilities.

~~(P)~~(Q) "Minor parent" means a caretaker who is under age eighteen.

~~(Q)~~(R) "Preschool child" means a child who is three years old or older but is not a school child.

~~(R)~~(S) "Professional development day" means a day in which a provider would normally provide child care for currently enrolled and scheduled children, but has closed to

the public so that the provider and/or child care staff may undergo training meant to improve their professional knowledge, competence, skill and effectiveness as child care professionals.

~~(S)~~(T) "Publicly funded child care" is the care of infants, toddlers, preschool children, and school-age children under age thirteen by an eligible provider. Publicly funded child care is paid, wholly or in part, with federal or state funds, including funds available under the child care block grant act Title IV-A, and Title XX, distributed by ODJFS.

~~(F)~~(U) "School-age child" means a child who is enrolled in and attending a grade of kindergarten or above ~~or who is of compulsory school age as defined in section 3321.01 of the Revised Code~~, but is less than fifteen years old or, in the case of a child who is receiving special needs child care, is less than eighteen years old.

~~(U)~~(V) "School hours" means the standardized hours of school as ~~determined by ODJFS~~ defined by the child's school. If the child is homeschooled, school hours are defined by the public school the child would attend if not being homeschooled.

~~(V)~~(W) "School not in session" means a day during the ODJFS defined school year when a school-age child is not able to attend school due to an official school closure, including a delayed start time or an early dismissal time.

(X) "School year" is defined by ODJFS as the first Sunday in September through the last Saturday in May.

~~(W)~~ "Special needs" means ~~providing child care services to a child who is under eighteen years old who does not function according to age appropriate expectations in one or more of the following areas of development: social/emotional, cognitive, communication, perceptual-motor, physical, or behavioral development, or the child has chronic health issues. The child's delays/conditions affect development to the extent that the child requires special adaptations, modified facilities, program adjustments or related services on a regular basis in order to function in an adaptive manner.~~

(Y) "Special needs child care" means child care provided to a child who is less than eighteen years of age and either has one or more chronic health conditions or does not meet age appropriate expectations in one or more areas of development, including social, emotional, cognitive, communicative, perceptual, motor, physical, and behavioral development and that may include on a regular basis such services, adaptations, modifications, or adjustments needed to assist in the child's function or development.

~~(X)~~(Z) "Step up to quality (SUTQ)" means the tiered quality rating system for licensed child care programs in Ohio.

~~(Y)~~(AA) "Temporary absence" is when a caretaker is out of the home for up to forty-five consecutive days with a definite plan to return to the household.

~~(Z)~~(BB) "Toddler" means a child who is at least eighteen months of age but is less than three years of age.

~~(AA)~~(CC) "Week" is the seven-day period from twelve a.m. Sunday to eleven fifty-nine p.m. Saturday.

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CERTIFIED ELECTRONICALLY

Certification

10/10/2019

Date

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5101:2-16-02**Application and qualification process for receipt of publicly funded child care benefits.**

(A) How does a caretaker apply for publicly funded child care (PFCC) benefits?

(1) The caretaker shall complete a PFCC application and submit the application to the county agency that serves the caretaker's county of residence.

(a) A valid PFCC application includes any of the following forms with the applicant's name, address and signature on the form:

(i) The JFS 01138 "Application for Child Care Benefits" (rev. 12/2018) or its electronic equivalent.

(ii) The JFS 01121 "Early Childhood Education Eligibility Screening Tool" (rev. 12/2018) or the JFS 01122 "Publicly Funded Child Care Supplemental Application" (rev. 12/2018).

(iii) If the PFCC application does not include, at a minimum, the applicant's name, address, and signature, the application is not considered valid.

(b) The application received date shall be the date the county agency receives a valid PFCC application as described in paragraph (A)(1)(a) of this rule.

(2) The application shall be considered complete when the caretaker has submitted all of the following:

(a) The JFS 01138 or the JFS 01121 and the JFS 01122 with the required information for all family members. A family is any of the following:

(i) One or more caretaker(s) and all minor children who reside with the caretaker(s) in the same household.

(ii) A caretaker, a minor parent and the child of the minor parent when all reside in the same household, unless the minor parent is participating in the learning, earning and parenting (LEAP) program. If the minor parent is participating in LEAP, the caretaker is not included in the household.

(iii) A caretaker with shared custody of minor children and all children who reside with the caretaker in the same household. Minor children with more than one residence due to shared custody agreements are counted in the caretaker's household during the time periods they reside with the caretaker.

(a) The application shall be denied due to insufficient information if the county agency does not receive all required documentation within the thirty day time frame.

(b) The caretaker may submit a new application with supporting documentation pursuant to paragraphs (A)(2) and (A)(3) of this rule if he or she still wishes to apply for benefits.

(B) What are the eligibility requirements to qualify for publicly funded child care benefits?

(1) The family shall meet the income requirements:

(a) Initially, a caretaker may be eligible for publicly funded child care benefits if the family's gross monthly income is at or below one hundred thirty per cent of the federal poverty level (FPL).

(b) Ongoing eligibility may be maintained if the family's gross monthly income is at or below three hundred per cent of the FPL.

(c) These amounts will be published annually in a child care manual procedure letter.

(2) All caretakers in the home shall be participating in one or more of the qualifying activities as listed in appendix A to this rule, unless verification is received that the caretaker cannot provide appropriate care for the child, pursuant to paragraph (A)(2)(b) of this rule.

(3) The child in need of care shall:

(a) Be under age thirteen at the time of application and may remain eligible through the end of the eligibility period in which they turn thirteen; or

(b) Be under age eighteen at the time of application if the child meets the definition of special needs pursuant to rule 5101:2-16-01 of the Administrative Code, and may remain eligible through the end of the eligibility period in which they turn eighteen.

(c) Meet the citizenship requirements as listed in appendix B to this rule.

(4) The family shall not have more than one million dollars in cash, checking or savings accounts.

(C) What if a child in need of care has special needs?

- (1) If a caretaker indicates on an application that a child has special needs, the county shall request verification of the child's special need. If the special need is verified, the provider may receive payment enhancements pursuant to rule 5101:2-16-10 of the Administrative Code for child care services provided for the child.
 - (2) If the provider must make special accommodations to care for the child, the caretaker and the provider may apply for a special needs waiver so that the provider may receive additional payment enhancements per rule 5101:2-16-09 of the Administrative Code.
- (D) What if a caretaker's qualifying activity ends before the end of a family's eligibility period?
- (1) A family will remain eligible for child care if the county agency has documentation that a caretaker's qualifying activity will begin within the next thirty days.
 - (2) A family may continue to be eligible for child care if a caretaker's qualifying activity ends and a new activity is not scheduled to begin pursuant to paragraph (D)(1) of this rule, if the following requirements are met:

 - (a) If the county agency is notified about the loss of a qualifying activity, eligibility may continue for up to thirteen weeks from the date the qualifying activity ends, not to extend beyond the current eligibility period.
 - (b) If a new qualifying activity is verified before the end of the thirteen week time period, the family may continue to be eligible for child care, not to extend beyond the current eligibility period.
 - (3) A child enrolled in a child care program that partners with a federally funded head start program may remain eligible for child care benefits until the end of the current head start program year if the county agency proposes termination of child care due to an unmet eligibility requirement. To remain eligible for continuation of child care benefits until the end of the current head start program year, the caretaker shall meet the following eligibility requirements:

 - (a) The caretaker shall meet the income eligibility requirements outlined in paragraph (B)(1) of this rule.
 - (b) The caretaker shall pay the assigned copayment.

(c) The caretaker shall complete the redetermination process pursuant to paragraph (K) of this rule if the head start program year extends beyond the current eligibility period.

(d) The caretaker shall not have been found guilty by a court of law for child care fraud.

(E) What is transitional child care?

(1) A caretaker shall be eligible for transitional child care benefits for the twelve-month period immediately following the end of participation in Ohio works first (OWF) if the caretaker meets all of the initial and redetermination eligibility requirements and all of the following apply:

(a) The caretaker needs child care due to employment.

(b) The caretaker's initial income does not exceed one hundred fifty per cent of the FPL. These amounts shall be published annually in a child care manual procedure letter.

(2) A caretaker who is ineligible to participate in OWF pursuant to section 5101.83 or 5107.16 of the Revised Code is not eligible for transitional child care.

(F) What if a family needs protective care?

(1) Protective child care is publicly funded child care services provided to assist in the care and protection of a child. Caretakers receiving protective child care shall be determined eligible without regard to income or assets and shall have their copayment waived pursuant to rule 5101:2-16-05 of the Administrative Code.

(2) A case plan, as required in section 2151.412 of the Revised Code shall be prepared and maintained for the child and caretaker. The case plan shall indicate a need for protective child care to permit the caretaker to complete requirements of the case plan. Protective child care may be authorized only for a child who resides in the home of the caretaker for whom the case plan is written.

(G) What if a family is homeless?

(1) The term "homeless children" means individuals who lack a fixed, regular and adequate nighttime residence as defined in rule 5101:2-16-01 of the Administrative Code.

- (2) If the homeless caretaker does not meet the eligibility requirements outlined in paragraph (B) of this rule, the family shall be determined eligible for homeless child care without regard to income or activity and the copayment shall be waived. The child in need of care shall still meet the requirements outlined in paragraph (B)(3) of this rule.
- (3) If the homeless caretaker does not have a qualifying activity, each child in need of care shall receive a full-time authorization.
- (4) Homeless child care shall be approved for ninety calendar days or the period of time that the caretaker and child are homeless, whichever period is shorter.
- (5) At the end of the homeless child care eligibility period, the county agency shall re-evaluate eligibility according to the requirements outlined in paragraph (B) of this rule. The maximum monthly income for ongoing eligibility, as defined in paragraph (B)(1)(b) of this rule, shall be used.

(H) What if a second caretaker is temporarily absent from the household, pursuant to rule 5101:2-16-01 of the Administrative Code?

When the family is currently eligible for publicly funded child care, eligibility may continue when a second caretaker is temporarily absent.

(1) The following is a list of temporary absences that may be considered:

- (a) Attendance at school.
- (b) Trip made in connection with current or prospective employment.
- (c) Service in the military when it is the sole reason for the absence.
- (d) Vacationing.
- (e) Serving a jail sentence.

(2) The temporarily absent caretaker is used in the determination of eligibility in the following manner:

- (a) The caretaker is counted in household size.
- (b) The income contributed to the household by the absent caretaker is counted in the determination of eligibility pursuant to rule 5101:2-16-03 of the Administrative Code.

- (c) The caretaker's activity shall not be considered when determining authorizations for child care and the caretaker is not considered available for care.

(I) Can child care be approved if a second caretaker is absent from the home for more than forty-five days?

If a second caretaker is absent from the home for more than forty-five days, the caretaker shall not be included in the household for determining eligibility for child care.

(J) Can child care benefits be reinstated after termination of child care benefits?

(1) A caretaker may be eligible for reinstatement of child care benefits within sixty days following termination if the termination was due to income, or if the caretaker's employment, training or education activity was interrupted and the individual did not meet or no longer met the requirements in paragraph (D) of this rule.

(a) The caretaker shall complete either a JFS 01126 "Request for Reinstatement of Child Care Benefits" (rev. 10/2019) or the application for publicly funded child care defined in paragraph (A)(1) of this rule. If the most recent period of eligibility will expire within forty-five days of the request for reinstatement, the caretaker shall complete the application for publicly funded child care defined in paragraph (A)(1) of this rule.

(b) The maximum monthly income limit for ongoing eligibility, as defined in paragraph (B)(1)(b) of this rule, shall be used to determine income eligibility.

(c) The copayment amount shall be based on the current income and household size.

(d) The caretaker shall verify that he or she is engaged in a qualifying employment, education or training activity as required in this rule, and shall verify current income and household size.

(e) The caretaker shall not have an outstanding overpayment or outstanding delinquent copayment unless a repayment plan is in place and the terms of the repayment plan are being met.

