Child Care Subsidy Program

Regulations & Resources Manual
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Local District Highlights  Guide to Enrollment for Legally-Exempt Child Care Providers
Regulations and Resources Overview

Tab 1: Funding Sources

17-OCFS-LCM-11, New York State Child Care Block Grant Subsidy Program Allocations SFY 2017-2018

The purpose of this Local Commissioners Memorandum (LCM) is to inform local departments of social services (LDSSs) of their allocations and maintenance of effort (MOE) levels for the New York State Child Care Block Grant (NYSCCBG) subsidy program for the period April 1, 2017, through March 31, 2018. This LCM also explains the allowable uses for these federal and state funds.

17-OCFS-LCM-10, SFY 2017-18 Social Services Block Grant (Title XX) Allocations

The purpose of this New York State Office of Children and Family Services’ (OCFS) Local Commissioners Memorandum (LCM) is to provide local departments of social services (LDSSs) with their Title XX Social Services Block Grant allocations for State Fiscal Year (SFY) 2017-18.

Tab 2: Child Care Subsidy Regulations

18 NYCRR, Title 18, Part 415; Child Care Services

New York State Code, Rules and Regulations, Title 18, Part 415, Child Care Services, governs the authorization and payment of publicly funded child care services for children under any provision of the Social Services Law or the Federal Social Security Act.

18 NYCRR, Title 18, Part 404; Determination and Redetermination of Eligibility

New York State Code, Rules and Regulations, Part 404, Determination and Redetermination of Eligibility for Social Services, includes requirements that apply to eligibility determination for any of the services programs. Part 404 includes:

- The process of eligibility determinations
- Responsibility for eligibility determinations
- Verification of eligibility determinations
- Fees for services
- Authorization for services
Tab 3: Program Administration

**05-OCFS-ADM-03, Child Care Subsidy Program**

The purpose of 05-OCFS-ADM-03, Child Care Subsidy Program is to inform social services districts of the changes in the requirements for child care subsidies funded through the New York State Child Care Block Grant (NYSCCBG) and Title XX of the Federal Social Security Act. Additionally, this Administrative Directive included requirements of the child care subsidy program not issued previously in an Administrative Directive or Local Commissioner’s Memorandum.

**18-OCFS-LCM-03, Guidelines for Preparing the Child and Family Services Plan**

The purpose of this Local Commissioners Memorandum (LCM) is to provide guidance to local departments of social services (LDSSs) for the completion of the required county Child and Family Services Plan (CFSP) for the five-year plan cycle covering the period April 1, 2018, to March 31, 2023. LDSSs in collaboration with county youth bureaus and other local stakeholders are required by statute to develop and submit to the New York State Office and Children and Family Services (OCFS) a local, multi-year plan for the provision of services and the allocation of resources. The plan must include the required Persons in Needs of Supervision (PINS) Diversion Services Plan that is developed by the LDSS, county youth bureau, and county probation department.

**14-OCFS-LCM-01, Website Postings of Changes to Child Care Services**

The purpose of 14-OCFS-INF-01, Website Postings of Changes to Child Care Services is to advise social services districts (districts) of a new public notice requirement when a district proposes an amendment to the child care portion of its Child and Family Services Plan (CFSP) that reduces eligibility or increases the family share percentage and when a district implements its child care case closing process under its approved CFSP.

**15-OCFS-INF-10, Child Care Subsidy Program Improper Authorization for Payment Review**

The purpose of 15-OCFS-INF-10 is to inform local social services districts (districts) of the results of a comprehensive review of child care subsidy cases that was performed by the Office of Children and Family Services (OCFS), Office of Audit and Quality Control (AQC) during 2015, and to help prepare districts for the next review.
Tab 3: Program Administration (con’t)

14-ADM-05, Automated Information Exchange Agreement Between OTDA, OCFS, DOH and DOL—Unemployment Insurance Benefit Information

A Memorandum of Understanding (MOU) was signed by the New York State Office of Temporary and Disability Assistance (OTDA), the New York State Department of Health (DOH), the New York State Office of Children and Family Services (OCFS) and the New York State Department of Labor (DOL) (hereafter “the Agencies”) in August 2012. This MOU agreed to continue an automated information exchange of Unemployment Insurance (UI) claim information in order to verify eligibility for benefits, conduct fraud investigations, and for the purposes of maintaining program integrity and quality control in the following covered programs: Temporary Assistance to Needy Families (TANF), Safety Net Assistance (SNA), Medicaid, Home Energy Assistance Program (HEAP), Supplemental Nutrition Assistance Program (SNAP) (formally Food Stamps) and the Child Care Subsidy Program (CCSP).

10-LCM-17-T, Use and Protection of Confidential Information

The purpose of this Local Commissioners Memorandum (LCM) is to remind local departments of social services (local districts) of the requirement to assure appropriate protection, access to, and disclosure of confidential information maintained in State and County systems/databases.

12-OCFS-INF-01, Sharing Confidential Client-Identifiable Information Between Child Protective Services (CPS) and Protective Services for Adults (PSA)

The purpose of this release is to provide guidance to local departments of social services (LDSS) as to permissible means for the sharing of client-identifiable information between Child Protective Services (CPS) and Protective Services for Adults (PSA) units of an LDSS.

12-ADM-01, Requirement to Make Information Available to Non-Parent Caregivers Relating to Available Services and Assistance Programs

The purpose of this ADM is to convey to Social Services Districts their responsibilities required by SSL 392 and provide Social Services Districts with the information that is needed to meet this responsibility.
Tab 4: Programmatic Eligibility

91-ADM-34, Child Care: Reimbursement of Payments for Children with Special Needs

A Memorandum of Understanding (MOU) was signed by the New York State Office of Temporary and Disability Assistance (OTDA), the New York State Department of Health (DOH), the New York State Office of Children and Family Services (OCFS) and the New York State Department of Labor (DOL) (hereafter “the Agencies”) in August 2012. This MOU agreed to continue an automated information exchange of Unemployment Insurance (UI) claim information in order to verify eligibility for benefits, conduct fraud investigations, and for the purposes of maintaining program integrity and quality control in the following covered programs: Temporary Assistance to Needy Families (TANF), Safety Net Assistance (SNA), Medicaid, Home Energy Assistance Program (HEAP), Supplemental Nutrition Assistance Program (SNAP) (formally Food Stamps) and the Child Care Subsidy Program (CCSP).

17-OCFS-ADM-06, Providing Services to Children of Undocumented Immigrants

The purpose of this Administrative Directive (ADM) is to remind local departments of social services (LDSSs) and voluntary authorized agencies (VAs) that no child who is a United States citizen or who is lawfully residing in the United States can be denied any social services for which the child is otherwise eligible because of the residency status of the child’s parent(s) or custodial relative(s). This ADM also is intended to remind LDSSs and VAs that, in 2010, an amendment to 18 NYCRR 403.7(b) removed the requirement to report undocumented immigrants receiving referral services and protective services to the United States Department of Homeland Security.

17-OCFS-INF-07, Clarification on the Financial Eligibility Requirements for Transitional Child Care

The purpose of this Informational Letter (INF) is to provide local social services districts with clarification regarding the financial eligibility requirements for Transitional Child Care (TCC). Section 410-w of the Social Services Law (SSL) and Title 18 of the Codes, Rules and Regulations of the State of New York (NYCRR) Section 415.2(a)(1)(iv) provide that a family receiving public assistance or child care subsidy in lieu of public assistance may be eligible for TCC provided the family is no longer financially eligible for public assistance, and certain other conditions are met.

Commissioner Letter, Changes to the Law Regarding Child Care in Lieu of Temporary Assistance

The purpose of this Commissioners letter is to inform social service districts of changes in section 410-w of Social Services Law which impacts families who are eligible for child care in lieu of temporary assistance.
Tab 4: Programmatic Eligibility (con’t)

04-OCFS-ADM-01, Guaranteed Child Care in Lieu of Temporary Assistance, Payment During Breaks in Activities, Eligibility for Families in Post-Secondary Education, No Application for Transitional Child Care

The purpose of 04-OCFS-ADM-01, Guaranteed Child Care in Lieu of Temporary Assistance, Payment During Breaks in Activities, Eligibility for Family in Post-Secondary Education, No Application for Transitional Child Care, describes amendments to the Social Services Law (SSL) section 410-w regarding eligible families under the New York State Child Care Block Grant (NYSCCBG).

02-OCFS-INF-01, Former Family Assistance Families Eligible for Transitional Child Care Guarantee

The purpose of 02-OCFS-INF-01, Former Family Assistance Families Eligible for Transitional Child Care Guarantee, is to advise social services districts of the potential eligibility of former Family Assistance (FA) recipients for the Transitional Child Care (TCC) guarantee. Some FA families have already or will soon reach their State 60-month time limit of cash assistance.

14-ADM-04, Employment and Resource Exemption Changes Authorized by Chapter 58 of the Laws of 2014

The purpose of this Administrative Directive (ADM) is to inform districts of changes to the sections 131-n, 335-a, 336, and 336-a of SSL as authorized by Chapter 58 of the Laws of 2014 and to provide information to assist districts to identify adjustments in local procedures that may be necessary to implement these changes. Changes include amendments to expand temporary assistance work activities to include up to four years of post-secondary education (or its part time equivalent).

Memorandum, Repeal of Child Support Requirement for Child Care Assistance, July 30, 2009

The purpose of the OCFS local district commissioner’s memorandum dated July 30, 2009 is to advise social services districts that Social Service Law has been amended to repeal the requirement that the child’s caretaker must demonstrate that he or she is actively pursuing child support.
Tab 5: Income Eligibility

18-OCFS-INF-01, 2018 Income Standards for the Child and Family Services Plan
The purpose of this Informational Letter (INF) is to transmit to the local departments of social services (LDSSs) the 2018 income standards to be used in determining eligibility for services.

18-OCFS-LCM-02, State Minimum Wage Increase and Its Effect Upon Child Care Assistance
The purpose of this Local Commissioners Memorandum (LCM) is to inform local social services districts (districts) that the increase in the state minimum wage, effective December 31, 2017, may affect a family’s eligibility for child care assistance.

14-OCFS-LCM-12, Excludable Income for Financial Eligibility for Child Care Subsidy
The purpose of this Local Commissioners Memorandum is to advise social services districts (districts) about an amendment to Social Services Law (SSL) 410-w regarding the treatment of earned income of a child under the age of 18 when determining the eligibility of a household for a child care subsidy.

01-OCFS-INF-08, Former Child Assistance Program (CAP) Families Eligible for Transitional Child Care Guarantee or/and Transitional Medicaid/CAP MA Guarantee
The purpose of 01-OCFS-INF-8, Former Child Assistance Program (CAP) Families Eligible for Transitional Child Care Guarantee or/and Transitional Medicaid/CAP MA Guarantee is to provide guidelines for the provision of guaranteed child care services for the former CAP families who have reached five-year cash time limits and are found to be income ineligible for Safety Net Assistance non-cash benefits.

Commissioner Letter, Sixty Day Notice Regarding Child Care Assistance
The purpose of this Commissioner Letter is to inform Social Services Districts of the new provisions outlined in SSL §34-a, which took effect January 1, 2015, regarding the amount of notice a district must provide to the Office of Children and Family Services (OCFS) when the district plans to lower eligibility levels or increase its co-payment multiplier, with regard to child care assistance.
Tab 5: Income Eligibility (con’t)

12-OCFS-LCM-03, Kinship Guardian Assistance Program Payments—Excludable Income for Child Care Subsidy Program

The purpose of this Local Commissioners Memorandum (LCM) is to establish a formal policy regarding the calculation of countable income for families in receipt of Kinship Guardianship Assistance Program (KinGAP) payments and to notify social services districts of this policy.

In an effort to support relative guardians, as well as to support the broader efforts of permanency for children, social services districts are directed to exclude KinGAP payments when calculating family gross income and eligibility for the child care subsidy program.

07-OCFS-LCM-05, Adoption and Foster Care Subsidies: Excludable Income for Child Care Subsidy Eligibility

The purpose of 07-OCFS-LCM-05, Adoption and Foster Care Subsidies: Excludable Income for Child Care Subsidy Program Eligibility, is to establish a formal policy regarding the calculation of countable income for families in receipt of adoption and foster care subsidies and to notify social services districts of this policy.
Tab 6: Application and Documentation

16-LCM-09, Revisions to the LDSS-2921, PUB-1301, LDSS-3174, PUB-1313, LDSS-4148A-C, LDSS-4826, LDSS-4826A, LDSS-4942, and LDSS-2291

The purpose of this Local Commissioners Memorandum (LCM) is to inform social services districts (SSDs) of recent revisions to the “Common Application” and relevant documents.

18-OCFS-LCM-01, Application for Child Care Assistance and How to Complete the Application for Child Care Assistance Revisions

The purpose of this Local Commissioners Memorandum (LCM) is to inform local departments of social services (LDSSs) of revisions (12/2017) to the following forms:

- Application for Child Care Assistance (OCFS-6025)
- How to Complete the Application for Child Care Assistance (OCFS-6026)

This LCM is intended to convey substantive changes made to the forms listed above, and to provide information to LDSSs regarding the distribution and use of these revised forms.

10-OCFS-INF-10, Law 191, Invalidating Puerto Rican Birth Certificates

The purpose of this INF is to provide social service districts and voluntary authorized agencies with information related to action by the government of Puerto Rico, enacting Law 191 of 2009 invalidating Puerto Rican birth certificates effective October 1, 2010.
Tab 7: Client Notifications

16-OCFS-LCM-03, 30-Day Client Notification for Child Care Subsidy and Revised Client Notices

The purpose of this Local Commissioners Memorandum (LCM) is to advise local departments of social services (LDSSs) that on August 13, 2015, the Governor signed into law Chapter 144 of the Laws of 2015, which included language to repeal and revise certain provisions of the Social Services Law (SSL) regarding notification to families receiving child care assistance.

This LCM also informs LDSSs of several revised client notices that must be used by LDSSs to provide notifications to families about actions related to their child care subsidy benefit as required by Sections 34-a(9) and 410-w(8) of the SSL and Title 18 of the Official Compilation of Codes, Rules and Regulations of the State of New York (NYCRR) Parts 358, 404, and 415.

Memorandum, Mandatory Child Care Notices Effective 5/15/04

The purpose of the memorandum Mandatory Child Care Notices, Effective 5/15/04, is to inform the social services districts of the issuance of revised forms that must be used by social services districts to provide notification to clients on actions related to his or her application for child care subsidy benefits as required by Title 18 of the NYCRR Part 358, 404, and 415. It also provides the definition of adequate and timely notice, and when it applies.

Client Notification Forms

Samples of the following Client Notification Forms are included:
- OCFS-LDSS-4779, Approval of Your Application for Child Care Benefits
- OCFS-LDSS-4780, Denial of Your Application for Child Care Benefits
- OCFS-LDSS-4781, Notice of Intent to Change Child Care Benefits and Family Share Payments
- OCFS-LDSS-4782, Notice of Intent to Discontinue Child Care Benefits
- OCFS-LDSS-4783, Delinquent Family Share for Child Care Benefits
- OCFS-LDSS-4784, Approval of Your Redetermination for Child Care Benefits
- OCFS-LDSS-4785, Approval of Your Transitional Child Care Benefits
- OCFS-LDSS-4773, Child Care Eligibility Re-Determination Coming Due
- OCFS-LDSS-7009, Notice of Child Care Assistance Overpayment and Repayment Requirements
- OCFS-LDSS-7010, Notice of Fraud Determination, Disqualification for Child Care Benefits and Repayment Plan
Tab 8: Payments

16-OCFS-LCM-18, Child Care Market Rates 2016
The purpose of this release is to advise local departments of social services (LDSSs) of the adoption of regulations related to the market rates and the maximum reimbursements for expenditures for child care services funded under the New York State Child Care Block Grant (NYSCCBG) and Social Services Block Grant (Title XX). These changes to Title 18 of the New York Codes, Rules and Regulations (NYCRR) Section 415.9 were filed as a notice of emergency adoption and proposed rule-making.

17-OCFS-LCM-05, Child Care Services for Families Experiencing Homelessness and Differential Payment Rates
The purpose of this Local Commissioners Memorandum (LCM) is to inform social services districts of changes to Title 18 of the official compilation of Codes, Rules and Regulations of the State of New York (18 NYCRR) Part 415, pursuant to the federal Child Care and Development Block Grant Act of 2014 (42 U.S.C. 9858 et. seq.), regarding the provision of child care services funded under the New York State Child Care Block Grant (NYSCCBG) and Title XX of the federal Social Security Act. The changes to 18 NYCRR Part 415 include: adding families experiencing homelessness as a priority population; adding certain families experiencing homelessness to the category of eligible families when districts have funds available; exempting families experiencing homelessness from contributing to the cost of care; providing an allowable grace period for children to attend child care programs, in accordance with New York State Public Health Law; establishing a differential payment rate for child care services provided to a child experiencing homelessness; and amendments to the provisions for differential payment rates to child care providers who are accredited by a nationally recognized child care organization and/or provide care during nontraditional hours. Additionally, this LCM informs districts about reporting requirements, effective March 1, 2017.

17-OCFS-LCM-01, Child Care Provider Deduction of Union Dues in Social Services Districts Other Than New York City
The purpose of this Local Commissioners Memorandum (LCM) is to inform social services districts (SSD), other than New York City, of a change in the deduction of union dues and fair share fees from child care subsidy payments made to providers of family day care, group family day care, legally exempt in-home, and legally exempt family day care.

Memorandum, CSEA Fair Share Payments
The purpose of this memorandum is to inform Social Services Districts of changes to the collection of CSEA fair share payments.
Tab 8: Payments (con’t)

09-OCFS-LCM-07, Training Programs for Dislocated Worker, One Time Disbursement under the American Recovery and Reinvestment Act of 2009, Enhanced Market Rate for Legally-Exempt Family and In-Home Child Care Providers

The purpose of this Local Commissioners Memorandum (LCM) is to inform social services districts of regulatory changes to Title 18 of the New York State Codes, Rules and Regulations (NYCRR), sections 404.5, 415.2 and 415.9, related to eligibility requirements for child care subsidies funded under the New York State Child Care Block Grant (NYSCCBG) and Title XX funds. The regulations were filed on an emergency basis and are effective as of May 15, 2009.

92-LCM-138, Child Care Certificate Program

The purpose of 92-LCM-138, Child Care Certificate Program, is to provide social services districts with instructions relative to the implementation of a child care certificate program. Note that the use of child care certificates is a Federal requirement.

Tab 9: Fraud

14-OCFS-LCM-04, Child Care Subsidy Fraud Regulations

The purpose of this Local Commissioners Memorandum (LCM) is to inform local social services districts (districts) of the regulatory changes to Part 415 of the Rules and Regulations of the State of New York (NYCRR) for child care subsidies funded through the New York State Child Care Block Grant (NYSCCBG) and the federal Social Security Act.

The Child Care Subsidy Fraud Regulations, which went into effect October 5, 2011, promote the fiscal integrity of the child care subsidy program by establishing a clear, regulatory basis for holding child care providers accountable for committing fraud.

02-OCFS-INF-05, Child Care Case Referrals to FEDS and EVR

The purpose of this informational letter is to inform social services districts of their ability to refer applicants to be funded under the New York State Child Care Block Grant (NYSCCBG) to their Front End Detection System (FEDS) or Eligibility Verification Review (EVR) programs. Additionally, districts have the ability to refer NYSCCBG applicants and recipients to other fraud and abuse control programs that may be instituted in the district and have appropriate costs distributed and reimbursed with NYSCCBG funds.
Tab 10: Legally-Exempt Child Care

14-OCFS-INF-05, Revision of OCFS-LDSS-4700 Enrollment Form for Provider of Legally-Exempt Group Child Care

The purpose of this Informational Letter is to inform local social services districts (LSSD) that the New York State Office of Children and Family Services (OCFS) has revised the OCFS-LDSS-4700, Enrollment Form for Provider of Legally-Exempt Group Child Care.

12-OCFS-LCM-01, Changes to the Legally-Exempt Child Care Provider Enrollment Process

The purpose of this Local Commissioners Memorandum (LCM) is to inform the Social Services Districts (districts) of changes in the Legally-Exempt Child Care Provider (LECCP) enrollment process and of planned enhancements to the Child Care Facility System (CCFS) that will impact district procedures. This LCM also clarifies the districts’ roles and responsibilities in the enrollment of LECCPs for the purpose of providing child care subsidized by the New York State Child Care Block Grant (NYSCCBG).

03-OCFS-LCM-17, Legally-Exempt In-Home Child Care Providers as Employees

The purpose of 03-OCFS-LCM-17, In-Home Child Care Providers As Employers, is to inform local social services districts of a ruling by a Territorial Office of the United States Internal Revenue Service (IRS) that may have widespread employment tax ramifications for local departments of social services.

Local District Highlights, Guide to Enrollment of Legally-Exempt Child Care Providers

The purpose of this document is to highlight sections in the Guide to Enrollment 2015 that are relevant to LDSS responsibilities in the enrollment of Legally-Exempt Child Care Providers.
The purpose of this Local Commissioners Memorandum (LCM) is to inform local departments of social services (LDSSs) of their allocations and maintenance of effort (MOE) levels for the New York State Child Care Block Grant (NYSCCBG) subsidy program for the period April 1, 2017, through March 31, 2018. This LCM also explains the allowable uses for these federal and state funds.
Local Commissioners Memorandum

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<tr>
<th>Transmittal:</th>
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<td>To:</td>
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<td>Issuing Division/Office:</td>
<td>Division of Child Care Services Division of Administration</td>
</tr>
<tr>
<td>Date:</td>
<td>June 26, 2017</td>
</tr>
<tr>
<td>Subject:</td>
<td>New York State Child Care Block Grant Subsidy Program Allocations SFY 2017-2018</td>
</tr>
<tr>
<td>Contact Person(s):</td>
<td>Please contact the following persons for questions regarding this LCM:</td>
</tr>
<tr>
<td></td>
<td>• Program questions</td>
</tr>
<tr>
<td></td>
<td>Joe Ziegler, OCFS Division of Child Care Services: 518-402-6520 or email <a href="mailto:Joe.Ziegler@ocfs.ny.gov">Joe.Ziegler@ocfs.ny.gov</a></td>
</tr>
<tr>
<td></td>
<td>• Claiming Questions</td>
</tr>
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<td>(Upstate) Dan Stuhlman: 518-474-7549 or email <a href="mailto:Dan.Stuhlman@otda.ny.gov">Dan.Stuhlman@otda.ny.gov</a></td>
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<td>(Downstate) Michael Simon: 212-961-8250 or email <a href="mailto:Michael.Simon@otda.ny.gov">Michael.Simon@otda.ny.gov</a></td>
</tr>
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<td></td>
<td>• WMS/Services Questions</td>
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<tr>
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<td>Tina McCarthy, OCFS IT Operations: 800-342-3727 or email <a href="mailto:Tina.McCarthy@its.ny.gov">Tina.McCarthy@its.ny.gov</a></td>
</tr>
<tr>
<td>Attachments:</td>
<td>A: New York State Child Care Block Grant Local Department of Social Services Allocations</td>
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<tr>
<td></td>
<td>B: Maintenance of Effort Level</td>
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</table>
I. Purpose

The purpose of this Local Commissioners Memorandum (LCM) is to inform local departments of social services (LDSSs) of their allocations and maintenance of effort (MOE) levels for the New York State Child Care Block Grant (NYSCCBG) subsidy program for the period April 1, 2017, through March 31, 2018. This LCM also explains the allowable uses for these federal and state funds. The NYSCCBG appropriation for LDSSs for the period April 1, 2017, through March 31, 2018, State Fiscal Year (SFY) 2017-18 is $799,082,001.

II. Background

In order for an LDSS to participate in the NYSCCBG subsidy program, the commissioner of the LDSS must agree to comply with the program requirements of the NYSCCBG as set forth in Title 5-C of Article 6 of the Social Services Law; Title 18 of the New York State Code of Rules and Regulations (18 NYCRR) Parts 358, 404, 405, 407, 415, and 628; and New York State Office of Children and Family Services (OCFS) policy directives, including Administrative Directives (ADMs), Local Commissioner Memorandums (LCMs), and Informational Letters (INFs). Title 5-C of Article 6 of the Social Services Law, Section 410-x (4), requires OCFS to establish in regulation the applicable market-related payment rates that will establish the ceilings for state and federal reimbursement for payments made under the NYSCCBG. The amount to be paid or allowed for child care assistance funded under the NYSCCBG and under Title XX shall be the actual cost of care but no more than the applicable market rate established in regulations. LDSSs must pay the applicable market rate unless the actual cost of care is less, in which case LDSSs must pay the actual cost of care. The LDSS also must agree to comply with the requirements for the federal Child Care and Development Fund (CCDF). LDSSs provide such legal assurances as part of the submission of their Child and Family Services Plans.

III. Program Implications

A. ALLOCATION INFORMATION

Attachment A provides LDSS allocations for the NYSCCBG subsidy funds for the period beginning April 1, 2017, and ending March 31, 2018. The allocations are listed for two six-month periods to reflect the Federal Fiscal Year (FFY), which differs from the SFY. The lists show allocations for the period April 1, 2017, to September 30, 2017, the last half of FFY 2016-17, and for the period October 1, 2017, to March 31, 2018, the first half of the FFY 2017-18. Previously, 16-OCFS-LCM-08, dated May 16, 2016, notified LDSSs of their NYSCCBG allocations for the first half of FFY 2016-17, October 1, 2016, to March 31, 2017. Any unspent funds allocated for that period will be carried into and be available for the period ending September 30, 2017. Any portion of an LDSS’s NYSCCBG allocation for FFY 2016-17 (October 1, 2016 through September 30, 2017) that is not claimed by the LDSS by March 31, 2018, will remain available to the LDSS through the end of FFY 2017-18 (September 30, 2018). This would include any Temporary Assistance for Needy Families (TANF) funds transferred from an LDSS’s SFY 2017-18 Flexible Fund for Family Services (FFFS) allocation for the period April 1, 2017, to September 30, 2017.
However, claims for expenditures for October 1, 2016, through September 30, 2017, cannot be rolled forward into the next FFY.

The allocation methodology for SFY 2017-18 determines each LDSS’s proportionate share of the block grant funds based on the average level of annual child care claims for FFY 2011-12 through FFY 2015-16. Rollover of unspent NYSCCBG funds is taken into account for those LDSSs that meet both of the following criteria:

- The LDSS’s FFY 2015-16 rollover into FFY 2016-17 was more than 15 percent of its FFY 2015-16 NYSCCBG claims; AND
- The LDSS’s FFY 2015-16 rollover amount exceeded 75 percent of its FFY 2014-15 rollover amount.

For any LDSS meeting both of these criteria, the base allocation is first reduced by an amount equal to 40 percent of the rollover amount from FFY 2015-16 into FFY 2016-17 (but not to exceed the five-year-average-claim base allocation).

The statewide allocation reduction is then redistributed among LDSSs as follows. For LDSSs whose FFY 2015-16 NYSCCBG claims exceeded the sum of their SFY 2016-17 base allocations (as adjusted) and FFY 2015-16 rollover amounts, the amount of allocation reduction is redistributed on a pro-rated basis, proportionate to the LDSS’s share of the total excess claims. The sum of each LDSS’s five-year average claim base allocation, allocation reduction, and redistribution is its final SFY 2017-18 allocation.

While the NYSCCBG allocation is the primary resource available to LDSSs in meeting their child care subsidy needs for low-income families and individuals on public assistance, all LDSSs have the ability to utilize additional funds from the FFFS for child care subsidy costs. The SFY 2017-18 Enacted Budget continues to appropriate $964 million of TANF funding for the FFFS. Under the FFFS, LDSSs have the option to transfer a portion of their FFFS allocation to the Child Care and Development Block Grant (CCDBG). Federal law requires that any FFFS funding transferred to the CCDBG must be used for families and individuals with incomes below 200 percent of the federal poverty level. Consistent with federal statute, a statewide total of 30 percent of the state’s total TANF funds may be transferred to the CCDBG and/or to the Title XX Social Services Block Grant, with an upward statewide limit of 10 percent for the Title XX transfer. An LDSS may transfer up to 32 percent of its FFFS allocation to the CCDBG and Title XX combined, with up to 25 percent of its FFFS allocation going to Title XX. Any FFFS funding an LDSS chooses to use for child care must be transferred to the CCDBG and not claimed as a direct charge to TANF funding. Local share requirements for child care subsidies paid on behalf of public assistance recipients and the local MOE are unchanged.

As was the case in SFY 2016-17, LDSSs that have fully expended their allocation and have met their MOE may seek 50 percent federal reimbursement through the Supplemental Nutrition Assistance Program Employment & Training (SNAP E&T) program. All SNAP E&T claims for FFY 2016-17 must be submitted to the New York State Office of Temporary and Disability Assistance (OTDA) by March 31, 2018. Further information about eligibility and claiming for FFY 2016-17 will be issued in a separate LCM from OTDA.
Each LDSS may spend no more than five percent of its NYSCBG allocation, including any funds transferred from FFPS for administrative activities. Administrative activities do not include the costs of providing direct services such as eligibility determinations and redeterminations; preparation and participation in judicial hearings; child care placements; the recruitment, licensing, inspection, review and supervision of child care placements; rate setting for contract development; resource and referral services; training; or the establishment and maintenance of computerized child care information systems.

An LDSS, at its option, may make payments for eligible families for transportation to and from a child care provider. An LDSS will be reimbursed for transportation expenses charged by a child care provider that are separate and apart from the regular rate charged by the provider. The LDSS may make arrangements using other providers of transportation services. Expenditures for transportation are reimbursed as a program cost under the LDSS’s NYSCBG allocation if the provision of transportation services is included in the LDSS’s Child and Family Services Plan.

B. ELIGIBLE FAMILIES

There are three broad categories of families eligible for child care services under the NYSCBG when such care is not otherwise available from the caretaker(s) of the child in need of services. Eligible families are defined in 18 NYCRR Section 415.2. LDSSs are required to include this information in their Child and Family Services Plans, including the categories of families that the LDSS has chosen to serve and prioritize under the second and third categories listed below.

- The first category is families that are eligible for a child care guarantee.
- The second category is families that are eligible if funds are available. This category includes such families as low-income working families and teen parents who are completing high school.
- The third category is families that are eligible if funds are available and if the LDSS includes them as eligible families in the child care section of the Child and Family Services Plan.

C. PARENTAL CHOICE

LDSSs must inform parents or caretakers requesting NYSCBG services that they may either:

- choose to have care provided by one of the child day care providers with whom the LDSS has contracted for the provision of child care services; or
- request a child care certificate, which enables the parents or caretakers to select from a full range of child care arrangements, including care by licensed or registered child care providers and providers of legally exempt child care.