(2) The caretaker may be eligible only if the original eligibility period has not ended, and shall be eligible until the end of the original eligibility period.

(3) The caretaker is not eligible for reinstatement if the termination of eligibility was as a result of a redetermination of eligibility.

(K) How does a caretaker re-apply for benefits at the end of their eligibility period?

Annually, a caretaker receiving publicly funded child care benefits shall submit the JFS 01124 "Re-determination Application for Child Care Benefits" (rev. 12/2018), household income verification and supporting documentation to their county agency if they wish to continue receiving benefits.

(L) How will a caretaker know when it is time to submit a re-determination application?

Forty-five days prior to the end of the current eligibility period, a JFS 01124 shall be mailed to the caretaker.

(M) What shall the caretaker submit to complete the re-determination process?

(1) Prior to the end of the current eligibility period, the caretaker shall:

(a) Verify information on the printed JFS 01124 and make changes as necessary.

(b) Attach proof of current household income and any other changes to the JFS 01124.

(c) Sign and return the JFS 01124 and necessary documentation to the county agency.

(2) If the caretaker does not submit a JFS 01124 and all required supporting documentation fifteen calendar days prior to the end of the current eligibility period, the caretaker will receive a termination notice.

(3) If the re-determination is completed after the issuance of a termination notice and prior to the end of the current eligibility period, ongoing eligibility will be determined.

(N) What if a caretaker fails to cooperate in the re-determination process?

If the caretaker does not comply with paragraph (M) of this rule, eligibility shall be terminated effective the last day of the current eligibility period.

(O) How will a caretaker be notified when ongoing eligibility has been re-determined?

Upon the receipt of a completed JFS 01124 and all supporting verifications, the county agency shall re-determine eligibility for publicly funded child care.

- (1) If the county agency determines the caretaker is eligible for benefits for a new eligibility period, the county agency shall provide notice of approval for child care benefits using the JFS 04074 "Notice of Approval of Your Application for Assistance" (rev. 6/2019) or its computer-generated equivalent.
- (2) If the county agency determines the caretaker is ineligible for benefits for a new eligibility period, the county agency shall provide notice of denial of an application for benefits using the JFS 07334 "Notice of Denial of Your Application for Assistance" (rev. 6/2019) or its computer-generated equivalent.

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5101:2-16-37

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06/26/2016, 10/01/2017, 12/16/2018

Qualifying Activities for the Publicly Funded Child Care Program

Eligibility for the publicly funded child care program requires all caretakers in the household to verify participation in one or more of the following qualifying activities:

1. Paid employment on a full-time or part-time basis.
 - a. Paid employment includes the following if verification is provided confirming the employee will return to work:
 - i. Maternity leave.
 - ii. Leave taken according to the Family Medical Leave Act of 1993 (FMLA).
 - iii. Short term disability.
 - b. The end of seasonal paid employment shall not be considered paid employment, even if there is verification that the employee will return to work.
2. Basic education activities.
 - a. Basic education activities must take place at an official practice center site or as part of a limited English proficiency program where an instructor is present, and include the following:
 - i. High school or equivalent education.
 - ii. Remedial high school education.
 - iii. Adult basic literacy education.
 - iv. Education for individuals with limited English proficiency.
 - b. Basic education activities shall be verified by the following documentation:
 - i. Proof of enrollment.
 - ii. The days and hours the caretaker is attending.
 - iii. The length of the class.
 - iv. Proof of initial testing, within the first month of class participation, showing the caretaker's education and/or literacy level.
 - v. When the class has open enrollment and no established end date, the caretaker shall provide proof of how often progress is measured, and provide verification of their progress at least once every twelve months.
3. Post-secondary education activities.
 - a. Post-secondary education activities must be part of a course of study leading to a degree, certificate or license. They include the following:
 - i. College classes.
 - ii. Federal work study assignments.
 - iii. Technical classes.
 - iv. Vocational classes.
 - b. The caretaker must have a record of satisfactory participation as defined by the school or institution.
 - c. When education activities are accessed via electronic media, the number of hours approved for child care shall not exceed the number of credit hours per week for the course, as defined by the educational institution.
 - d. Post-secondary education activities shall be approved by one of the following:
 - i. An accredited institution of higher education.

Appendix A to rule 5101:2-16-02

- ii. An institution that has a certificate or has an authorization from the Ohio board of regents.
 - iii. An institution that has a registration from the state board of school and college registration.
 - e. Post-secondary education activities shall not be eligible for receipt of publicly funded child care benefits in the following instances:
 - i. When the caretaker has completed the requirements for a baccalaureate degree unless the education is necessary to meet specific requirements associated with maintaining the caretaker's employment, certification or licensure.
 - ii. When the caretaker has completed one hundred forty-four undergraduate semester hours or two hundred sixteen undergraduate quarter hours, or the combined equivalent hours.
 - 4. Vocational and occupational job skills training that is directly related to the caretaker's employment goal.
 - a. Job skills training may include but are not limited to:
 - i. Classroom job skills training.
 - ii. Supervised on-the-job skills training.
 - iii. Refresher job skills training.
 - b. Job skills training activities shall be approved by one of the following:
 - i. An accredited institution of higher education.
 - ii. An institution that has a certificate issued or has authorization from the Ohio board of regents.
 - iii. An institution that has a registration from the state board of school and college registration.
 - iv. A workforce inventory of education and training (WIET) provider who has been approved by the Ohio department of job and family services (ODJFS).
 - v. An apprenticeship program approved by the Ohio State Apprenticeship Council and registered with ApprenticeOhio.
 - 5. Requirements set forth for those participating in Ohio works first (OWF) or the supplemental nutrition assistance program (SNAP) including:
 - a. Caretakers who have applied for or receive OWF and need child care to comply with a self-sufficiency contract or an individual opportunity plan.
 - b. Caretakers who are sanctioned under OWF and are participating in an approved activity to meet OWF requirements.
 - c. Caretakers who need child care to comply with a SNAP employment and training program plan.
 - d. Minor parents participating in the learning, earning and parenting (LEAP) program pursuant to rule 5101:1-23-50 of the Administrative Code.

Verification of Citizenship for Children in the Publicly Funded Child Care Program

The county agency shall verify the United States (U.S.) citizenship or immigration status for children for whom a caretaker applies for child care benefits. If the county agency verifies that a caretaker receives or has received OWF for a child, verification of citizenship is not required.

To be eligible for child care, a child must be one of the following:

1. A U.S. born citizen.
 - a. The caretaker shall provide a civilian birth, baptismal, church certificate, or hospital record showing a birthplace in the U.S.
 - b. "Birthplace in the U.S." refers to an individual born in one of the fifty states, District of Columbia, Puerto Rico, Guam, Northern Mariana Islands, U.S. Virgin Islands, Swain Island, or American Samoa.
2. A foreign-born U.S. citizen.
 - a. The caretaker shall provide a citizen certification, U.S. passport, consular certification of birth or certificate of naturalization as verification.
3. A qualified alien.
 - a. Qualified alien means one of the following:
 - i. An alien who is lawfully admitted for permanent residence under the Immigration and Nationality Act (INA), 8 U.S.C. 1101 (1/14).
 - ii. An alien who is granted asylum under section 208 of the INA, 8 U.S.C. 1158 (1/3/12).
 - iii. A refugee who is admitted to the United States under section 207 of the INA, 8 U.S.C. 1157 (1/3/12).
 - iv. An alien who is paroled into the United States under section 212(d)(5) of the INA, 8 U.S.C. 1182(d)(5), for a period of at least one year (3/2013).
 - v. An alien whose deportation is being withheld under section 243(h) of the INA, 8 U.S.C. 1253 (as in effect immediately before the effective date of section 307 of division C of Public Law 104-208) or section 241(b)(3) of the INA, 8 U.S.C. 1231(b)(3) (as amended by section 305(a) of division C of Public Law 104-208).
 - vi. An alien who is granted conditional entry pursuant to section 203(a)(7) of the INA, 8 U.S.C. 1153(a)(7) as in effect prior to April 1, 1980.
 - vii. An alien who is a Cuban or Haitian entrant (as defined in section 501(e) of the Refugee Education Assistance Act of 1980).
 - viii. A battered alien who meets the conditions set forth in 8 U.S.C. 1641 (c)(1/3/12).
 - ix. An alien who is the victim of a severe form of trafficking as set forth in 8 U.S.C. 1641 (c)(4).
 - x. An Afghan or Iraqi alien admitted to the U.S. who was granted a special immigrant visa (SIV) under section 101(a)(27) of the INA, 8 U.S.C. 1157.
 - b. Except as provided in paragraph (3)(c) of this appendix, a child who is a qualified alien as defined in 8 U.S.C. 1641, and entering the United States on or after

August 22, 1996, shall be required to live in the United States for five years before being eligible for child care.

- c. A child in any of the following categories is exempt from the requirement that he or she live in the United States five years prior to eligibility:
 - i. An alien who is admitted to the United States as a refugee under section 207 of the INA, U.S. C. 1157.
 - ii. An alien who is granted asylum under section 208 of the INA, 8 U.S.C. 1158.
 - iii. An alien whose deportation is being withheld under section 243(h) of the INA as in effect prior to April 1, 1997 or whose removal is withheld under section 241(b)(3) of the INA, 8 U.S.C. 1231 (1/3/12).
 - iv. An alien who is a Cuban or Haitian entrant as defined in section 501(e) of the Refugee Education Assistance Act of 1980.
 - v. An alien admitted to the United States as an Amerasian immigrant as described in 8 U.S.C. 1612(a)(2)(A)(v) (1/7/11).
 - vi. The unmarried dependent child of an alien meeting the veteran and active duty exception in 8 U.S.C. 1641(b)(2).
- d. If the child is an alien, his or her status may be verified by forms issued through the systematic alien verification for entitlements (SAVE) program. In some instances, validity of documents shall be verified by submitting the department of homeland security, "Document Verification Request" form G845S (5/20/15) to the appropriate office, along with the proper documentation.

5101:2-16-03**Income eligibility requirements for publicly funded child care benefits.**

(A) What income is used to determine caretaker eligibility for publicly funded child care benefits?

The county agency shall use gross earned income and gross unearned income to determine child care income eligibility and family copayment. Gross income is the income amount before taxes and other deductions are removed.

(B) What is considered gross earned income?

"Gross earned income" means the total amount of gross earnings received in a month by all of the employed individuals in the family including wages legally obligated to all members of the family but which are diverted to a third party.

(C) What is counted as gross earned income for services performed as an employee?

(1) "Gross earnings for services performed as an employee" means any of the following:

(a) Wages, salary, back pay, bonuses and awards paid by an employer.

(b) Commissions.

(c) Severance pay.

(d) Payments from job corps.

(e) Earnings from work training programs and/or on-the-job training programs.

(f) Sick leave paid as wages.

(g) Annual leave.

(h) Holiday and vacation pay.

(2) State temporary disability insurance and temporary worker's compensation payments are considered gross earnings when such payments meet all of the following conditions:

(a) The payment is employer-funded.

(b) The payment is made to an individual who remains employed during recuperation from a temporary illness or injury pending return to the job.

(c) The payment is specifically characterized under state law as temporary wage replacement.

(D) What is counted as gross earned income for individuals who are self-employed?

(1) "Gross self-employment earnings" means the total profit from a business enterprise. The total profit from the self-employment business enterprise is determined by one of the following:

(a) Adding all gross self-employment income, then deducting the self-employment expenses from the total gross income, or

(b) Using a standard fifty per cent deduction from the total gross self-employment income.

(2) Self-employment expenses are those expenses directly related to producing the goods and services. The following expenses are not allowable deductions:

(a) Net losses from a previous period.

(b) Federal, state and local income tax.

(c) Money set aside for retirement.

(d) Work related personal expenses, such as transportation to and from work.

(e) Entertainment expenses.

(f) Depreciation.

(3) Individuals who are self-employed and have no countable income shall provide written verification documenting how they are meeting basic living expenses, including, but not limited to, food, housing, utilities and transportation. This documentation shall be used in determining authorized hours in paragraph (E) of this rule. Failure to provide sufficient documentation shall result in the denial or termination of child care benefits.

(E) How are work hours determined for individuals who are self-employed?

(1) For approved self-employment activities, the work hours used to determine the publicly funded child care category of authorization shall be for no more hours than it would take an individual to earn the same amount of money working at the federal minimum wage. This shall be calculated as follows:

- (a) Divide the gross self-employment earnings determined in paragraph (D) of this rule by 4.3 weeks.
 - (b) Divide the number determined in paragraph (E)(1)(a) of this rule by the federal hourly minimum wage.
 - (c) Round the number determined in paragraph (E)(1)(b) of this rule up to the nearest whole number.
- (2) The number determined in paragraph (E)(1) of this rule is the maximum weekly hours which can be applied to the child care authorization for the self-employment approved activity.

(F) What income is not counted as gross earned income?

- (1) The gross earnings of a minor child in the family who is a full-time student as defined by the school, unless the minor is a parent.
- (2) Alimony or child support payments paid by a family member. The amount paid, up to the amount ordered, is excluded.
- (3) The verified amount which is being garnished from the income.
- (4) Earnings received under the Domestic Volunteer Service Act of 1973 for participation in the "Americorp Vista" program.
- (5) Federal work study income as referenced in rule 5101:4-4-13 of the Administrative Code.
- (6) All income, including in kind benefits, excluded under the supplemental nutrition assistance program (SNAP) regulations, as set forth in rule 5101:4-4-13 of the Administrative Code.
- (7) Any other income amounts that federal statutes or regulations require be excluded.
- (8) Any income earned by a person receiving supplemental security income (SSI).

(G) What about individuals who are unemployed or on unpaid leave from employment?

- (1) Individuals who are unemployed or on unpaid leave from employment shall provide written verification documenting how they are meeting basic living expenses including, but not limited to, food, housing, utilities and transportation.

(2) Failure to provide sufficient documentation shall result in the denial or termination of child care benefits.

(H) What income is considered gross unearned income?

(1) "Gross unearned income" means the total amount of unearned income that is received in the month by all members of the family.

(2) Unearned income is income that is not gross earned income or is not gross earned income from self-employment, as defined in this rule.

(3) Unearned income includes cash contributions received by the family from absent caretakers, persons, organizations or assistance agencies; social security administration disability, death or retirement benefits; and child support payments.

(I) What income is not counted as gross unearned income?

(1) SSI payments.

(2) Federal, state or local foster care maintenance payments.

(3) Federal, state or local adoption assistance payments.

(4) Kinship permanency incentive payments made in accordance with the requirements of rule 5101:2-40-04 of the Administrative Code.

(5) Payments made with county funds to increase the amount of cash assistance an assistance group receives in accordance with section 5107.03 of the Revised Code.

(6) Child support payments paid by a family member for a child outside the family. The amount paid, up to the amount ordered, is excluded.

(7) Alimony paid pursuant to a court order.

(8) Contributions for shared living arrangements.

(a) These include cash payments received by a family from an individual who is not a family member but who resides in the household and shares responsibility for the household expenses through an informal arrangement.

- (b) The cash payment given to the family is not available to the family because the payment represents the non-family member's share of the household expenses.
- (9) Bona fide loans from any source, including rural housing loans made by the federal housing administration.
- (10) Experimental housing allowance program payments made under annual contributions on contracts entered into prior to January 1975, under section 23 of the U.S. Housing Act of 1937.
- (11) HUD community development block grant funds paid under Title I of the Housing and Community Development Act of 1974 (Public Law 93-383).
- (12) Home energy assistance support and maintenance paid in cash or in-kind, Public Laws 97-377 (December 21, 1982), 97-424 (January 6, 1983), and 98-21 (April 20, 1983).
- (13) Income tax refunds received by any of the family members.
- (14) The verified amount which is being garnished from the income.
- (15) Earned income tax credit payments when received as part of an income tax refund.
- (16) The value of surplus commodities donated by the department of agriculture.
- (17) Benefits received under Title VII, nutrition program for the elderly, Older Americans Act of 1965, Public Law 89-73 as amended through Public Law 114-144 (April 19, 2016).
- (18) Retroactive payments made as a result of a state hearing.
- (19) Escrow accounts established or credited as the direct result of the assistance group's involvement in family self-sufficiency on or after May 15, 1992.
- (20) Ohio works first cash payment for support services, pursuant to section 5107.66 of the Revised Code.
- (21) Prevention, retention and contingency (PRC) payments.
- (22) The value of SNAP allotments.
- (23) Money received in the form of a nonrecurring lump sum payment, including, but not limited to:

- (a) Retroactive lump sum social security, SSI, or pension benefits.
 - (b) Retroactive lump sum insurance settlements.
 - (c) Retroactive lump sum payment of child support arrearage.
 - (d) Refunds of security deposits on rental properties or utilities.
 - (e) Publicly funded child care overpayment reimbursements.
 - (f) PRC payments not defined as cash assistance.
- (24) Income excluded under the SNAP regulations, as set forth in rule 5101:4-4-13 of the Administrative Code, unless the income is included under the provisions of this rule.
- (25) Any other income amounts that federal statutes or regulations require be excluded.

(J) How is the family's gross monthly income calculated?

- (1) When determining eligibility and copayment for child care benefits, the county agency shall calculate the family's gross monthly income.
- (2) Earned and unearned income that is received on a monthly basis shall be rounded down by dropping all cents.
- (3) Earned and unearned income that is received weekly, bi-weekly or semi-monthly shall have all cents dropped before and after being converted into a monthly amount. Amounts shall be converted as follows:
 - (a) Income received on a weekly basis is multiplied by 4.3.
 - (b) Income received biweekly (every two weeks), is multiplied by 2.15.
 - (c) Income received semimonthly (twice a month) is multiplied by two.
- (4) Hourly rates which include cents are not rounded but are converted into monthly figures using the exact amounts.

(K) What if an individual has fluctuating income?

If an individual has fluctuating income, the income shall first be averaged to arrive at a figure to be converted into a monthly amount, according to the following procedures:

- (1) If the employed individual works the same number of hours per pay period, that number of hours shall be used in computing the individual's gross monthly income.

 - (a) The gross monthly income shall be computed by one of the following:

 - (i) Using the gross earnings listed on the individual's pay stubs; or
 - (ii) Multiplying the number of hours per pay period by the hourly rate of pay.
 - (b) The figure determined in paragraph (K)(1)(a) of this rule is used to convert the income into a monthly amount.
- (2) If the employed individual has fluctuating hours of employment, the income shall be averaged.

 - (a) Cents shall be dropped prior to calculating the average income amount.
 - (b) The average income amount is used in converting the income into a monthly figure.
 - (c) When possible, the county agency shall average the income received in the preceding four weeks.
- (3) When the income from the prior four week period is not representative of current or future income, the county agency shall project income based on a best estimate. The best estimate shall consider the following variables which may affect the determination:

 - (a) More than four weeks of pay stubs, if they are available and the individual states that an average of a longer period of time is more representative because the income received in the most recent four weeks was less or greater than the average. The county agency shall use all available income related information for the immediately preceding three month period.
 - (b) The individual's projection of future earnings, when the individual disagrees with the use of income for the past four weeks period as representative of future income. The county agency shall determine a representative figure using all available income related information, including the individual's projection of future income.

- (c) Year-to-date earnings, if listed on an individual's pay stub. Year-to-date earnings may be used to determine average income for periods longer than four weeks.
- (d) All available income related information, which shall be used to determine a representative figure when there are fewer than four weeks of pay stubs available. This includes situations when the employed individual disagrees with the use of earnings from the past four week period as indicative of future earnings.
- (e) Written documentation from the employer, which shall be required if there are no pay stubs available because the employment is new.

(L) What if an individual's income is sporadic?

- (1) If income is sporadic, the income for a period of one year shall be used to determine an average adjusted monthly income. An example of sporadic income is commission-based income.
- (2) When income is from work that normally involves seasonal periods of unemployment, the family's adjusted monthly income shall be determined from the adjusted annual income of the family divided by twelve months.

(M) How is self-employment income calculated?

For situations in which an individual has self-employment income, the county agency shall determine the gross earnings for the month based on an estimate of the individual's gross annual earnings.

- (1) The self-employed individual shall provide copies of the tax return from the previous year as well as current business records in order to project annual gross income.
 - (a) The income shown on the previous year's tax return shall be used to estimate earnings for the current and future months.
 - (b) The gross monthly earnings shall be determined by dividing the previous year's tax return by the number of months the individual was self-employed the previous year.
 - (c) Estimation of self-employment income shall be used when the individual has been self-employed for some time, the gross earnings have remained fairly constant, and there is no anticipated change in the individual's circumstance.

- (2) If the individual contests the estimate of income from self-employment based solely on information on the previous year's tax return, the individual shall provide a projected estimate of gross earnings for the current taxable year, based upon current business records.
- (a) When the individual cannot estimate gross earnings for the current taxable year based on current business records, the county agency shall accept the individual's best estimate.
- (b) Using the individual's best estimate of income for the current taxable year, the county agency shall allocate one-twelfth of the gross annual income equally into each month of the taxable year.
- (3) If the individual contests the county agency estimate of the income from self-employment based solely on information on the previous year's tax return but does not provide a projected estimate of gross earnings for the taxable year based on current business records, the county agency shall project the earnings based on the gross earnings listed on the previous year's tax return.
- (a) If the individual does not have a tax return from the previous year, the county agency shall project an estimate of the individual's annual gross earnings from self-employment based on the individual's current business records. The county agency shall determine that one-twelfth of the projected gross earnings from self-employment shall be allocated monthly.
- (b) In the absence of both previous year's tax return and current business records, the county agency shall require the individual to provide a written best estimate of his or her projected annual income and expenses. The county agency shall then determine that one-twelfth of the projected annual gross earnings from self-employment shall be distributed into all months of the taxable year.

(N) What are acceptable forms of income verification?

All income shall be verified by the best available information from the following list:

- (1) Documentary evidence is written confirmation of the applicant's income. The county agency should include copies of all documents used for verification in the case file. If copies of documents cannot be obtained, a description of the documentary evidence shall be included in the case file. Documentary evidence includes, but is not limited to, the following:
- (a) Pay stubs.

- (b) Income tax returns.
- (c) The most recent W-2 form.
- (d) Self-employment bookkeeping records.
- (e) The most recent W-38 self-employment income verification.
- (f) Data from providers of pension benefits.
- (g) Business records.
- (h) Correspondence or data from the social security administration.
- (i) Data from the Ohio bureau of worker's compensation.
- (j) A signed statement from the employer that includes gross income and/or hourly wage and work hours.

(2) A collateral contact is an oral confirmation by someone that is not a member of the applicant's household, including employers, human resources personnel, social service agencies or migrant service agencies.

- (a) A confirmation may be made in person or over the phone.
- (b) The collateral contact may be anyone who can provide an accurate third-party verification. The person who will act as the collateral contact may be provided by the applicant or selected by the county.
- (c) If income received is cash without a receipt, a contact with the employer is required.
- (d) The county agency is not required to use a collateral contact provided by the applicant if there is reason to believe the contact will not be able to provide accurate third-party verification. In these cases, the county agency may request another collateral contact from the applicant or may select an alternate contact themselves.
- (e) The county agency may contact individuals or agencies with receipt of a signed application as defined in rule 5101:2-16-02 of the Administrative Code, or other signed written consent by the caretaker, in order to obtain all pertinent information regarding family income.

(3) A statement from the applicant may be acceptable on a case-by-case basis when no other verification is available. When an applicant statement is used it shall be documented in the case record.

(O) Who is responsible for providing verifications of income?

The caretaker shall provide verification of the source and amount of any income received, unless such information is already available to the county agency.