The child’s parents or caretakers must be given discretion in selecting or arranging for the purchase of child care services from any eligible provider. The case record should
document that parents or caretakers have been apprised of the full range of providers eligible for payment and of their right to elect to use a child care certificate. LDSSs must allow parents to select, and must have a method to pay, any and all legally operating providers with whom they do not contract. A contract may not be made a condition of receiving payment from NYSCCBG funds.

D. REIMBURSEMENT

Claims for expenditures for child care services for families receiving public assistance will be reimbursed at 75 percent with NYSCCBG funds, up to the LDSS’s NYSCCBG allocation ceiling. Claims for expenditures for child care for all other eligible families will be reimbursed at 100 percent with NYSCCBG funds, as long as the LDSS’s MOE is met, up to the LDSS’s NYSCCBG allocation ceiling.

E. MAINTENANCE OF EFFORT

Each LDSS must maintain local spending for child care services at a level established by OCFS in accordance with state statute. The MOE for each LDSS is listed in Attachment B and is unchanged from the previous year.

The MOE was calculated by totaling the LDSS share of expenditures in FFY 1994-95 for child care services claimed under the following categories: State Low Income Day Care program and administrative costs, Transitional Child Care, At-Risk Low Income Child Care, CCDBG, Emergency Assistance to Families, Job Opportunities and Basic Skills (JOBS)-related child care and employment-related child care. The MOE for those LDSSs participating in the Child Assistance Program (CAP) was adjusted to reflect the LDSS share for FFY 1996-97 CAP child care expenditures included in their NYSCCBG allocations.

Each LDSS must meet its MOE level in cash in FFY 2016-17 and in each subsequent FFY. The MOE is met by the 25 percent local share of claims for expenditures for public assistance recipients, as reported on Schedule H Non-Title XX Services for Recipients and any other non-Title XX expenditures that are allowable but not reimbursed under the NYSCCBG allocation. Claims submitted under NYSCCBG will be processed to ensure that the LDSS’s MOE requirement is met. Claims for administrative costs exceeding the five percent administrative cap will not count toward meeting the MOE and will not be eligible for federal and state reimbursement.

F. SYSTEMS INFORMATION

Procedures for the authorization of payment for child care services in the Welfare Management System (WMS) are as follows:

For child care payments for eligible families applying for or receiving public assistance, the LDSS can continue to use the DSS-3209 IM/WMS Authorization for child care payments for eligible families applying for or receiving public assistance. The LDSS may, at its option, use the DSS-2970 WMS Services Authorization to authorize payment for child care for public
assistance families. Purchase of Service Type Suffix Code (Data Element #23021) value "S-Block Grant DC 75 percent" designates child care services funded under the NYSCCBG for public assistance applicants/recipients and reimbursed at 75 percent federal and state share, up to the LDSS's allocation ceiling.

The LDSS has the option to authorize payments for child care for NYSCCBG eligible families not in receipt of public assistance on the DSS-3209 for Food Stamps and Medical Assistance-only cases.

For all other eligible families, the LDSS must authorize payment in WMS/Services by using Purchase of Service Type Suffix Code value "R-Block Grant DC 100%" on the DSS-2970, WMS Services Authorization, which designates child care services funded under NYSCCBG for non-public assistance families and reimbursed at 100 percent federal and state share, up to the LDSS's allocation ceiling.

In circumstances of an adult-only public assistance case in which the children are not included in the public assistance filing unit, child care payment is authorized as a public assistance family and reimbursed at 75 percent federal and state share. For cases in which children are in receipt of public assistance but the caretaker is not included in the public assistance filing unit, child care is authorized in WMS Services and reimbursed at 100 percent federal and state share, up to the LDSS's allocation ceiling.


G. CLAIMING INSTRUCTIONS

NYSCCBG expenditures for child care subsidies for families receiving public assistance are claimed on Schedule H, Non-Title XX Services for Recipients (LDSS-4283), line 2 (Day Care Services for Children), column 13 (Day Care Block Grant 75 percent). NYSCCBG program expenditures for child care subsidies for all other eligible families are claimed on Schedule H, line 2, column 12 (Day Care Block Grant 100 percent). Please refer to the Fiscal Reference Manual, Volume 2, Chapter 3 for detailed instructions for completing Schedule H.

NYSCCBG child counts and expenditures also must be reported on the Schedule G-2 Summary of All Payments for Day Care (LDSS-2109EL). Expenditures made under the services types allowed must be reported on the Schedule G-2, via the Automated Claiming System. The BICS Schedule G-2 report provides the information needed to file the report. Please refer to the Fiscal Reference Manual, Volume 2, Chapter 3 for Schedule G-2 instructions.

Administrative expenditures for the NYSCCBG that are not direct charged on the
Schedule D-2 are claimed in accordance with the Services Random Moment Survey (RMS) as Child Care Block Grant costs on line 6, section 1A (associated A-87 costs are claimed on line 4, section 2) of the Schedule D-2, Allocation for Claiming General Services Administration Expenditures (LDSS-2347B). Instructions for completing the Schedule D-2 are contained in Chapter 9 of Volume 3 of the Fiscal Reference Manual, County Cost Allocation Plan.

Claiming instructions for LDSS administrative expenditures related to the training of employees that are claimed on the Schedule D-6 Reimbursement Claim for Training (LDSS-2347-C) for the NYSCCBG program are provided in Chapter 13 of Volume 3 of the Fiscal Reference Manual.

The Fiscal Reference Manual is available here:

/s/ Derek J. Holtzclaw          /s/ Janice M. Molnar, Ph.D.

Derek J. Holtzclaw               Janice M. Molnar Ph.D.
Associate Commissioner for Financial Management
Division of Administration

Deputy Commissioner
Division of Child Care Services
# ATTACHMENT A

## NEW YORK STATE CHILD CARE BLOCK GRANT

### SOCIAL SERVICES DISTRICT ALLOCATIONS

4/1/2017-3/31/2018

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# ATTACHMENT B

NEW YORK STATE CHILD CARE BLOCK GRANT

MAINTENANCE OF EFFORT (MOE) LEVEL
Federal Fiscal Year 1994-95 Basis

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New York City | 52,937,271

State Total | 68,293,085
17-OCFS-LCM-10
SFY 2017-18 Social Services Block Grant (Title XX) Allocations

The purpose of this New York State Office of Children and Family Services’ (OCFS) Local Commissioners Memorandum (LCM) is to provide local departments of social services (LDSSs) with their Title XX Social Services Block Grant allocations for State Fiscal Year (SFY) 2017-18.
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Local Commissioners Memorandum

Transmittal: 17-OCFS-LCM-10
To: Local District Commissioners
Issuing Division/Office: Division of Administration/Bureau of Budget Management
Date: June 16, 2017
Subject: SFY 2017-18 Social Services Block Grant (Title XX) Allocations
Contact Person(s): See page 4.
Attachments: Federal Fiscal Year (FFY) 2017 Social Services Block Grant (Title XX) Allocations as authorized by the SFY 2017-18 Budget
- Attachment A: Adult Protective and Domestic Violence Services
- Attachment B: All Eligible Title XX Services

I. Purpose

The purpose of this New York State Office of Children and Family Services’ (OCFS) Local Commissioners Memorandum (LCM) is to provide local departments of social services (LDSSs) with their Title XX Social Services Block Grant allocations for State Fiscal Year (SFY) 2017-18.

II. Background

The Social Services Block Grant (SSBG) (CFDA# 93.667) or Title XX of the Social Security Act, (42 U.S.C. 1397 – 1397f) provides annual capped entitlement funding from the United States Department of Health and Human Services for a range of social services. In Federal Fiscal Year (FFY) 2017, New York State is expected to receive $96,931,926, a net decrease of $638,817 from the prior year.

Approximately 5 percent of the total New York State allotment or $4,846,596 is allocated to support training activities for LDSSs and state staff. The remaining amount of $92,085,330 is allocated to LDSSs. Chapter 53 of the Laws of 2017 directs that $66,000,000 will continue to be provided for the reimbursement of LDSSs’ expenditures.
for adult protective and domestic violence services, and the remaining funding of $26,085,330 will be available to reimburse other eligible Title XX services expenditures. The funds are available to reimburse for eligible expenditures made from October 1, 2016, through September 30, 2017, and must be final accepted in the Automated Claiming System (ACS) by March 31, 2018.

III. Other Related 2017-18 Budget Actions

The SFY 2017-18 Enacted Budget continues to appropriate $964 million of Temporary Assistance for Needy Families (TANF) funding for the Flexible Fund for Family Services (FFFS). Under the FFFS, child welfare services may be funded for families that meet the TANF-Emergency Assistance to Families (EAF) eligibility criteria and/or for families with incomes up to 200 percent of the federal poverty level. LDSSs also have the option to transfer a portion of their FFFS allocation to the Title XX Social Services Block Grant. Federal law requires that any FFFS funding transferred to the Title XX Social Services Block Grant must be used for children and their families with incomes below 200 percent of the federal poverty level. Recipients of the Title XX below 200 percent funds also must be either U.S. citizens or qualified aliens as defined by the Personal Responsibility and Work Opportunity Reconciliation Act of 1996.

Among the programs that can be supported with funds transferred to Title XX from an LDSS’s FFFS allocation are the TANF Transfer to Title XX below 200 percent for preventive, child protective, aftercare and adoption services, and the TANF transfer to Title XX for otherwise eligible Title XX below 200 percent expenditures. Consistent with federal statute, a statewide total of 30 percent of the state’s total TANF funds may be transferred to the Child Care and Development Block Grant (CCDBG) and/or to the Title XX Social Services Block Grant, with an upward statewide limit of 10 percent for the Title XX transfer. Under Chapter 53 of the Laws of 2017, for SFY 2017-18, an LDSS may transfer up to 32 percent of its FFFS allocation to the amount of TANF funds that may be transferred to the CCDBG and Title XX combined, with up to 25 percent of its FFFS allocation going to Title XX.

With the establishment of FFFS in SFY 2005-06, district-specific child welfare services thresholds were enacted. For SFY 2017-18, the total combined threshold continues to be $342,322,341. In order for districts to receive state reimbursement for eligible child welfare expenditures, each district must expend FFFS funds for Title XX below 200 percent, TANF-EAF child welfare services, FFFS child welfare direct services for families with income below 200 percent, and administration at a level equal to or greater than that district’s portion of the $342,322,341 statewide child welfare services threshold. If districts do not meet the child welfare threshold through child welfare expenditures under FFFS and FFFS funds transferred to Title XX, they will not receive 62 percent reimbursement for their other child welfare costs, other than community optional preventive services.

IV. Title XX Social Services Block Grant Methodology

The Title XX allocations provide $66,000,000 for the reimbursement of LDSS expenditures for adult protective and domestic violence services, and $26,085,330 for the reimbursement of other eligible Title XX services expenditures for a total of $92,085,330. The allocation methodology is as follows:
Adult Protective and Domestic Violence Services (Attachment A): In accordance with appropriation language, $66,000,000 is set aside to provide 100 percent reimbursement to LDSSs for eligible Title XX services expenditures for adult protective and for residential services for victims of domestic violence who are determined to be ineligible for public assistance during the time they are in a residential program for such victims and for non-residential services for victims of domestic violence (collectively “domestic violence services”), incurred on or after October 1, 2016, through September 30, 2017, and claimed by March 31, 2018, for settlement purposes. Allocation of this funding is based on each LDSS’s share of claims for those services, adjusted by the applicable cost allocation methodology and net of any retroactive payments, for the 12-month period ending June 30, 2016, that was submitted on or before January 3, 2017.

If an LDSS does not fully expend its allocation, the funds may be reallocated to other LDSSs with eligible claims that exceed their allocations. Eligible adult protective and domestic violence services expenditures in excess of the allocation are eligible for state reimbursement at the rate of 98 percent of 50 percent (or 49 percent) after any additional federal reimbursement is applied.

It should be noted that FFFS funds also are available to cover costs eligible for Title XX below 200 percent. An LDSS can elect to transfer a portion of its FFFS funds allocation to Title XX, to fund adult protective and domestic violence services for children and their families with incomes less than 200 percent of the federal poverty income level for the family.

All Other Eligible Title XX Services (Attachment B): The remaining funding of $26,085,330 may be used to reimburse other eligible Title XX services expenditures incurred on or after October 1, 2016, through September 30, 2017, and claimed by March 31, 2018, for settlement purposes. The allocation of these funds is based on each LDSS’s claims for eligible Title XX services, for the 12-month period ending June 30, 2016, that was submitted on or before January 3, 2017. The allocation methodology for these funds does not consider adult protective and domestic violence services, as those claims were considered in allocating the $66,000,000 set aside mentioned above. Although the allocation of these Title XX funds did not include claims for adult protective and domestic violence services, these funds may be used to reimburse the costs of such services. The allocation methodology considers claims for preventive services, child protective services, aftercare services, and adoption services (including post-adoption services).

If an LDSS does not fully expend its allocation, the funds may be reallocated to other LDSSs with eligible claims that exceed their allocations. Title XX eligible services expenditures, other than adult protective services, domestic violence services and child welfare services, in excess of the allocation are not eligible for state reimbursement.

V. Claiming

Expenditures for allocations included in this publication are claimed as follows:

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### VI. Contact Information / Questions

Questions pertaining to the allocations may be directed to:

Shonna Clinton, Local Operations Manager, Bureau of Budget Management,  
(518) 474-1361  
Email – Shonna.Clinton@ocfs.ny.gov

Questions pertaining to the FFFS Plan and Fiscal Claiming may be directed to the Office of Temporary and Disability Assistance:

**FFFS Plan:**

Elida Tomasulo, (518) 474-8905  
Email – Elida.Tomasulo@otda.ny.gov

**Fiscal Claiming:**

Claiming Questions (Upstate): Dan Stuhlman, (518) 474-7549  
Email – Dan.Stuhlman@otda.ny.gov

Claiming Questions (Downstate): Michael Simon, (212) 961-8250  
Email – Michael.Simon@otda.ny.gov

/s/ Derek J. Holtzclaw  

---

**Issued by:**  
Name: Derek J. Holtzclaw  
Title: Associate Commissioner for Financial Management  
Division/Office: Administration
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## Attachment B

### Title XX
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### All Other Eligible Title XX Services

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New York Code, Rules and Regulations, Title 18, Part 415

*Child Care Services*

New York State Code, Rules and Regulations, Title 18, Part 415, *Child Care Services*, governs the authorization and payment of publicly funded child care services for children under any provision of the Social Services Law or the federal Social Security Act.
OFFICIAL COMPILATION OF CODES, RULES AND REGULATIONS OF THE STATE OF NEW YORK
TITLE 18. DEPARTMENT OF SOCIAL SERVICES
CHAPTER II. REGULATIONS OF THE DEPARTMENT OF SOCIAL SERVICES
SUBCHAPTER C. SOCIAL SERVICES
ARTICLE 2. FAMILY AND CHILDREN’S SERVICES
PART 415. CHILD CARE SERVICES

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*Disclaimer: This is an unofficial compilation of NYCRR
Section 415.0. Applicability

This Part governs the authorization and payment of publicly funded child care services for children under any provision of the Social Services Law or the Federal Social Security Act to the extent of appropriations made available therefor.

Section 415.1. Definitions

For purposes of this Part and instruction of the department pertaining thereto, the following definitions of terms shall apply:

(a) Child care services means care for an eligible child provided on a regular basis either in or away from the child's residence for less than 24 hours per day which is provided by an eligible provider as defined in subdivision (g) of this section. Child care services may exceed 24 consecutive hours when such services are provided on a short-term emergency basis or in other cases where the caretaker's approved activity necessitates care for 24 hours or more on a limited basis, if the district has indicated in its consolidated services plan or integrated county plan that it will provide for such care.

(b) Eligible child means a child who resides with a caretaker which meets the program and financial eligibility requirements for the particular type of child care services and who:

   (1) is under 13 years of age. For child care services provided under title XX of the Federal Social Security Act or provided as child protective services or preventive services under other than under the New York State Child Care Block Grant Program, a child who turns 13 years of age during a school year may continue to receive child care services through the end of that school year; or

   (2) is under 18 years of age; and

      (i) is a child with special needs as defined in subdivision (c) of this section; or

      (ii) is under court supervision; or

   (3) is under 19 years of age, is a full-time student in a secondary school, or in an equivalent level of vocational or technical training, and:

      (i) is a child with special needs as defined in subdivision (c) of this section; or

      (ii) is under court supervision.

(c) Child with special needs means a child who is incapable of caring for himself or herself and who has been diagnosed as having one or more of the following conditions to such a degree that it adversely affects the child's ability to function normally:

   (1) visual impairment;
   (2) deafness or other hearing impairment;
   (3) orthopedic impairment;
   (4) emotional disturbance;
   (5) mental retardation;
(6) learning disability;
(7) speech impairment;
(8) health impairment;
(9) autism; or
(10) multiple handicaps.

Any such diagnosis must be made by a physician, licensed or certified psychologist or other professional with the appropriate credentials to make such a diagnosis.

(d) Caretaker means the child's parent, legal guardian or caretaker relative, or any other person in loco parentis to the child.

(e) Caretaker relative means any person who is a parent or other relative as set forth in section 369.1(b) of this Title who exercises responsibility for the day-to-day care of, and who lives with, a child.

(f) Person in loco parentis to a child means the child's guardian or caretaker relative or any other person with whom a child lives who has assumed responsibility for the day-to-day care and custody of the child.

(g) Eligible provider means one of the following:

1. a validly licensed or properly registered day care center or a properly registered school-age child care program operated by a voluntary non-profit corporation or association or an authorized child caring agency; or

2. a validly licensed or properly registered child day care center or a properly registered school-age child care program operated by a private proprietary corporation or organization or by an individual; provided, however, that for child care services provided under title XX of the Federal Social Security Act or provided as child protective services or preventive services that are funded other than under the New York State Child Care Block Grant Program, such a provider will be an eligible provider only with the prior approval of the commissioner of the Office of Children and Family Services upon the demonstration by the social services district that conveniently accessible non-profit facilities are unavailable or unable to provide the required care; or

3. a public school district operating a child care program which meets State and Federal requirements; or

4. a family day care home properly registered with the department to provide child care services to children; or

5. a group family day care home issued a valid license by the department to provide child care services to children; or

6. a caregiver of informal child care as defined in subdivision (h) of this section who is enrolled with the social services district in accordance with section 415.4(f) of this Part; provided, however, that such a caregiver is not an eligible provider for child care services provided under title XX of the Federal Social Security Act or provided as child protective services or preventive services that are funded other than under the New York State Child Care Block Grant Program; or

7. a caregiver of legally-exempt group child care as defined in subdivision (i) of this section which is enrolled with the social services district in accordance with section 415.4(f) of this Part; provided, however, that such
a caregiver is not an eligible provider for child care services provided under title XX of the Federal Social Security Act or provided as child protective services or preventive services that are funded other than under the New York State Child Care Block Grant Program except as provided in paragraph (3) of this subdivision.

(h) Informal child care includes legally-exempt family child care and legally-exempt in-home child care. Members of the child's or the caretaker's public assistance unit, and other adult members of the child care service unit except the child's siblings, are not eligible to provide subsidized child care.

(1) **Legally-exempt family child care** means:

(i) child care for one or two children provided outside the child's own home in a residence by a caregiver who is at least 18 years of age, or who is less than 18 years of age and meets the requirements for the employment of minors as set forth in article 4 of the New York State Labor Law, and who is chosen and whose services are monitored by the child's caretaker; or

(ii) child care for more than two children provided outside the child's own home in a residence by a caregiver who is at least 18 years of age, or who is less than 18 years of age and meets the requirements for the employment of minors as set forth in article 4 of the New York State Labor Law, who provides such care for less than three hours per day and who is chosen and whose services are monitored by the child's caretaker; or

(iii) child care provided by a relative within the third degree of consanguinity of the parent(s) or step-parent(s) of the child or children except where such relative is a person legally responsible for, or the caretaker relative of, such child or children. Relatives within the third degree of consanguinity of the parent(s) or step-parent(s) of the child include: the grandparents of the child; the great-grandparents of the child; the great-great-grandparents of the child; the aunts and uncles of the child, including the spouses of the aunts and uncles; the great-aunts and great-uncles of the child, including the spouses of the great-aunts and great-uncles; the siblings of the child; and the first cousins of the child, including the spouses of the first cousins.

(2) **Legally-exempt in-home child care** means:

(i) child care furnished in the child's own home by a caregiver who is chosen and monitored by the child's caretaker and who is at least 18 years of age, or who is less than 18 years of age and meets the requirements for the employment of minors as set forth in article 4 of the New York State Labor Law; provided, however, that the child's caretaker must provide the caregiver with all employment benefits required by State and/or Federal law, and must pay the caregiver at least the minimum wage, if required.

(i) **Legally-exempt group child care** means care provided by those caregivers, other than caregivers of informal child care as defined in subdivision (h) of this section, which are not required to be licensed by or registered with the department or licensed by the City of New York but which meet all applicable State or local requirements for such child care programs. Caregivers of legally-exempt group child care include, but are not limited to:

(1) pre-kindergarten and nursery school programs for children three years of age or older, and programs for school-age children conducted during non-school hours, operated by public school districts or by private schools or academies which provide elementary or secondary education or both in accordance with the compulsory education requirements of the Education Law, provided that such pre-kindergarten, nursery school or school-age programs are located on the premises or campus where the elementary or
secondary education is provided;

(2) nursery schools and programs for pre-school-aged children operated by non-profit agencies or organizations or private proprietary agencies which provide services for three or less hours per day;

(3) summer day camps operated by non-profit agencies or organizations or private proprietary agencies in accordance with Subpart 7-2 of the State Sanitary Code;

(4) day care centers, family day care homes and other child care programs located on Federal property which are operated in compliance with the applicable Federal laws and regulations for such child care programs; and

(5) day care centers, family day care homes and other child care programs located on tribal property which are operated in compliance with the applicable tribal laws and regulations for such child care programs.

(j) Family share means the weekly amount paid by the child's caretaker toward the costs of the child care services determined in accordance with section 415.3(f) of this Part.

(k) State income standard means the most recent Federal income official poverty line, as defined and annually revised by the United States Department of Health and Human Services under the authority of 42 U.S.C. 9902(2), updated by the department for a family size of four and adjusted by the department for family size.

(l) Child care services unit means those adults and/or children residing in the same household who will be considered for the purposes of determining a family's eligibility for child care services. For the purposes of this Part, an adult means any person 18 years of age or older unless the individual meets the definition of a child with special needs or the district has elected to include 18-, 19- or 20-year old individuals in the same child care services unit as their parent by indicating such option in its consolidated services plan or integrated county plan. Districts have the option to include all 18-, 19- or 20-year olds whose inclusion in the child care services unit would benefit the family. The district's approved consolidated services plan or integrated county plan must specify the criteria it will use to determine whether or not an 18-, 19- or 20-year old is included in the child care services unit.

(1) For families where the child's caretaker is receiving public assistance, the child care services unit will be comprised of the caretaker, his or her children and any other member of the public assistance unit. For families where no adult family member is in receipt of public assistance, the child care service unit will be comprised as follows:

(i) when adults, other than spouses, reside together and do not have a child in common, each adult along with his or her child(ren) will be considered a separate child care services unit;

(ii) when adults, other than spouses, reside together and have at least one child in common, the child care services unit will be comprised of the adults who have child(ren) in common, the child(ren) those adults have in common, and the other child(ren) of each such adult;

(iii) when a custodial parent who is under the age of 21 years is residing with his or her parent(s), or has established his or her own household, or resides with an individual other than his or her parent(s), the child care services unit will be comprised of the custodial parent who is under 21 years of age, his or her child(ren), and any other individual in the household with legal responsibility for the custodial parent's child(ren);
(iv) when an eligible child(ren) resides only with individuals who are not the child(ren)'s parent, step-parent, adoptive parent or legal guardian with financial responsibility for the child(ren), the child care services unit will be comprised of the eligible child(ren) only; and

(v) individuals who would otherwise be included in the child care services unit but who are temporarily absent from a household who meet the following criteria will be considered part of the child care services unit:

(a) individuals whose needs are partially or fully being met by members of the household, such as children or minors attending school away from home; provided, however, that a child away from home due to a foster care placement will not be considered part of the child care services unit; and

(b) individuals who are required to contribute to the needs of the household.

(m) Actual cost of care means the rate usually charged by the caregiver for non-subsidized child care services. When child care services are provided in accordance with the terms of a contract between a social services district and the caregiver, the negotiated contract rate is the actual cost of care for such services even if such rate is less than the rate usually charged by the caregiver for non-subsidized child care services.

(n) Child care certificate means a certificate that is issued directly to a child's caretaker which verifies that the caretaker is eligible for subsidized child care services which the caretaker arranges.

(o) Engaged in work.

(1) For an individual who is not receiving public assistance, engaged in work means that the individual:

   (i) is earning wages at a level equal to or greater than the minimum amount required under Federal and State Labor Law for the type of employment; or

   (ii) is self-employed and is able to demonstrate that such self-employment produces personal income equal to or greater than the minimum wage or has the potential for growth in earnings to produce such an income within a reasonable period of time.

(2) For an individual receiving public assistance, engaged in work means the individual is engaged in work as defined by the social services district in the district's employment plan submitted to and approved by the New York State Department of Labor.

(p) Seeking employment. For an individual who is not receiving public assistance, seeking employment means making in-person job applications, going on job interviews, registering with a New York State Department of Labor's Division of Employment Services Office to obtain job listings, and participating in such other job seeking activities as are approved by the social services district.

(q) Child welfare service plan means a clearly defined service plan as developed and approved by the appropriate children's service unit, including a description of the immediate home situation of the children, the reason for care, kind of service needed, planned hours of care, and the goal of the service, including an evaluation of the plan and goal at the six-month redetermination of eligibility for the day-care service provided.

(r) Office means the New York State Office of Children and Family Services.
(s) **Legally-exempt caregiver enrollment agency** means the agency under contract with the office to enroll caregivers of legally-exempt child care to provide subsidized services under the New York State Child Care Block Grant. For each district in New York State except for the City of New York, the legally-exempt caregiver enrollment agency will be the applicable child care resource and referral agency under contract with the office to serve that district. For the City of New York, the legally-exempt caregiver enrollment agency will be an entity or entities identified by the office in consultation with the New York City Human Resources Administration and the New York City Administration for Children’s Services.

**Section 415.2. Eligibility, guarantees, and priorities for child care services**

**Eligibility.** The following families are eligible for child care services under the specified child care programs when such care is not otherwise available from a legally responsible relative or caretaker of the child in need of services and the care is a necessary part of a plan for self support. For two-parent or two-caretaker families, each parent or caretaker must meet one of the eligibility criteria set forth in this subdivision.

(a) **New York State Child Care Block Grant Program.** A family will be eligible for child care services under the New York State Child Care Block Grant Program, if the family meets one or more of the following criteria:

1. Families which are guaranteed child care services. A social services district must guarantee child care services to a family which meets the criteria set forth in any subparagraph of this paragraph regardless of whether the social services district has any State or Federal funds available under this program to pay for all or a portion of such costs. In accordance with subdivision (d) of this section, a district may set aside funds and/or establish priorities for families eligible for a child care guarantee.

   (i) A social services district must guarantee child care services to a family who has applied for or is receiving public assistance when such services are needed for a child under 13 years of age in order to enable the child's parent(s) or caretaker relative(s) to participate in activities required by a social services official including orientation, assessment, or work activities as defined in 18 NYCRR Part 385. The guarantee applies to all of the eligible children of the parent(s) or caretaker relative(s) regardless of the child's status as part of the public assistance filing unit.

   (ii) A local social services district must guarantee to applicants who would otherwise be eligible for, or are recipients of, public assistance benefits and who are employed, the option to choose to receive continuing child care subsidies in lieu of public assistance benefits, for such period of time as the recipient continues to be eligible for public assistance. For the purposes of this section, an eligible applicant for, or recipient of, public assistance benefits and who is employed, includes a person whose gross earnings equal, or are greater than, the required number of work houses times the State minimum wage. Recipients of child care subsidies under this section who are no longer eligible for public assistance benefits, shall be eligible for transitional child care described in subparagraph (iv) of this paragraph as if they had been recipients of public assistance.

   (iii) A social services district must guarantee child care services to a family which is receiving public assistance when such services are needed for a child under 13 years of age in order to enable the child's parent(s) or caretaker relative(s) to engage in work as defined by the social services district.

   (iv) A social services district must guarantee child care services for a period of up to 12 consecutive months after the month in which a family's public assistance case closed or, for those who chose child care in lieu of public assistance, the month after the family is no longer financially eligible for
public assistance, provided:

(a) the case closed or the family became financially ineligible for public assistance due to:

(1) increased income from either employment or child support; or

(2) the family voluntarily ending assistance and their income is no longer within public assistance standards; and

(b) the family received public assistance in at least three of the six months immediately preceding the case closing; or, for a family which chose child care in lieu of public assistance, was eligible for public assistance in at least three of the six months immediately preceding their ineligibility for public assistance; and

(c) the family includes an eligible child that is under the age of 13 who needs child care services in order to enable the child's parent(s) or caretaker relative(s) to be engaged in work as defined in section 415.1(o)(1) of this Part; and

(d) the family has income at or below 200 percent of the applicable State income standard. This child care guarantee is available to eligible families for 12 months from the month after the family's eligibility for public assistance has terminated or ended. Families may ask for and begin to receive child care in any month during the 12-month period of the child care guarantee. The start date for eligibility may precede the date services were requested and cover any period during the 12 months of the guarantee.

(2) Families that are eligible when funds are available. A social services district must provide child care services to a family eligible under any one of the subparagraphs of this paragraph, to the extent that the district continues to have funds available under either the district's allocation from the State Child Care Block Grant Program or any local funds appropriated for such program subject to any priorities and set asides established pursuant to subdivision (d) of this section.

(i) A family which has applied for or is receiving public assistance when such services are needed for an eligible child aged 13 or older, who has special needs or is under court supervision, in order to enable the child's parent(s) or caretaker relative(s) to participate in activities required by social services officials including orientation, assessment, or work activities defined in 18 NYCRR Part 385.

(ii) A family receiving public assistance when such services are needed for a child aged 13 or older, who has special needs or is under court supervision, in order to enable the child's parent(s) or caretaker relative(s) to engage in work as defined by the social services district.

(iii) A family receiving public assistance when child care services are necessary:

(a) to enable a teenage parent to attend high school or an equivalency program; or

(b) for the child to be protected because the child's parent(s) or caretaker relative(s) is physically or mentally incapacitated or has family duties away from home necessitating his or her absence.

(iv) A family with income up to 200 percent of the State income standard when the family is at risk of becoming dependent on public assistance and child care services are needed:
(a) for the child's caretaker(s) to be engaged in work as defined in section 415.1(o)(1) of this Part; or

(b) to enable a teenage parent to attend high school or an equivalency program.