(1) The county agency shall assist the caretaker in obtaining verification provided the caretaker has not refused to cooperate in the development of documentation for any source of income received. If it would be difficult or impossible for the caretaker to obtain verification in a timely manner, or if the county agency can obtain the verification faster, the county agency shall offer assistance in obtaining the verification.

(2) Failure to cooperate in the development of documentation for any source of income received is acceptable grounds for a delay in the processing of an application or a determination of eligibility.

(3) If failure to cooperate continues beyond thirty days from the date of application, the application shall be denied.

(4) Denial of an application does not prohibit the caretaker parent from reapplying for child care benefits.

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5101:2-16-04**Caretaker responsibilities to maintain eligibility in the publicly funded child care program.**

(A) What are the caretaker responsibilities for tracking a child's attendance in the publicly funded child care program?

(1) The caretaker and/or the caretaker's designee(s)/sponsor(s) shall use the automated child care system upon entry to and exit from the child care provider's location.

(a) Use of the automated system will track attendance for each child at each authorized provider.

(b) An eligible caretaker or the caretaker's designee(s)/sponsor(s) are the only people permitted by the Ohio department of job and family services (ODJFS) to use the automated child care system to record a child's attendance.

(c) The caretaker and/or the caretaker's designee(s)/sponsor(s) shall create and use personal identification information to access the automated system. Personal identification information shall not be shared with the provider.

(d) The caretaker's personal identification information shall serve as an electronic signature.

(e) Misuse of the automated child care system pursuant to rule 5101:2-16-07 of the Administrative Code may result in termination of a caretaker's eligibility.

(2) The caretaker shall review any changes made by a provider to their child's attendance in the automated child care system, and approve all appropriate changes. A caretaker's designee(s)/sponsor(s) is not permitted to review and approve changes to a child's attendance. The caretaker's designee(s)/sponsor(s) will not be alerted when changes are made by providers and will not have access to case information.

(B) What are the caretaker financial responsibilities in the publicly funded child care program?

(1) The caretaker shall make all copayments assigned pursuant to rule 5101:2-16-05 of the Administrative Code to the provider.

(2) The caretaker shall abide by an agreed upon payment arrangement with the provider if delinquent copayments are owed pursuant to rule 5101:2-16-05 of the Administrative Code.

(3) The caretaker shall abide by a payment agreement with the county agency if money is owed for an overpayment pursuant to rule 5101:2-16-07 of the Administrative Code.

(C) What information shall a caretaker report to the county agency?

(1) A caretaker receiving publicly funded child care benefits shall report to the county agency any changes which affect the caretaker's eligibility for the publicly funded child care program, including:

(a) Changes in family income.

(b) Changes in caretaker participation in a qualifying activity pursuant to rule 5101:2-16-02 of the Administrative Code.

(c) Changes in household composition.

(d) Address changes, including relocation to another county.

(e) When a preschool child becomes a school-age child and begins attending elementary school.

(f) When a school-age child changes schools.

(2) The caretaker shall report changes within ten calendar days of the date the change occurs.

(3) If the caretaker fails to comply with the ten calendar day reporting requirement, the county agency will pursue a determination of and recovery of any overpayment, pursuant to rule 5101:2-16-07 of the Administrative Code.

(4) The caretaker shall notify the county agency regarding any change that impacts their child's current authorization for care prior to or within the service week that the new authorization is needed. A service week starts at twelve a.m. on Sunday and ends at eleven fifty-nine p.m. on Saturday. Changes that impact a child's authorization for care include the following:

(a) When a child stops attending a child care program that is authorized to provide publicly funded child care services for the child.

(b) When a caretaker wants to switch to a different provider of publicly funded child care services.

(c) When a caretaker needs to change the category of authorization for the child, Verification of qualifying activity shall be required to increase a child's category of authorization.

(D) What are the caretaker responsibilities regarding program integrity review requests by ODJFS or any approved entity?

(1) Caretakers in the publicly funded child care program shall cooperate and participate in program integrity review requests by ODJFS or any approved entity pursuant to rule 5101:2-16-12 of the Administrative Code.

(2) If a caretaker fails to comply with a program integrity review request, the county agency may propose termination of child care benefits pursuant to rule 5101:2-16-08 of the Administrative Code.

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5101:2-16-05**Copayment for publicly funded child care benefits.**

(A) What are the copayment requirements for families receiving publicly funded child care benefits?

- (1) Families shall be assigned a weekly copayment amount based on income level.
- (2) Families shall pay the assigned copayment(s) directly to their child care provider(s).
- (3) Weekly copayment amounts shall be based on the federal poverty guidelines released annually by the United States department of health and human services.
 - (a) Each family with a monthly income of one hundred per cent or less of the federal poverty level (FPL) shall have a weekly copayment of zero dollars.
 - (b) Each family with a monthly income of more than one hundred per cent of the FPL shall have a weekly copayment based on family size and gross monthly income.
 - (c) The family copayment schedule will be published annually in a child care manual procedure letter.

(B) How is the copayment calculated?

To calculate the family's copayment, the county agency shall:

- (1) Determine the family's monthly income pursuant to rule 5101:2-16-03 of the Administrative Code, and multiply by twelve to calculate the family's annual income.
- (2) Divide the family's annual income by one hundred per cent of the FPL that corresponds to the family size to determine the family's FPL. The FPL guidelines are published annually in a child care manual procedure letter pursuant to rule 5101:2-16-02 of the Administrative Code.
- (3) Round the family's FPL determined in paragraph (B)(2) of this rule up to the next five per cent (for example, one hundred two per cent FPL is rounded to one hundred five per cent FPL).
- (4) Using the FPL determined in paragraph (B)(3) of this rule, multiply by one hundred per cent of the FPL that corresponds to the family size and divide by

twelve, rounding up to the nearest dollar to determine the maximum monthly income.

(5) Using the chart in appendix A to this rule, multiply the maximum monthly income as determined in paragraph (B)(4) of this rule by the appropriate copay multiplier, round to the nearest whole dollar, multiply by twelve, and divide by the number of weeks in the current state fiscal year to determine the family's weekly copay.

(C) If a family has more than one weekly authorization for child care, how is the copayment distributed?

(1) The copayment amount shall be equally distributed among all authorizations each week.

(2) The distributed copayments shall be rounded down to the nearest whole dollar.

(3) The caretaker shall be notified of the copayment amounts for each authorization.

(D) How long is a family copayment effective?

The copayment amount that is assigned to the family upon determination of eligibility shall be in effect for the entire eligibility period unless any of the following occurs:

(1) The caretaker reports a change in family income, family size, or both, that reduces the amount of the copayment.

(2) An incorrect copayment was assessed by the county agency as a result of agency error, recipient error, or recipient fraud, resulting in corrective action to reduce or increase the family's copayment.

(3) The Ohio department of job and family services (ODJFS) requires a change in the copayment.

(4) The caretaker is no longer receiving protective child care or homeless child care as described in rule 5101:2-16-02 of the Administrative Code.

(E) When can a family copayment increase?

Copayments may increase at the time of redetermination or reinstatement approval. The new copayment amount is effective on the first day of the new eligibility period.

(F) When can a family copayment be reduced?

A family copayment may be reduced any time a change is reported in income or family size that reduces the copayment, even during the current eligibility period.

(G) When shall the county agency waive the copayment requirement?

The county agency shall waive the copayment requirement for families eligible for protective or homeless child care benefits pursuant to rule 5101:2-16-02 of the Administrative Code.

(H) Is a copayment impacted if the family does not utilize all of the authorized hours for child care in a week?

A family shall be required to pay the copayment assigned for a child's authorization or the child's cost of care for that week, whichever amount is lower.

(I) Is the family required to pay the copayment when only absent days or professional development days are reported for the week?

A family shall not be required to pay the copayment when only absent days and/or professional development days are reported, with no hours of attendance at the child care program during that week.

(J) What is the due date for each copayment?

The family will sign a written agreement with the provider(s) in which a mutually agreed upon due date for each copayment is specified, pursuant to rule 5101:2-16-09 of the Administrative Code.

(K) What happens if the caretaker does not pay the copayment according to the signed agreement with the child care provider?

A caretaker shall be ineligible for child care benefits if a delinquent copayment is owed, unless satisfactory arrangements are made to pay the delinquent copayment. Arrangements to pay a delinquent copayment shall be satisfactory to both the caretaker and the provider.

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Per cent of FPL	Multiplier
0 - 100	0.0000
105	0.0700
110	0.0735
115	0.0770
120	0.0805
125	0.0840
130	0.0875
135	0.0875
140	0.0875
145	0.0875
150	0.0875
155	0.0875
160	0.0875
165	0.0875
170	0.0875
175	0.0875
180	0.0875
185	0.0875
190	0.0875
195	0.0875
200	0.0875
205	0.0900
210	0.1000
215	0.1100
220	0.1200
225	0.1300
230	0.1400
235	0.1500
240	0.1600

245	0.1700
250	0.1800
255	0.1900
260	0.2000
265	0.2100
270	0.2200
275	0.2300
280	0.2400
285	0.2500
290	0.2600
295	0.2700
300	0.2700

5101:2-16-06

Authorizations for publicly funded child care services.

(A) What is a child care authorization?

- (1) The child care authorization indicates how many weekly hours have been approved for the child to receive care.**
- (2) The child care authorization identifies the provider that the family has chosen to provide care. The chosen provider shall have a provider agreement with the Ohio department of job and family services (ODJFS) to provide publicly funded child care services.**
- (3) The child care authorization allows ODJFS to make weekly payments to the authorized provider for child care services for the child.**

(B) What is a category of authorization?

- (1) The category of authorization is based on the number of hours per week that a child is approved to receive publicly funded child care services. The approved hours of care shall be categorized as follows:**
 - (a) An hourly authorization is for hours of care totaling fewer than seven hours per week.**
 - (b) A part-time authorization is for hours of care totaling seven hours to fewer than twenty-five hours per week.**
 - (c) A full-time authorization is for hours of care totaling twenty-five hours to sixty-hours per week.**
 - (d) A full-time plus authorization is for hours of care totaling more than sixty-hours per week.**
 - (e) A week is defined as the seven-day period from twelve a.m. Sunday to fifty-nine minutes after eleven p.m. Saturday.**
- (2) Authorizations for care shall not exceed the maximum category of care that a caretaker is eligible to receive.**
- (3) The category of authorization, determined at the time the county agency determines eligibility, shall be maintained for the entire eligibility period unless verification is submitted requiring an increase to the category of authorization.**
- (4) Authorizations for approved initial applications shall begin on the date the county received the valid application pursuant to rule 5101:2-16-02 of the**

Administrative Code, or the date that the qualifying activity begins, if that date is later than the application received date.

(C) How does the county determine the category of authorization?

(1) The approved hours of care shall be reasonably related to the hours that the caretaker participates in qualifying activities, pursuant to rule 5101:2-16-02 of the Administrative Code.

(2) If there is more than one caretaker in the household, the hours of care shall be reasonably related to the hours in which neither caretaker is available to care for the child because of participation in qualifying activities.

(D) Can child care be approved for hours in addition to the hours the caretaker is participating in an approved activity?

(1) Travel time, not to exceed four hours round trip, shall be allowed.

(2) Sleep time shall be allowed on a case by case basis, not to exceed eight hours, for a caretaker who participates in an activity where at least four hours occur between midnight and six a.m.

(3) Child care may exceed twenty-four consecutive hours when the caretaker's hours of employment, training or education indicate such a need. Child care shall not exceed forty-eight consecutive hours.

(E) How many weekly authorizations may a county grant for one child?

(1) A child shall have one authorization for one provider in a week; unless an exemption is met as set forth in paragraph (E)(2) of this rule.

(2) The county agency may grant an additional part-time or hourly authorization in a week if the family provides documentation showing it meets one of the following exemption criteria:

(a) The child needs care during non-traditional hours as defined in rule 5101:2-16-10 of the Administrative Code.

(b) The child needs to change providers in the middle of the week and the hours of care provided by the providers do not overlap.

(c) The child's provider is closed on scheduled school days off or on calamity days and the child needs care for those days.

(d) The child is enrolled in a part-time program participating in step up to quality and needs care from an additional provider.

(F) Can an authorization be created if the publicly funded child care application is denied?

A full-time authorization may be created for child care services provided for the period of time between the date the county agency receives the valid application as defined in rule 5101:2-16-02 of the Administrative Code and the date of denial plus five days, if all of the following occur:

(1) A complete application, as defined in rule 5101:2-16-02 of the Administrative Code, was submitted.

(2) The child in care is age eligible, as defined in rule 5101:2-16-02 of the Administrative Code.

(3) The provider had a valid provider agreement pursuant to rule 5101:2-16-09 of the Administrative Code for all or part of the time the child received care. The authorization shall match the period of time the provider had a valid provider agreement.

(4) The caretaker was not previously approved for paid publicly funded child care services after denial in the previous twelve months.

(G) Are there any publicly funded child care providers that caretakers may not choose to provide care for their children?

(1) A caretaker shall not receive publicly funded child care services from a provider who resides in the same household as the child and the caretaker.

(2) If the caretaker is the owner or an owner's representative of a licensed child care center or type A home, the caretaker's children shall not be authorized to that center or type A home.

(3) If the caretaker is the employee of a licensed type A home or licensed type B home, the caretaker's children shall not be authorized to that licensed type A or type B home.

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5101:2-16-07**Caretaker improper payments or misuse of publicly funded child care benefits.****(A) What is a caretaker improper child care payment?**

A caretaker improper payment for publicly funded child care (PFCC) means that a PFCC payment was made to a caretaker's provider for services provided to the caretaker's child that were ineligible to be paid by the PFCC program. The caretaker shall repay the county agency for the following improper payments:

- (1) An error on the part of the caretaker.
- (2) Payments made to a provider for care provided during a state hearing appeal period when the decision to terminate benefits is upheld at the state hearing.
- (3) An error by the county agency or Ohio department of job and family services.

(B) What is considered caretaker misuse of PFCC benefits or the automated child care system?

Misuse is when the caretaker:

- (1) Intentionally withholds or falsifies information.
- (2) Allows the provider to use or possess the caretaker's personal identification information to gain access to the automated child care system.
- (3) Falsifies attendance records.

(C) What are the repayment procedures for a caretaker improper child care payment or an overpayment related to misuse of the automated child care system?

- (1) The county agency shall:
 - (a) Calculate the overpayment resulting from an improper payment.
 - (b) Notify the caretaker of the determined overpayment amount to be repaid using the JFS 01151 "County Notice of Child Care Benefit Repayment Requirements for Caretakers" (rev. 10/2019).
 - (c) Report payments received from caretakers in the county finance information system (CFIS).
- (2) The caretaker shall:

(a) Sign the JFS 01151 acknowledging the overpayment and agreeing to a repayment plan.

(b) Make payments in accordance with the signed payment agreement.

(D) What if the caretaker fails to comply with a repayment agreement?

(1) The county agency shall terminate child care benefits if the caretaker fails to enter into or comply with an agreement to repay a child care overpayment, and shall issue the appropriate hearing notice pursuant to division 5101:6 of the Administrative Code.

(2) Ineligibility for child care benefits shall continue until the caretaker complies with an agreement to repay the determined amount.

(E) What is considered child care caretaker fraud?

(1) Child care caretaker fraud is the willful withholding or falsification of information, or the misuse of child care services by the caretaker with an intent to deceive or defraud, resulting in the acceptance of services to which the caretaker was not entitled, as determined by a court of law or the caretaker's admission.

(2) The county agency, in cooperation with the county prosecutor, shall develop and implement procedures for the investigation and/or prosecution of alleged child care caretaker fraud and the recovery of child care over payments from caretakers. The county agency shall update these procedures as necessary.

(F) What happens if a caretaker has admitted to caretaker fraud or has been convicted of fraud by a court of law?

(1) The county agency shall terminate child care benefits.

(2) The caretaker shall not be eligible for PFCC benefits until full repayment has been made.

(3) The county agency shall follow all appropriate provisions of the state hearing notice as required in division 5101:6 of the Administrative Code.

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5101:2-16-08**County agency responsibilities for the administration and determination of eligibility for publicly funded child care.**

(A) How shall the county agency, in accordance with Chapter 5104. of the Revised Code, manage the publicly funded child care program?

(1) The county agency shall accept any gift, grant, or other funds from public or private sources offered unconditionally or under conditions which are, in the judgment of the Ohio department of job and family services (ODJFS), proper and consistent with Chapter 5104. of the Revised Code and deposit such funds in the county public assistance fund established by section 5101.161 of the Revised Code.

(2) The county agency shall submit a plan to ODJFS for approval that assures the application process is as accessible to the public as possible and complies with section 5104.33 of the Revised Code. The county agency shall submit any revisions of the plan to ODJFS. The plan shall:

(a) Assure that alternative methods for application are available to families through telephone, fax, agency computer, the ODJFS child care web site and other means that are convenient and accessible for families. These shall include but are not limited to the following:

(i) To the extent permitted by federal law, the county agency may contract with child care providers, resource and referral organizations, or an outside entity to make all or any part of the eligibility determinations.

(ii) To the extent permitted by federal law, the county agency may contract with child care providers, resource and referral organizations, or an outside entity to collect information for use by the county agency in determining eligibility for child care benefits.

(iii) The county agency may use and accept electronic records and electronic signatures as specified in Chapter 1306. of the Revised Code.

(b) Station county agency employees at various sites in the county for the purpose of assisting applicants in completing the application process and for eligibility determinations at those locations.

(c) Extend county agency hours and assigning county agency employees to hours of employment outside the normal working hours of the county

agency to collect information relevant to applications for publicly funded child care and to make eligibility determinations.

(d) Provide training and technical assistance to individuals or agencies so they may assist families in completing the application process and, where applicable, in making eligibility determinations.

(3) The county agency shall provide caretakers with complete written explanations of the following:

(a) Instructions on how to apply for publicly funded child care.

(b) Factors used in determining eligibility including family income, family size, ages of family members and the caretaker's hours of employment, training or education.

(c) The caretaker's responsibility for reporting changes of information that may affect eligibility.

(d) The consequences to the caretaker for failure to accurately and completely report information or changes, including:

(i) A repayment of child care benefits pursuant to rule 5101:2-16-07 of the Administrative Code.

(ii) Termination or denial of child care benefits.

(iii) Penalty of fine and/or imprisonment if a court action renders a finding that the caretaker fraudulently received child care benefits for which the caretaker was not eligible.

(4) The county agency shall report to ODJFS any known or suspected violations of Chapter 5104. of the Revised Code or the rules promulgated pursuant to that chapter regarding licensed child care centers, licensed family child care homes, Ohio department of education licensed preschool or school-age child programs, or approved child day camps.

(5) The county agency shall cooperate and participate in all reviews including but not limited to, fiscal, programming, records, and other monitoring activities regarding publicly funded child care.

(6) The county agency shall comply with the National Voter Registration Act of 1993 which requires each state to provide voter registration services at designated government agencies that provide public assistance.

(a) The county agency shall distribute voter registration applications with applications for publicly funded child care, defined in rule 5101:2-16-02 of the Administrative Code.

(b) The county agency shall follow procedures outlined in rule 5101:1-2-15 of the Administrative Code for the acceptance of voter registration applications.

(7) The county agency shall cooperate with ODJFS for the recruitment of providers to meet the need for publicly funded child care in the county.

(B) What is the record retention requirement for the county agency?

(1) The county agency shall maintain records in accordance with Chapter 149. of the Revised Code.

(2) Records shall be maintained a minimum of three years or until an audit is completed, if one has been initiated within a three-year period, to document compliance with child care requirements.

(C) What is the county agency responsibility in the utilization of the child care information data system (CCIDS)?

The county agency shall limit access to and use of CCIDS to the extent necessary to meet the requirements of the publicly funded child care program under the Child Care and Development Block Grant Act (CCDBG) of 1990, established in section 5082 of the Omnibus Budget Reconciliation Act of 1990, 104 Stat. 1388-236 (1990), 42 U.S.C. 9858, (11/2014) and reauthorized by the CCDBG Act of 2014.

(1) Personnel having access to CCIDS shall be limited to those who have been trained in the confidentiality requirements of ODJFS, who are informed of all penalties, who have been trained in security procedures and who have signed the JFS 07078 "Code of Responsibility" (rev. 6/2018).

(2) The county agency shall monitor access to and use of CCIDS to prevent and promptly identify any unauthorized use.

(3) The county agency shall ensure that all personnel who have access to, may have access to or are required to use CCIDS are informed of applicable requirements and penalties and have been trained in security procedures.

(D) What is the county agency responsibility to migrant families?

The county agency shall assist migrant families in obtaining appropriate documentation in order to expedite the migrant family's determination of eligibility for child care benefits.

(E) What is the county agency responsibility for the determination of eligibility for publicly funded child care?

(1) The county agency shall document the date a valid application for publicly funded child care, defined in rule 5101:2-16-02 of the Administrative Code, is received.

(2) The county agency shall determine eligibility no later than thirty calendar days from the date the county agency receives the valid application. The complete application and all required supporting documentation shall be retained in the agency's files.

(3) The county agency shall not require a face-to-face interview with the caretaker if the information required for determining the caretaker's eligibility for child care is already on file with the county agency and/or the required information can be obtained through other methods.

(4) If the county agency determines a caretaker is eligible for child care benefits, the eligibility period may begin on the date the county agency received the valid application, pursuant to rule 5101:2-16-02 of the Administrative Code. The county agency shall send the caretaker a notice of approval for child care benefits by the JFS 04074 "Notice of Approval of Your Application for Assistance" (rev. 6/2019) or its computer-generated equivalent.

(5) The county agency shall deny or terminate a caretaker's eligibility for child care benefits, after providing hearing notice rights as required by applicable rules in division 5101:6 of the Administrative Code, if the caretaker does any of the following:

(a) Does not meet current eligibility, unless the caretaker is approved for continuing eligibility pursuant to rule 5101:2-16-02 of the Administrative Code.

(b) Has another adult caretaker available in the family who can provide appropriate care for the child, and no written verification has been provided to the county agency from a licensed physician, licensed psychologist, licensed psychiatrist or public children services agency (PCSA) that the caretaker cannot provide appropriate care for the child pursuant to rule 5101:2-16-02 of the Administrative Code.

(c) Does not cooperate in determining eligibility for current or for past benefits.

- (d) Does not enter into or comply with an agreement with the county agency or ODJFS to repay a child care overpayment. If an initial application is received from a caretaker who owes an overpayment from a previous PFCC benefit period, the application shall be denied unless the caretaker enters into an agreement with the county agency or ODJFS to repay the overpayment.
- (e) Does not pay the required child care copayment unless the family makes arrangements to pay delinquent copayments.
- (f) Owes delinquent copayments to a child care provider, unless satisfactory arrangements are made to pay such delinquent copayments.
- (6) If the county agency determines a caretaker ineligible for child care benefits the county agency shall deny the application. The county agency shall:

 - (a) Provide the caretaker with a notice of denial of an application for child care benefits by the JFS 07334 "Notice of Denial of Your Application for Assistance" (rev. 6/2019) or its computer-generated equivalent.
 - (b) Authorize child care pursuant to rule 5101:2-16-06 of the Administrative Code for the period of time between the date the county agency receives the valid application and the date of denial plus five days, not to exceed a full time authorization. Authorization for payment after denial shall not be approved if a caretaker received paid services after denial in the previous twelve months from the date of the valid application.
- (7) The county agency may terminate a caretaker's eligibility for child care benefits, after providing hearing notice rights as required by applicable rules in division 5101:6 of the Administrative Code. The county agency shall propose termination of child care benefits using the JFS 04065 "Prior Notice of Right to a State Hearing" (rev. 6/2019) or its computer-generated equivalent at least fifteen calendar days prior to the date of the proposed action if any of the following occur:

 - (a) The county agency determines the family is no longer eligible, and the family does not qualify for continuing eligibility pursuant to rule 5101:2-16-02 of the Administrative Code.
 - (b) The caretaker does not comply with the automated child care system, which includes but is not limited to use of the automated system and approval of edited attendance as necessary.