(v) A family experiencing homelessness, in accordance with section 725 of Subtitle VII-B of the McKinney-Vento Act, with income up to 200 percent of the State income standard and child care services are needed for the child's caretaker(s) to seek housing and:

(a) for the child's caretaker(s) to seek employment as defined in section 415.1(p); or

(b) for the child's caretaker(s) to be engaged in work as defined in section 415.1(o); or

(c) for the child's caretaker(s) to attend educational or vocational activities as defined in section 415.2(a)(3)(vii)(b) or section 415.2(a)(3)(iv). Notwithstanding the potential for some of these educational or vocational training programs to allow for the eventual attainment of a bachelor's degree or like certificate of completion for a four-year college program, this regulation does not permit the renewal of such educational or vocational training program enrollment for any additional period in excess of 30 consecutive calendar months except as for those programs defined in section 415.2(a)(3)(iv), nor does it permit enrollment in more than one such program; or

(d) for the child's caretaker(s) to access or participate in counseling services programs.

(3) Families that are eligible if funds are available under this program and if the social services district has listed such families as eligible in the district's consolidated services plan or integrated county plan. A social services district must provide child care services for an eligible child as defined in section 415.1(b) of this Part to a family eligible under this paragraph, to the extent that the district continues to have funds available under either the district's allocation for the State Child Care Block Grant Program or any local funds appropriated for such program subject to any priorities and set asides established pursuant to subdivision (d) of this section, provided the social services district has listed such families as eligible families in the district's consolidated services plan or integrated county plan:

(i) a family receiving public assistance when child care services are necessary for a parent or caretaker relative to participate in an approved activity in addition to their required work activity;

(ii) a family receiving public assistance when child care services are necessary for a sanctioned parent or caretaker relative to participate in unsubsidized employment whereby the parent or caretaker relative receives earned wages at a level equal to or greater than the minimum amount required under Federal and State Labor Law;

(iii) a family receiving public assistance or with income up to 200 percent of the State income standard when child care services are needed for the child to be protected because the child's caretaker is:

(a) participating in an approved substance abuse treatment program, or in screening for or an assessment of the need for substance abuse treatment;

(b) homeless or receiving services for victims of domestic violence and needs child care in order to participate in an approved activity, or in screening for or an assessment of the need for
services for victims of domestic violence; or

(c) in an emergency situation of short duration including, but not limited to, cases where the caretaker's absence from the home for a substantial part of the day is necessary because of extenuating circumstances such as a fire, being dispossessed from the home, seeking living quarters, or providing chore/housekeeper services for an elderly or disabled relative.

(iv) a family is receiving public assistance or has income up to 200 percent of the State income standard and child care services are needed for the child's caretaker to attend a two-year program other than one with a specific vocational sequence leading to an associates degree or a certificate of completion, or a four year college or university program leading to a bachelor's degree provided:

(a) the program is reasonably expected to improve the earning capacity of the caretaker;

(b) the caretaker is and continues to participate in non-subsidized employment whereby the caretaker works at least 17 1/2 hours per week and earns wages at a level equal to or greater than the minimum amount required under Federal and State Labor Law while pursuing the course of study; and

(c) the caretaker can demonstrate his or her ability to successfully complete the course of study;

(v) a family with an open child protective services case when it is determined on a case-by-case that such child care is needed to protect the child;

(vi) a family with income up to 200 percent of the State income standard when child care services are needed for the child to be protected because the child’s caretaker is physically or mentally incapacitated or has family duties away from home necessitating his or her absence;

(vii) a family with income up to 200 percent of the State income standard when child care services are needed for the child's caretaker to participate in one of the following activities provided such activity is an allowable activity set forth in the social services district's consolidated services plan or integrated county plan and the district determines that the activity is a necessary part of a plan for the family's self-support:

(a) actively seeking employment as defined in section 415.1(p) of this Part for a period of up to six months as established by the social services district in its consolidated services plan or integrated county plan, if the caretaker documents that he or she is currently registered with a New York State Department of Labor's Division of Employment Services Office, provided that child care services will be available only for the portion of the day the family is able to document is directly related to the parent or caretaker engaging in such activities;

(b) educational or vocational activities including attendance in one of the following secondary or post-secondary programs:

(1) a public or private educational facility providing a standard high school curriculum offered by or approved by the local school district;

(2) an education program that prepares an individual to obtain a New York State high school equivalency diploma;
(3) a program providing basic remedial education in the areas of reading, writing, mathematics and oral communications for individuals functioning below the ninth month of the eighth grade level in those areas;

(4) a program providing literacy training designed to help individuals improve their ability to read and write;

(5) an English as a second language (ESL) instructional program designed to develop skills in listening, speaking, reading and writing the English language for individuals whose native or primary language is other than English;

(6) a two year full-time degree granting program at a community college, a two year college, or an undergraduate college with a specific vocational goal leading to an associate degree or certificate of completion within a determined time frame which must not exceed 30 consecutive calendar months;

(7) a training program which has a specific occupational goal and is conducted by an institution licensed or approved by the State Education Department other than a college or university;

(8) a prevocational skills training program such as a basic education and literacy training program; or

(9) a demonstration project designed for vocational training or other projects approved by the Department of Labor;

(c) a program to train workers in an employment field that currently is or is likely to be in demand in the near future, if the caretaker documents that he or she is a dislocated worker and is currently registered in such a program, provided that child care services are only used for the portion of the day the caretaker is able to document is directly related to the caretaker engaging in such a program. For the purposes of this provision, a dislocated worker is any person who: has been terminated or laid off from employment; has received a notice of termination or layoff from employment that will occur within six months of such notice; or was self-employed but is unemployed as a result of general economic conditions in the community in which the individual resides or because of natural disasters. Notwithstanding the potential for some of these educational or vocational training programs to allow for the eventual attainment of a bachelor’s degree or like certificate of completion for a four-year college program, this regulation does not permit the renewal of such educational or vocational training program enrollment for any additional period in excess of 30 consecutive calendar months except as authorized under subparagraph (iv) of this paragraph, nor does it permit enrollment in more than one such program.

(b) Title XX program

(1) To the extent that the social services district has made title XX funds available for child care services, a family is eligible for child care services funded under title XX of the Federal Social Security Act if the family meets one or more of the criteria set forth in subdivision (a) of this section or the child is in need of child care as a preventive service provided the social services district has listed such families as eligible families in the district’s consolidated services plan or integrated county plan,
subject to any applicable priorities and set asides established pursuant to subdivision (d) of this section.

(2) A social services district may establish in its consolidated services plan or integrated county plan upper income levels above 200 percent of the State income standard for families receiving child care services under the title XX provided that the income levels do not exceed 275 percent of the State income standard for a family of one or two, 255 percent of the State income standard for a family of three, or 225 percent of the State income standard for a family of four or more.

(c) Child care services during breaks in activities.

(1) A social services district must provide New York State Child Care Block Grant services to families receiving public assistance, during breaks in activities, for a period of up to two weeks when the parent or caretaker relative is: engaged in work; participating in work activities or performing community service pursuant to title 9-B of article 5 of the Social Services Law; a teen parent attending high school or other equivalent training; physically or mentally incapacitated; or absent from the home due to family duties. Such child care services may be authorized for up to one month if child care arrangements would be lost if the services were not continued, and the program or employment is scheduled to begin within that one-month period.

(2) For all other families that are eligible under subdivision (a) or (b) of this section, a social services district may provide child care services while the caretaker is waiting to enter an approved activity or employment or on a break between approved activities for a period not to exceed two weeks or for a period not to exceed one month where child care arrangements would otherwise be lost and the subsequent activity is expected to begin within that period.

(d) Priority populations and funding set asides.

(1) Priority populations.

(i) For child care services funded under the New York State Child Care Block Grant Program, each social services district must give priority to the following federally-mandated populations:

(a) families with very low income. Each social services district must establish in its consolidated services plan or integrated county plan an income level at or below 200 percent of the State income standard which will constitute the upper income level for families with very low income; and

(b) families with children who have special needs; and

(c) families experiencing homelessness.

(ii) For child care services funded under the New York State Child Care Block Grant Program and/or under title XX of the Federal Social Security Act, each social services district may establish local priorities for child care services provided that the priorities provide eligible families with equitable access to child care assistance funds to the extent that these funds are available. Any local priorities must be set forth in the district’s consolidated services plan or integrated county plan.

(a) Local priorities may refine but can not replace the federally mandated priorities.
(b) Local priorities may be based on one or a combination of factors, including, but not limited to, household composition, reason for child care, and income level.

(c) Local priorities may not have the effect of limiting a caretaker's choice of any eligible child care provider or be based on a caretaker's choice of a child care certificate.

(2) **Funding set-asides.**

(i) Each social services district may set aside a portion of the district's New York State Child Care Block Grant allocation and/or its title XX allocation to serve one or more of the Federal and/or the district's local priority populations including families eligible for a child care guarantee; provided that the method of disbursement of funds to priority groups provides that eligible families within a priority group will receive equitable access to child care assistance funds to the extent that such funds are available.

(ii) Each funding set aside must be based on a 12-month period and must be described in the district's consolidated services plan or integrated county plan along with the rationale for the set aside amount based on the projected need for that population.

(iii) Within each 12-month period, the amount of the set aside for each particular priority population may be adjusted up or down by 10 percent without the prior written approval of the office. Each such adjustment to a set aside amount must be reported to the office within 30 days of the adjustment.

(iv) The prior approval of the office is needed for any adjustment in the amount of a set aside for a particular priority population which would exceed 10 percent of the amount for that set aside originally specified in the district's consolidated services plan or integrated county plan.

(3) **Waiting lists and denial of services.**

(i) If a social services district has set aside funds to serve one or more priority populations and all of the available funds that are not set aside are projected to be needed for open child care cases, the district may deny services to a family which is not eligible for a child care guarantee and which does not fall within the priority populations for the set asides or place the family on a waiting list for subsidies.

(ii) A social services district that has not established set asides must open a new case for an eligible family if the district has sufficient funding available to provide child care services to that family at the time the family is determined to be eligible. If the district does not have sufficient funding available because all of the available funds are projected to be needed for open child care cases, the district may deny services to a family which is not eligible for a child care guarantee or place the family on a waiting list for subsidies.

(4) **Case closings.** Once a social services district has committed all of the funds available to it, either through set asides approved in the district's consolidated services plan or integrated county plan and/or because all of the available funds are projected to be needed for open child care cases, the social services district may discontinue funding to those families which are not eligible for a child care guarantee that have lower priorities in order to serve families with higher priorities. If no priorities are established beyond the federally-mandated priorities and all funds are committed, case closings for families which are not eligible under a
child care guarantee and are not a federally-mandated priority must be based on the length of time in receipt of services. The length of time used to close cases may be based either on the shortest or longest time receiving child care services but must be consistent for all families. The social services district must specify in its consolidated services plan or integrated county plan whether case closings will be based on the shortest or longest length of time receiving child care services.

(5) Each social services district must collect and submit to the office information, in the form and manner and at the times specified by the office, concerning the disbursement of child care subsidy funds showing the geographic distribution of children receiving child care services from the district.

Section 415.3. Caretaker’s responsibilities

(a) An applicant for child care and development block grant services must apply, in writing, on forms and in a manner prescribed by the social services district in accordance with Part 404 of this Title. The social services district must permit the applicant to submit an application by mail. The caretaker with whom an eligible child or children reside(s) is the applicant for such services.

(b) The applicant is responsible for providing accurate, complete and current information regarding family income and composition, child care arrangements and any other circumstances related to the family's eligibility for child care services, and for notifying the social services district immediately of any changes in such information.

(c) The child(ren)'s caretaker is responsible for locating a child care provider(s) that meets the needs of his or her child(ren). A caretaker that is unable to locate a child care provider(s) may ask the social services district for assistance.

(d) A family which chooses to have a caregiver of informal child care provide child care services in the child(ren)'s own home must provide such caregiver with all employment benefits required by State and/or Federal law and pay the caregiver at least minimum wage, if required by State and/or Federal law.

(e) Family share

(1) Each family receiving child care services, except for a family where the parent(s) or caretaker relative(s) is receiving public assistance or a family experiencing homelessness, must contribute toward the costs of such services by paying a family share based upon the family's income. A family share also may be required of any family to recoup an overpayment for a child care services regardless of whether any member of the family is receiving public assistance.

(2) The income-based portion of the family share for child care services must be determined by the social services district in accordance with a sliding fee scale developed pursuant to paragraph (3) of this subdivision. The overpayment portion of the family share, if any, must be reflected separately from any income-based portion of the family share and must be determined in accordance with section 415.4(i) of this Part.

(3) The sliding fee scale developed by the social services district must be calculated by subtracting the State income standard, as defined in section 415.1(k) of this Part, for the specific family size of the eligible family from the annual gross income of the eligible family, multiplying the remaining income by a factor of 10 to 35 percent, as selected by the social services district and included in the district's consolidated services plan or integrated county plan, and dividing the product by 52 to determine a weekly family share. The same percentage factor must be used for all families receiving child care services which are required to pay an income-based portion of a family share.
(4) A minimum weekly family share of $1 must be charged to each family receiving child care services which is required to pay an income-based portion of a family share.

(5) Each family receiving child care services is responsible for paying only one family share regardless of the number of children in the family who are receiving child care services.

(6) The family is responsible for paying the family share in the manner determined by the social services district. The social services district may require the family to pay the family share to the social services district or to one or more child care providers used by the family.

(7) The family share will be recalculated by the social services district whenever there is a change in income, household circumstances or child care provider that would affect the amount of the family share, or when an overpayment for child care services has occurred and the recovery of such overpayment will be made through the family share, but no less frequently than each recertification.

(8) The failure of a family receiving child care services to pay the family share for such services established by the social services district or to cooperate with such district to develop an arrangement satisfactory to the district to make full payment of all delinquent family shares constitutes an appropriate basis for suspending or terminating such child care services in accordance with the procedures set forth in section 404.6 of this Title.

(f) A caretaker seeking child care services to enable the caretaker to participate in an approved training program must provide documentation that includes, but is not limited to, the following:

(1) the name of the institution offering or conducting the training program;

(2) the course of study to be pursued or in which the person is participating;

(3) the specific vocational or rehabilitative goal;

(4) the duration of the training (hours per day) including no more than a total of three hours per day to commute (from home) to and from training location; and

(5) progress reports (marks, transcripts, letters, and like documents) which indicate that the caretaker is progressing satisfactorily towards attaining the established vocational or rehabilitative goal.

Section 415.4. Local district responsibility

Each local social services district shall be responsible for compliance with the following requirements:

(a) Initial eligibility.

(1) At the time of application for child care services, the social services district must inform the applicant of:

   (i) the various child care services programs available and the requirements of the child care services programs for which the applicant may be eligible including information about the child care guarantee for applicants and recipients of public assistance and for families transitioning from public assistance set forth in section 410-w(3) of the Social Services Law. Such information must describe the actions that the family needs to take in order to be eligible for the child care guarantee;
(ii) the applicant's responsibility for reporting all relevant facts to the social services district in order that a proper determination of the applicant's eligibility for child care services can be made and for providing the documents or other information which the applicant must submit to verify such facts;

(iii) the fact that any investigation needed in order to determine the applicant's eligibility will be undertaken;

(iv) a recipient's responsibility for notifying the social services district immediately of any change in financial circumstances, living arrangements, employment, household composition, child care provider or other circumstances that affect the family's need or eligibility for child care services;

(v) a recipient's responsibility to contribute toward the costs of the child care services by paying a family share, if required as determined in accordance with section 415.3(e) of this Part;

(vi) the child care providers with which the social services district has arrangements for the provision of child care services to recipients;

(vii) a recipient's option to choose between the eligible providers set forth in section 415.1(g) of this Part;

(viii) a recipient's responsibility to locate child care. In addition, a public assistance recipient who needs child care in order to comply with his or her work requirements must be notified of the provisions in section 415.8 of this Part regarding the recipient's responsibility to locate child care and to inform the district of the recipient's efforts to locate child care including following up on referrals from the district, the applicable local child care resource and referral agency and/or any other child care agency to which the recipient is referred by the district;

(ix) information to assist a recipient to make an informed choice regarding the provider from which the recipient wishes to receive child care services; and

(x) a recipient's right to have child care services provided without discrimination on the basis of race, religion, national origin, sex, handicapping condition or political belief.

(2) All applications for child care services must be processed promptly. A determination of programmatic and financial eligibility must be completed within the time-frame set forth in section 404.1(d) of this Title except where the applicant requests additional time, where difficulties in verifying eligibility lead to a delay or where other reasons beyond the social services district's control lead to a delay. The reason for a delay in making such determination must be recorded in the case record and communicated to the applicant.

(3) Initial eligibility for child day care, informal child care and legally-exempt group child care services must be determined pursuant to the requirements of this Part, Part 404 of this Title and, where applicable, 18 NYCRR Part 385. In addition, required documentation and a completed service plan are necessary prerequisites to the determination of eligibility and must be retained in the case folder.

(4) If an application for child care services is approved, the social services district must:

(i) send written notice to the applicant of the determination of eligibility for child care services; the family share to be paid by the applicant, if required, the date(s) such family share is due and the family share payment procedures which must be followed; and the applicant's right to a fair hearing
in accordance with Part 358 and section 404.1(f) of this Title; and

(ii) provide an authorization for child care services to the applicant in accordance with section 404.7 of this Title.

(5) If an application for child care services is denied, the social services district must send written notice to the applicant of the determination of ineligibility and of the applicant’s right to a fair hearing in accordance with Part 358 and section 404.1(f) of this Title.

(b) Continuing eligibility.

(1) Continuing eligibility for child care services must be redetermined as often as case factors indicate, but no less frequently than every 12 months; provided, however, that a social services district may not require the submission of a new application merely because the applicant is no longer eligible for public assistance or no longer eligible for a child care guarantee. The district must establish procedures to enable families to keep their child care services without interruption as long as the families remain eligible for such services including procedures to transfer families from one unit of the district to another when necessary.

(2) All factors concerning need and eligibility for child care services must be reconsidered, reevaluated and verified during redeterminations. The periodic redeterminations conducted by the social services district do not eliminate the responsibility of a recipient of child care services to report to such district any change in financial circumstances, living arrangements, child care arrangements, employment, household composition or other circumstances that affect the family’s need or eligibility for child care services.

(3) If a recipient is redetermined to be eligible for child care services, the social services district must send written notice to the recipient of the determination of eligibility for child care services; the family share payment procedures which must be followed; and the recipient’s right to a fair hearing in accordance with Parts 358 and 404 of this Title.

(4) If a recipient is determined to no longer be eligible for child care services, the social services district must send written notice to the recipient of the determination of ineligibility and of the recipient’s right to a fair hearing in accordance with Part 358 and section 404.1(f) of this Title.

(c) Child care services requirements.

(1) A recipient must have the option to choose between the eligible providers set forth in section 415.1(g) of this Part; provided, however, that:

(i) a recipient may choose a provider of informal child care or a provider of legally-exempt group child care only for child care services provided under the New York State Child Care Block Grant Program;

(ii) a social services district may disapprove a provider chosen by a recipient in a preventive or child protective case if the district has reason to believe that it would be contrary to the health, safety or welfare of the child to receive child care services from that provider;

(iii) a child care provider chosen by a recipient must be validly licensed, properly registered or enrolled, as appropriate; and

(iv) a child care provider chosen by a recipient must permit a child’s caretaker to have: unlimited and on demand access to such child; the right to inspect, on demand and at any time during the hours of
415.4(c)(1)(iv)

operation of the home or facility, all parts of such home or facility used for child care or which could present a hazard to the health or safety of a child; unlimited and on demand access to the provider(s) caring for such child whenever such child is in care and during the normal hours of operation; and, unlimited and on demand access to written records concerning such child except where access to such records is otherwise restricted by law.

(2) A recipient who chooses a caregiver of legally-exempt in-home child care who will be providing such care in a child's own home must be advised of the recipient's responsibility to provide such provider with all employment benefits required by State and/or Federal law and the recipient's responsibility to pay the provider at least the minimum wage if required by State and/or Federal law.

(3) The child care services provided must be reasonably related to the hours of employment, education or training of a child's caretaker, as applicable, and permit time for delivery and pick-up of the child. Up to eight hours of child care services may be provided, if needed, to enable an employed caretaker who works a second or third shift to sleep if the social services district indicates in its consolidated services plan or integrated county plan that it will provide such services.

(4) When arranging child care services, the needs of the child must be taken into account including: continuity of child care; reasonable proximity of the care either to the child's home and school or to the child's caretaker's place of employment, education or training, as applicable; and, the appropriateness of the child care to the child's age and special needs.

(5) No child may be moved by a social services district from an existing placement with an eligible provider unless the recipient of child care services consents to such move; provided, however, that a social services district may require that a child receiving child care services as part of a preventive case or a child protective case be moved from an existing placement with an eligible provider if the district has reason to believe that it would be contrary to the child's health, safety or welfare to continue receiving child care services from that provider.

(6) A current list of the licensed or registered child day care providers located in the social services district must be maintained and made available to applicants for and recipients of child care services.

(7) Social services districts must inform public assistance recipients that:

   (i) the exemption from work requirements for lack of child care, if applicable, will not extend the time limitations on the receipt of family assistance; and

   (ii) the recipient will not be sanctioned for failure to comply with work requirements as long as the recipient can demonstrate an inability to find child care in accordance with section 415.8 of this Part. The information provided to the recipient must include the definitions and procedures set forth in such section.

(8) A social services district must notify applicants for and recipients of public assistance of the guarantee for child care services and for transitional child care services available to applicants or recipients that choose child care services in lieu of public assistance. Recipients of public assistance also must be informed of their potential eligibility for the guarantee for transitional child care services when their public assistance benefits are terminated. Such notification must describe the actions an applicant or recipient must take to obtain the guaranteed transitional child care services. A social services district may not require that an applicant or recipient reapply to receive the guaranteed transitional child care services as long as the family remains eligible for child care services.
(9) The social services district shall allow, disallow, or defer a claim for reimbursement, submitted by an eligible provider to the social services district, for the purpose of providing child care services pursuant to this Part within 30 days of receiving such claim.

(ii) The social services district may defer a claim for reimbursement only in the following circumstances:

(a) upon the recommendation of a federal, state, or local agency, when the agency has informed the social services district that continued payments of such claims place the social service district at risk of making payments for services that were not provided in accordance with the applicable state regulations; or

(b) after an initial review of the claim by the social services district revealed inaccuracies in the claim that warrant a more detailed review; or

(c) upon notification of the existence of a pending criminal charge involving fraud.

(iii) The social services district may disallow payment for claims for services provided to any and all children receiving a child care subsidy for the time period in which:

(a) an enrolled provider is found by the office to be operating or have operated a child care program, required to be licensed or registered with the office, without obtaining such license or registration; or

(b) a licensed or registered provider is found by the office to be operating or have operated over its licensed or registered capacity; or

(c) an enrolled informal provider is found by the office to be caring or have cared for more children than the limits defined in section 415.1(h) of this Part.

(d) Jurisdiction.

(1) When a family which is guaranteed child care services moves from one social services district to another social services district within the State, the new social services district of residence is responsible for paying for the family's child care services beginning with the second full month that the family lives in that district, provided the family continues to be eligible for guaranteed child care services. The former social services district is obligated to continue to pay for the guaranteed child care services during the month the family moves to the other district and the first full month following the month the family moved.

(2) Notwithstanding paragraph (1) of this subdivision, if a social services district continues to have responsibility for providing public assistance benefits for a family which has moved to another district, such as when the parent(s) or caretaker relative(s) is required to attend a substance abuse program located in another district, the district which is responsible for the public assistance benefits remains responsible for all child care services needed for any child(ren) of that parent(s) or caretaker relative(s) who moves to live with, or be near, the parent(s) or caretaker relative(s).

(3) When a child(ren) is placed in foster care in a social services district outside of the district where the child(ren) resided at the time of placement, and the foster family needs child care services for the foster child(ren) and the foster family is eligible to receive such services pursuant to section 415.2(a) of this Part, the district that has financial responsibility for the foster child(ren) will be responsible for providing child care services.
services for the foster child(ren).

(4) For all other families not described in paragraph (1), (2) or (3) of this subdivision, the social services district where a family resides will be responsible for providing child care services.

(e) Administration.

(1) In the case of providers from whom or from which the social services district purchases child care services, contracts, when required by section 405.3 of this Title, will be negotiated in accordance with the purchase of service requirements set forth in such section; provider budgets may be reviewed and attendance and payment records will be monitored.

(2) Required reports and claims for reimbursement must be prepared and submitted in the form and manner and at the times as required by the office.

(3) Records required to be maintained by the State and Federal law and by instructions of the office must be retained as appropriate. Under this subdivision, local districts must keep and retain adequate claiming records, retain appropriate documentation in the recipient’s case file, and make appropriate records available for audit by appropriate State and Federal agencies.

(4) Social services districts may alter their participation in activities related to arranging for, subsidizing, delivering, and monitoring the provision of subsidized child day care, provided that the total participation of an individual district in all activities related to the provision of subsidized child day care must be no less than the participation level engaged in by such individual district on the effective date of this section, to be determined based on a review of expenditures for the calendar year January 1, 1990 through December 31, 1990.

(5) The social services district is responsible for reporting to the office, in the form and manner and at the times required by the office, specific information regarding child care services, including, but not limited to, the number of children receiving each specific child care services, the costs of such services separated by the type of child care providers used, and any additional information required for the State to meet Federal reporting requirements.

(6) Each social services district must submit a child care services plan to the office for approval as part of the district’s multi-year consolidated services plan or integrated county plan and any annual implementation reports, in the form and manner and at the times required by the office. A social services district must implement its child care services programs in accordance with the child care services plan approved by the office.

(f) Enrollment of caregivers of informal and legally-exempt group child care. A social services district may only make payments for child care provided by caregivers of informal or legally-exempt group child care if the caregiver has been enrolled by a legally-exempt caregiver enrollment agency on either a temporary or final basis in accordance with this subdivision. Each social services district must provide a child’s caretaker that has applied for or is receiving child care subsidies under the New York State Child Care Block Grant and who is interested in using a caregiver of legally-exempt child care with an enrollment package and notify the caretaker that the completed package must be submitted to the applicable legal-exempt caregiver enrollment agency.

(1) Each legally-exempt caregiver enrollment agency must establish procedures for enrolling, for payment purposes, a caregiver of informal child care or a caregiver of legally-exempt group child care, as defined in section 415.1 of this Part, who or which chooses to provide child care services under the New York State
Child Care Block Grant Program. Such enrollment procedures must:

(i) collect only such information about the caregiver as determined by the Office of Children and Family Services to be necessary to make payments and to furnish information to the caregiver or to a recipient;

(ii) facilitate appropriate and prompt payments; and

(iii) permit the caregiver to enroll with the legally-exempt caregiver enrollment agency after selection by a recipient.

(2) Each legally-exempt caregiver enrollment agency must distribute health and safety information as specified by the office to all newly enrolled caregivers of informal child care and caregivers of legally-exempt group child care.

(3) 

(i) Prior to enrolling or re-enrolling a caregiver of informal child care or a caregiver of legally-exempt group child care, the legally-exempt caregiver enrollment agency must review the enrollment package obtained from the caregiver and determine, within 10 days of receiving the enrollment package, whether the enrollment package is complete and the caregiver is exempt from the State's child day care licensing and registration requirements.

(ii) If the caregiver is exempt from the State's child day care licensing and registration requirements, and the completed checklist and attestations in the enrollment package do not raise any immediate concerns, the legally-exempt caregiver enrollment agency must enroll the caregiver on a temporary basis until the legally-exempt caregiver enrollment agency completes a full review of the package. The legally-exempt caregiver enrollment agency must notify the applicable social services district of the enrollment of the legally-exempt caregiver on a temporary basis.

(iii) The legally-exempt caregiver enrollment agency must complete a full review of the enrollment package within 40 days of receiving the completed enrollment package to determine whether the caregiver meets the enrollment requirements including the basic health and safety requirements set forth in paragraph (7) of this subdivision and the additional requirements for informal child care caregivers set forth in paragraph (8) of this subdivision, if applicable. The legally-exempt caregiver enrollment agency must notify the applicable social services district of its final determination regarding the enrollment of the legally-exempt caregiver.

(iv) Caregivers enrolled with a social services district on or before the effective date of these regulations, must document compliance with the requirements set forth in paragraph (7) of this subdivision and the additional requirements for informal child care caregivers in paragraph (8) of this subdivision, if applicable, before or as part of the next redetermination of eligibility for child care services for a child in the caregiver's care.

(v) Enrollment information must be updated and reviewed at least annually and at any other time when a change in circumstances warrants such a review including but not limited to when the caregiver seeks to serve another child. The legally-exempt caregiver enrollment agency only must verify any changes that have occurred to the caregiver's enrollment information since the last enrollment package was submitted.
(4) If the caregiver is exempt from the licensing and registration requirements and the caregiver otherwise meets the qualifications set forth in section 415.1(h) or (i) of this Part, and meets the basic health and safety requirements set forth in paragraph (7) of this subdivision and the additional requirements for informal child care set forth in paragraph (8) of this subdivision, if applicable, or integrated county plan, then the legally-exempt caregiver enrollment agency must enroll the caregiver for the purpose of providing child care services to eligible families under the New York State Child Care Block Grant Program unless the applicable social services district informs the legally-exempt caregiver enrollment agency that the caregiver does not meet a locally-defined additional requirement set forth in the social services district's consolidated services plan or integrated county plan in accordance with subdivision (h) of this section.

(5) A caregiver of informal child care or a caregiver of legally-exempt group child care must be enrolled with the legally-exempt caregiver enrollment agency before payment is made to such caregiver by a district for providing child care services under the New York State Child Care Block Grant Program.

(6) Each legally-exempt caregiver enrollment agency must maintain an automated roster, in the New York State Child Care Facilities System, of the caregivers of informal child care and caregivers of legally-exempt group child care enrolled with such legally-exempt caregiver enrollment agency including the name and address of each such caregiver and information about the caregiver's compliance with the enrollment requirements at such time and in manner and form required by the office.

(7) Basic health and safety requirements for caregivers of informal or legally-exempt group child care.

   (i) At the time of applying for enrollment and for re-enrollment, the caregiver must furnish a sworn statement indicating whether, to the best of his or her knowledge, such caregiver, any employee of the caregiver, and any volunteer who has the potential for regular and substantial contact with children in care, and, for caregivers of legally-exempt family child care, each household member age 18 or older, has ever been convicted of a misdemeanor or a felony in New York State or any other jurisdiction. Prior to furnishing the caretaker and the legally-exempt caregiver enrollment agency with such information, the caregiver shall inquire of each such employee, volunteer and household member regarding whether that person has ever been convicted of a misdemeanor or any felony in New York State or any other jurisdiction.

   (a) When a caregiver, indicates that he or she or such an employee, volunteer or household member has been convicted of a crime, the caregiver must give the caretaker and the legally-exempt caregiver enrollment agency true and accurate information about the crime which will enable the caretaker and the legally-exempt caregiver enrollment agency to evaluate whether the criminal background poses an unreasonable risk to the safety or welfare of the child(ren). Such information must include, but is not limited to, the nature of the crime, the penalties imposed as a result of the conviction, and the length of time which has elapsed since the conviction.