- (c) The caretaker does not comply with a review conducted by ODJFS pursuant to rule 5101:2-16-12 of the Administrative Code.
- (8) The county agency shall not terminate child care benefits pursuant to paragraph (E)(5) of this rule if any of the following apply:

 - (a) A caretaker has not participated in an education or training activity which prepares the caretaker for paid employment due to a scheduled break in the education or training activity. This scheduled break cannot exceed one quarter or one semester.
 - (b) A caretaker has not utilized child care benefits.
 - (9) The county agency shall use the procedures outlined by ODJFS for transferring cases between counties when the caretaker relocates to another county.
- (F) What is the county agency responsibility for informing caretakers of available child care providers?

 - (1) The county agency shall allow eligible caretakers a choice from all available child care providers who are certified, licensed or approved to provide publicly funded child care.
 - (2) The county agency shall make available a current list of all certified, licensed or approved providers in the county. The county agency shall provide selected portions of the list or the complete list as requested by the caretaker to facilitate parental choice. Such lists shall include, but are not limited to:

 - (a) Reasonable access to the child's home or school.
 - (b) Reasonable access to the caretaker's place of employment, education or training.
 - (c) Reasonable access to special child care needs as specified by the family.
- (G) What is the county agency responsibility for reporting all information required by ODJFS data and payment information systems?

 - (1) The county agency shall transmit all data regarding child care eligibility and authorizations on a daily basis as required in the CCIDS or other data systems required by ODJFS.
 - (2) The county agency shall provide caretakers with a verification checklist no later than ten calendar days following the receipt of a valid application for

publicly funded child care as defined in rule 5101:2-16-02 of the Administrative Code, with notification of the requirements needed to complete the eligibility determination process.

- (3) The county agency shall submit eligibility data no later than five calendar days following the date eligibility is determined or no later than five calendar days following any reported changes to a case that affect eligibility or authorizations.
- (4) The county agency shall assign each family a payment code according to the family's programmatic eligibility for publicly funded child care benefits.
- (5) The county agency shall issue a notice of change in child care benefits to the caretaker within ten calendar days from the date the change of circumstances was reported by the caretaker.

(H) What is the responsibility of the county agency in the re-determination process?

- (1) In the event a caretaker requests a copy of the JFS 01124 "Redetermination Application for Child Care Benefits" (rev. 12/2018) the county agency shall provide both of the following:
 - (a) The JFS 01124; and
 - (b) The voter registration application pursuant to this rule.
- (2) The county agency shall re-determine eligibility by the last day of the current eligibility period.
 - (a) If the county agency determines the caretaker is eligible for benefits for a new eligibility period, the new period shall begin on the date following the last day of the current eligibility period. The county agency shall provide notice of approval for benefits using the JFS 04074 "Notice of Approval of Your Application for Assistance" (rev. 6/2019) or its computer-generated equivalent.
 - (b) If the county agency determines the caretaker is ineligible for benefits for a new eligibility period, the county agency shall provide notice of denial of the application for benefits using the JFS 07334 "Notice of Denial of Your Application for Assistance" (rev. 6/2019) or its computer-generated equivalent. The eligibility shall end on the last day of the current eligibility period.
 - (c) The county agency shall propose termination of benefits using the JFS 04065 or its computer-generated equivalent if the caretaker fails to submit a JFS

01124 and all required supporting documentation fifteen calendar days prior to the end of the current eligibility period.

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5101:2-16-09**Provider responsibilities for publicly funded child care.****(A) Who is eligible to sign an agreement to provide publicly funded child care?**

(1) A child care provider who operates a licensed child care center; a licensed type A or type B child care home; an approved Ohio department of education (ODE) licensed program; an approved child day camp; a certified in-home aide; or a regulated border state provider is eligible to sign a provider agreement.

(a) A school child or preschool program licensed by the ODE, pursuant to sections 3301.52 to 3301.59 of the Revised Code, will become eligible to sign a provider agreement after requesting approval to provide publicly funded child care services. All requests shall be made by:

(i) Submitting the JFS 01140 "Request to Provide Publicly Funded Child Care for Ohio Department of Education Programs" (10/2017) with a copy of the ODE license or the Ohio child licensing and quality system (OCLQS) generated equivalent to ODJFS.

(ii) Complying with background check requirements pursuant to rule 5101:2-12-09 of the Administrative Code.

(b) A border state provider shall register in OCLQS prior to signing a provider agreement.

(2) Beginning July 1, 2020, a provider who operates a licensed child care program is eligible to provide publicly funded child care only if the program is rated through the step up to quality program established pursuant to section 5104.29 of the Revised Code.

(3) A provider is exempt from paragraph (A)(2) of this rule if the provider operates any of the following:

(a) A program that operates only during the summer and not for more than fifteen consecutive weeks.

(b) A program that operates only during school breaks.

(c) A program that operates only on weekday evenings, weekends, or both.

(d) A program that holds a provisional license issued under section 5104.03 of the Revised Code.

(e) A program that had its step up to quality program rating removed by the department of job and family services within the previous twelve months.

(f) A program that is the subject of a revocation action initiated by the department, but the license has not yet been revoked.

(4) Child care providers with a signed provider agreement shall maintain compliance with all requirements of the Child Care and Development Block Grant Act of 2014, P.L.113-186 (11/19/2014), 128 Stat. 1971 (2014) 42 U.S.C. 9858 (CCDBG Act of 2014).

(B) What are the provider requirements to sign an agreement for publicly funded child care services?

(1) Providers are eligible for payment after they complete the provider agreement with the Ohio department of job and family services (ODJFS) and have entered all required information in the automated system.

(a) The provider agreement is effective on the date it is signed and submitted by the provider or the date the provider becomes an eligible provider pursuant to paragraph (A) of this rule, whichever is later.

(b) The provider agreement as entered into with ODJFS may be terminated if ODJFS determines misuse of publicly funded child care or the automated child care system.

(c) The provider agreement as entered into with ODJFS, may be terminated in accordance with the terms contained in the agreement.

(d) The provider agreement shall be terminated if the eligible provider fails to maintain approval as an eligible provider.

(e) Providers of publicly funded child care with a valid provider agreement shall not be considered employees of ODJFS but shall be considered independent contractors who are responsible for the requirements of self-employment.

(2) ODJFS shall pay eligible child care providers for publicly funded child care services provided to eligible caretakers authorized to that provider.

(a) An eligible child care provider who provides child care services for a caretaker who is potentially eligible for publicly funded child care benefits shall be paid for child care services if an authorization is created by the county agency pursuant to rule 5101:2-16-06 of the Administrative Code.

(b) Payment for publicly funded child care services shall be contingent upon the availability and appropriation of state and federal funds.

(C) How shall a provider track attendance for publicly funded child care services?

(1) Child care providers shall utilize the automated child care system to track attendance data for caretakers who have applied or have been determined eligible for publicly funded child care, in accordance with procedures outlined by ODJFS.

(2) Child care providers or a person acting in any capacity for the provider shall not use the personal identification information created by the caretaker or a caretaker's designee/sponsor to track or approve attendance in the automated child care system.

(3) The provider shall be responsible for the cost of replacement or repair of the hardware required for use of the automated child care system. Recoupment may occur through the payment adjustment process.

(D) How are school hours deducted in the automated system for school-age children being cared for by a provider?

(1) The provider shall enter each school-age child's current school schedule in the automated system on or before the first day of the school year as defined in rule 5101:2-16-01 of the Administrative Code or the child's first week of attendance if authorization is after the first day of the school year. Each school schedule shall include all of the school year, but may begin earlier and/or end later.

(2) The schedule set by the provider for each school-age child shall be used to deduct the hours in which that child is in school and not at the child care program.

(E) How shall a provider submit attendance data for child care services provided?

A child care provider shall submit all data for the calculation of payments in accordance with instructions provided by ODJFS.

(1) Attendance data shall be submitted for payment after the close of the service week and no later than four weeks from the last day of the service week or four weeks from the last day of the week the authorization is provided to the automated system, whichever is later.

(2) Only complete data (days with both an in and out time for the child receiving care) may be submitted.

- (3) Each school-age child shall have an associated school schedule set by the provider pursuant to paragraph (D) of this rule before the child's attendance may be submitted for payment.
 - (4) Changes to attendance data shall be submitted with caretaker approval.
 - (5) The provider may track attendance or make changes to attendance data in the automated child care system without caretaker approval if all of the following apply:

 - (a) There has been a loss of contact with the caretaker for five consecutive calendar days from the last day of attendance.
 - (b) The provider has notified the county agency of the loss of contact.
 - (c) The authorization to the provider has been ended.
 - (d) Any new or changed attendance is limited to no more than five consecutive days.
 - (6) Once attendance has been submitted, the provider has until the following Saturday to recall the submitted attendance in order to make a change to the attendance data. Any changes made shall require caretaker approval pursuant to paragraphs (D)(3) and (D)(4) of this rule prior to resubmitting the attendance.
 - (7) ODJFS will begin processing the payment on the Sunday following the submission of the attendance data.
 - (8) If the attendance has not been submitted pursuant to the time line in paragraph (D)(1) of this rule, ODJFS shall automatically process any complete attendance data for payment. No new attendance data may be submitted after this date.
 - (9) ODJFS shall not pay for a child's attendance submitted by more than one provider for the same date and time.
- (F) How does a provider receive payment when a caretaker's application for publicly funded child care has been denied?
- (1) Child care providers shall submit attendance data pursuant to paragraphs (C) and (D) of this rule when notification has been received that a caretaker's application for child care has been denied.
 - (2) The provider may appeal a denial notice of eligibility for payment after denial within fifteen days from the date of denial if either of the following apply:

(a) Payment was denied due to a caretaker's incomplete application.

(b) Payment was denied because the provider did not have a valid provider agreement when services were provided.

(3) Attendance submitted for payment after denial shall not include absent days or professional development days.

(G) How does a provider request a payment adjustment after a payment has been issued?

(1) The provider shall submit a request for payment adjustment in the automated child care system within four weeks of the payment date. No new attendance may be submitted for payment adjustments.

(2) If the incorrect payment amount is because of a county agency data entry error, the provider shall contact the county agency to request correction of the error before the provider submits the request for payment adjustment. ODJFS shall not process the request for payment adjustment until the error is corrected by the county agency. The request for adjustment may exceed four weeks from the original payment date.

(H) What are the provider's responsibilities to collect a copayment?

(1) The provider shall establish a written and signed agreement with the caretaker for payment of the child's assigned copayment.

(2) If an assigned copayment is delinquent more than two weeks from the date established in the written copayment agreement, the provider shall submit a record of the delinquent copayment to the county agency no later than three weeks from the date the copayment was due.

(3) If a provider fails to inform the county agency of the delinquent copayment, the caretaker shall be responsible for any delinquent copayments reported by the provider for up to the previous three weeks from the date the county agency was notified.

(I) What is the process for requesting payment for services provided prior to December 16, 2018?

(1) Child care providers shall submit to ODJFS the JFS 01261 "Publicly Funded Child Care Manual Claim for Attendance" (rev. 9/2014) for attendance not recorded in the Ohio electronic child care (Ohio ECC) system for the following reasons:

(a) Authorization made prior to the back swipe period.