   (b) No person convicted of a felony or misdemeanor against children or, for caregivers of legally-exempt family child care, whose household includes an individual convicted of such a crime may be enrolled by a legally-exempt caregiver enrollment agency as a child care caregiver.

   (c) No legally-exempt informal child care program or legally-exempt group child care program which employs an individual or uses a volunteer convicted of a felony or misdemeanor against children may be enrolled by a legally-exempt caregiver enrollment agency as a child care caregiver.
(d) A legally-exempt caregiver enrollment agency may enroll a caregiver who has been convicted or whose employee, volunteer or household member has been convicted of other felony or misdemeanor offenses, consistent with guidelines issued by the office for evaluating applicants with criminal conviction records.

(ii) The caregiver must furnish the child’s caretaker with true and accurate information, in writing, indicating whether, to the best of the caregiver’s knowledge, such caregiver, any employee of the caregiver, any volunteer who has the potential for regular and substantial contact with children and, for caregivers of legally-exempt family child care, any household member age 18 or older, has ever been the subject of an indicated report of child abuse or maltreatment in New York State or any other jurisdiction. Prior to furnishing the caretaker with such information, the caregiver shall inquire of each such employee, volunteer and household member regarding whether that person has ever been the subject of an indicated report of child abuse or maltreatment. The caregiver must furnish the child’s caretaker with information regarding any such indicated report including a description of the incident, the date of the indication and any other relevant information.

(iii) To be enrolled by a legally-exempt caregiver enrollment agency to provide child care services under the New York State Child Care Block Grant Program, a caregiver of informal child care or a caregiver of legally-exempt group child care which is not required to be operated under the auspices of another Federal, State or local government agency must attest and certify in writing:

(a) whether, to the best of his or her knowledge, the caregiver has ever been denied a license or registration to operate a school-age child care program, day care center, family day care home or group family day care home, or had such a license or registration suspended or revoked. If a caregiver indicates that he or she has been denied such a license or registration or had such a license or registration suspended or revoked, the caregiver must provide true and accurate information to the child’s caretaker and the legally-exempt caregiver enrollment agency about the reasons for the denial, suspension or revocation. A legally-exempt caregiver enrollment agency must determine whether to enroll a caregiver who has had such a license or registration denied, suspended or revoked, based on guidelines issued by the office; and

(b) whether the caregiver has ever had his or her parental rights terminated, or had a child(ren) removed from his or her care by court order under article 10 of the Family Court Act. If a caregiver indicates that he or she has had his or her parental rights terminated or has had a child(ren) removed from his or her care by court order under article 10 of the Family Court Act, the caregiver must provide true and accurate information regarding the reasons underlying the loss of parental or custodial rights. A legally-exempt caregiver enrollment agency must determine whether to enroll a caregiver who has had his or her parental rights terminated or has lost custody of a child(ren) by court order under article 10 of the Family Court Act, based on guidelines issued by the office.

(iv) To be enrolled with a legally-exempt caregiver enrollment agency to provide child care services under the New York State Child Care Block Grant Program, a caregiver of legally-exempt group child care must attest and certify in writing either that:

(a) the caregiver is legally operating under the auspices of another Federal, State or local government agency; or

(b) if the caregiver of legally-exempt group child care is not required to operate under the
auspices of another Federal, State or local governmental agency, then the caregiver must meet the additional health and safety requirements set forth in section 415.4(f)(7).

(v) To be enrolled by a legally-exempt caregiver enrollment agency to provide child care services under the New York State Child Care Block Grant Program, a caregiver of informal child care or a caregiver of legally-exempt group child care which is not required to be operated under the auspices of another Federal, State or local governmental agency also must attest and certify in writing, and the child’s caretaker must attest and certify in writing, that the caregiver meets and has agreed to continue to meet the following basic health and safety requirements:

(a) The caregiver and all children have two separate and remote ways to escape in an emergency.

(b) Rooms for children are well-lighted and well-ventilated. Heat, ventilating and lighting equipment are adequate for the protection of the health of the children.

(c) The caregiver will use barriers to restrict children from unsafe areas. Such areas include, but are not limited to, swimming pools, open drainage ditches, wells, holes, wood and coal burning stoves, fireplaces and permanently installed gas space heaters.

(d) Where child care is provided on floors above the first floor, windows on floors above the first floor are protected by barriers or locking devices to prevent children from falling out of the windows.

(e) Adequate and safe water supply and sewage facilities are provided and comply with State and local laws. Hot and cold running water is available and accessible at all times.

(f) The caregiver certifies that the caregiver and each employee and each volunteer with the potential for regular and substantial contact with children in care is physically fit to provide child care and are free of any communicable disease and, for caregivers of legally-exempt family child care, that all persons residing in the home are free of any communicable disease unless the caregiver’s or household member’s health care provider has indicated that the presence of a communicable disease does not pose a risk to the health and safety of the children in care. If the legally-exempt caregiver enrollment agency has reasonable cause to suspect that the information provided by the caregiver is incorrect, the legally-exempt caregiver enrollment agency may require that the caregiver submit a statement from a physician, physician’s assistant or nurse practitioner verifying the information.

(g) Suitable precautions will be taken to eliminate any conditions in areas accessible to children that pose a safety hazard.

(h) All matches, lighters, medicines, drugs, cleaning materials, detergents, aerosol cans and other poisonous or toxic materials are stored in their original containers and used in such a way that they will not contaminate play surfaces, food or food preparation areas or constitute a hazard to children. Such materials will be kept in a place inaccessible to children.

(i) The caregiver will ensure that each child receives meals and snacks in accordance with the plan developed jointly by the caregiver and the child's caretaker.

(j) Perishable food, milk and formula will be kept refrigerated.
(k) When the caregiver cares for infants, formula, breast milk and other food items for infants will not be heated in a microwave oven.

(l) The caretaker of a child will have unlimited access to the child, and to the premises when the child is in care and to written records regarding the child.

(m) Evacuation drills will be conducted at least monthly with the children during the hours that children are in care.

(n) The caregiver will never use corporal punishment or allow others to use corporal punishment while children are in care.

(o) The caregiver will never use or be under the influence of alcohol or drugs while children are in care and will make sure that children are not exposed to individuals using drugs or alcohol while in care.

(p) The caregiver will not smoke or allow smoking in indoor areas while children are in care or in vehicles while children are being transported.

(q) The caregiver will never leave children unsupervised or in the care of individuals who are not authorized to supervise the children.

(r) The caregiver has either a working telephone or immediate access to one. Emergency telephone numbers for the fire department, local or State Police or sheriff’s department, poison control center and ambulance service are posted conspicuously on or adjacent to the telephone.

(s) Protective caps, covers or permanently installed obstructive devices are used on all electrical outlets that are accessible to young children.

(t) Paint and plaster are in good repair so that there is no danger of children putting paint or plaster chips in their mouths or of it getting into their food.

(u) There is one operating smoke detector on each floor of the home or facility. Such detectors will be checked regularly to insure proper operation.

(v) The home or facility is equipped with a portable first aid kit that is accessible for emergency treatment. The first aid kit is stocked to treat a broad range of injuries and situations and will be restocked as necessary. The first aid kit and any other first aid supplies are kept in a clean container or cabinet not accessible to children.

(w) The caregiver shall not provide child care to any child unless the caregiver has been furnished with a statement signed by a physician or other authorized individual who specifies that the child has received age appropriate immunizations in accordance with New York State Public Health Law or a statement signed by a physician or other authorized individual who indicates that one or more of the immunizations would be detrimental to the child’s health, or the child’s caretaker provides a statement indicating that the child has not been immunized due to the caretaker’s religious beliefs.

(x) Stairs, railings, porches and balconies are in good repair.
(y) The caretaker and the caregiver certified in writing that to the best of their knowledge, all statements made on the enrollment or re-enrollment form and any attachments thereto are accurate and true. Any false information, certified and attested to by the caregiver or the caretaker on either the enrollment or re-enrollment form or any attachment thereto, may result in the caregiver being denied enrollment or the termination of the caregiver’s enrollment by the legally-exempt caregiver enrollment agency and/or the social services district terminating child care subsidy payments and/or taking legal action against the caregiver or caretaker.

(z) The caregiver may not administer medication to any child in his or her care except to the extent that the caregiver is authorized under the Education Law to administer medications or has met the requirements for the administration of medications as defined in section 418-1.11 of this Title.

(vi) To be enrolled by or to maintain enrollment with a legally-exempt caregiver enrollment agency to provide child care services to families receiving child care subsidies under the New York State Child Care Block Grant Program, every legally exempt caregiver, employee with a caregiving role, and volunteer with the potential for regular and substantial contact with children in care, except for a grandparent, great grandparent, sibling (if living in a separate residence), aunt, or uncle providing care pursuant to 415.1(h), must complete Office-approved training that complies with the federal minimum health and safety pre-service training requirements.

(a) For informal child care programs enrolled at the time this regulation becomes effective, the required individuals must complete the Office-approved training by September 30, 2017.

(b) For applicants seeking to be enrolled as an informal child caregiver after this regulation becomes effective, the required individuals must complete the Office-approved training pre-service or by September 30, 2017, whichever is later.

(c) For legally-exempt group child care programs enrolled at the time this regulation becomes effective, the required individuals must complete the Office-approved training by September 30, 2017. Any individual who does not complete the training by September 30, 2017 must not be left unsupervised with children in care until such time as the training has been completed. The person supervising the individual must have completed the Office-approved training that complies with the federal minimum health and safety pre-service training requirements.

(d) For applicants seeking to be enrolled as a legally-exempt group child care program after this regulation becomes effective, the required individuals must complete the Office-approved training pre-service or by September 30, 2017, whichever is later. Any required individual who has not completed the training by September 30, 2017 must not be left unsupervised with children in care until such time as the training has been completed. The person supervising the individual must have completed the Office-approved training that complies with the federal minimum health and safety pre-service training requirements.

(8) Additional health and safety requirements for caregivers of informal child care.

(i) A legally-exempt caregiver enrollment agency must refer a caregiver of informal child care to the child and adult care food program (42 USC 1758, 1759[a], 1762[a], 1765, and 1766) at initial enrollment of any caregiver not currently enrolled, or at the annual re-enrollment of any currently enrolled
caregiver. If the caregiver is or becomes a participant in the child and adult care food program, the caregiver must provide the legally-exempt caregiver enrollment agency with a copy of documentation of participation in the program. A legally-exempt caregiver enrollment agency must verify the caregiver's documentation to determine whether the caregiver is a participant in the child and adult care food program.

(ii) Upon applying for enrollment, and as part of the annual re-enrollment process, a legally-exempt caregiver enrollment agency must verify the information in the attestation of each caregiver of informal child care to determine if the caregiver's parental rights have been terminated, or if a child(ren) was removed from his or her care by court order under article 10 of the Family Court Act.

(a) The legally-exempt caregiver enrollment agency will request that the applicable social services district conduct a child welfare database check of the caregiver and provide the applicable social services district with such available information about the caregiver as is necessary to complete the database check to determine whether the caregiver has had his or her parental rights terminated or had a child removed from his or her care by court order under article 10 of the Family Court Act. The district must provide the legally-exempt caregiver enrollment agency with the results of the child welfare database check within 15 days of receiving the request.

(1) When the check of the district's child welfare database reveals that the caregiver has had his or her parental rights terminated or had a child removed from his or her care by court order under article 10 of the Family Court Act, the district shall provide the specific office mandated information on the foster care and/or court records concerning the caregiver's termination of parental rights and the removal of the child from the caregiver's home to the legally-exempt caregiver enrollment agency for the purposes of determining whether to enroll the caregiver.

(2) When the check of the district's child welfare database reveals that the caregiver has had his or her parental rights terminated or had a child removed from his or her care by court order under article 10 of the Family Court Act, the caregiver must provide the caretaker and the legally-exempt caregiver enrollment agency true and accurate information regarding the reasons underlying the loss of parental or custodial rights, if such information has not already been provided to the caretaker and the legally-exempt caregiver enrollment agency. A legally-exempt caregiver enrollment agency must determine, based on guidelines issued by the office, whether to enroll a caregiver who has had such a loss of parental or custodial rights.

(iii) Upon applying for enrollment, and as part of the annual re-enrollment process, a legally exempt caregiver enrollment agency will:

(a) Check each caregiver against the office's child care facility system to determine whether the caregiver has ever been denied a child day care license or registration or had a child day care license or registration suspended or revoked. When the check of the office's child care facility system reveals that the caregiver has been denied a child day care license or registration or had a child day care license or registration revoked or suspended, the caregiver must provide the caretaker and the legally-exempt caregiver enrollment agency true and accurate information regarding any such denial, revocation or suspension, including a description of the reason for denial, revocation or suspension, the date of the denial, revocation or suspension, and any other relevant information, if such information has not already been
provided to the caretaker and the legally-exempt caregiver enrollment agency. A legally-
exempt caregiver enrollment agency must determine whether to enroll a caregiver who has
had such a license or registration denied, suspended or revoked based on guidelines issued
by the office.

(b) Check each caregiver of informal child care, any employee of the caregiver, any volunteer
who has the potential for regular and substantial contact with children in care, and for
caregivers of legally-exempt family child care, each household member age 18 or older
against the New York State Sex Offender Registry maintained by the New York State Division
of Criminal Justice Services, via the Registry's toll free telephone number to determine if such
caregiver, any employee of the caregiver, any volunteer who has the potential for regular
and substantial contact with children in care, and for caregivers of legally-exempt family child
care, each household member age 18 or older is listed on the New York State Sex Offender
Registry. When the New York State Sex Offender Registry reveals that a caregiver, any
employee of the caregiver, any volunteer who has the potential for regular and substantial
contact with children in care, or for caregivers of legally-exempt family child care, a
household member is listed on the Sex Offender Registry for committing a sex offense, the
legally-exempt caregiver enrollment agency may not enroll such a caregiver.

(iv) On an annual basis, the applicable legally-exempt caregiver enrollment agency must conduct on-site
inspections including reviewing the immunization records of at least 20 percent of the currently
enrolled legally-exempt family child care caregivers, as defined in this Part, in the applicable district
who do not participate in the child and adult care food program to determine whether such caregivers
are in compliance with the health and safety standards set forth in this section.

(a) The office will provide by January 31st of each year to the legally-exempt caregiver
enrollment agency instructions for compiling a list of the caregivers that must be inspected
and a minimum unduplicated number of providers that must be inspected. The legally-
exempt caregiver enrollment agency must complete the inspections and report the results of
the inspections in a manner and format as specified by the office by December 31st of each
year.

(b) If the legally-exempt caregiver enrollment agency finds that a caregiver is non-compliant
with any requirements of this section, the legally-exempt caregiver enrollment agency will
assist the caregiver in working towards compliance, in the manner and according to the
timeframes established by the office. If the caregiver does not come into compliance with
the requirements within the required timeframes, the legally-exempt caregiver enrollment
agency will terminate the enrollment of the caregiver and notify the appropriate district of
that the caregiver's enrollment has been terminated.

(g)

(1) Where a social services district is subsidizing child care services pursuant to any of the provisions of this Part,
the district may submit to the office justification for a need to impose additional requirements on child care
providers providing subsidized child care services and a plan to monitor compliance with such additional
requirements. A social services district may make participation in the child and adult care food program a
condition of enrollment for each caregiver of informal child care who will be providing an average in excess
of 30 hours of care per week to one or more subsidized children provided the district sets forth this
requirement in the district's consolidated services plan or integrated county plan. No such additional
requirements or monitoring may be imposed without the written approval of the office.
(2) To the extent that a social services district has established any additional standards for caregivers of legally-exempt child care, the district's monitoring process must include procedures for notifying the applicable legally-exempt caregiver enrollment agency if the district determines that such a caregiver is not in compliance with an additional standard. Any such procedures established by the social services district may not extend the timeframes set forth in subdivision (f) of this section for legally-exempt caregiver enrollment agency to review an enrollment package.

(h)

(1) A social services district may refuse to allow a child care provider that is not in compliance with this section and regulations promulgated by the office, or any approved additional requirements of the social services district, to provide subsidized child care services to a child.

(2)

(i) A social services district may disqualify a provider from receiving payment for child care services provided under the child care subsidy program if a provider:

(a) is criminally convicted of fraud;

(b) is found to be civilly liable for fraud;

(c) has voluntarily admitted to filing a false claim for reimbursement for child care services;

(d) has been disqualified from the Child and Adult Care Food Program, by the New York State Department of Health and/or its sponsoring agency, for submission of false information on the application, submission of a false claim for reimbursement or failure to keep required records;

(e) has failed to comply with the terms of a repayment plan with the social services district; or

(f) has a conviction of any activity that occurred in the past seven (7) years that indicated a lack of business integrity; or

(g) has been found by a social services district, after the social services district has conducted an administrative review in accordance with subparagraph (ii) of this paragraph, to have submitted a false claim(s) to a social services district for reimbursement.

(ii) An administrative review by a social services district must include the following:

(a) A review of the claims submitted to the social services district and any other information or documentation obtained by the social services district to determine the accuracy of the information contained in the claims; and if a social services district determines after such a review that a provider submitted inaccurate information in the claims, then a preliminary review report must be prepared by a social services district and sent to the child care provider that is the subject of the review for a response.
415.4(h)(2)(ii)(b)

(b) A child care provider must be given 20 days, from the date the district sent the preliminary review report to respond to the report. A child care provider may respond in writing presenting evidence and arguments that the provider believes refute the findings of the preliminary review report, or may request a formal review by a social services district, which allows a provider, in person, to present evidence and arguments in support of his/her position.

(c) If no response from a provider is received by a social services district within 20 days from the date of the postmark of the preliminary review report, the report may be finalized by a social services district. A final report, issued under this subclause, may be the basis for a social services district to disqualify a provider from providing subsidized child care.

(d) If a response from a provider is received by a social services district within 20 days from the date of the postmark of the preliminary report, the social services district must review and evaluate the response and may make appropriate changes based on the response from the provider, before issuing a final review report. Upon completion of the review, the social services district shall issue a final review report, such report must be sent to the child care provider that is the subject of the review.

(e) A child care provider, upon receipt of a final review report, must be given 10 days from the date of the postmark of the final review report to respond, and to request a formal review by the social services district. A final review report issued under this subclause, where a provider does not request a formal review within the 10-day specified timeframe, or does not provide a response that disproves the findings of said report, may be the basis for a social services district to disqualify a provider from providing subsidized child care.

(f) A social services district, upon receipt of a request for a formal review by a provider found in a final review report to have submitted inaccurate claims, must conduct such a review within 30 days of receipt of the request.

(g) A social services district at a formal review must allow a provider, in person, to present evidence and arguments in support of the provider’s position.

(h) A social services district, after a formal review and after reviewing the evidence and arguments supplied by a provider at a formal review must make a final determination of whether a provider submitted false claims. A final determination that a provider submitted false claims may be the basis for a social services district to disqualify a provider from providing subsidized child care.

(iii) A provider who has been disqualified from receiving payment for child care services provided under the child care subsidy program by a social services district under subparagraph (i) of this paragraph is ineligible to receive such payments through any social services district for five years from the date of the disqualification, if such a provider made full restitution of any and all falsely obtained funds to the social services district. If such a provider did not make full restitution to a social services district, then the provider will remain ineligible to provide subsidized child care.

(iv) A social services district that disqualifies a provider from receiving a payment for child care services provided under the child care subsidy program must provide appropriate information concerning the disqualification to the appropriate regional office of the Office’s Division of Child Care Services if the provider is a licensed or registered day care provider, or to the appropriate legally-exempt caregiver.
enrollment agency if the provider is a legally-exempt child care provider.

(3) In accordance with a plan approved by the office, a social services district will have the right to make announced or unannounced inspections of the records and premises of any provider that provides care for subsidized children, including the right to make inspections prior to subsidized children receiving care in a home where the inspection is for the purpose of determining whether the child care provider is in compliance with applicable laws and regulations and any additional requirements imposed on such a provider by the social services district. A social services district must notify the office immediately of any violations of regulations and must provide the office with an inspection report documenting the results of such inspection.

(4) Nothing contained in this Part will diminish the authority of the local social services district from referring a matter to the appropriate district attorney or law enforcement agency.

(i) Overpayments.

(1) The social services district must take all reasonable steps to correct promptly any overpayments for child care services to a child's caretaker or a child care provider.

(2) Overpayments must be recovered through:

   (i) repayment by the child's caretaker or child care provider; or

   (ii) by recovery through a reduction in the amount of the payment to the child's caretaker or child care provider; provided, however, that no recovery of overpayments may be made from a child care provider where a contract for such child care services obligates the social services district to make full payment. When no recovery may be made from a child care provider because a contract requires full payment, and repayment is not made from the child's parent or caretaker, Federal financial participation (FFP) and State reimbursement cannot be claimed for such overpayment.

(3) In recovering overpayments for child care services from child care recipients, social services districts must ensure that the child care recipients retain, for any month, a reasonable amount of funds.

(4) Recoupment of such overpayment can be made only from child care benefits unless the child care recipient voluntarily requests that such recovery be made from his or her available income.

(5) Overpayments must be recovered from the caretaker(s) on whose behalf the payments were made or the provider(s) who received payment for such services, so long as caretaker(s) or provider(s) are deemed responsible for such overpayments whether by acts of omission or commission.

(6) Overpayments to child care providers or former recipients of child care services who refuse to repay may be recovered in accordance with the legal remedies available under State law.

(7) When an overpayment occurs as a result of a district's failure to act promptly on information provided by a parent or caretaker regarding circumstances affecting child care benefits, no recovery shall be made from the party who provided such information. When a recovery cannot be made under this subdivision, Federal financial participation (FFP) and State reimbursement cannot be claimed for such overpayment.

(8) Underpayments and overpayments may be offset against each other.
(9) In all cases involving current child care services recipients, in all cases of fraud, and in all cases where the overpayment would equal or exceed the cost of recovery of the overpayment, the recovery of an overpayment must be attempted.

(10) Each social services district must collect and maintain information on the collection of overpayments and make appropriate adjustments when claiming FFP and State reimbursement, and when satisfying the district's maintenance of effort requirement under the New York State Child Care Block Grant Program as set forth in section 415.7 of this Part.

(11) An applicant for child care services who has not repaid past overpayments for previous child care services that resulted from:

(i) the failure of the applicant, or member(s) of the applicant's family unit, to promptly notify the social services district of a change in circumstances; or

(ii) from child care services fraud by the applicant or member(s) of the applicant's family unit must agree to, and comply with, a plan to make full payment of such overpayments as a condition of being eligible for the new child care services.

(12) With the exception of child care services authorized as a child protective or preventive service, a recipient of child care services who fails to agree to a reasonable plan for repayment or recovery of an overpayment, or who fails to comply with an agreed upon plan, must have their child care benefits suspended or terminated until such time as the recipient comes into compliance with such a plan.

(13) With the exception of child care services authorized as a child protective or preventive service, a recipient or former recipient of child care services who has been convicted of, or has voluntarily admitted to, fraudulently receiving child care services must have their child care services, if any, suspended or terminated and will not be eligible for subsequent child care services for a period of time determined in accordance with the time periods established for intentional program violations set forth in section 359.9(a) of this Title. If such recipient or former recipient is a recipient of temporary assistance and needs child care in order to participate in an activity required by the social services district, the disqualification of eligibility for child care services based on the former fraud conviction or voluntary admission will be suspended during the recipient’s or former recipient’s participation in the required activity. However, the disqualification period will begin or resume once the recipient or former recipient is no longer participating in a required activity.

(14) Overpayments for child care services made as a result of payment for aid continuing for a caretaker who loses a fair hearing must be recovered as prescribed in this subdivision.

(j) Due process requirements.

(1) Written notice of the determination of eligibility, the family share to be paid by the applicant, or ineligibility for child care services, as well as any modifications thereto, must be sent to the applicant or recipient in accordance with section 404.1(f) of this Title. Recipients of child care services must receive timely and adequate notice of any change in child care services, except that changes in the manner of payment for child care services by a social services district may be made with only adequate notice pursuant to section 358-3.3 of this Title, unless those changes result in a discontinuation, suspension, reduction or termination of such benefits, or force a change in child care arrangements.

(2) An applicant for or recipient of child care services must be notified of the right to a fair hearing in accordance
with Part 358 of this Title whenever there is a determination affecting his or her family's eligibility for child care services.

(k) Nothing contained in this Part will diminish the authority of the office to conduct inspections of licensed or registered child care providers or to provide for such inspections through purchase of services in accordance with section 390 of the Social Services Law. Nothing contained in this subdivision will obligate the office to take any action to enforce any additional requirements imposed by a social services district on child care providers providing care to children receiving child care subsidies.

(l) Social services districts must describe how they will examine and verify the accuracy of information contained in the enrollment forms completed by legally-exempt providers. This information must be described in the district’s consolidated services plan or integrated county plan.

(m) Each social services district must establish comprehensive fraud and abuse control activities for the district’s child care subsidy program. A social services district must provide details on its comprehensive fraud and abuse control activities in the district’s consolidated services plan or integrated county plan, which must include, but not be limited to:

(1) identification of the criteria the social services district will use to determine which child care subsidy applications suggest a higher than acceptable risk for fraudulent or erroneous child care subsidy payments and procedures for referring such applications to the district’s front end detection system;

(2) a sampling methodology to determine which cases the social services district will seek verification of an applicant or recipient’s continued need for child care including, as applicable, verification of participation in employment, education or other required activities; and

(3) a sampling methodology to determine which caregivers of subsidized child care services the social services district will review for the purpose of comparing the caregiver’s attendance forms for children receiving subsidized child care services and any child and adult care food program inspection forms to verify that child care was actually provided on the days listed on the attendance forms.

Section 415.5. Methods of making payment for child care services

(a) Each social services district may provide child care services directly or may pay for such services in accordance with the provisions of this section applicable to the particular child care services program.

(1) For child care services provided under the New York State Child Care Block Grant Program, payment may be made by one or more of the following methods:

(i) by advance cash payments, cash reimbursements or vouchers to the child's caretaker for care provided by an eligible provider and supported by a bill signed by both the child’s caretaker and the provider; provided, however, that a caregiver of informal child care or of legally-exempt group child care must be enrolled with the social services district pursuant to section 415.4 of this Part before payment may be made for such services; or

(ii) by a purchase of services contract or letter of intent in accordance with section 405.3 of this Title, or by advance cash payments, cash reimbursements or vouchers to an eligible provider; provided, however, that a caregiver of informal child care or of legally-exempt group child care must be enrolled with the social services district pursuant to section 415.4 of this Part before payment may be made for such services.
(2) The provisions in section 159 of the Social Services Law precluding the payment of cash assistance for certain families in receipt of safety net assistance do not apply to the payment of child care services for such families.

(3) A social services district must establish at least one method of payment by which payment for child care services arranged by the child's caretaker can be made.

(b) [Reserved]

(c) For child care services provided under title XX of the Federal Social Security Act or provided as child protective services or preventive services funded other than under the New York State Child Care Block Grant Program, payment must be made by a purchase of services contract or letter of intent in accordance with section 405.3 of this Title.

(d) Attendance and payment records must be monitored for all providers receiving payment for child care services regardless of the method of payment.

Section 415.6. State reimbursement

(a) A change in the rate of payment based on a change in the age of a child is effective in the first full month following the date in which the child becomes 1 1/2 years of age or the date of the child's birthday, whichever is applicable.

(b) Reimbursement for payment on behalf of children who are temporarily absent from child care is allowable subject to the following conditions:

(1) The provider rendering the child care services must be duly licensed, registered or enrolled to provide child care services and the social services district has opted to make such payments. If a social services district opts to make such payments, it may choose to make such payments either to those child care providers with which the social services district has a contract or letter of intent only, or to all providers of subsidized child care services except for caregivers of informal child care. The social services district must specify in its consolidated services plan or integrated county plan whether it opts to make such payments and, if applicable, for which providers such payments will be made.

(2) The social services district has specified in its contract or written agreement with the provider or through written notice to the provider that payment is allowable in cases of temporary absences from child care.

(3) Except in cases of extenuating circumstances defined below, temporary absences from child care are allowed up to 12 days in any one calendar month; provided, further, that such absences may total no more than 12 days in any three-month period if the social services district selects a three-month period for determining maximum temporary absences, or 24 days in any six-month period if the social services district selects a six-month period for determining maximum temporary absences.

(4) Extenuating circumstance means a situation or occurrence verified by the social services district, and noted in the child's services plan, in which a child is temporarily absent from child care for one or more of the following reasons:

   (i) the social services district determines that the child is unable to attend child care because it is necessary for the child or the child’s caretaker to appear in court or to keep other appointments related to the provision of preventive, foster care, adoption, or child protective services, or other
needs as set forth in the child's services plan;

(ii) the child is ill, has a handicapping or other condition which requires medical care and/or treatment, or the child requires routine medical care and/or treatment;

(iii) the child's family is homeless, and the homelessness necessitates the child's absence from child care; or

(iv) the child's caretaker is participating in an approved education or training program and the child's absences coincide with a temporary suspension of such program for purposes including, but not limited to, holidays, school conferences and snow days.

(5) Where it is determined that an extenuating circumstance or circumstances exists, reimbursement for temporary absences due to such circumstance or circumstances will be permitted for an additional three days in any one calendar month; provided, further, that all absences may total no more than 20 days in any three-month period if the social services district selects a three-month period for determining maximum temporary absences, or 40 days in any six-month period if the social services district selects a six-month period for determining maximum temporary absences.

(6) Under no circumstances will reimbursement for temporary absences be permitted in excess of the limits set forth in paragraph (5) of this subdivision unless the office and social services district expressly consent to such reimbursement.

(7) A social services district must select one of the alternative periods in paragraph (3) of this subdivision as the basis on which it will maintain records and seek reimbursement. No combination of methodologies is permitted within a district. Once a methodology is selected, no change may be made until the end of the annual program year as defined in the Comprehensive Annual Social Services Program Plan.

(8) For purposes of this section, a social services district may establish the three-month or the six-month periods used in determining maximum temporary absences on either of the following bases:

(i) beginning on the date of a child's admission to child care and ending three or six months later depending on the period selected; or

(ii) beginning on a fixed calendar date for all children entering child care and ending three or six months later depending on the period selected. If this basis is chosen, a child entering child care during a quarterly or semiannual cycle may, during that initial cycle, receive a prorated number of days of absence beginning on the date of entry and ending on the last day of the quarterly or semiannual cycle. All temporary absences thereafter will be computed using the normal quarterly or semiannual cycle.

(9) Reimbursement is not available for a day a child is absent from care if the provider ordinarily charges the caretaker on a daily or part-time basis and the child for whom reimbursement is requested is otherwise in need of and receives subsidized child care from a different provider on the same day.

(c) Reimbursement for payments to licensed or registered or legally-exempt group programs during program closures also is allowable subject to the following conditions:

(1) The social services district has opted to make such payments. If a social services district opts to make such payments, it may choose to make such payments either to those child care providers with which the social
services district has a contract or letter of intent or to all providers of subsidized child care services except for
caregivers of informal child care. The social services district must specify in its consolidated services plan or
integrated county plan whether or not it opts to make such payments and, if applicable, for which providers
such payments will be made.

(2) The program closure is due to a State, Federal or nationally recognized holiday or due to extenuating
circumstances beyond the provider’s control including but not limited to:

(i) natural disaster;

(ii) severe weather; or

(iii) other emergency closings that are due to circumstances other than a substantiated regulatory
violation.

(3) Reimbursement is available only for children in receipt of a child care subsidy who would otherwise be
present at the child care program.

(4) Reimbursement is not available for a day the program is closed if the provider ordinarily charges the
caretaker on a daily or part-time basis and the child for whom reimbursement is requested is otherwise in
need of and receives subsidized child care services from a different provider on the same day.

(5) The maximum number of days allowable under this section is five per annum.

(6) The district must maintain a record of the payments made under this provision for each provider in order to
receive reimbursement.

(d) Special reimbursement requirements specific to the title XX Social Services Block Grant Program.

(1) State reimbursement for child care services provided under title XX of the Federal Social Security Act will be
available for 100 percent of allowable costs up to the amount of the social services district’s annual title XX
Social Services Block Grant allocation, or as otherwise provided by State law.

(2) When a client is determined to be eligible for child care services under the title XX Social Services Block
Grant, payment must be claimed for reimbursement in accordance with the State instructions relating to
such title.

(e) Payments by a social services district for child day care, informal child care and legally- exempt group child care
are subject to reimbursement only when the following requirements are met:

(1) Payments do not exceed the actual cost of care. For purposes of this Part, the actual cost of care is:

(i) for care provided pursuant to a contract between the social services district and the provider, the
payment rate set forth in the contract;

(ii) for care provided other than pursuant to a contract between the social services district and the
provider, the amount charged to the general public for equal care in the providing facility or home;
provided, however, if the facility or home cares only for subsidized children, then the actual cost of
care is the amount the provider currently is receiving from the social services district for such children
unless the provider can demonstrate to the social services district that the actual cost of providing care
to such children is higher than that amount.
(2) Payments for child day-care or child care services for eligible families/children do not exceed the amount charged to the general public for equal care in the providing facility or home.

(3) Payments per child for child day care in a day care center (DCC), a family day care home (FDC), a group family day care home (GFDC), a school-age child care program (SACC) and for informal child care and legally-exempt group child care do not exceed the applicable rates for the type of child care provider used and the age of the child set forth in section 415.9 of this Part.

(4) Payments cannot be made when such care is provided by a child's parent, stepparent, legal guardian, caretaker relative, person in loco parentis to the child, or another member of the child care services unit other than the child's sibling.

(5) Payments cannot be made when such care is provided by a member of the public assistance unit including essential persons as referred to in section 369.3(c) of this Title.

**Section 415.7. Additional requirements for the New York State Child Care Block Grant Program**

(a) For child care services provided under the New York State Child Care Block Grant Program. State reimbursement to a social services district will be available, up to the social services district’s annual block grant allocation for 75 percent of allowable costs for child care services provided to families in receipt of public assistance and for 100 percent of allowable costs for child care services provided to all other eligible families. Allowable program costs include the following costs of providing child care services:

   (1) eligibility determinations and re-determinations;

   (2) participation in adjudicatory and judicial hearings;

   (3) child care placements including transportation to such placements;

   (4) inspection, review and supervision of child care placements including monitoring compliance with any additional local child care requirements imposed pursuant to section 415.4(f) of this Part;

   (5) training of social services district staff; and

   (6) the establishment of computerized child care information systems.

(b) A social services district must expend its allocation from the New York State Child Care Block Grant in a manner that provides for equitable access to child care services funds to eligible families.

(c) A social services district may spend no more than five percent of its annual block grant allocation for administrative activities. The term administrative activities does not include the costs of providing child care services set forth in subdivision (a) of this section. Administrative activities include, but are not limited to the following:

   (1) providing local officials and the public with information about the program;

   (2) conducting public hearings;

   (3) monitoring program activities for compliance with program requirements;
(4) maintaining substantiated complaint files;

(5) coordinating the resolution of audit and monitoring findings;

(6) evaluating program results;

(7) managing or supervising persons with responsibilities set forth in paragraphs (1) through (6) of this subdivision;

(8) travel costs incurred for official business in carrying out the program; and

(9) other costs for goods and services required for the administration of the program including rental or purchase of equipment, utilities, and office supplies.

(d) Any claims for child care services made by a social services district for expenditures during a particular Federal fiscal year, other than claims made under title XX of the Federal Social Security Act, will be counted against the social services district's New York State Child Care Block Grant for that Federal fiscal year. A social services district's New York State Child Care Block Grant allocation for a particular Federal fiscal year is available only for child care services expenditures made during that Federal fiscal year that are claimed in the form and manner and at such times required by the office. Any portion of a social services district's New York State Child Care Block Grant allocation for a particular Federal fiscal year that is not claimed by the time required by the office will be available to the district for New York State Child Care Block Grant expenditures for the next Federal fiscal year.

(e) Each social services district must maintain the amount of local funds spent for child care assistance under the New York State Child Care Block Grant Program at a level equal to or greater than the amount the district spent for child care assistance during Federal fiscal year 1995 under title IV-A of the Federal Social Security Act, the Federal Child Care and Development Block Grant Program and the State Low Income Child Care Program. Each social services district's claims submitted under the New York State Child Care Block Grant will be processed in a manner that maximizes the availability of Federal funds and ensures that the district meets its maintenance of effort requirement in each applicable Federal fiscal year.

(f) When offering child care services under the New York State Child Care Block Grant Program to a family eligible to receive such services, a participating social services district must offer the child's caretaker the choice either:

(1) to enroll the child with an eligible child day care provider which has a contract with the social services district for the provision of such services; or

(2) to receive a child care certificate, as defined in section 415.1(n) of this Part, which permits the child's caretaker to arrange child care services with any eligible provider.

(g) When a child's caretaker elects to use a child day care provider which has a contract with the social services district for the provision of child care services, the child must be enrolled with the provider selected by such caretaker to the maximum extent practical.

(h) When a child's caretaker elects to use a child care certificate to arrange child care services, the social services district must issue such certificate directly to the caretaker.
Section 415.8. Special provisions relating to public assistance recipients

(a) A social services district must guarantee child care services to a family who has applied for or is in receipt of public assistance when such services are needed for a child under 13 years of age in order to enable the child's custodial parent or caretaker relative to participate in activities required by a social services official pursuant to title 9-B of article 5 of the Social Services Law.

(b) A social services district may not reduce or terminate public assistance to an individual or an individual and the family of such individual based on a refusal of the individual to comply with applicable work requirements if the individual is a custodial parent or caretaker relative of a child under 13 years of age and the individual has a demonstrated inability, as determined by the social services district, to obtain child care needed to comply with such work requirements due to the following reasons:

1. unavailability of appropriate and accessible child care within a reasonable distance from the individual's home or work site;

2. unavailability or unsuitability of informal child care by a relative or under other arrangements; and

3. unavailability of appropriate and affordable formal child care arrangements.

(c) The social services district must inform the family:

1. about the exception to the penalties associated with the work requirement if the family is unable to locate child care needed to comply with applicable work requirements including the procedures used to demonstrate an inability to obtain child care and the definitions of the terms "appropriate," "accessible," "reasonable distance," "unsuitability of informal child care" and "affordable"; and

2. that any family assistance received during the time the parent or caretaker relative receives an exception from the work requirements under this section will count toward the family's 60-month limit on receiving such benefits.

(d) It is the responsibility of the parent or caretaker relative to locate child care for the applicable child(ren) needed to comply with such work requirements.

(e) If such parent or caretaker relative cannot locate the needed child care on his or her own, the parent or caretaker relative must inform the social services district of his or her efforts to locate such care and request additional assistance in locating care.

(f) When a parent caretaker relative requests assistance from the social services district in locating child care due to an inability to locate the needed child care on his or her own, the social services district must:

1. assist the family by referring the parent or caretaker relative to the child care resource and referral agency funded under title five-B of article six of the Social Services Law that is responsible for the areas in which the parent or caretaker relative lives and/or would be expected to work or to another appropriate child care referral agency; and/or

2. provide the parent or caretaker relative with a list of names, addresses and telephone numbers of eligible providers.

(g) The parent or caretaker relative must follow-up on all referrals from the social services district, child care resource
and referral agency and/or other child care referral agency, as applicable, and must report his or her success or failure to the social services district. In order to be excused from complying with the applicable work requirements, the parent or caretaker relative must have a demonstrated inability, as determined by the social services district, to locate the needed child care for the applicable child(ren) despite the referrals from the social services district, the child care resource and referral agency and/or any other child care referral agency, as applicable.

(h) If the parent or caretaker relative has a demonstrated inability, as determined by the social services district, to locate the child care needed for the applicable child(ren) despite such referrals, the social services district must offer the parent or caretaker relative two choices of eligible child care providers at least one of which must be a licensed or registered provider.

(1) If the parent or caretaker relative is unwilling to accept child care services from either of these providers; is unable to demonstrate, as determined by the social services district, that such child care is not appropriate, accessible, suitable, affordable or a reasonable distance from the individual's home or work site; and the individual fails to comply with the applicable work requirements, then the social services district may reduce or terminate public assistance to such parent or caretaker relative and/or that individual's family in accordance with applicable statutory or regulatory provisions.

(i) A social services district must determine that a parent or caretaker relative has a demonstrated inability to locate needed child care if all of the following conditions are met:

(1) the parent or caretaker relative has provided an attestation that he or she has contacted those accessible and suitable friends, neighbors and relatives who are within a reasonable distance of the individual's home or work site and who have the potential to act as informal child care providers for the applicable child(ren) but those individuals are not appropriate or affordable. The attestation must include a list of the friends, neighbors and relatives the parent or caretaker relative contacted; and

(2) the parent or caretaker relative has provided an attestation that he or she has contacted all of the child care providers to which the parent or caretaker relative was referred by the social services district, a child care resource and referral agency and/or any other child care agency, as applicable. The attestation must specify each potential provider contacted and the reasons why that provider is not appropriate, accessible, suitable, affordable or a reasonable distance from the individual's home or work site.

(j) The social services district must review and verify the attestations provided by the parent or caretaker relative. If the attestations validly document the unavailability of appropriate, accessible, suitable, affordable child care within a reasonable distance from the individual's home or work site, the district must excuse the parent or caretaker relative from the applicable work requirements.

(k) A parent or caretaker relative who has been excused from the applicable work requirements due to a demonstrated inability to locate needed child care for his or her applicable child(ren) will be excused from the work requirements only for so long as that demonstrated inability continues to exist.

(1) A parent or caretaker relative who has been excused from the applicable work requirements due to a demonstrated inability to locate needed child care for his or her applicable child(ren) will be excused from the work requirements only for so long as that demonstrated inability continues to exist.

(2) The parent or caretaker relative must document to the social services district, through the submission of new attestations in accordance with section 415.8(i) on a periodic basis as set forth by the social services district, that the parent or caretaker relative is continuing to attempt to locate the needed child care including following up on all new referrals from the social services district, child care resource and referral agency, and/or any other child care agency, as applicable, and by responding to all offers of child care from the social...
services district. New attestations must be submitted in accordance with a schedule developed by the district based on the parent's or the caretaker relative's employment plan.

(l) For the purposes of this section, the following definitions apply:

(1) Applicable child(ren) means the child(ren) under 13 years of age who are residing with a custodial parent or caretaker relative and who need child care in order for the parent or caretaker relative to comply with the applicable work requirements.

(2) Appropriate means the child care provider(s) is open for the hours and days the parent or caretaker relative would need child care in order to comply with the applicable work requirements and the provider(s) is able and willing to provide child care services to the applicable child(ren) including addressing any special needs of the applicable child(ren).

(3) Accessible means the parent or caretaker relative is able, by available public or private transportation, to get the applicable child(ren) to and from the child care provider(s) taking into consideration the age and any special needs of the child(ren).

(4) Reasonable distance means the child care provider(s) is located within a reasonable distance from the parent or caretaker relative's home and work activity, based on locally accepted community standards, as defined by the social services district in the district's consolidated services plan.

(5) Unsuitability of informal child care means the physical condition of the home in which care would be provided, or the physical or mental condition of the informal provider, would be detrimental to the health, welfare and/or safety of the applicable child(ren).

(6) Affordable means the parent or caretaker relative would have sufficient income to pay the family share for the child care services determined in accordance with section 415.3(e) of this Part, if required, and/or to pay the cost of care above market rate, if applicable. If the potential provider is a provider of informal child care who would be providing care in the child(ren)'s home, affordable also means that the parent or caretaker relative would have sufficient income to pay the provider at least minimum wage, if required by State and/or Federal law, and to provide such provider with all employment benefits required by State and Federal law.

Section 415.9. Rates

A social services district has the option to apply the weekly or daily rate, except as provided below, when care is provided for 30 or more hours per week on five or less days. When care is provided for less than 30 hours per week, the daily, part-day or hourly rates must be applied, as applicable.

(a) Weekly rates must be applied when care is provided for 30 or more hours for five or less days per week.
Weekly rates also must be applied when child care services are provided for 30 or more hours per week by a child care provider who routinely charges nonsubsidized parents on a weekly basis and who has not signed a purchase of service contract or other written agreement for payment on a different basis.

(b) Daily rates must be applied if care is provided for at least six but less than twelve hours per day, and care is provided for less than 30 hours per week. When child care services are provided for 30 or more hours per week by a child care provider who routinely charges nonsubsidized parents on a daily basis and who has not signed a purchase of service contract or other written agreement for payment on a different basis, the weekly rates divided by five must be applied.
(c) Part-day rates must be applied when the child care services are provided for at least three but less than six hours per day. Part-day rates also must be applied for children who are attending pre-kindergarten, kindergarten or higher grade and who are provided care before and/or after school for less than three hours per day by day care centers or school-age child care programs that do not charge on an hourly basis.

(d) With the exception noted in subdivision (c) of this section, the hourly rates in this section must be applied when child care services are provided for less than three hours per day.

(e) Where child care services provided by a single provider exceed one weekly or daily period as set forth in this section, payment for the additional child care services will be based on the actual cost of care up to the applicable rate for the type of child care provider used, the age of the child and the amount of time the child care services are provided.

(f) Where child care services are provided by multiple providers, reimbursement will be made for the actual cost of such services up to the applicable rate for each child care provider used. However, if the combined reimbursement to the multiple providers would exceed one weekly market rate, in order to receive such reimbursement the parent or caretaker must demonstrate that the schedule of employment of the parent or caretaker or the special needs of the child necessitates that child care services be arranged with multiple providers. If the social services district determines that the parent or caretaker has not demonstrated that there is a necessity to use multiple providers, reimbursement is limited to one weekly market rate that is applicable for the type of provider who provides care for the highest number of hours. The social services district will determine how to distribute the reimbursement for the multiple providers.

(g) The rate of payment for child care services provided to a child determined to have special needs is the actual cost of care up to the statewide limit of the highest weekly, daily, part-day or hourly market rate for child care services in the State, as applicable, based on the amount of time the child care services are provided per week regardless of the type of child care provider used or the age of the child.

(h)

(1) A social services district may establish a differential payment rate for child care services provided by licensed or registered child care providers that have been accredited by a nationally recognized child care organization. Legally-exempt child care providers are not eligible for a differential payment rate under this paragraph. If the social services district chooses to provide a differential rate, the differential rate must be at least five percent higher than the actual cost of care or the applicable market rate, whichever is less. The differential rate may not exceed 15 percent of the actual cost of care or the applicable market rate, whichever rate is less.

(2) A social services district must establish differential payment rates for any eligible child care provider as defined in section 415.1(g) of this Part for child care services provided during nontraditional hours (evening, night or weekend hours). The differential rate must be at least five percent higher than the actual cost of care or the applicable market rate, whichever is less. The differential rate may not exceed 15 percent of the actual cost of care or the applicable market rate, whichever is less.

(3) A social services district must establish differential payment rates for licensed and registered child care providers for child care services provided to a child experiencing homelessness. A social services district may establish differential payment rates for legally-exempt child care providers for a child experiencing homelessness. The differential rate for licensed and registered child care providers must be at least five percent higher than the actual cost of care or the applicable market rate, whichever is less. There is no minimum differential rate for legally-exempt child care providers. The
differential rate may not exceed 15 percent of the actual cost of care or the applicable market rate, whichever is less.

(4) The differential payment rates the district sets may be different for each category established in this subdivision. The social services district must indicate in the district's consolidated services plan or integrated county plan the percentage that it will provide for each category. The social services district must indicate the rate that it will provide for child care providers that qualify for multiple differential payment rates, pursuant to this section. The total percentage must not exceed 25 percent of the applicable market rate or the actual cost of care. A social services district may request a waiver from the Office to establish a payment rate that is in excess of 25 percent above the applicable market rate upon a showing that the 25 percent maximum is insufficient to provide access within the district to such child care providers or services, as applicable.

(i) The rate of payment for caregivers of legally exempt group child care is the actual cost of care up to 75 percent of the applicable market rate for day care center providers as set forth in this section.

(j)

(1) Effective June 1, 2016, the following are the local market rates for each social services district set forth by the type of provider, the age of the child and the amount of time the child care services are provided per week.

(2) Upon the effective date of these regulations, there will be two market rates for the legally-exempt family child care and in-home child care categories, a standard market rate and an enhanced market rate. The standard market rate for legally-exempt family child care and in-home child care categories will be 65 percent of the applicable registered family day care market rate. The enhanced market rate for legally-exempt family child care and in-home child care categories will be 70 percent of the applicable registered family day care market rate. The enhanced market rate will apply to those caregivers of legally-exempt family child care and in-home child care who have provided notice to, and have been verified by, the applicable legally-exempt caregiver enrollment agency or by the district for those portions of the district that are not covered by a legally-exempt caregiver enrollment agency, as having completed 10 or more hours of training annually in the areas set forth in section 390-a(3)(b) of the Social Services Law. A social services district has the option, if it so chooses in the child care portion of its child and family services plan, to increase the enhanced market rate for eligible legally-exempt family child care and in-home child care categories to up to 75 percent of the applicable registered family day care market rate:

   (i) for all such providers;

   (ii) for those providers who were receiving the enhanced rate on the date of the regulations but only for the remainder of their current one-year enrollment period; or

   (iii) for those providers who were receiving the enhanced rate on the date of the regulations for the remainder of the time they remain enrolled and continue to meet the 10 hour annual training requirement. The standard market rate will apply to all other caregivers of legally-exempt family child care and in-home child care.

(3) The market rates are established for each of five groupings of social services districts. The rates established for a group apply to all districts in the designated group. The district groupings are as follows*:

*
*See current market rates LCM for this information

(k) When a social services district pays for child care services provided by an eligible provider located in another district, the applicable market rate is the rate for the district in which the child care provider is located.

Section 415.10 Waivers
A social services district may request a waiver of any non-statutory provision of this Part. The waiver must be described in the social services district's consolidated services plan or integrated county plan and must be approved by the office prior to implementation.

Section 415.11 Effective date—Repealed

Section 415.12 Eligible provider responsibilities

(a) An eligible provider that provides child care services to families receiving child care subsidies must comply with the following requirements:

1. An eligible provider must operate their child care program in compliance with the applicable office regulations. Failure to operate in compliance with the office regulations may result in the office taking enforcement action pursuant to section 413.3 of this Title.

2. An eligible provider, on a daily basis, must maintain current and accurate attendance records for each child showing the date of attendance with the time of arrival and departure. Full day absences must also be noted.

3. An eligible provider must certify that all documentation and information provided to a social services district is accurate and true. Any false or fraudulent claims for payments by a provider may result in the deferral or disallowance of payment for such claims with a social services district, a referral to the office for the revocation of a provider's registration or license, and/or referral for criminal prosecution.

4. An eligible provider must not charge more for subsidized child care than the provider charges for non-subsidized care.
New York Code, Rules and Regulations, Title 18, Part 404

Determination and Redetermination of Eligibility

New York State Code, Rules and Regulations, Part 404, Determination and Redetermination of Eligibility for Social Services, includes requirements that apply to eligibility determination for any of the services programs. Part 404 includes:

- The process of eligibility determinations
- Responsibility for eligibility determinations
- Verification of eligibility determinations
- Fees for services
- Authorization for services
NEW YORK CODES, RULES AND REGULATIONS

*** THIS DOCUMENT REFLECTS CHANGES RECEIVED THROUGH SEPTEMBER 10, 2004 ***

TITLE 18. DEPARTMENT OF SOCIAL SERVICES
CHAPTER II. REGULATIONS OF THE DEPARTMENT OF SOCIAL SERVICES
SUBCHAPTER C. SOCIAL SERVICES
ARTICLE 1. PROVISION OF SOCIAL SERVICES--GENERAL

PART 404. DETERMINATION AND REDETERMINATION OF ELIGIBILITY FOR SOCIAL SERVICES

Part 404 Notes

Statutory authority: Social Services Law, §§ 20, 34, 358, 390, 410, 473, 473-a

Added Part 404 on 4/01/76.

§ 404.1 Process Of Eligibility Determination

(a) Method of determining eligibility. The social services district must adopt methods of determining eligibility which are consistent with the objectives of the program and must respect the rights of individuals under the United States Constitution, and the Social Security Act, title IV of the Civil Rights Act of 1964, and all other relevant provisions of Federal and State law. The social services district must adopt safeguards in determining eligibility which prevent discrimination or adverse action against individuals with AIDS or an HIV infection or an HIV-related illness and individuals who have had an HIV-related test. The terms AIDS, HIV infection, HIV-related illness or HIV-related test are defined in section 360-8.1 of this Title.

(b) Provision of information to applicants. The social services district shall:

(1) provide applicants, recipients and others who may inquire with clear and detailed information concerning social services programs, eligibility requirements, documentation requirements, and the right to a fair hearing;

(2) inform each applicant and recipient at the time of application or redetermination of his initial and continuing responsibility:

   (i) to provide accurate, complete and current information on income and family composition;

   (ii) to provide accurate information relating to service needs, as requested, and to notify the district of any changes in such information;

   (iii) to cooperate in the verification and documentation of eligibility whenever required;

(3) inform each applicant or recipient that he has the right to accept or reject services without consequence except as specified in this Title.
(c) Application for social services.

(1) Each individual wishing to apply for social services shall be assured the opportunity to do so without delay.

(2) The application process must insure that all information, as prescribed by the department, which is necessary to establish eligibility is obtained. The required information may be obtained verbally, in writing on department approved forms, or electronically from the WMS or other department system. Information obtained verbally must be recorded by the interviewer. All information must be verified by the applicant. When an applicant for social services is currently receiving income maintenance or medical assistance benefits, any relevant existing information, including, but not limited to service goals and living arrangements, which is available through the WMS or other department system, must be used to avoid a duplication of efforts in the collection of information.

(3) The application process described in this Part must be used when a person applies for services described in Articles 1, 2 or 3 of Subchapter C of Chapter II of this Title.

(4) The application process may be initiated by the applicant himself or herself, his or her authorized representative, or someone acting responsibly for him or her.

(5) Except where required by Federal law or regulation, no person who applies for a social service shall be required to disclose the social security number of any person for whom the service is requested as a condition of eligibility for the service. However, nothing herein shall restrict the ability of a social services official to request that the applicant disclose the social security number of the person who will receive the service. If such a request is made, the applicant must be informed whether the disclosure is mandatory or voluntary, by what statutory or other authority such number is solicited and the uses which will be made of the social security number. A request for disclosure of the applicant's social security number may be made either orally or in writing.

(6) No person may be required to have an HIV-related test or required to disclose the results of such test as a condition of applying for services.

(7) An applicant who requests services, in whole or in part, on the basis of AIDS or an HIV-related illness may have such condition subject to verification by the local social services district acting in accordance with article 27-F of the Public Health Law.

(8) An application shall be required as a condition of authorization for any social service identified and defined in the district component of the comprehensive annual social services program plan except:

(i) No application is required for the provision of information and referral services, nonresidential services for victims of domestic violence and for social group services for senior citizens.

(ii) Completion of an application for protective services for children is required only after investigation of a report of alleged or suspected child abuse or neglect has determined that there is some credible evidence of abuse or neglect. An application may not be completed prior to such determination.
(iii) Completion of an application for protective services for adults is required only after the investigation and assessment of a protective service for adults referral have determined that an individual meets the client characteristics for adult protective services, unless an adult who is the subject of a request for protective services for adults, the adult’s authorized representative, or someone acting responsibly for such adult disagrees with the decision of the district not to accept the request as a referral for protective services for adults, as defined in section 457.1(c)(2) of this Title. In such case, the adult, the adult’s authorized representative, or someone acting responsibly for such adult may apply for protective services for adults in accordance with paragraph (1) of this subdivision. If an application for protective services for adults is submitted by an adult, an adult’s authorized representative, or by someone acting responsibly for such adult, the application must be accepted and a determination of eligibility or ineligibility made in accordance with subdivision (f) of this section and section 457.13 of this Title.

(9) An application must be completed at the following times:

   (i) when the applicant is making an initial application for services or care;
   (ii) when reapplication is made 30 days after a services case is closed or an application for services is denied; and
   (iii) no less often than every 12 months, when redetermining the eligibility of income-eligible recipients, except those individuals specified in clause (d)(2)(ii)(b) of this section.

(10) When an income maintenance or medical assistance case is closed but social services are to be continued, information contained in the WMS concerning the recipient must be made available to enable a determination of eligibility to be made. When additional information is necessary to determine continued eligibility for social services, the social services district may require that the social services recipient submit the additional information.

(11) When a recipient of services moves to another social services district and the recipient wants to continue to receive services, information contained in WMS concerning the recipient must be made available to the district to which the recipient moved in order for the district to determine whether the recipient remains eligible for the continuation of services. When additional information is necessary to determine continued eligibility, the social services district may require that the social services recipient submit the additional information.

(d) Time period for determination of eligibility.

   (1) Initial determination of programmatic and/or financial eligibility.

   (i) A determination of programmatic and/or financial eligibility must be completed for all applications or reapplications for services within 30 days of the date of application, except for protective services for adults as set forth in Part 457 of this Title. Eligibility for protective services for adults must be determined at the time the protective services for adults assessment services plan is completed in accordance with section 457.2 (b) (4) of this Title.
(ii) Except for the provision of child care services to certain families transitioning from family assistance as set forth in section 415.2(a)(1)(iii) of this Title, and protective services for adults as set forth in Part 457 of this Title, no reimbursement will be available for the provision of services prior to the date of actual determination of programmatic and/or financial eligibility unless such determination is made within 30 days of the date of application and the individual is determined to have been programmatically and/or financially eligible when services were initiated. In no event may the date of eligibility precede the date of application except for the provision of child care to transitioning families as set forth in section 415.2(a)(1)(iii) and protective services for adults.

(2) Redetermination of programmatic and/or financial eligibility.

(i) Programmatic eligibility must be redetermined periodically but not less frequently than every 12 months, including State charge recipients of post-institutional service planning (PISP) who are receiving only follow-up visits as specified in paragraphs (a)(1)-(4) of section 313.2 of this Title. However, programmatic eligibility must be redetermined not less frequently than every six months for recipients of foster care services for children. The requirements regarding the periodic redetermination of programmatic eligibility as set forth in this section do not supersede or otherwise affect the requirements concerning the development, periodic review, and update and implementation of services plans or the client eligibility and monitoring activities for child care services as set forth in Part 415 of this Title or for protective services for adults as set forth in Part 457 of this Title.

(ii) Redeterminations of financial eligibility shall be made periodically, but not less frequently than:

(a) every 12 months for an income-eligible individual in receipt of services;

(b) every six months for a child or minor in receipt of foster care maintenance payments;

(c) every 12 months for an individual in receipt of services whose family gross income is derived exclusively from pensions or social security benefits or SSI or a combination thereof;

(d) every 12 months for a State charge PISP recipient residing in those facilities specified in paragraphs (a)(1)-(3) of section 313.2 of this Title who is receiving only mandated follow-up visits and/or contacts.

This subparagraph does not apply to a child or minor in receipt of adoption assistance or to a recipient of social group services to senior citizens. This subparagraph also does not apply to recipients of public assistance, including Emergency Assistance to Families (EAF), or medical assistance; provided, however, that the continuing eligibility of such recipients for services must be verified every 12 months by use of an on-line inquiry or appropriate system production reports in those social services districts where the public assistance, medical assistance and services components of the welfare management system have been installed. In all other social services districts, verification of continuing eligibility for such recipients must occur every 12 months, and must be documented in the case record and signed by the caseworker and case supervisor.
(iii) Redetermination of eligibility for social services which are made pursuant to the provisions of subparagraph (ii) of this paragraph shall not occur earlier than 30 days prior to the expiration of the periods specified in such subparagraph.

(iv) Redetermination of both financial and/or programmatic eligibility shall be made within 30 days of an indication of a change in an individual’s circumstances which may render the individual ineligible or may change the degree of need for services.

(v) At the time of redetermination, current documentation shall be obtained to verify family size, categorical relationship, income, and continuing need for services, as appropriate.

(e) Documentation.

(1) General. No determination of eligibility shall be made solely on the basis of the application. Documentation of the criteria and conditions essential for eligibility shall be part of the eligibility determination process. Documentation means the collection, verification and recording of information necessary to determine eligibility.

(i) Applications for services based on income maintenance status shall be supported by documentation of the actual receipt of, or eligibility for, the income maintenance benefit or payment.

(ii) Applications for services based on income eligible status shall be supported by documentation of current family size and monthly gross income as specified in section 404.5 (b) of this Part.

(iii) Applications for services based on need without regard to income shall be supported by documentation of the existence of the requisite programmatic factors except that no such documentation shall be required for the provision of information and referral.

(iv) All applications for service shall be supported by the documentation of the need for service as evidenced by an individual plan for service.

(v) If the application is filed by an applicant’s authorized representative or someone acting responsibly for him, the relationship of the authorized representative or the responsible person to the applicant and the reasons for such representative filing shall be recorded.

(2) Documentation of eligibility based on income status.

(i) When an eligibility determination is based on a family’s income status, the family size and the amount and source of each component of gross income as defined in section 404.5 (b) of this Part shall be identified and documented prior to a determination of eligibility for social services.

(ii) Family size need not be documented beyond the information on the signed application unless there is reason to suspect that the information is not correct.

(iii) Applicants shall be required to provide documentation for all income received.
(iv) Adequate documentation of gross income can include pay stubs, business records, and/or correspondence from employers, the Social Security Administration, Veterans Administration, State employment agencies, State welfare agencies and/or providers of pensions.

(3) Recording and maintenance of records. The social services district shall maintain for each applicant or recipient a record which contains, in accordance with the requirements of Part 406 of this Title, information necessary to support an eligibility determination.