- (b) A bureau of state hearings decision.
- (c) The point of services (POS) device was not installed when services were provided.
- (d) A caretaker is awaiting a swipe card.
- (e) A caretaker withdraws without notice.
- (2) The child care provider shall submit the JFS 01261 no later than seven weeks from the week of service being submitted unless otherwise determined by ODJFS.
- (3) ODJFS shall reject the JFS 01261 for care provided during the back swipe period.
- (4) Child care providers shall submit to ODJFS the JFS 01292 "Publicly Funded Child Care Request for Ohio ECC Payment Adjustment" (rev. 7/2017) when a payment has been issued and needs to be corrected no later than seven weeks from the week of service unless otherwise determined by the bureau of state hearings.
- (5) Child care providers shall submit to ODJFS the JFS 01211 "Request for Payment of Publicly Funded Child Care Services Provided for a Denial of Application" (rev. 9/2014) when notification has been received that a caretaker's application for child care has been denied.
- (J) What is the process for requesting a payment enhancement when a provider must make accommodations to care for a child with special needs?

 - (1) A child care provider may submit a request for a payment enhancement when accommodations must be made to care for a child who meets the definition of special needs as defined in rule 5101:2-16-01 of the Administrative Code.

 - (a) To request this payment rate, the provider shall submit a completed JFS 01231 "Request for Payment Rate for Special Needs Child Care" (rev. 10/2019) to ODJFS.
 - (b) ODJFS will notify the provider with verification of the approved amount, the effective date of the change in payment rate, or if the request is denied.
 - (c) An approved payment enhancement shall be in effect for twelve months for a child authorized to receive publicly funded child care at the approved provider.

- (2) If state and/or federal funds are not available for the purchase of publicly funded child care services, ODJFS shall reserve the right to deny all requests.
- (3) The granting of this payment rate by ODJFS shall not be construed as constituting precedence for the granting of any other payment changes or the subsequent renewal of a rate. All requests shall be considered on an individual basis.

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5101:2-16-10**Payment rates and procedures for providers of publicly funded child care services.**

(A) How are payment rates established in the publicly funded child care program?

- (1) Payment rates are based on a market rate survey completed by the Ohio department of job and family services (ODJFS) to providers in the state of Ohio.
- (2) Payment rates shall apply to all providers of publicly funded child care.

(B) What is the payment rate for a provider not participating in step up to quality (SUTO)?

- (1) The payment rate for a provider not participating in SUTO shall be the lower of these two:
 - (a) The rate shown in appendix A to this rule for non-rated programs in the provider's county of location.
 - (b) The provider's customary rate to the public.
- (2) The rate determined in paragraph (B)(1) of this rule shall be the base rate used to calculate any applicable additional payment amounts pursuant to paragraphs (D), (F) and (G) of this rule.

(C) What is the payment rate for a provider participating in SUTO?

- (1) The base payment rate for a provider participating in SUTO shall be the lower of these two:
 - (a) The rate shown in appendix A to this rule for rated programs in the provider's county of location.
 - (b) The provider's customary rate to the public. If the customary rate is used, an additional four per cent will be added, not to exceed the rated appendix.
- (2) Once the rate is determined in paragraph (C)(1) of this rule, an additional per cent shall be added, as follows:
 - (a) One-star rated programs shall be paid an additional five per cent.
 - (b) Two-star rated programs shall be paid an additional eighteen per cent.
 - (c) Three-star rated programs shall be paid an additional twenty-one per cent.
 - (d) Four-star rated programs shall be paid an additional twenty-nine per cent.

(e) Five-star rated programs shall be paid an additional thirty-five per cent.

(D) What is the payment rate for accredited providers?

(1) Providers who are accredited by an ODJFS approved accrediting body as listed at <http://jfs.ohio.gov/cdc/childcare.stm> shall be paid an additional ten per cent of the applicable payment rate established in paragraph (B)(1) of this rule or paragraph (C)(1) of this rule. This rate shall apply for all children receiving publicly funded child care services.

(2) Providers who are accredited and also participating in SUTO shall be paid either the per cent additional payment in paragraph (C)(2) of this rule or the per cent additional payment in paragraph (D)(1) of this rule, whichever is higher.

(E) What is the difference between a school-age rate and a summer school-age rate?

(1) School-age rates shall be in effect during the school year as defined in rule 5101:2-16-01 of the Administrative Code.

(2) Summer school-age rates shall be in effect outside of the school year as defined in rule 5101:2-16-01 of the Administrative Code.

(F) What is the compensation for child care services provided during non-traditional hours?

(1) Providers who care for children during non-traditional hours shall be paid an additional five per cent of the applicable payment rate established in paragraph (B)(1) or (C)(1) of this rule.

(2) This rate shall apply to the child for all hours of care during a week when any non-traditional hours of care are provided.

(3) The payment shall not exceed the provider's customary charge to the public.

(4) Non-traditional hours are the hours between seven p.m. and six a.m. on weekdays, and between twelve a.m. Saturday and six a.m. Monday.

(5) Non-traditional hours include any hours of care provided on New Year's day, Martin Luther King Jr. day, Memorial day, Independence day, Labor day, Thanksgiving day and Christmas day.

(G) How are providers compensated for the care of children with special needs?

(1) Providers who care for a child that the caretaker and the county agency have identified as having special needs pursuant to rule 5101:2-16-02 of the

Administrative Code shall be paid an additional five per cent of the applicable payment rate established in paragraph (B)(1) or (C)(1) of this rule. The payment shall not exceed the provider's customary charge to the public.

(2) Providers who make special accommodations for the care of a child with special needs may receive twice the amount of the applicable payment rate established in paragraph (B)(1) or (C)(1) of this rule if approved pursuant to rule 5101:2-16-09 of the Administrative Code.

(3) Payment enhancements or additional percentages shall only apply to the hours of care for the child with special needs.

(H) What time increments are used for the payment of publicly funded child care services?

(1) Time increments are broken down into weekly categories based on the total number of hours per week that each child is authorized to receive publicly funded child care services, pursuant to rule 5101:2-16-06 of the Administrative Code. The categories of payment are as follows:

(a) An hourly payment is for hours of care totaling less than seven hours per week.

(b) A part-time payment is for hours of care totaling seven hours to less than twenty-five hours per week.

(c) A full-time payment is for hours of care totaling twenty-five hours to sixty hours per week.

(d) A full-time plus payment is for hours of care totaling more than sixty hours per week.

(e) A week is defined as the seven-day period from twelve a.m. Sunday to fifty-nine minutes after eleven p.m. on Saturday.

(2) Payment shall be calculated using the total number of child care hours per week, that have been approved by the caretaker, if applicable, and submitted by the provider in the automated child care system.

(a) The total number of weekly hours of care received will be matched with the associated category and the provider will receive the payment rate for that category of care, up to the child's category of authorization.

(b) Payment shall not be made for hours that exceed the child's category of authorization.

(I) Are providers compensated for registration fees?

Providers may receive registration fees for children receiving publicly funded child care according to the following criteria:

- (1) Annually, a provider with a valid provider agreement as of January first shall receive a twenty-five dollar registration fee for each child who received publicly funded child care from the provider in the previous calendar year. For approved day camps, the camp shall have had a valid provider agreement as of August thirtieth of the previous year.
- (2) The child must have received publicly funded child care from the provider for at least one day during January through December of the previous year.

(J) Is a provider compensated when a child is absent from the program?

- (1) A child is eligible for a maximum of ten absent days during each six-month period of January through June and July through December of each state fiscal year.
- (2) Absent days are defined in rule 5101:2-16-01 of the Administrative Code.
- (3) A provider may be paid for an absent day for which a child is eligible. An absent day shall not be paid prior to actual attendance at the authorized program. The attendance shall be documented by a recorded in time and a recorded out time, and shall have occurred on any day in the previous rolling twelve months.
- (4) The value of an absent day is based on the child's authorized hours for care, as follows:
 - (a) For a full-time or a full-time plus authorization, the value of an absent day is eight hours.
 - (b) For a part-time or an hourly authorization, the value of an absent day is five hours.

(K) Are providers compensated for staff professional development days?

- (1) Providers are eligible for two professional development days per state fiscal year. A fiscal year is defined as July first through June thirtieth.
- (2) Professional development days are defined in rule 5101:2-16-01 of the Administrative Code.

(3) Professional development days cannot be used on two consecutive calendar days or in two consecutive calendar months.

(4) Professional development days shall not be used on any holiday listed in paragraph (F)(5) of this rule.

(5) The value of a professional development day is based on a child's authorized hours for care, as follows:

(a) For a full-time or a full-time plus authorization, the value of a professional development day is eight hours.

(b) For a part-time or an hourly authorization, the value of a professional development day is five hours.

(L) What is not included in the payment for publicly funded child care services?

The provider's publicly funded child care payment shall not include:

(1) A child's copayment amount pursuant to rule 5101:2-16-05 of the Administrative Code.

(2) Payment for services provided during the hours that a child is in care in another federal or state funded program (including, but not limited to, head start, early head start, or the early childhood education program).

(3) Payment for services provided during the hours that a school-age child would typically be in attendance at a primary or secondary school.

(M) What are the requirements regarding fees that a provider may charge to the caretaker?

(1) A provider shall make a caretaker aware of fees not covered by publicly funded child care payments for which the caretaker may be responsible.

(a) A provider shall have a signed agreement with the caretaker for the payment of these fees.

(b) Such fees may include:

(i) Late fees.

(ii) Activity fees.

(iii) Transportation fees.

(iv) Charges for absent days which exceed those eligible for payment from ODJFS.

(v) Charges for hours of care that exceed those authorized.

(2) A provider shall not ask a caretaker to pay the difference between the provider's payment rate and the provider's customary charge to the public when the customary charge is higher.

(3) A provider shall not ask a caretaker to pay the difference between the registration fee paid for the child by ODJFS and the provider's customary registration fee charge to the public when the customary registration fee is higher.

(N) What are the payment rates for in-home aides that provide publicly funded child care services?

An in-home aide is the only provider of publicly funded child care services who may provide child care in the child's own home. Payment rates for in-home aides shall be determined according to the following:

(1) An in-home aide shall be paid an hourly rate that is equal to the state minimum wage for forty or fewer hours in a week.

(2) A rate of one and one-half times the state minimum wage shall be paid for hours in excess of forty in a week.

(3) The total payment shall include child care services provided to all of the authorized child(ren) in the caretaker's home.

(4) An in-home aide shall not claim absent days or professional development days for children receiving publicly funded child care services.

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Five Year Review (FYR) Dates: 10/20/2024

CERTIFIED ELECTRONICALLY

Certification

10/10/2019

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10/27/2011, 10/01/2013, 07/10/2015, 06/26/2016,
12/31/2016, 12/16/2018

Category 1 - Non-Rated

Weekly Payment Rates for Providers of Publicly Funded Child Care Not Participating in SUTQ

Center, Day Camps, Type A Homes, ODE Programs			
	Full Time	Part Time	Hourly
Infant	\$143.31	\$94.40	\$6.56
Toddler	\$123.47	\$81.42	\$5.55
Pre-School	\$109.96	\$60.78	\$3.64
School Age	\$61.50	\$43.17	\$3.23
School Age Summer	\$104.96	\$62.50	\$2.90

Licensed Type B Homes			
	Full Time	Part Time	Hourly
Infant	\$134.28	\$77.37	\$4.42
Toddler	\$124.47	\$85.48	\$3.25
Pre-School	\$114.68	\$78.93	\$3.53
School Age	\$100.75	\$71.69	\$3.00
School Age Summer	\$114.31	\$71.74	\$3.45

BROWN

CHAMPAIGN

CRAWFORD

DEFIANCE

FAYETTE

FULTON

GALLIA

GUERNSEY

HOCKING

MERCER

MUSKINGUM

PAULDING

PUTNAM

ROSS

SCIOTO

TUSCARAWAS

VAN WERT

VINTON

WILLIAMS

WYANDOT

BORDER STATE PROVIDERS

Category 1 - Rated

Weekly Payment Rates for Providers of Publicly Funded Child Care Participating in SUTQ

Center and Type A Homes			
	Full Time	Part Time	Hourly
Infant	\$149.04	\$98.18	\$6.82
Toddler	\$128.41	\$84.68	\$5.77
Pre-School	\$114.36	\$63.21	\$3.79
School Age	\$63.96	\$44.90	\$3.36
School Age Summer	\$109.16	\$65.00	\$3.02