(f) Notice of eligibility determinations. Written notice of determination of eligibility or ineligibility for service shall be sent to the applicant or recipient as follows:

(1) A notice of eligibility or ineligibility shall be sent to applicants or recipients within 15 calendar days after the determination has been made.

(2) A notice of eligibility must include information concerning the type of service to be provided, any required fee for services in accordance with section 404.6(b) of this Part, the duration of service planned, the name of the worker or unit responsible for case management and his or her telephone number, a statement regarding the continuing responsibility of the applicant or recipient to report any change in his or her status and the right of the recipient to accept or reject the service(s).

(3) A notice of ineligibility shall include information concerning specific reasons for denial or termination and department policy on which the decision is based.

(4) All notices of determination of eligibility or ineligibility must include information concerning the right of an applicant or recipient to request a fair hearing and all other information required by section 358-2.2 of this Title.

(5) Written notice of determination of eligibility or ineligibility may not be required in the following situations:

   (i) where, through a face-to-face interview, a determination is made to continue eligibility; or

   (ii) where, in a foster care case, the child has been surrendered by the natural parent(s) or guardian and placed under the custody of the local commissioner of social services.

(g) Provision of services. When the service is authorized to be delivered, the social services district and the provider agency shall make provision for the delivery of the service(s) authorized within 15 calendar days after notification of eligibility.

Section statutory authority: Public Health Law, § A27-F

Statutory authority: Social Services Law, §§ 20, 34, 358, 390, 410, 473, 473-a

§ 404.2 Responsibility For Eligibility Determinations

(a) The social services district shall be solely responsible for the determination of eligibility for services.

(b) If the acceptance of applications is delegated to a provider under a contract executed in accordance with the purchase of services requirements specified in section 405.2 of this Title, responsibility for eligibility determinations shall remain with the social services district; any requirements that a provider obtain and transmit to the social services district data necessary to make a determination of eligibility shall be specified in the purchase of services contract.

Statutory authority: Social Services Law, §§ 20, 34, 358, 390, 410, 473, 473-a

Added 404.2 on 4/01/76.

§ 404.3 Verification Of Eligibility Determination

(a) The social services district shall establish procedures to verify the accuracy of eligibility determinations.

(b) The department will, through audits and case review on a sampling basis, conduct additional verification of social services district implementation and application of eligibility criteria.

Statutory authority: Social Services Law, §§ 20, 34, 358, 390, 410, 473, 473-a

Added 404.3 on 4/01/76.

§ 404.4 Programmatic Eligibility

A social service defined in the comprehensive annual social services program plan and included for provision in the district component shall be provided only when the following programmatic conditions are met:

(a) Need for the service has been established by the social services district.

(b) The applicant for such service is included in a category of individuals specified in the comprehensive annual social services program plan to be eligible.

Statutory authority: Social Services Law, §§ 20, 34, 358, 390, 410, 473, 473-a

Added 404.4 on 4/01/76.
§ 404.5 Financial eligibility.

(a) Income maintenance status.

(1) For purposes of financial eligibility for services, the following persons have income maintenance status:

(i) Recipients of ADC--an ADC recipient is any individual who is certified eligible for cash assistance under the ADC program and receives such payments during the period upon which eligibility for social services is based.

(ii) Individuals whose needs are taken into account in computing the grant for eligible persons under the ADC program--these include children and other relatives in the home not eligible for ADC in their own right but whose presence is significant to ADC recipients as "essential persons."

(iii) Recipients of SSI benefits including recipients of State supplementary payments--an SSI recipient is any individual who is certified eligible for cash assistance under the SSI program and receives such payments including State supplementary payments during the period upon which eligibility for social services is based.

(iv) Recipients of foster care or adoption assistance (FCAA)--an FCAA recipient is any child or minor certified eligible for foster care maintenance or adoption assistance who received such benefits during the period upon which eligibility for social services was based.

(v) Recipients of HR--an HR recipient is any individual who is certified eligible for cash assistance under the HR program and who received such payments during the period upon which eligibility for services is based.

(vi) Recipients of MA--an MA recipient is any individual who is certified eligible to receive a medical payment during the period upon which eligibility for services is based.

(2) Persons with income maintenance status shall be financially eligible for services in accordance with the provisions of the then effective comprehensive annual social services program plan.

(3) When financial eligibility for services is based on the income maintenance status of the applicant, such status shall be verified as of the date of application.

(b) Income eligible status.

(1) Individuals, other than those described in subdivision (a) of this section, must be financially eligible for services on the basis of income eligibility status if the monthly gross income of the family is equal to or less than:

(i) the appropriate income eligibility level contained in the then effective consolidated services plan or integrated county plan;

(ii) for New York State Child Care Block Grant child care services, the financial eligibility requirements for such services established by the Office of Children and Family Services in accordance with section 415.2(a) of this Title.
(2) The determination of family monthly gross income shall be based on the average monthly income for a period of not less than one month nor in excess of three months prior to application, adjusted for any changes in income known or expected to occur during the period of authorization.

(3) If income fluctuates significantly, the average monthly amount shall be computed based on income received during a period of not less than three nor more than six months.

(4) Computation of monthly gross income shall be based on a factor of 41/3 of the weekly income.

(5) Monthly gross income means the monthly sum of income received from the following sources:

(i) Monthly wages or salary, i.e., total money earnings received for work performed as an employee, including wages, salary, Armed Forces pay, commissions, tips, piece-rate payments, and cash bonuses earned before deductions are made for taxes, bonds, pensions, union dues and similar purposes.

(ii) Net income for non-farm self-employment, i.e., gross receipts minus expenses from one’s own business, professional enterprise, or partnership. Gross receipts include the value of all goods sold and services rendered. Expenses include costs of goods purchased, rent, heat, light, power, depreciation charges, wages and salaries paid, business taxes (not personal income taxes) and similar costs. The value of salable merchandise consumed by the proprietors of retail stores is not included as part of net income.

(iii) Net income from farm self-employment, i.e., gross receipts minus operating expenses from the operation of a firm by a person on his own account, as owner, renter or sharecropper. Gross receipts include the value of all products sold, government crop loans, money received from the rental of farm equipment to others, the incidental receipts from the sale of wood, sand, gravel, and similar items. Operating expenses include cost of feed, fertilizer, seed and other farming supplies, cash wages paid to farm hands, depreciation charges, cash rent, interest on farm building repairs, farm taxes (not State and Federal income taxes) and similar expenses. The value of fuel, food or other farm products used for family living is not included as part of net income. Social security benefits include social security pensions and survivor benefits, and permanent disability insurance payments made by the Social Security Administration prior to deductions for medical insurance and railroad retirement checks from the U.S. government.

(iv) Dividends, interest (on savings or bonds) income from estates or trusts, net rental income or royalties, including dividends from stockholding or membership in associations, interest on savings or bonds, periodic receipts from estates or trust funds, net income from rental of a house, store or other property to others, receipts from boarders or lodgers and net royalties.

(v) Public assistance or welfare payments include public assistance payments such as ADC, SSI (including State supplemental payments), and home relief.
(vi) Pensions and annuities include pensions or retirement benefits paid to a retired person or his survivors by a former employer or by a union, either directly or through an insurance company, and periodic receipts from annuities or insurance.

(vii) Unemployment compensation means compensation received from government unemployment insurance agencies or private companies during periods of unemployment and any strike benefits received from union funds.

(viii) Workers' compensation means compensation received periodically from private or public insurance companies for injuries incurred at work. The cost of this insurance must have been paid by the employer and not by the individual.

(ix) Alimony.

(x) Child support.

(xi) Veterans' pensions means money paid periodically by the Veterans' Administration to disabled members of the Armed Forces or to survivors of deceased veterans, subsistence allowances paid to veterans for education and on-the-job training, as well as so-called "refunds" paid to ex-servicemen as GI insurance premiums.

(6) Exclusions from monthly gross income. Excluded from computation of monthly gross income are the following:

(i) per capita payments to or funds held in trust for any individual in satisfaction of a judgment of the Indian Claims Commission or the Court of Claims;

(ii) money received from sale of property, such as stocks, bonds, a house, or a car (unless the person was engaged in the business of selling such property in which case the net proceeds would be counted as income from self-employment);

(iii) withdrawals of bank deposits;

(iv) money borrowed;

(v) tax refunds;

(vi) gifts;

(vii) lump sum inheritances or insurance payments;

(viii) capital gains;
(ix) the value of coupon allotments under the Food Stamp Act of 1964, as amended, in excess of the amount paid for the coupons;

(x) the value of USDA donated foods;

(xi) the value of supplemental food assistance under the Child Nutrition Act of 1966 and the special food service program for children under the National School Lunch Act;

(xii) any payment received under the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970;

(xiii) earnings of a child under 14 years of age (no inquiry shall be made);

(xiv) loans and grants such as scholarships obtained and used under conditions that preclude their use for current living costs;

(xv) any grant or loan to any undergraduate student for educational purposes made or insured under the Higher Education Act;

(xvi) home produce utilized for household consumption;

(xvii) payments made for child care services, or the value of child care services provided to a recipient of child care services provided under the New York State Child Care Block Grant Program and under title XX of the Social Security Act who is applying for or receiving any other services funded under any Federal or federally assisted program that bases eligibility for such services upon need or the amount of benefits upon need;

(xviii) veterans' assistance payments made to or on behalf of certain Vietnam veterans' natural adult or minor children for any disability resulting from spina bifida suffered by such children;

(xix) veterans' assistance payments made for covered birth defects to or on behalf of the adult or minor children of women Vietnam veterans in service in the Republic of Vietnam during the period beginning on February 28, 1961 and ending on May 7, 1975. Covered birth defects means any birth defect identified by the Veterans' Administration as a birth defect that is associated with the service of women Vietnam veterans in the Republic of Vietnam during the period on February 28, 1961 and ending on May 7, 1975, and that has resulted or may result in permanent physical or mental disability; and

(xx) one-time $250 payments made under the American Recovery and Reinvestment Act of 2009 to social security, supplemental security income (SSI), railroad retirement benefits and veterans disability compensation or pension benefits recipients for 10 months from the date the payment was received, including the month payment was received.
(c) Eligibility without regard to financial circumstances. Notwithstanding subdivisions (a) and (b) of this section, individuals and families who are programmatically eligible for the following services will be determined to be eligible for such services without regard to financial eligibility criteria: information and referral services;

(1) protective services for adults;

(2) protective services for children;

(3) preventive services for children; and

(4) residential services for victims of domestic violence.

(d) Resources. Financial eligibility for services contained in the district component of the comprehensive annual social services program plan shall be based only on the monthly gross income of the family as defined in this section.

(1) No exploration of resources shall be made in the determination of eligibility for services.

(2) No lien or incumbrance of any kind shall be required from or be imposed against the property of any individual in connection with services rendered or to be rendered.

(3) No adjustment or recovery of the cost of services rendered shall be made.

§ 404.6 Fees For Services

(a) The social services district must impose and provide for the collection of such fees for service as are required in the then effective consolidated services plan or integrated county plan or, in the case of child care services, the family share for such services required by section 415.3(f) of this Title. Failure of the service recipient to pay a fee or family share as required in this section must lead to suspension or termination of the service for which the fee or family share was imposed and not paid unless, in the case of child care services, satisfactory arrangements have been made, prior to the suspension or termination of such services, for the service recipient to make full payment of all delinquent family shares. No subsequent application nor any reapplication by the service recipient for any service suspended or terminated by reason of the failure to pay a required fee or family share will be considered until such time as all delinquent fees are paid or, in the case of child care services, unless and until arrangements satisfactory to the social services district are made for the service recipient to make full payment of all delinquent family shares. Notwithstanding the foregoing, failure of the service recipient to pay a fee or family share must not be a basis for denial or discontinuance of services as part of a plan of protective services for an adult or a child or for preventing placement of a child in foster care.
(b) Methods of collection.

(1) The social services district must advise the recipient in writing, at the time of the initial eligibility determination and each redetermination, of the required fee amount, the date(s) such fee is due and the payment procedures to be followed. The notice of the fee requirements must be included in the written notice of eligibility. A provider must also be notified when a recipient is required to pay a fee, if the provider is required to collect fees for the service. Such notification to the provider must contain the amount of the fee and the date(s) such fee is due.

(2) If a fee is not paid by the specified date, the social services district, or the provider, when appropriate, must immediately give a written notice of the fee past due in person or by mail to the service recipient. Such notice must include a warning of impending termination of the service for continued nonpayment and specify the time period within which such payment must be made or, in the case of child care services, the time period within which satisfactory arrangements for such payment must be made. Such time period may be no less than seven days and no more than 30 days. If payment is not received or, in the case of child care services if arrangements, satisfactory to the social services district, for full payment of delinquent fees by the service recipient, have not been made within the time period specified in the written notice that the fee is past due, then the social services district must give written notice of termination of service in person or by mail to the service recipient. The notice of termination of service must state that the service will be terminated 10 days subsequent to the date of the notice unless payment of all delinquent fees is received prior to the date of termination or, in the case of child care services, unless and until arrangements, satisfactory to the social services district, are made for the service recipient to make full payment of all delinquent fees. Copies of the warning and termination notices must be maintained in the recipient’s basic data file.

(c) Claiming. Fees imposed upon service recipients in accordance with this section shall be deducted from the amount of expenditures for such services for which Federal and State reimbursement is claimed.

Statutory authority: Social Services Law, §§ 20, 34, 358, 390, 410, 473, 473-a
Added 404.6 on 9/08/77; amended 404.6 on 3/27/91; amended 404.6(a) on 1/13/93; amended 404.6(a) on 3/03/04; amended 404.6(b) on 1/13/93.
§ 404.7 Authorization For Services

(a) An authorization for services to be provided either by the social services district directly or by purchase shall be required prior to the provision of any service. An authorization for services is not required for information and referral services, and other services where the eligibility determination is on the basis of group eligibility only.

(b) The social services district shall use form DSS-2562, Services Authorization/Reporting Record, as the basic authorization for all services. In addition, form DSS-638, or a local equivalent approved by the department, shall be completed for the purpose of authorization for services provided by purchase.

(c) Social services districts which are in the department’s welfare management system shall use, for all services, form DSS-2970, Authorization for Services.

(d) An Authorization for Services shall require the following data as a minimum:

1. name of recipient;
2. identification of the basis for eligibility, i.e., income maintenance, income, or without regard to income status;
3. identification of the service or services to be provided;
4. identification of goal(s);
5. period of authorization for the services to be provided which may be up to 12 months except as otherwise specified in sections 372.6, 415.6, and 457.1 of this Title;
6. name and title of authorizing person; and
7. for purchased services, the name of the provider shall be added.

(e) The social services district and/or the provider agency shall provide a service within 15 calendar days after making notification of eligibility to the applicant in the instances when a written application is taken, and within 30 calendar days after acceptance of a request for service in all other instances. Providing a service means actual provision of service or arrangement for its provision at an appropriate later date.

Statutory authority: Social Services Law, §§ 20, 34, 358, 390, 410, 473, 473-a

Added 404.7 on 4/01/76; amended 404.7 on 1/29/79; amended 404.7 on 4/17/80; amended 404.7 (d)(5) on 3/23/94.
§ 404.8 Definitions

The following definition of family shall be used for all determinations and redeterminations of eligibility for services under this Part:

(a) Family means one or more adults and children, if any, related by blood or law, and residing in the same household. Where adults, other than spouses, reside together, each shall be considered a separate family. Emancipated minors and children living under the care of individuals not legally responsible for that care shall be considered one-person families.

(b) In the above definition, adult shall mean any person 18 years of age or older.

* NB Effective until May 15, 2004
* § 404.8 Definitions.

(c) The following definition of family must be used for all determinations and redeterminations of eligibility for services, other than child care services, under this Part:

(1) Family means one or more adults and children, if any, related by blood or law, and residing in the same household. Where adults, other than spouses, reside together, each shall be considered a separate family. Emancipated minors and children living under the care of individuals not legally responsible for that care shall be considered one-person families.

(2) In the above definition, adult shall mean any person 18 years of age or older.

(d) The definition of child care services unit set forth in section 415.1(f) of this Title must be used for all determinations and redeterminations of eligibility for child care services.

* NB Effective May 15, 2004

Statutory authority: Social Services Law, §§ 20, 34, 358, 390, 410, 473, 473-a

Added 404.8 on 12/01/82; amended 404.8(effective 05, 15, 04) on 3/03/04.
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05-OCFS-ADM-03
Child Care Subsidy Program

The purpose of 05-OCFS-ADM-03, *Child Care Subsidy Program* is to inform social services districts of the changes in the requirements for child care subsidies funded through the New York State Child Care Block Grant (NYSCCBG) and Title XX of the federal Social Security Act. Additionally, this Administrative Directive included requirements of the child care subsidy program not issued previously in an Administrative Directive or Local Commissioner's Memorandum.

**Note:** The requirement to pursue child support has been repealed. Pursuit of child support is encouraged, but is no longer an eligibility requirement.
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# Administrative Directive

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<td>To:</td>
<td>District Commissioners</td>
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<tr>
<td>Issuing Division/Office:</td>
<td>Division of Development and Prevention Services</td>
</tr>
<tr>
<td>Date:</td>
<td>May 20, 2005</td>
</tr>
<tr>
<td>Subject:</td>
<td>Child Care Subsidy Program</td>
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<tr>
<td>Suggested Distribution:</td>
<td>Directors of Services; Child Support and Temporary Assistance; Supervisors of Services; Child Support and Temporary Assistance; Child Care Assistance Staff; Accounting; WMS Coordinators; Domestic Violence Liaisons</td>
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<tr>
<td>Contact Person(s):</td>
<td>Questions pertaining to this ADM should be directed to the Office of Children and Family Services, Bureau of Early Childhood Services: Anne Ball, (518) 474-3775 or E-mail: <a href="mailto:Anne.Ball@ocfs.state.ny.us">Anne.Ball@ocfs.state.ny.us</a></td>
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<td>Questions pertaining to claiming should be directed to the Office of Temporary and Disability Assistance, Bureau of Financial Services: Regions I-IV: Virginia Scala, (518) 474-7549 or Email: <a href="mailto:virginia.scala@otda.state.ny.us">virginia.scala@otda.state.ny.us</a> Region V: Michael Borenstein, (631) 854-9704 or Email: <a href="mailto:michael.borenstein@otda.state.ny.us">michael.borenstein@otda.state.ny.us</a> Region VI: Marian Borenstein, (212) 961-8250 or Email: <a href="mailto:marian.borenstein@otda.state.ny.us">marian.borenstein@otda.state.ny.us</a></td>
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<td>Attachments:</td>
<td>A: Guidelines For Review of Enrollment Forms for Provider of Legally-Exempt Care: History of Article 10 Removal; Termination of Parental Rights; and Denial, Revocation and/or Suspension of a Child Day Care License or Registration</td>
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<td>C: OCFS-LDSS-4700, Enrollment Form for Provider of Legally-Exempt Group Child Care</td>
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H: OCFS-LDSS-7012, Notice of Good Cause Determination

Attachments Available On-Line: [X]

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I. Purpose

The purpose of this Administrative Directive (ADM) is to inform social services districts (districts) of the changes in the requirements for child care subsidies funded through the New York State Child Care Block Grant (NYSCCBG) and Title XX of the federal Social Security Act. Additionally, this ADM includes requirements of the child care subsidy program not issued previously in an ADM or Local Commissioners Memorandum (LCM).

The OCFS forms provided as Attachments D, E, F, G and H of this ADM will be available shortly on the OCFS Intranet website under the Forms Section. The format of these forms, but not the content, may change when they are finalized and posted to the website. The five forms, that are Attachments D – H, can be printed directly from this ADM and used on an interim basis to support the requirements under the child care subsidy program. OCFS will issue a notice once the five respective forms are finalized, and available for downloading from the OCFS Intranet.

II. Background

Changes to the regulations regarding the child care subsidy program, Title 18 of the Official Compilation of Codes, Rules and Regulations of the State of New York (NYCRR) Parts 358 and 415 and Sections 403.1, 404.1, 404.5, 404.6, 404.8, 405.1, 405.2, 405.3, and 628.3, were adopted effective May 15, 2004. These regulations fully implement the provision of child care services under the Title XX Social Services Block Grant and the NYSCCBG program; and the federal statutory and regulatory requirements that govern the federal funds included in the NYSCCBG. NYSCCBG funds child care subsidies to families receiving Temporary Assistance1 (TA) and to other low income families.

This ADM details those changes to regulatory requirements as well as other requirements of the child care subsidy program that have not been addressed in previous releases by the Office of Children and Family Services (the Office).

This ADM is not an all-inclusive guide to the requirements of the child care subsidy program. Districts should refer to the following list for additional guidance.

- 05 OCFS ADM-01 Administration of Medication by Legally-Exempt Child Care Providers: Revised Health and Safety Requirements for Legally-Exempt Family, In-Home and Group Child Care
- 05 OCFS INF-02 Consolidated Services Plan-2005 Income Eligibility Standards
- 04 OCFS ADM-01 Guaranteed Child Care in Lieu of Temporary Assistance; Payment During Breaks in Activities; Eligibility for Families in Post Secondary Education; No Application for Transitional Child Care
- 04 OCFS LCM-07 Child Care Market Rates
- 03 OCFS LCM-19 Guidelines and Instructions for Preparing County Service Plans
- 03 OCFS LCM-17 Legally-Exempt In-Home Child Care Providers as Employees

1 The term “public assistance” has been replaced by the term “temporary assistance.” Temporary Assistance encompasses Family Assistance, Safety Net Assistance and Veteran’s Assistance.
III. Program Implications

Districts must operate child care subsidy programs in compliance with State statutes, regulations and policies. The following are highlights of significant changes to the child care subsidy program based on regulatory amendments:

- To be eligible for a child care subsidy, the child's parents/caretakers must demonstrate they have a child support order in place, be actively pursuing a child support order or have good cause not to pursue a child support order.

- New State health and safety requirements apply to informal and legally-exempt group child care providers.

- Amendments to 18 NYCRR 358-2 and 358-3 expand fair hearing rights to include all families that apply for or receive child care services.

- “Aid continuing” for child care services is available to all families in receipt of child care subsidies.

- Districts are no longer required to have a contract with a provider to pay for absences and now have the option to pay for days on which the program is closed.

- The Child Care Services Unit replaces the Services Family Unit in determining which family and household members’ needs and income are taken into account when determining child care eligibility and the amount of the family share.

- New definitions of “engaged in work” and “seeking employment” clarify circumstances under which certain families are eligible for child care services.

- Families in which a member has voluntarily admitted to or was convicted of child care fraud are subject to disqualification penalties similar to those applied in the Temporary Assistance program.
A. DEFINITIONS

1. THE OFFICE


2. CHILD CARE SERVICES

Child care services mean care for an eligible child provided on a regular basis either in or away from the child’s residence for less than 24 hours per day, which is provided by an eligible provider. Child care services may exceed 24 consecutive hours when such services are provided on a short-term emergency basis or in other cases where the caretaker’s approved activity necessitates care for 24 hours or more on a limited basis, if the district has indicated in its Consolidated Services Plan (CSP) or Integrated County Plan (ICP) that it will provide for such care.

3. ELIGIBLE CHILD

Eligible child means a child who resides with a parent/caretaker that meets the program and financial eligibility requirements for the particular type of child care services and who:

- is under 13 years of age. For child care services provided under Title XX of the federal Social Security Act or provided as a child protective service or a preventive service funded other than under the NYSCCBG program, a child who turns 13 years of age during a school year may continue to receive child care services through the end of that school year; or
- is under 18 years of age and is either a child with special needs or is under court supervision; or,
- is under 19 years of age, is a full-time student in a secondary school, or in an equivalent level of vocational or technical training, and is either a child with special needs, or is under court supervision.

4. CARETAKER

Caretaker means the child’s parent, legal guardian or caretaker relative, or any other person in loco parentis who lives with a child.

5. CARETAKER RELATIVE

Caretaker relative means any person who is a custodial parent or other adult relative as set forth in 18 NYCRR section 369.1(b), who exercises responsibility for the day-to-day care of and who lives with a child.

The term custodial parent or other adult caretaker relative shall include the following, as applicable:

(a) the child's father, mother, brother, sister, grandfather, great-grandfather, great-great-grandfather, grandmother, great-grandmother, great-great-grandmother, uncle, great-uncle,
great-great-uncle, aunt, great-aunt, great-great-aunt, of whole or half blood;

(b) the child's first cousin, nephew and niece, of whole or half blood;

(c) the child's step father, step mother, step brother, step sister, but no other step relative;

(d) in the case of a child who has been surrendered to an authorized agency or who has been adopted:

(i) any of the blood or step relatives included in the preceding paragraphs of this subdivision; and

(ii) the child's adoptive parents and:

   (a) the other children of the adoptive parents and the children of such children;

   (b) the parents, grandparents and great-grandparents of the adoptive parents;

   (c) the brothers and sisters of the adoptive parents and the children of such brothers and sisters; and

   (d) the aunts, uncles, great-aunts and great-uncles of adoptive parents;

(e) the spouse of any person described in the preceding paragraphs of this subdivision, even though the marriage may have been terminated by death, divorce or annulment; and

(f) in the case of a child born out of wedlock, any relative in the maternal line included in the preceding paragraphs of this subdivision and, if paternity has been adjudicated or acknowledged in writing, any relative in the maternal and paternal lines included in the preceding paragraphs of this subdivision.

6. **INFORMAL CHILD CARE**

Informal child care includes legally-exempt family child care and legally-exempt in-home child care. Members of the child’s or the caretaker’s temporary assistance unit and other adult members of the child care service unit, except the child’s siblings, are not eligible to provide subsidized child care.

**Legally-exempt family child care** means:

1. Child care for one or two children provided outside the child’s own home in a residence by a caregiver who is at least 18 years of age, or who is less than 18 years of age and meets requirements for the employment of minors as set forth in Article 4 of the NYS Labor Law, and who is chosen and whose services are monitored by the child’s parent/caretaker; or

2. Child care for more than two children provided outside the child’s own home in a residence by a caregiver who is at least 18 years of age, or who is less than 18 years of age and meets the requirements for the employment of minors as set forth in Article 4 of the NYS Labor Law, who provides such care for less than three hours per day and who is chosen and whose services are monitored by the child’s parent/caretaker; or

3. Child care provided by a relative within the third degree of consanguinity of the parent or step-parent of the child except where such relative is a person legally responsible for, or the caretaker relative of, such child. Relatives within the third degree of consanguinity of the parents or step-parents of the child include:
• siblings of the child;
• grandparents of the child;
• great-grandparents of the child;
• great-great-grandparents of the child;
• aunts and uncles of the child, including their spouses;
• great-aunts and great-uncles of the child, including their spouses; and
• first cousins of the child, including their spouses.

Legally-exempt in-home care means:
Child care furnished in the child’s home by a caregiver who is chosen and monitored by the child’s parent/caretaker and who is at least 18 years of age, or who is less than 18 years of age and meets the requirements for the employment of minors as set forth in Article 4 of the NYS Labor Law. In addition, the child’s parent/caretaker must pay the caregiver at least the minimum wage as set forth in Article 19 of the NYS Labor Law and provide the caregiver with all employment benefits required by State and/or federal law, including but not limited to Social Security and Workers’ Compensation coverage.

7. LEGALLY-EXEMPT GROUP CHILD CARE

Legally-exempt group child care refers to care provided by those caregivers, other than caregivers of informal child care, which are not required to be licensed by or registered with the NYS Office of Children and Family Services (the Office) or licensed by the City of New York but which meet all applicable State or local requirements for such child care programs.

Caregivers of legally-exempt group child care include, but are not limited to:

(1) pre-kindergarten and nursery school programs for children three years of age or older, and programs for school-age children conducted during non-school hours, operated by public school districts or by private schools or academies which provide elementary or secondary education or both in accordance with the compulsory education requirements of the NYS Education Law, provided that such pre-kindergarten, nursery school or school-age programs are located on the premises or campus where the elementary or secondary education is provided;

(2) nursery schools and programs for pre-school age children operated by non-profit agencies or organizations or private proprietary agencies which provide services for three or less hours per day;

(3) summer day camps operated by non-profit agencies or organizations or private proprietary agencies in accordance with Subpart 7-2 of the State Sanitary Code;

(4) day care centers, family day care homes and other child care programs located on federal property which are operated in compliance with the applicable federal laws and regulations for such child care programs;

(5) day care centers, family day care homes and other child care programs located on tribal property which are operated in compliance with the applicable tribal laws and regulations for
such child care programs; and,

(6) school-age programs caring for not more than six children.

8. **ELIGIBLE CHILD CARE PROVIDER**

To be an eligible child care provider, the provider must be included in the following list:

(1) For eligibility under the NYSCCBG:

a) a validly licensed or properly registered child day care center or properly registered school-age child care program operated by a voluntary non-profit corporation or association or an authorized child care agency; or

b) a validly licensed or properly registered child day care center or properly registered school-age child care program operated by either a private, proprietary corporation or organization or by an individual; or

c) a public school district operating a child care program which meets State and federal requirements; or

d) a family day care home properly registered with the Office to provide child care services to children; or

e) a group family day care home issued a valid license by the Office to provide child care services to children; or

f) a caregiver of informal child care who is enrolled with the district; or

g) a caregiver of legally-exempt group child care that is enrolled with the district.

(2) For eligibility under Title XX of the Social Security Act:

a) a validly licensed or properly registered child day care center or properly registered school-age child care program operated by a voluntary non-profit corporation or association or an authorized child care agency; or

b) a validly licensed or properly registered child day care center or properly registered school-age child care program operated by a private proprietary corporation or organization or by an individual; provided, however, that such a provider will be an eligible provider only with the prior approval of the commissioner of the Office upon the demonstration by the district that conveniently accessible non-profit facilities are unavailable or unable to provide the required care; or

c) a public school district operating a child care program which meets State and federal requirements; or

d) a family day care home properly registered with the Office to provide child care services to children; or

e) a group family day care home issued a valid license by the Office to provide child care services to children.
9. **CHILD CARE SERVICES UNIT**

The Child Care Services Unit (CCSU) replaces the Services Family Unit (SFU) in determining eligibility for child care. CCSU refers to the adults and/or children residing in the same household who will be considered for the purposes of determining a family's eligibility and the family share for child care services. Adult means any person 18 years of age or older unless the individual meets the definition of a child with special needs. The district may elect to include 18, 19, or 20 year old individuals in the same CCSU as their parent by indicating such option in its CSP/ICP. Districts have the option to include all 18, 19, or 20 year olds in the CCSU or to include only those 18, 19 or 20 year olds whose inclusion in the CCSU would benefit the family. The district’s approved CSP/ICP must specify the criteria it will use to determine whether or not an 18, 19, or 20 year old is included in the CCSU.

1. For families where the child’s parent or caretaker relative is receiving TA, the CCSU will be comprised of the parent or caretaker relative, his or her children and any other member of the TA unit.

2. For families that are receiving “child care in lieu of TA,” the CCSU will be comprised of those household members that would be included in the TA filing unit, if the family were in receipt of TA, and those legally responsible non-filing unit members in the household whose income or resources would be considered in determining eligibility for TA.

3. For families where no adult family member is in receipt of TA, the CCSU will be comprised as follows:
   
   (a) When adults, other than spouses, reside together and do not have a child in common, each adult along with his or her child will be considered a separate CCSU.

   (b) When adults, other than spouses, reside together and have at least one child in common, the CCSU will be comprised of the adults who have child(ren) in common, the child(ren) those adults have in common and the other child(ren) of each such adult.

When a custodial parent who is under the age of 21 years is residing with his or her parent(s), or has established his or her own household, or resides with an individual other than his or her parent(s), the CCSU is comprised of the custodial parent who is under 21 years of age, his or her child(ren) and any other individual in the household with legal responsibility for the custodial parent's child(ren).

When eligible children reside only with individuals who are not the children's parent, step-parent, adoptive parent or legal guardian with financial responsibility for the children, the CCSU will be comprised of the eligible child only. For example, a child placed in foster care and residing with a foster family is considered a family of one. As another example, a child residing with a relative who does not have legal guardianship, but may or may not have legal custody, is considered a family of one. The awarding of legal custody to a non-parental caretaker does not remove financial responsibility for the child from the parent and assign it to the custodial party. For example, when a child is removed from his or her parent and placed in the custody of the district commissioner, the parent still remains financially responsible for the child.

Individuals who would otherwise be included in the CCSU, but who are temporarily absent from a household, who meet the following criteria will be considered part of the CCSU: 
(1) Individuals whose needs are partially or fully being met by members of the household, such as children or minors attending school away from home; provided, however, that a child away from home due to a foster care placement will not be considered part of the CCSU; and

(2) Individuals who are contributing or are required to contribute to the needs of the household, such as individuals who are serving in the military.

10. FAMILY SHARE

Family share means the weekly amount paid by the child’s parent/caretaker toward the costs of the child care services.

11. ENGAGED IN WORK

For an individual who is not receiving TA, “engaged in work” means:

(1) Is earning wages at a level equal to or greater than the minimum amount required under federal and NYS Labor Law for the type of employment; or

(2) Is self-employed and is able to demonstrate that such self-employment produces personal income equal to or greater than the minimum wage or has the potential for growth in earnings to produce such an income within a reasonable period of time.

For an individual receiving TA, “engaged in work” means the individual is engaged in work as defined by the district in the district’s approved employment plan.

12. SEEKING EMPLOYMENT

For an individual who is not receiving TA, “seeking employment” means making in-person job applications, going on job interviews, registering with a NYS Department of Labor Division of Employment Services Office to obtain job listings, and participating in such other job seeking activities as are approved by the district.

13. CHILD WITH SPECIAL NEEDS

Child with special needs means a child who is incapable of caring for himself or herself and who has been diagnosed as having one or more of the following conditions derived from the NYS Education Law, Title 8 NYCRR 200.1(zz), to such a degree that it adversely affects the child’s ability to function normally:

- Autism
- Deafness
- Deaf-blindness
- Emotional disturbance
- Other health impairment
- Health impairment
- Learning disability
- Mental retardation
- Multiple disabilities
- Orthopedic impairment
- Speech or language impairment
- Traumatic brain injury
- Visual impairment including blindness
14. **PERSON IN LOCO PARENTIS TO A CHILD**

Person in loco parentis to a child means the child’s guardian, caretaker relative or any other person with whom a child lives who has assumed responsibility for the day-to-day care of the child.

15. **CHILD CARE CERTIFICATE**

Child care certificate means a certificate issued to a child’s parent/caretaker that verifies the parent/caretaker is eligible for subsidized child care services. The parent/caretaker uses the certificate to assist in arranging for care from a child care provider.

16. **STATE INCOME STANDARD (SIS)**

State Income Standard (SIS) means the most recent official federal income poverty level (as defined by the federal Office of Management and Budget) as updated by the Office.

**B. ELIGIBILITY DETERMINATION AND REDETERMINATION**

**1. APPLICATION FOR CHILD CARE**

Applicants for child care services must apply in writing on the Common Application LDSS-2921, or local equivalent approved by the Office. The district must permit applicants to submit their applications by mail. The parent/caretaker with whom an eligible child resides is the applicant for child care services. The applicant is responsible for providing accurate, complete and current information regarding the family’s circumstances including the family’s income, composition and child care arrangements. The applicant must notify the district immediately of any change in this information.

Recipients of TA and “child care in lieu of TA” must not be required to complete a new application for transitional child care assistance, although districts may contact the family to update the case information. The district must determine whether a family is eligible for transitional child care prior to closing a TA case or a “child care in lieu of TA” case. Districts may use the family's existing TA application with updated information to determine eligibility and benefits for transitional child care. A separate Administrative Directive, 04 OCFS ADM-01, has been issued to detail requirements for “child care in lieu of TA.”

Except where required by federal law or regulation, no person who applies for a social service must be required to disclose the Social Security Number of any person for whom the service is requested as a condition of eligibility for the service. For child care assistance, the provision of a Social Security Number is voluntary and child care benefits must not be denied or withheld for the failure to furnish a Social Security Number. No federal statute requires families who are receiving child care assistance through Title XX or NYSCCBG to disclose Social Security Numbers for the receipt of child care assistance.

However, this does not restrict the ability of a district to request that the applicant disclose the Social Security Number of the person who will receive the service. If such a request is made, the applicant must be informed that the disclosure is voluntary, by what statutory or other authority such number is
solicited and the uses which will be made of the Social Security Number. Additionally, when a district obtains a Social Security Number voluntarily disclosed by an applicant for child care benefits, the district must provide the collected Social Security Number as requested by the Office to meet federal reporting requirements.

For additional information on application requirements, refer to section III.E.1, Application of this ADM.

2. DETERMINATION OF ELIGIBILITY

The district is solely responsible for the determination of eligibility for child care benefits. An initial determination of programmatic and/or financial eligibility must be completed for all applications or reapplications for child care services within 30 days of the date of application. Initial eligibility for child day care, informal child care and legally-exempt group child care services must be determined pursuant to the requirements of Title 18 NYCRR Parts 404 and 415; the district’s options designated in an approved CSP/ICP; and, where applicable, 12 NYCRR Part 1300. Additionally, the required documentation is a necessary prerequisite to the determination of eligibility and must be retained in the case folder.

In determining whether a family is eligible for child care, the following conditions must be established:

(1) Programmatic Eligibility

There is a programmatic need for child care and child care services are a necessary part of a plan of self-support, self-sufficiency, or protection for the child developed by the district.

The child care is not otherwise available from a legally responsible relative. If there is a legally responsible relative outside of the household, the availability of that person to provide child care must be assessed, taking into account any court ordered or court sanctioned custody agreements. In two-parent households, both parents must meet the eligibility criteria.

In the case where a non-custodial parent exists, districts must make an assessment of the availability of the non-custodial parent when determining whether child care is needed. If the non-custodial parent resides in close proximity to the custodial parent and the non-custodial parent’s work or activity schedule indicates availability, and there are no other circumstances that would make care by the non-custodial parent inappropriate, the non-custodial parent is considered to be available to provide child supervision during periods when the custodial parent is engaged in an approved activity. Availability of the non-custodial parent may be limited by any number of factors including but not limited to custody orders, visitation agreements, incarceration, disability or domestic violence situations.

The district can require the non-custodial parent to provide child supervision provided that it does not violate the provisions of any child custody order or other court order or infringe on the non-custodial parent’s ability to work or participate in an activity that would be approved by the district. The district cannot request that the non-custodial parent offer child supervision on the custodial parent's days of custody, as specified by a court order. For example, Mary and Bill are divorced and share custody of their child. Bill has custody on Saturday, Sunday and Monday and Mary has custody the rest of the week. Bill lives across the street from their child's school and does not work the same hours as Mary. He is willing to supervise the child after school but Mary insisted that their
child not be with Bill on her days of custody, even though she was working during the hours that their child could be with Bill. The district cannot insist that Bill provide care and deny child care assistance on the days that he does not have custody but is available to provide care. As another example, John is a divorced father who lives two blocks from his ex-wife, Sara. John has joint custody of his daughter and is not prohibited by any provision in the custody order from providing child care. He works the night-shift at a local factory and Sara is a school teacher. The district cannot require John to provide child care during the day when Sara is teaching because John must have adequate time to sleep before his shift begins at the factory.

A district cannot require a non-custodial parent to provide child supervision if he/she has no visitation privileges, or if other circumstances exist indicating it would not be in the best interests of the child or the custodial parent.

In child protective cases, there must be a determination that child care is needed to address a child protective need.

(2) Family Eligibility
The family must be included in one or more of the categories of eligible families for the funding source.

- For NYSCCBG, eligible families include: families that are guaranteed child care, families that are eligible when funds are available, and families that are eligible if funds are available and if the district has listed such families as eligible in the district’s CSP/ICP.

- For Title XX, eligible families include: families that are receiving child care services as part of a preventive or protective services case or identified as an eligible family in the district’s approved CSP/ICP. For more information, refer to section III.C.2.a, Categories of Eligible Families Under Title XX of this ADM.

(3) Child Eligibility
The child meets the definition of an eligible child.

(4) Financial Eligibility
The family (Child Care Services Unit) is financially eligible to receive child care subsidy. For NYSCCBG funds, the family income must be at or below 200% of the State Income Standard. For Title XX funds, the family income must be at or below the upper income levels established by the district within its CSP/ICP.

For child protective cases, eligibility for child care is established without regard to financial circumstances only when it is determined that such child care is needed to protect the child.

(5) Child Support
In all households in which a parent is continuously absent, the custodial parent/caretaker seeking a child care subsidy must demonstrate that: he or she is actively pursuing child support, or he or she has good cause not to pursue child support. Refer to section III.G, Child Support Requirements of this ADM for more information.
3. **DOCUMENTATION OF DECISION**

No determination of eligibility may be made based solely on the application. Documentation, meaning collection, verification and recording of the criteria and conditions necessary for eligibility, is part of the determination process. The district must maintain a record that contains information that supports all aspects of the eligibility determination for each applicant or recipient, including, but not limited to programmatic, financial, family composition, and family and child eligibility. Family size need not be documented beyond the information provided on the application unless there is reason to believe the information provided is incorrect.

Additional factors that determine eligibility must be cited in the case record with supporting documentation. These include but are not limited to:

1. The hours the child care is needed, including the work or education/training schedule of the parent/caretaker, if applicable;
2. The reason child care is needed;
3. The goal to be achieved by provision of child care assistance;
4. Evaluation at subsequent redetermination periods of whether the goal is being achieved;
5. The non-custodial parent's or other legally responsible relative’s availability to provide care;
6. Ages of children needing care and documentation of any special needs to support the determination that a child has special needs;
7. Active pursuit of child support or good cause exception;
8. For a licensed or registered provider, the provider’s name;
9. For an informal or legally-exempt group provider, enrollment forms which have been approved by the district and are completed annually or as required;
10. Where applicable, for families who are eligible when funds are available, how the availability of funding has impacted the eligibility decision; and,
11. If the application is filed by the applicant’s authorized representative or someone acting responsibly for him or her, the relationship of the authorized representative or responsible person to the applicant and the reasons for such representative filing must be recorded.

4. **INCOME**

Individuals, other than those receiving TA, must be financially eligible for services on the basis of income eligibility status. Individuals are eligible for NYSCCBG if the monthly gross income of the family is equal to or less than to 200 percent of the State Income Standard or, for services funded under Title XX, the appropriate income eligibility level contained in the district’s effective CSP/ICP.

The determination of family monthly gross income must be based on the average monthly income for a period of not less than one month nor in excess of three months prior to application, adjusted for any changes in income known or expected to occur during the period of authorization.
If income fluctuates significantly, the average monthly amount must be computed based on income received during a period of not less than three nor more than six months. Refer to other information on the treatment of lump sum payments and or other payments received for child support arrears in section III.G.6.j, Fluctuating Child Support Income and Lump Sum Child Support Payments of this ADM. Computation of monthly gross income must be based on a factor of 4 1/3 of the weekly income.

a) **MONTHLY GROSS INCOME**

Monthly gross income means the monthly sum of income received from the following sources:

- Monthly wages or salary, i.e., total money earnings received for work performed as an employee, including wages, salary, Armed Forces pay, commissions, tips, piece-rate payments, and cash bonuses earned before deductions are made for taxes, bonds, pensions, union dues and similar purposes;

- Net income for non-farm self-employment, i.e., gross receipts minus expenses from one's own business, professional enterprise, or partnership. Gross receipts include the value of all goods sold and services rendered. Expenses include costs of goods purchased, rent, heat, light, power, depreciation charges, wages and salaries paid, business taxes (not personal income taxes) and similar costs. The value of salable merchandise consumed by the proprietors of retail stores is not included as part of net income;

- Net income from farm self-employment, i.e., gross receipts minus operating expenses from the operation of a farm by a person on his or her own account, as owner, renter or sharecropper. Gross receipts include the value of all products sold, government crop loans, money received from the rental of farm equipment to others, the incidental receipts from the sale of wood, sand, gravel, and similar items. Operating expenses include cost of feed, fertilizer, seed and other farming supplies, cash wages paid to farm hands, depreciation charges, cash rent, interest on farm building repairs, farm taxes (not State and federal income taxes) and similar expenses. The value of fuel, food or other farm products used for family living is not included as part of net income;

- Social Security benefits including Social Security pensions and survivor benefits, and permanent disability insurance payments made by the Social Security Administration prior to deductions for medical insurance, and railroad retirement checks from the U.S. government;

- Dividends; interest income from estates or trusts; net rental income or royalties, including dividends from stockholdings or membership in associations, interest on savings or bonds, periodic receipts from estates or trust funds, net income from rental of a house, store or other property to others, receipts from boarders or lodgers, and net royalties;

- Temporary assistance or welfare payments include Safety Net, Veterans Assistance, and Family Assistance payments;

- Pensions and annuities include pensions or retirement benefits paid to a retired person or his or her survivors by a former employer or by a union, either directly or through an insurance company, and periodic receipts from annuities or insurance;

- Unemployment compensation means compensation received from government unemployment insurance agencies or private companies during periods of unemployment and any strike benefits
received from union funds;

- Workers' compensation means compensation received periodically from private or public insurance companies for injuries incurred at work. The cost of this insurance must have been paid by the employer and not by the individual;
- Alimony;
- Child support; and
- Veterans' pensions means money paid periodically by the Veterans' Administration to disabled members of the Armed Forces or to survivors of deceased veterans, subsistence allowances paid to veterans for education and on-the-job training, as well as so-called "refunds" paid to ex-servicemen as GI insurance premiums.

**b) Exclusions from Monthly Gross Income**

Excluded from computation of monthly gross income are the following:

- per capita payments to, or funds held in trust for, any individual in satisfaction of a judgment of the Indian Claims Commission or the Court of Claims;
- money received from sale of property, such as stocks, bonds, a house, or a car (unless the person was engaged in the business of selling such property in which case the net proceeds would be counted as income from self-employment);
- withdrawals of bank deposits;
- money borrowed;
- tax refunds;
- gifts;
- lump sum inheritances or insurance payments;
- capital gains;
- the value of coupon allotments under the Food Stamp Act of 1964, as amended, in excess of the amount paid for the coupons;
- the value of USDA donated foods;
- the value of supplemental food assistance under the Child Nutrition Act of 1966 and the special food service program for children under the National School Lunch Act;
- any payment received under the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970;
- earnings of a child under 14 years of age (no inquiry must be made);
- loans and grants such as scholarships obtained and used under conditions that preclude their use for current living costs;
- any grant or loan to any undergraduate student for educational purposes made or insured under the Higher Education Act;
• home produce utilized for household consumption;

• payments made for child care services or the value of child care services provided to a recipient of TA or the NYSCCBG subsidy program who is applying for or receiving any other services funded under any federal or federally assisted program that bases eligibility for such services upon need or the amount of benefits upon need; and,

• Veterans Administration (VA) payments provided under Public Law 104-204 to Vietnam veterans’ natural adult or minor children for any disability resulting from spina bifida suffered by such children and VA payments to covered birth defects to or on behalf of the adult or minor biological children of female Vietnam veterans.

5. DATE OF ELIGIBILITY

Eligibility for all child care services, except for transitional child care, begins on the date that an application is submitted. Potential eligibility for the transitional child care guarantee begins on the date that the TA case or the “child care in lieu of TA” case closes and continues for a period of 12 consecutive months following the month of closing. A parent or caretaker relative may apply for transitional child care benefits at any point during the 12-month eligibility period.

6. REDETERMINATION OF ELIGIBILITY

Continuing eligibility must be redetermined as often as factors indicate, but no less than every 12 months, provided, however, that a district may not require the submission of a new application merely because the applicant is no longer eligible for TA. Refer to 04 OCFS ADM-01 for information on the requirements for families transitioning from TA.

Periodic redeterminations must not occur earlier than 30 days prior to the end of the previous eligibility period. When a new person is added to the case or there is another indicator of a change in a recipient’s circumstances, which may render him/her ineligible or which may change the degree of need for services, redeterminations of both financial and/or programmatic eligibility must be made within 30 days of the change.

The district must establish procedures to enable families to keep their child care services without interruption as long as the families remain eligible for such services including procedures to transfer families from one unit of the district to another. This requirement does not apply to a family that has moved out of the district that was issuing the TA or the guaranteed child care assistance.

All factors concerning need and eligibility for child care services must be reconsidered, re-evaluated and verified during redeterminations. Current documentation of family size, categorical relationship, income, and continuing need for services must be obtained as appropriate. The periodic redeterminations conducted by the district do not eliminate the responsibility of the recipient of child care services to report to the district any change in financial circumstances, living arrangements, child care arrangements, employment, household composition, or other circumstances that affect the family’s need or eligibility for child care services.

If a family is using a legally-exempt child care provider, the provider enrollment form must be updated or replaced with a newly completed enrollment form at least every 12 months.
C. ELIGIBLE FAMILIES

For two-parent or two-caretaker families, each parent/caretaker must meet the eligibility criteria.

For parents living separately and sharing joint custody of a child, both parents may be eligible for child care services. Each parent must engage separately in the normal eligibility determination process to establish his/her subsidy level. The district must include the child's custody schedule within the case record for verification purposes.

1. CATEGORIES OF ELIGIBLE FAMILIES UNDER THE NEW YORK STATE CHILD CARE BLOCK GRANT

The NYSCCBG provides funding for child care subsidies to recipients of TA, low-income families transitioning off TA, families that are eligible for TA who have opted to receive “child care in lieu of TA” after applying for TA, and non-TA low income families.

Some families are guaranteed child care assistance, regardless of whether the district has any State or federal funds available under the NYSCCBG to pay for any or all of such costs, if they meet specific eligibility requirements described in this section. A second group of families may be considered to be eligible only when there are funds available within the district and they meet programmatic and financial criteria. A third group of families is considered to be eligible when the district has funds available to serve them, and the district has included them as eligible families in its CSP/ICP and they meet the programmatic and financial criteria.

The three categories of families listed below are eligible for child care services under the NYSCCBG provided that child care is not otherwise available from a legally responsible relative or caretaker of the child in need of services, and the care is a necessary part of a plan of self support or protection for the child developed by the district.

a) FAMILIES THAT ARE GUARANTEED CHILD CARE

A district must guarantee child care services (regardless of whether the district has any State or federal funds available under the NYSCCBG to pay for such costs) to the following families. The guarantee applies to all of the eligible children under 13 years of age of the parent or caretaker relative regardless of the child’s status as part of the TA filing unit.

(1) Families that have applied for or are in receipt of TA when child care is needed for a child under 13 years of age in order to enable the child’s parent or caretaker relative to participate in activities required by the district including orientation, assessment or work activities as defined in 12 NYCRR Part 1300.

(2) Families that are receiving TA when child care is needed for a child under 13 years of age in order to enable the child’s parent or caretaker relative to engage in work as defined by the district;

(3) Families which have applied for and would otherwise be eligible for TA benefits and choose to receive “child care in lieu of TA”, or were receiving TA and voluntarily closed their TA case while still eligible for TA and when child care is needed for a child under 13 years of age in order to enable the child’s parent or caretaker relative to work for at least the following number of hours.
(a) For a single parent:

- with a child under the age of six years: 20 hours per week; or
- with children who are all six years or older: 30 hours per week.

(b) For two-parent families:

- the parents must be working a combined total of 55 hours per week with at least one parent working 30 or more hours per week.

This guarantee continues as long as the family meets these requirements.

(4) Families transitioning from TA whose TA cases have been closed or who voluntary close their TA cases; and who are no longer financially eligible for TA due to an increase in income or child support. The family must have received TA in three of the six months prior to case closing, or, for a family that chose “child care in lieu of TA”, was eligible for assistance in at least three of the six months immediately preceding their ineligibility for TA. The family must include an eligible child under the age of 13 who needs child care in order for the parent(s) to be engaged in work, and the family's gross income must be at or below 200% of the State Income Standard. For transitional child care, the eligibility period begins with the first month in which a family becomes ineligible for TA or “child care in lieu of TA”, and is limited to 12 months in duration.

b) Families that are eligible when funds are available

Families in this category may receive subsidized child care to the extent that the district continues to have funds available under either its allocation from the NYSCCBG or any local funds appropriated for this program, subject to any service priorities and set-asides established by the district. Districts may establish priorities, in addition to the federal priorities of very low income families and special needs children, by identification of such categories in the CSP/ICP, subject to approval from the Office. Funds may be set aside for such priority families when described in the CSP/ICP and approved by the Office.

A district must provide child care assistance to the following families when funds are available:

(1) Families that have applied for or are receiving TA, when child care is needed for an eligible child 13 years of age or older who has special needs or is under court supervision, to enable the child’s parent or caretaker relative to engage in work or participate in activities required by the district including orientation, assessment or work activities defined in 12 NYCRR Part 1300.

(2) Families that are receiving TA, when child care is needed for an eligible child 13 years of age or older who has special needs or is under court supervision, to enable the child’s parent or caretaker relative to engage in work as defined by the district.

(3) Families that are receiving TA when child care is needed to enable a teenage parent to attend high school or an equivalency program; or for the child to be protected because the child’s parent or caretaker relative is unable to care for their children due to a physical or mental incapacity or has family duties away from home necessitating his or her absence.

(4) Families with income at or below 200% of the State Income Standard when the family is at risk of becoming dependent on TA and child care services are needed to permit the child’s parent/caretaker to be engaged in work; or to enable a teenage parent to attend high school or
an equivalency program.

c) Families That are Eligible When Funds are Available and the Category of Family is Identified in the District’s CSP/ICP

Families in this category may receive subsidized child care to the extent that the district continues to have funds available under either its allocation from the NYSCCBG or any local funds appropriated for this program, and the category of family is designated as an eligible family by the district in its CSP/ICP. Availability of funds is subject to the service priorities and set-asides established by each district in its CSP/ICP and approved by the Office.

The district may select categories from the following list or the district may opt to refine any of the optional categories, by specifying any limitations to the programmatic eligibility criteria, so that a more specific population is selected. The identified families must be listed as eligible in the district’s CSP/ICP and approved by the Office.

(1) Families receiving TA when child care services are necessary for the parent or caretaker relative to participate in an approved activity in addition to being engaged in work as required by the district or in a required work activity (e.g.: A parent or caretaker relative with a minimum wage position requesting additional child care during the hours he or she is not at work to enable him or her to seek a better job).

(2) Families receiving TA when child care services are necessary for a sanctioned parent or caretaker relative to participate in unsubsidized employment when the parent or caretaker relative receives earned wages greater than or equal to the minimum amount required under federal and State labor law.

(3) Families receiving TA or families with incomes up to 200% of the State Income Standard when child care services are needed for the child to be protected because the parent/caretaker is:

   (a) participating in an approved substance abuse treatment program, screening or assessment (If the applicant is classified as exempt from work activities because of his or her substance abuse, child care can be offered under this category. However, if the district requires that the applicant receive substance abuse treatment and he or she is working or participating in a required work activity, child care is guaranteed.);

   (b) homeless, or receiving services for victims of domestic violence, and is in need of child care to participate in an approved activity, screening or assessment for domestic violence; or,

   (c) in an emergency situation of short duration including, but not limited to, cases where the parent/caretaker must be away from the home for a substantial period of the day due to extenuating circumstances such as a fire, being dispossessed from the home, seeking living quarters or providing chore/housekeeping services for an elderly or disabled relative.

(4) Families receiving TA or with incomes up to 200% of the State Income Standard when child care services are needed for the child's parent/caretaker to attend a two year program other than one with a specific vocational sequence leading to an associates degree or a certificate of completion, or at a four year college or university program leading to a bachelor's degree.
provided:

(a) that it is reasonably expected to improve the earning capacity of the parent/caretaker;

(b) the parent/caretaker is participating in and continues to participate in non-subsidized employment whereby the parent/caretaker works at least 17 1/2 hours per week and earns wages at a level equal or greater than the minimum amount required under federal and State labor law while pursuing the course of study; and

(c) the parent/caretaker is and remains engaged in work while pursuing the course of study and can demonstrate his or her ability to successfully complete the course of study.

(5) Families with an open child protective case, irrespective of income, only when it is determined that such child care is needed to protect the child.

(6) Families with income up to 200% of the State Income Standard when child care services are needed for the child to be protected because the parent/caretaker is physically or mentally incapacitated or has family duties away from the home.

(7) Families with incomes up to 200% of the State Income Standard when child care services are needed for the child’s parent/caretaker to participate in one of the following approved activities provided the activity is identified in the district’s CSP/ICP as an allowable activity, the district determines it is a necessary part of a plan for the family’s self support, and provided that the parent/caretaker can demonstrate that he or she is participating in the approved activity:

(a) Actively seeking employment for a period no greater than six months, and if the parent/caretaker is registered with the NYS Department of Labor, Division of Employment; or

(b) Educational or vocational activities, including attendance in one of the following secondary or post-secondary programs:

   (i) A public or private educational facility providing standard high school curriculum offered by, or approved by, the local school district;

   (ii) An education program that prepares the parent/caretaker to obtain a NYS high school equivalency diploma;

   (iii) A program providing basic remedial education in the areas of reading, writing, mathematics and oral communications for individuals functioning below the ninth month of the eighth grade level in those areas;

   (iv) A program providing literacy training designed to help individuals improve their ability to read and write;

   (v) An English as second language instructional program designed to develop skills in listening, speaking, reading and writing the English language for individuals whose native or primary language is other than English;

   (vi) A two year full-time degree granting program at a community college, a two year college, or an undergraduate college with a specific vocational goal leading to an associate degree or certificate of completion within a determined time frame which must not exceed 30 consecutive months;
A training program which has a specific occupational goal and is conducted by an institution licensed or approved by the State Education Department other than a college or university;

A pre-vocational skills training program such as a basic education and literacy training program; or

A demonstration project designed for vocational training or other project approved by the Department of Labor.

Notwithstanding the potential for some of these educational or vocational training programs to allow for the eventual attainment of a bachelor’s degree or like certificate of completion for a four-year college program, Office regulations do not permit the renewal of such educational or vocational training program enrollment for any additional period is excess of 30 consecutive calendar months, except for families as authorized under paragraph (4) in this section (to attend a two year program other than one with a specific vocational sequence leading to an associates degree or a certificate of completion, or at a four year college or university program leading to a bachelor’s degree), nor does it permit enrollment in more that one such program.

2. TITLE XX OF THE FEDERAL SOCIAL SECURITY ACT

a) Categories of Eligible Families under Title XX

To the degree that the district has chosen to make Title XX funds available for low income child care services, a family is eligible for child care services funded under Title XX if the family meets any of the programmatic eligibility criteria for the NYSCCCBG, or if the child is in need of child care as a preventive service, subject to any applicable priorities and set asides established in the district’s most recently approved CSP/ICP. To exercise this option, the district must identify the programmatically eligible families it chooses to include as eligible families in the district’s CSP/ICP and receive approval from the Office. The district may opt to refine any of the optional categories so that a more specific population is selected by specifying any limitations to the programmatic eligibility criteria in its CSP/ICP.

b) Upper Income Levels for Title XX

For Title XX funds, a district is permitted to establish within its CSP/ICP upper income levels that exceed 200% of the State Income Standard (SIS) for families receiving child care services, up to the maximum income levels shown below.

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<thead>
<tr>
<th>FAMILY SIZE</th>
<th>MAXIMUM INCOME LEVEL ALLOWED</th>
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<tbody>
<tr>
<td>1 to 2</td>
<td>275% SIS</td>
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<tr>
<td>3</td>
<td>255% SIS</td>
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<tr>
<td>4 or more</td>
<td>225% SIS</td>
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3. **CHILD CARE SERVICES DURING BREAKS IN PARENT/CARETAKER RELATIVE’S ACTIVITIES**

**a) FAMILIES RECEIVING TA**

Districts must provide NYSCCBG services to families receiving TA during breaks in activities, for a period up to two weeks. Such child care services may be authorized for up to one month when child care arrangements would otherwise be lost and the program or employment is expected to begin within that one month period, and when the parent or caretaker relative is:

- engaged in work;
- participating in work activities;
- performing community service per SSL Article 5, Title 9-B;
- a teen parent attending high school or equivalent training; or,
- physically or mentally incapacitated, or absent from home due to family duties.

For example, the employer of parent or caretaker relative who is on TA and receiving child care in order to attend work, closed his business for a one week period. The provider requires payment whether or not the child attends the program during that week. The district must provide a child care subsidy.

**b) LOW INCOME FAMILIES**

For all other families who are eligible under the NYSCCBG or Title XX, including families who are receiving transitional child care or “child care in lieu of TA”, a district may provide child care services while the parent/caretaker is waiting to enter an approved activity/employment, or on a break between activities for a period up to two weeks or for a period up to one month, where child care arrangements would otherwise be lost and the subsequent activity is expected to begin within that period. If the district elects to provide this service to low income families, it must be indicated in its CSP/ICP and approved by the Office. For example, a teenage parent is attending high school and has one week off for school vacation. The parent will lose the child care arrangements if subsidy is not provided. If the district has chosen to provide this service to this low income category of family in its CSP/ICP that has been approved by the Office and there are funds available, subsidy for child care during the school vacation must be paid.