Licensed Type B Homes			
	Full Time	Part Week	Hourly
Infant	\$139.65	\$80.46	\$4.60
Toddler	\$129.45	\$88.90	\$3.38
Pre-School	\$119.27	\$82.09	\$3.67
School Age	\$104.78	\$74.56	\$3.12
School Age Summer	\$118.88	\$74.61	\$3.59

BROWN

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CRAWFORD

DEFIANCE

FAYETTE

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HOCKING

MERCER

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PUTNAM

ROSS

SCIOTO

TUSCARAWAS

VAN WERT

VINTON

WILLIAMS

WYANDOT

BORDER STATE PROVIDERS

Category 2 - Non-Rated

Weekly Payment Rates for Providers of Publicly Funded Child Care Not Participating in SUTQ

Center, Day Camps, Type A Homes, ODE Programs			
	Full Time	Part Time	Hourly
Infant	\$164.61	\$112.01	\$7.81
Toddler	\$150.51	\$94.44	\$5.89
Pre-School	\$131.57	\$70.04	\$4.33
School Age	\$75.22	\$58.48	\$4.75
School Age Summer	\$120.12	\$83.75	\$5.41

Licensed Type B Homes			
	Full Time	Part Time	Hourly
Infant	\$138.45	\$80.00	\$5.10
Toddler	\$130.00	\$87.74	\$4.60
Pre-School	\$119.50	\$91.31	\$5.23
School Age	\$100.00	\$71.20	\$3.71
School Age Summer	\$118.88	\$79.07	\$5.71

ADAMS

ALLEN

ASHLAND

ASHTABULA

ATHENS

CARROLL

CLARK

CLINTON

COLUMBIANA

COSHOCTON

DARKE

ERIE

HANCOCK

HARDIN

HENRY

HIGHLAND

HOLMES

HURON

JACKSON

LAWRENCE

LICKING

LOGAN

MADISON

MEIGS

MIAMI

MORROW

PERRY

PICKAWAY

PIKE

PREBLE

RICHLAND

SANDUSKY

SENECA

SHELBY

STARK

UNION

WASHINGTON

WAYNE

Category 2 - Rated

Weekly Payment Rates for Providers of Publicly Funded Child Care Participating in SUTQ

Center and Type A Homes			
	Full Time	Part Time	Hourly
Infant	\$171.19	\$116.49	\$8.12
Toddler	\$156.53	\$98.22	\$6.13
Pre-School	\$136.83	\$72.84	\$4.50
School Age	\$78.23	\$60.82	\$4.94
School Age Summer	\$124.92	\$87.10	\$5.63

Licensed Type B Homes			
	Full Time	Part Time	Hourly
Infant	\$143.99	\$83.20	\$5.30
Toddler	\$135.20	\$91.25	\$4.78
Pre-School	\$124.28	\$94.96	\$5.44
School Age	\$104.00	\$74.05	\$3.86
School Age Summer	\$123.64	\$82.23	\$5.94

ADAMS

ALLEN

ASHLAND

ASHTABULA

ATHENS

CARROLL

CLARK

CLINTON

COLUMBIANA

COSHOCTON

DARKE

ERIE

HANCOCK

HARDIN

HENRY

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LICKING

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MADISON

MEIGS

MIAMI

MORROW

PERRY

PICKAWAY

PIKE

PREBLE

RICHLAND

SANDUSKY

SENECA

SHELBY

STARK

UNION

WASHINGTON

WAYNE

Category 3 - Non-Rated

Weekly Payment Rates for Providers of Publicly Funded Child Care Not Participating in SUTQ

Center, Day Camps, Type A Homes, ODE Programs			
	Full Time	Part Time	Hourly
Infant	\$210.00	\$135.00	\$7.00
Toddler	\$188.05	\$115.00	\$11.82
Pre-School	\$164.51	\$90.00	\$6.00
School Age	\$93.46	\$62.12	\$5.48
School Age Summer	\$150.00	\$95.00	\$6.00

Licensed Type B Homes			
	Full Time	Part Time	Hourly
Infant	\$143.29	\$106.47	\$5.24
Toddler	\$143.79	\$90.00	\$5.00
Pre-School	\$123.50	\$89.34	\$5.44
School Age	\$100.00	\$66.31	\$5.53
School Age Summer	\$118.00	\$93.70	\$5.94

AUGLAIZE

BELMONT

BUTLER

CLERMONT

CUYAHOGA

DELAWARE

FAIRFIELD

FRANKLIN

GEAUGA

GREENE

HAMILTON

HARRISON

JEFFERSON

KNOX

LAKE

LORAIN

LUCAS

MAHONING

MARION

MEDINA

MONROE

MONTGOMERY

MORGAN

NOBLE

OTTAWA

PORTAGE

SUMMIT

TRUMBULL

WARREN

WOOD

Category 3- Rated

Weekly Payment Rates for Providers of Publicly Funded Child Care Participating in SUTQ

Center and Type A Homes			
	Full Time	Part Time	Hourly
Infant	\$218.40	\$140.40	\$7.28
Toddler	\$195.57	\$119.60	\$12.29
Pre-School	\$171.09	\$93.60	\$6.24
School Age	\$97.20	\$64.60	\$5.70
School Age Summer	\$156.00	\$98.80	\$6.24

Licensed Type B Homes			
	Full Time	Part Time	Hourly
Infant	\$149.02	\$110.73	\$5.45
Toddler	\$149.54	\$93.60	\$5.20
Pre-School	\$128.44	\$92.91	\$5.66
School Age	\$104.00	\$68.96	\$5.75
School Age Summer	\$122.72	\$97.45	\$6.18

AUGLAIZE

BELMONT

BUTLER

CLERMONT

CUYAHOGA

DELAWARE

FAIRFIELD

FRANKLIN

GEAUGA

GREENE

HAMILTON

HARRISON

JEFFERSON

KNOX

LAKE

LORAIN

LUCAS

MAHONING

MARION

MEDINA

MONROE

MONTGOMERY

MORGAN

NOBLE

OTTAWA

PORTAGE

SUMMIT

TRUMBULL

WARREN

WOOD

5101:2-16-11**Provider improper payments or misuse of publicly funded child care benefits.****(A) What is a provider improper child care payment?**

A provider improper child care payment means that a payment was made to a provider for which the provider was not eligible to receive. Improper payments are the result of one of the following:

- (1) An error on the part of the provider.
- (2) An error on the part of the county agency or the Ohio department of job and family services (ODJFS).

(B) What is considered provider misuse of publicly funded child care benefits or the automated child care system?

Provider misuse includes, but is not limited to:

- (1) Utilizing the personal identification information of a caretaker or designee/ sponsor to log a child's attendance in the automated child care system.
- (2) Falsifying attendance records.
- (3) Knowingly seeking and/or accepting payment for child care services that were not provided.
- (4) Knowingly seeking and/or accepting payment for child care services which the provider was not eligible to receive, including providing care at an unlicensed location.
- (5) Knowingly seeking and/or accepting payment for child care services provided to a child that resides in the provider's own home.

(C) What are the procedures if a provider improper child care payment is a result of a county error?

If the improper payment is the result of a county data error, the county agency shall:

- (1) Correct the error in the child care information data system.
- (2) Calculate the total overpayment amount that resulted from the county error.
- (3) Send a provider with a current provider agreement a notice of the determined overpayment using the JFS 01172 "County Agency Notice of Child

Care Improper Payment and Repayment Requirements for Child Care Providers" (rev. 12/2018).

(4) Notify ODJFS of the provider improper child care payment so that ODJFS may adjust all impacted payments in the child care automated system.

(5) Refer all provider improper child care payments for providers without a current provider agreement to ODJFS.

(D) What are the repayment procedures for all improper payments, including misuse of the automated child care system?

(1) ODJFS may recoup one hundred per cent of the over payment via payment adjustments if the provider has a current provider agreement and is currently receiving payments for publicly funded child care services.

(2) An invoice will be issued to the provider if either of the following are true:

(a) The provider does not have a current provider agreement or is not currently receiving payments for publicly funded child care services.

(b) Overpayments are unable to be recouped through the payment adjustment process, for those providers currently receiving payments for publicly funded child care services.

(3) After thirty calendar days, any remaining balance will be certified to the office of the attorney general for collection.

(E) Can a child care provider request a review of an identified overpayment?

(1) A child care provider may request in writing to ODJFS that a reconsideration review be conducted for any identified overpayment that is subject to recoupment.

(2) The written request must be received by ODJFS no later than fifteen calendar days after the date the provider receives the overpayment notice.

(F) What is provider fraud?

(1) Provider fraud is the willful withholding or falsification of information by the provider with an intent to deceive or defraud, resulting in the acceptance of or the receipt of payment for which the provider was not entitled, as determined by a court of law or the provider's admission.

(2) The county agency shall recommend to ODJFS the termination of the provider agreement if a provider has admitted or pleaded guilty to committing fraud or has been convicted of fraud, as determined by a court of law.

Replaces: 5101:2-16-71
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08/28/2011, 05/04/2014, 08/10/2015, 07/09/2017,
12/16/2018

5101:2-16-12**Publicly funded child care program integrity review.****(A) What is a program integrity review?**

A program integrity review carried out for the publicly funded child care program is meant to ensure:

- (1) The program is limited to only eligible recipients.
- (2) Payments to providers are for actual services provided.
- (3) Payments to providers conform to program rules.

(B) Who performs program integrity reviews?

The following entities may perform program integrity reviews for the publicly funded child care program:

- (1) The Ohio department of job and family services (ODJFS).
- (2) A county department of job and family services.
- (3) The Ohio auditor of state.
- (4) The Ohio attorney general.
- (5) The Ohio inspector general.
- (6) The U.S. department of health and human services (HHS).
- (7) The HHS office of inspector general.
- (8) The U.S. government accountability office.
- (9) Any entity working on behalf of ODJFS or the federal government.

(C) Who shall comply with publicly funded child care program integrity reviews?

Child care providers with a provider agreement or who had a provider agreement pursuant to rule 5101:2-16-09 of the Administrative Code, and caretakers determined eligible for publicly funded child care benefits pursuant to rule 5101:2-16-02 of the Administrative Code shall cooperate and participate in reviews conducted by any of the entities listed in paragraph (B) of this rule.

(D) What documentation and records will child care providers be required to provide as part of a program integrity review?

(1) Child care providers shall provide all documentation and records which are required to be maintained by Chapters 3301-32, 3301-37, 5101:2-12, 5101:2-13, 5101:2-14, 5101:2-16 and 5101:2-18 of the Administrative Code.

(2) Child care providers shall provide the documents and records listed in paragraph (D)(1) of this rule immediately upon request or no later than fifteen days from the date the child care provider receives notice of the request.

(3) Child care providers shall provide all documentation and records required to be maintained on-site immediately upon request during an on-site review.

(E) What happens if a child care provider fails to comply with a program integrity review request?

If a child care provider fails to comply with a program integrity review request, ODJFS may do both of the following:

(1) Terminate the provider agreement entered into with ODJFS pursuant to rule 5101:2-16-09 of the Administrative Code.

(2) Determine an overpayment for any claims under examination as part of the review.

(F) What happens if ODJFS determines misuse of publicly funded child care or the automated child care system pursuant to rule 5101:2-16-11 of the Administrative Code?

ODJFS may do any of the following:

(1) Recoup all improper payments due to misuse of publicly funded child care.

(2) Terminate the provider agreement entered into with ODJFS pursuant to rule 5101:2-16-09 of the Administrative Code.

(G) If ODJFS terminates a provider agreement pursuant to this rule, when can the provider request a new agreement?

A child care provider whose provider agreement has been terminated pursuant to this rule may not re-enter into a provider agreement for a period of five years from the date of termination.

Replaces: 5101:2-16-72
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Five Year Review (FYR) Dates: 10/20/2024

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Certification

10/10/2019

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