4. **PRIORITY POPULATIONS, FUNDING SET ASIDES, WAITING LISTS, AND CASE CLOSINGS**

**a) PRIORITY POPULATIONS**

Federal regulations require that two specific populations of families be prioritized for child care services funded under the NYSCCBG program: *families with very low income* and *families with children who have special needs*. Districts define “families with very low income” by establishing the upper income level for these families in their CSP/ICP. This income level must be set at or below 200% of the State Income Standard (SIS).
In addition to the federally mandated priority populations, each district has the option of establishing local priorities for child care services funded under the NYSCCBG and/or under Title XX of the federal Social Security Act. The district may identify categories of families as local priority populations, in order to “set-aside” funds for that population’s estimated 12-month needs. The district must provide eligible families within a priority group equitable access to child care assistance funds, to the extent that these funds are available. Local priorities must be identified in the district’s CSP/ICP and approved by the Office prior to being implemented. Local priorities may refine but cannot replace the federally mandated priorities. Local priorities may be based on one or a combination of factors, including, but not limited to, household composition, reason for child care, and income level. Local priorities may not have the effect of limiting a parent/caretaker’s choice of any eligible child care provider or be based on a parent/caretaker’s choice of a child care certificate. Families with a child care guarantee must be provided child care services even if a district has insufficient funds. However, there may be times of the year when a district has insufficient funds to cover other families that do not have a child care guarantee.

Identification of a category of family as a “priority” and the definition of “very low income” does not change the income eligibility standards for the NYSCCBG, which are set in the Social Services Law at 200% of the State Income Standard (SIS). However, priorities and the district’s definition of “very low income” assist in determining how intake may be limited or cases closed when a district has insufficient funds to provide child care to all families who meet the State income and programmatic eligibility criteria but do not fall under a guarantee of child care.

A district may decide, for example, that it only has sufficient funds to cover families with incomes below 160% of the SIS. In this case, a family with income of 175% is financially eligible for child care but is ineligible to receive a subsidy at the current time due to insufficient funds. If a district is limiting intake to a particular income level when there are insufficient funds, the district must be prepared to support its decision by documenting spending levels.

When circumstances require that a district must limit the number of cases that will be opened, the provision of assistance to families identified as priorities will dictate which cases are opened first and which cases may be denied due to insufficient funds and/or put on a waiting list. When circumstances dictate that some cases be closed due to insufficient funding, families who do not meet the definition of a priority population will be closed first.

b) FUNDING SET ASIDES

Each district may set aside a portion of the district’s NYSCCBG allocation and/or its Title XX allocation to serve one or more of the federal and/or local priority populations. Families eligible for child care guarantees may have set aside. The method of disbursement of funds to priority groups must be such that eligible families within a priority group will receive equitable access to child care assistance funds to the extent that such funds are available.

Each funding set aside amount must be based on the projected need for the population for a 12-month period. The amount of the set aside, and the rationale, must be described in the district’s CSP/ICP. The amount of the set aside, for each particular priority population for a given 12-month period, may be adjusted up or down by 10 percent without the prior written approval of the Office. Such adjustment to a set aside amount must be reported to the Office within 30 days of the adjustment. Any adjustment of the set aside amount for a priority population that exceeds 10% of the amount originally set in the CSP/ICP requires the prior approval of the Office.
c) **Waiting Lists and Denial of Services**

If a district has set aside funds to service one or more priority populations and all of the available funds that *are not set aside* are projected to be needed for open cases, the district may deny services to a family that is not eligible for a child care guarantee and that does not fall within the priority population for the set asides, or the district may place the family on a waiting list for subsidies.

A district that has not established set asides must open a new case for an eligible family if the district has sufficient funding available to provide child care services to that family at the time the family is determined to be eligible. If the district does not have sufficient funding available because all of the available funds are projected to be needed for open child care cases, the district may deny services to a family that is not eligible for a child care guarantee, or place the family on a waiting list for subsidies.

### d) Case Closings

Once a district has committed all available funds, either through set asides, as approved in its CSP/ICP, and/or projections based on open child care cases, the district may discontinue funding to families that have lower priorities and who are not eligible for a child care guarantee in order to serve those families with higher priorities. A district must rank in its CSP/ICP its identified priority families for the purposes of case closing and case openings for use in the event that funds are insufficient to serve all eligible families. If no priorities are established beyond the federally-mandated priorities and all funds are committed, case closing for families that are not eligible under a child care guarantee and are not a federally-mandated priority must be based on the length of time in receipt of services. The district must choose to close cases based either on the shortest or longest time receiving child care services, but the decision must be specified in its CSP/ICP and be applied consistently for all families.

### D. Responsibilities of Parent/Caretaker

1. **Application for Child Care**

Applicants for child care services must apply, in writing, on forms and in a manner prescribed by the district. The parent/caretaker with whom an eligible child resides is the applicant for such services. The applicant is responsible for providing accurate, complete and current information regarding family income and composition, child care arrangements, and any other circumstances related to the family’s eligibility for child care services. Any change in this information must be reported immediately to the district. The parent/caretaker is informed of this requirement in the LDSS-2921 Application and the LDSS-4148A: “What You Should Know About Your Rights and Responsibilities.”

2. **Active Pursuit of Child Support**

The child’s parent/caretaker must demonstrate that he or she is actively pursuing child support from the non-custodial parent through the district’s Child Support Enforcement Unit (CSEU) or by private legal means or must show good cause for why the family should be excused from this requirement. For more information on determining good cause, refer to *section III.G.5, Good Cause* of this ADM.
3. **CHOOSING A CHILD CARE PROVIDER**

The child’s parent/caretaker is responsible for locating a child care provider that meets the need of his or her child. A parent/caretaker that is unable to locate a child care provider may ask the district for assistance. The district must provide a copy of a list of licensed or registered providers to applicants when the list is requested. The district may also refer the parent/caretaker to the child care resource and referral agency for assistance in arranging child care. Refer to section III.F, Special Provisions Relating to Temporary Assistance Recipients of this ADM for a district’s responsibility when a TA parent cannot find care.

Parents/caretakers are responsible for paying those providers that do not have a contract with the district any differential between the maximum allowable child care market rate and the actual cost of child care. Parents/caretakers who are unwilling or unable to increase their out-of-pocket expenses should be instructed to search for another provider whose costs are closer to the market rate.

A family that chooses to have a provider providing child care services in the child’s own home must provide such provider with all employment benefits required by State and/or federal law, and must pay the provider at least the minimum wage, if required. Families may be referred to the NYS Department of Labor for information on specific requirements.

4. **FAMILY SHARE**

Each low income family receiving child care services must contribute toward the costs of the child care by paying a family share based on the income of the CCSU. The family is responsible for paying the family share in the manner determined by the district. The district may require the family to pay the family share to the district or to one or more child care providers used by the family. A family share may also be required of any family to recover an *overpayment* for child care services regardless of whether any member of the family is receiving TA.

The parent/caretaker has the right to request a fair hearing if he or she disagrees with an action taken or decision made by the district. If a fair hearing is requested, the parent/caretaker is not required to repay any overpayments until after the district prevails at the fair hearing.

The failure of a family receiving child care services to pay the family share established by the district, or to cooperate with the district to develop an arrangement satisfactory to the district to make full payment of all delinquent family shares constitutes an appropriate basis for suspending or terminating such child care services. However, the failure of a recipient to pay his or her family share is not to be used as a basis for the denial or discontinuance of services as part of a plan of protective services for an adult or a child or for preventing the placement of a child in foster care.

For more information on the family share, please refer to the section III.E.5, Family Share of this ADM.

5. **CHILD CARE NEEDED FOR PARTICIPATION IN APPROVED TRAINING**

A parent/caretaker seeking child care services in order to participate in an approved training program must provide documentation that includes, but is not limited to, the following:

- the name of the institution offering or conducting the training program;
• the course of study to be pursued or in which the person is participating;
• the specific vocational or rehabilitative goal;
• the duration of the training (hours per day) including no more than a total of three hour per day to commute (from home) to and from the training location; and
• progress reports (marks, transcripts, letters, and like documents) that indicate that the parent/caretaker is progressing satisfactorily towards attaining the established vocational or rehabilitative goal.

6. IMMEDIATE NOTIFICATION WHEN A CHANGE OCCURS

A recipient is responsible for notifying the district immediately of any change in financial circumstances, living arrangements, employment, household composition, child care provider or other circumstances that affect the family’s need or eligibility for child care services. Such changes may have an immediate impact on issuance of subsidy payment, and may result in a child care overpayment if the recipient does not immediately notify the district.

E. RESPONSIBILITIES OF THE SOCIAL SERVICES DISTRICT

1. APPLICATION

Each individual wishing to apply for social services must be allowed the opportunity to do so without delay. The district must allow the applicant to submit an application by mail.

Districts are required to inform applicants of their rights and responsibilities. This is accomplished through the following documents:

• LDSS-4148A: “What You Should Know About Your Rights and Responsibilities”
• LDSS-4148B: “What You Should Know About Social Services Programs”
• LDSS-4148C: “What You Should Know If You Have an Emergency”

2. INITIAL ELIGIBILITY

Initial eligibility for child day care, informal child care and legally-exempt group child care services must be determined pursuant to the requirements of 18 NYCRR Parts 404 and 415, the district’s options designated in its approved CSP/ICP, and, where applicable, 12 NYCRR Part 1300. Additionally, the required documentation is a necessary prerequisite to the determination of eligibility and must be retained in the case folder.

All applications must be processed promptly. A determination of programmatic and/or financial eligibility must be completed for all applications within 30 days of the date of the application.

Except for the provision of child care services to families transitioning from TA eligible for the child care guarantee, reimbursement for services provided prior to the date of actual determination of programmatic and/or financial eligibility will be allowed only if:
• the eligibility determination was made within 30 days of the date of application, and
• the applicant was determined to have been programmatically and/or financially eligible when services were initiated.

The date of eligibility for services may not precede the date of application except in the case of transitional child care benefits.

Upon the approval of a child care services application, the district must provide an authorization for child care services and send written notice, OCFS/LDSS-4779, Approval of Your Application for Child Care Benefits, within 15 calendar days after the determination has been made to the applicant regarding:

• the eligibility determination,
• the amount of the family share, if required,
• the dates the family share is due to be paid by the applicant,
• the family share payment procedures, and
• the applicant's right to a fair hearing.

If the child care services application is denied, the district must send written notice, OCFS/LDSS-4780, Denial of Your Application for Child Care Benefits, within 15 calendar days after the determination has been made to inform the applicant of the reason for the determination of ineligibility and of the applicant's right to a fair hearing.

Notification must be made using the forms specified above unless the district has requested and been granted approval from the Office for use of local equivalents to replace any of these forms.

3. CONTINUING ELIGIBILITY

Continuing eligibility for child care services must be redetermined no less frequently that every 12 months. In reevaluating eligibility, all eligibility factors must be reevaluated.

If a recipient is found to be eligible at redetermination, the district must send to the recipient the required notice, OCFS/LDSS-4779, Approval of Your Application for Child Care Benefits, within 15 calendar days after the determination has been made.

Districts must send the required notice, OCFS/LDSS-4781, Notice of Intent to Change Child Care Benefits, at least ten days before the proposed action when a change involves an increase or decrease in the amount of benefits or there is a change in the manner of payment that forces the recipient to change child care arrangements.

For those changes that result in a suspension or termination of such benefits, a district must provide notice, using OCFS/LDSS-4782, Notice of Intent to Discontinue Benefits, at least ten days before the suspension or termination of benefits.
4. CHILD CARE SERVICE REQUIREMENTS

a) PARENTAL CHOICE

A recipient must have the option to choose among eligible child care providers. A district may disapprove a child care provider chosen by the recipient in a child preventive case funded under Title XX or a child protective case if the district has reason to believe that it would be contrary to the health, safety or welfare of the child to receive child care services from that provider.

When offering NYSCCBG to a family eligible to receive such services, the district must offer the child’s parent/caretaker the choice to either:

- enroll the child with an eligible child care provider which has a contract with the district for the provision of such services; or
- receive a child care certificate that permits the child’s parent/caretaker to arrange child care services with any eligible provider.

A child care provider must be validly licensed, properly registered or enrolled, as appropriate. When the license or registration of a provider is suspended, the provider is not validly licensed or registered and cannot operate for the term of the suspension.

b) CHILD CARE SERVICES MUST FIT THE HOURS OF THE APPROVED ACTIVITY

The child care services must be reasonably related to the hours of employment, education or training of a child’s parent/caretaker, as applicable, and permit time for pick up and delivery for the child. Additionally, up to eight hours of child care services may be provided, if needed, to enable an employed parent/caretaker who works a second or third shift to sleep if the district indicates in its CSP/ICP that it will provide such services.

c) MOVING OF A CHILD FROM AN ELIGIBLE PROVIDER

No child may be moved by a district from an eligible provider unless the recipient consents to such move; provided, however, that a district may require that a child receiving child care services as part of a preventive case funded under Title XX, or as a child protective services case, be moved from an existing placement with an eligible provider if the district has reason to believe that it may be contrary to the child’s health, safety or welfare to continue receiving services from that provider.

d) ASSIST IN ARRANGING CHILD CARE

A parent/caretaker that is unable to locate a child care provider may ask the district for assistance. The district must provide a list of licensed or registered child care providers located in the district or refer the parent/caretaker to the child care resource and referral agency for assistance in arranging child care. Refer to section III.F, Special Provisions Relating to Temporary Assistance Recipients of this ADM for a district’s responsibility when a TA parent cannot find care.

Districts may use the Child Care Facilities System (CCFS) to obtain a list of providers and update such list against providers on the hold list provided to the district by the Bureau of Early Childhood Services Regional Office.
5. **FAMILY SHARE**

   **a) Income-Based Portion of the Family Share**

   Each family receiving child care services, other than those receiving child care services under TA, must contribute toward the costs of the child care by paying a family share based on the income of the CCSU. This *income-based* portion of the family share for child care services must be determined by the district in accordance with a sliding fee scale. Each district must select a percentage, from 10% to 35%, that it will use to calculate the family share for all families receiving child care services that are required to pay an income-based portion of a family share. The district must use the same percentage for all families. Once the percentage is recorded in the district’s CSP/ICP and approved by the Office, it becomes the basis for the district’s sliding fee scale.

   The family share is calculated as follows:
   
   - Determine the annual gross income for the eligible family.
   - Subtract the State Income Standard (SIS) for the specific family size of the CCSU from the annual gross income of the CCSU to obtain the difference.
   - Multiply the difference by the district’s selected percentage, designated in the CSP/ICP, to get the annual family share.
   - Divide the annual family share by 52 to get the weekly family share.

   A minimum weekly family share of one dollar must be charged to each family receiving child care services that is required to pay an income-based portion of a family share. Each family receiving child care services is responsible for paying only one income-based family share regardless of the number of children in the family who are receiving child care services.

   **b) Overpayment Portion of Family Share**

   A family share may also be required of any family to recover an *overpayment* for child care services regardless of whether any member of the family is receiving TA. The child care overpayment portion of the family share, if any, must be reflected separately from any income-based portion of the family share. Refer to section III.E.13, Child Care Overpayments of this ADM for detailed information on the calculation and collection of overpayments.

   **c) Method of Payment of the Family Share**

   The family is responsible for paying the family share in the manner determined by the district. The district may require the family to pay the family share to the district or to one or more child care providers used by the family.

   **d) Recalculation of Family Share**

   The family share will be recalculated by the district whenever there is a change in income, household circumstances or child care provider that would affect the amount of the family share, or when an overpayment for child care services has occurred and the recovery of such overpayment will be made through the family share, but no less frequently than each recertification.
e) **Failure to Pay Family Share and Termination of Services**

The failure of a family receiving child care services to pay the family share established by the district, or to cooperate with the district to develop an arrangement satisfactory to the district to make full payment of all delinquent family shares, constitutes an appropriate basis for suspending or terminating such child care services. However, the failure of a recipient to pay his or her family share is not to be used as a basis for the denial or discontinuance of child care services as part of a plan of protective services for a child or adult or for preventing the placement of a child in foster care.

f) **When Family Share Exceeds Cost of Care**

If the family share exceeds the cost of care, the family is ineligible for child care payments. However, there may be situations when the family share exceeds the cost of care during certain times of the year and the cost of care exceeds the family share at other times of the year. This happens with school age children who need only part-time child care while school is in session and full-time child care during school vacations and summer break. In this circumstance, when the family share exceeds the cost of care, the family pays the full cost of care. When the cost of care exceeds the family share, the family pays the family share and the district covers the balance.

g) **Informing the Applicant**

At the time of initial eligibility determination, redetermination, and each recalculation of the family share, the district must inform the parent/caretaker, using the OCFS/LDSS-4779, Approval of Your Application for Child Care Benefits, or the OCFS/LDSS-4781, Notice of Intent to Change Child Care Benefits, of the amount of the required family share and when the family share is due to be paid. A provider that is being paid directly by the district must be notified if the provider is required to collect a family share from the recipient. The notification to the provider must include the amount of the family share to be collected and when it is due.

6. **Enrollment of Legally-Exempt Providers**

New health and safety standards require that a legally-exempt child care provider attest to his or her history, if any, in regards to the removal of a child from his or her care through an Article 10 court order; termination of his or her parental rights; and/or denial, revocation and/or suspension of a license or registration to operate a school-age child care program, day care center, family day care home or group family day care home. Districts should refer to 01 OCFS LCM-11, Revised Health and Safety Requirements for Legally-Exempt Providers, and 03 OCFS LCM-17, Legally-Exempt In-Home Child Care Providers as Employees, and 05 OCFS ADM-01, Administration of Medication by Legally-Exempt Child Care Providers, for all other health and safety requirements and enrollment procedures for legally-exempt providers.

a) **New Legally-Exempt Provider Certifications**

To be enrolled by a district to provide child care services under the NYSCCBG, a provider of legally-exempt family child care, legally-exempt in-home child care or legally-exempt group child care which is not required to be operated under the auspices of another federal, State or local government agency must attest and certify in writing:
• Whether the provider has ever had a child(ren) removed from his or her care by court order under Article 10 of the Family Court Act;

• Whether the provider has ever had his or her parental rights terminated; and

• Whether, to the best of his or her knowledge, the provider has ever been denied a license or registration to operate a school-age child care program, day care center, family day care home or group family day care home, or had such a license or registration suspended or revoked.

The provider must provide true and accurate information to the district and the parent/caretaker about the reasons for the denial, suspension or revocation and the reasons underlying the loss of parental or custodial rights. Based on guidelines issued by the Office, a district must determine whether to enroll a provider who indicates that he or she has been subject to any of the conditions listed above. The guidelines for implementing this requirement are provided as Attachment A of this ADM.

b) REvised Enrollment Forms

The naming of the enrollment forms, LDSS-4699, Enrollment Form for Provider of Legally-Exempt Family Child Care and Legally-Exempt In-Home Child Care and the LDSS-4700, the Enrollment Form for Provider of Legally-Exempt Group Child Care has been changed to include an OCFS prefix. The content of these forms has been revised to include the new legally-exempt provider certifications. These forms, OCFS/LDSS-4699 and OCFS/LDSS-4700, are included as Attachments B and C, respectively.

Districts must begin using these immediately for all new enrollments.

Districts must notify current recipients of child care assistance of the requirement for providers to complete the new certifications, and provide the certification sections of the revised enrollment forms, OCFS/LDSS-4699 and OCFS/LDSS-4700, to the child care recipients with instructions to have them completed by their provider and returned as a condition of eligibility, at the next case action, recertification or the end of the enrollment period, whichever comes first. At its option, the district may take the additional action of directly informing the enrolled child care providers of these regulatory changes that may affect their status as enrolled providers. Districts must promptly review the certification sections of the revised enrollment form and make an enrollment decision in accordance with the guidelines.

Other additions and changes to the enrollment forms

Administration of medication

On January 31, 2005, new regulations regarding administration of medication went into effect. A new section has been added to the enrollment forms to address the administration of medication in legally-exempt care. The Office issued 05 OCFS ADM-01 dated January 12, 2005 that details guidelines concerning the administration of medication.

Access to where child care services are being provided

In the final Provider Certification section on both enrollment forms, OCFS/LDSS-4699 and OCFS/LDSS-4700, a new certification was added to allow districts access to the child care site when subsidized care is being provided. Districts may use this clause to verify the appropriate delivery of services.
Other changes to the enrollment forms

For both forms, language was added to the case identifying information section to clarify that a parent/caretaker may, but is **not required** to, provide his/her Social Security Number. The parent/caretaker may not be required to disclose the Social Security Number as a condition of eligibility. It explains that the Social Security Number will be used to assist in identifying the child care parent’s/caretaker’s file. It may also be used by federal, State and local agencies to prevent duplication of services and fraud, and for federal reporting.

In Section I of the OCFS/LDSS-4699, instruction was added to advise the parent and provider that they must submit the Agreement for Legally-Exempt In-Home Child Care when in-home care is provided. Also the response to 2B under Provider Status, was reworded, from “I care for only 2 children...” to say, “I care for no more than 2 children...”

**c) Monitoring Determinations Prior to Authorizing Payment**

Prior to authorizing payment for child care services provided by a provider of legally-exempt family child care, legally-exempt in-home child care or legally-exempt group child care, the district must review information obtained from the provider and determine whether the provider is exempt from the State’s child day care licensing and registration requirements and whether the provider meets the basic health and safety requirements. Enrollment information must be updated and reviewed at least annually and at any other time when a change in circumstances warrants such a review.

A district must describe in its CSP/ICP how it will examine and verify the accuracy of information contained in the enrollment forms completed by legally-exempt providers. The district’s monitoring activities may involve other components in addition to the review and verification of enrollment paperwork, attendance sheets, work schedules, bills signed by both the child’s caretaker and the provider, and other payment records. For example, a district may:

- Conduct random site visits during the hours care is being provided to verify information on the enrollment forms regarding health and safety and whether child care is actually being provided as billed. These random visits can only be conducted as part of an audit function or when the district has received approval to conduct such as part of its CSP/ICP.

- Conduct file reviews to determine whether providers are submitting enrollment documents at least annually and to determine if child care services are reasonably related to the hours of employment, training or education of the child’s parent/caretaker.

- Conduct file reviews to determine whether those child care providers who are also receiving TA are accurately reporting their income for the purpose of computing their TA benefits.

- Define additional standards for legally-exempt providers in the district’s CSP/ICP. Such standards may include a routine home visit to assess health and safety prior to enrollment; or a local criminal or local child welfare database check of the caregivers and/or persons residing in the home where the child care is provided.

- Make fraud referrals when the district has reason to believe that a provider or a parent/caretaker has made a fraudulent statement.
7. **MONITORING OF ATTENDANCE AND PAYMENT RECORDS**

Attendance and payment records must be monitored for all providers receiving payment for child care services regardless of the method of payment.

8. **ADDITIONAL DISTRICT STANDARDS FOR PROVIDERS OF SUBSIDIZED CHILD CARE SERVICES**

Districts may submit to the Office justification for a need to impose additional requirements on child care providers providing subsidized child care services that exceed the current State and federal regulations. The justification for additional standards must include a plan to monitor compliance with such additional requirements. Additional standards are established by including them in the district’s CSP/ICP and obtaining approval by the Office. The Office is not obligated to take any action to enforce any additional requirements imposed by a district on child care providers providing care to children receiving a subsidy. The district must not impose such requirements or monitoring without the written approval of the Office.

If the local standard is included in its CSP/ICP and approved the Office, a district may choose to conduct announced or unannounced inspections of the records and the premises of providers of child care to subsidized children. An example of an additional standard a district may select includes conducting inspections prior to the actual provision of child care to subsidized children for the purpose of determining whether a child care provider is in compliance with applicable local laws and regulations and any additional requirements imposed on the provider by the district. However, a district may always conduct announced or unannounced inspections of the records and the premises of any provider of care to subsidized children as part of its audit function without the prior approval of the Office.

If the district finds any suspected violations of child care provider licensing or registration regulations promulgated by the Office, and the district must immediately notify the Office and provide the Office with an inspection report documenting the results of such inspection.

9. **PAYMENT TO NON-COMPLIANT PROVIDER**

A district may refuse to allow a child care provider that is not in compliance with regulations and requirements promulgated by the Office, or any additional district standards as approved by the Office, to provide subsidized child care services to a child. A district may refuse to provide subsidy payments to child care providers who are considered “non-compliant” as set forth herein.

   (1) **A legally-exempt, enrolled child care provider** must be considered “non-compliant” for the purpose of stopping the issuance of subsidy payments if the district determines:

   (a) the provider does not meet the health and safety requirements or other requirements set forth by the Office;

   (b) the provider does not meet the definition of a legally-exempt family child care, legally-exempt in-home child care or legally-exempt group child care; or

   (c) the provider does not meet locally defined additional requirements set forth in the district’s CSP/ICP and approved by the Office.
A licensed or registered child care provider has due process rights and may only be considered “non-compliant” for the purpose of stopping the issuance of subsidy payments, after one of the following events occurs:

(a) the provider’s license or registration was suspended following a finding that the public health or a child’s safety or welfare is in imminent danger;

(b) the provider was issued a letter to revoke or deny the provider’s child care license or registration and the child care provider’s due process hearing rights have been adhered to and all rights to appeal have been exhausted, resulting in a final decision to revoke or deny the provider’s child care license or registration;

(c) the provider was issued a written notification that the provider’s license or registration is no longer valid; or

(d) the provider is closed.

The district is responsible for documenting the eligibility status of a provider prior to approving payments for child care. The eligibility status of licensed and registered providers, except for day care centers licensed in New York City, can be verified by using the search capability of the CCFS. CCFS contains up-to-date information on suspension and/or closure actions taken by the Bureau of Early Childhood Services (BECS) licensors. Providers can be viewed according to their facility statuses.

Prior to approving the issuance of a child care subsidy payment, the district should review the statuses of licensed or registered child care providers in their area in CCFS to determine which, if any, have a status of “suspended” or “closed.” When providers have been suspended or closed, the district should check the “status effective” date in CCFS to determine if the provider was “suspended” or “closed” during times when subsidized child care was provided. Payment cannot be made for child care provided during the times the provider was “suspended” or “closed.” However, subsidy must be paid for child care provided for the time period that a program is legally allowed to continue to operate.

Any parent choosing to use a suspended provider should be made aware that such providers are ineligible for subsidy and the district may not issue subsidy payment for care provided by such provider.

10. DUE PROCESS REQUIREMENTS

Written notice of the determination of eligibility and the family share to be paid by the applicant, or ineligibility for child care services, as well as any modification thereto, must be sent to the applicant or recipient. Recipients of child care services must receive timely and adequate notice of any change in child care services, except for changes in the manner of payment. A district must provide timely and adequate notice for those changes that result in a discontinuation, suspension, reduction or termination of such benefits, or force a change in child care arrangement.

An applicant or recipient of child care services must be notified of the right to a fair hearing whenever there is a determination affecting his or her family’s eligibility for child care services.

11. JURISDICTIONAL REQUIREMENTS

When a family which is guaranteed child care services moves from one district to another district within the State, the new social service district is responsible for paying the family’s child care services
beginning with the second full month that the family lives in that district, provided the family remains
eligible for guaranteed child care services. The former district is obligated to continue to pay for the
guaranteed child care services during the month the family moves to the other district and the first full
month following the month the family moved.

However, in a situation where the district requires a recipient to attend a program, such as substance
abuse residential facility, in another district as part of his or her employment plan, the original district
retains responsibility for providing TA benefits for that recipient. The original district is also
responsible for all child care services needed for any child who moves to live with, or be near, the
recipient, until the recipient’s TA expires.

When a child is placed in foster care in a social service district outside of the district where the child
resided at the time of placement, and the foster family needs child care services for the foster child and
the foster family is eligible to receive such services, the district that has financial responsibility for the
foster child will be responsible for providing child care services for the foster child.

For all other families not described above, the social service district where a family resides will be
responsible for providing child care services.

12. OTHER ADMINISTRATIVE REQUIREMENTS

A district has the following responsibilities for the administration of child care services:

(1) In the case of providers from whom the district purchases child care services, contracts, when
required by 18 NYCRR section 405.3, must be negotiated in accordance with the purchase of
service requirements set forth in such section. The district may review provider budgets, and
must monitor attendance and payment records for providers.

(2) Required reports and claims for reimbursement must be prepared and submitted in the form
and manner and at the times required by the Office of Temporary and Disability Assistance
and the Office of Children and Family Services.

(3) Each district must collect and submit information to the Office, in the form and manner and
at the times specified by the Office, concerning the disbursement of child care subsidy funds
showing the geographic distribution of children receiving child care services from the
district.

(4) The records required to be maintained by State and federal law and regulation, and by
requirements of the Office of Temporary and Disability Assistance and the Office of
Children and Family Services, must be retained as stated. A district must keep and retain
adequate claiming records, retain appropriate documentation in the recipient’s case file and
make appropriate records available for audit by appropriate State and federal agencies.

(5) The district is responsible for reporting to the Office, in the form and manner and at the times
required by the Office, specific information regarding child care services, including but not
limited to, the number of children receiving each specific child care service, the costs of such
services separated by the type of child care providers used, and any additional information
required for the State to meet federal reporting requirements.

(6) The district must submit a child care services plan to the Office for approval as part of the
district’s multi-year CSP/ICP and any annual implementation reports. The plan must be
submitted in the form and manner prescribed by the Office and at the times required by the Office. A district’s child care subsidy program must be implemented in accordance with the CSP/ICP approved by the Office.

13. CHILD CARE OVERPAYMENTS

a) OCCURRENCE OF OVERPAYMENTS
Overpayments for child care services may occur as a result of payment for aid continuing for a parent/caretaker who lost a fair hearing. Additionally, overpayments may occur when an applicant or recipient fails to inform the district of changes affecting his or her family’s eligibility or child care benefit level. These changes include but are not limited to the following:

- household income
- household composition
- work or approved activity schedule
- hours of care needed
- child care provider
- rate changes.

Overpayments may occur due to the failure of the provider to report changes. These changes include but are not limited to the following:

- child’s absence, that is not covered by the district’s absence policy
- child withdrawn from care
- hours of care provided
- rate changes.

Overpayments may also occur when a district fails to take timely action to make a change in the family’s child care benefit level or when the district makes an error in calculation of the family’s child care benefit level.

b) DISTRICT ACTION TO CORRECT OVERPAYMENT
The district must take all reasonable steps to correct promptly any overpayments for child care services to a child’s parent/caretaker or a child care provider. For the purposes of this section, “promptly”, on the part of the district, means that corrective action must be taken and the client must receive a client notice within 60 days of the date the client notified the district of a change in circumstances. However, when an overpayment occurs as a result of a district’s failure to act within 60 days on information provided by a parent/caretaker regarding the circumstances affecting child care benefits, no recovery may be made from the party who provided such information. In the case of a district calculation error or other error causing a child care overpayment, the corrective action must be taken and the client must receive a client notice within 60 days of the date of occurrence of the district error.
Although there is a 60 day grace period for corrective action on child care overpayments, a district is encouraged to take corrective action as soon as possible to lessen the economic impact on the family. A district should not wait until the next recertification period to recoup child care overpayments. Such a delay by the district may result in a family receiving additional child care benefits for which it is no longer eligible or applying an inappropriate amount towards the family share of child care costs.

**c) Recovery of Overpayment**

The following actions are to be taken by the district to determine the overpayment and whether to recover the amount of overpayment:

- determine how the child care overpayment occurred and who was responsible for the overpayment. Responsible parties may include the district, parent, provider or a combination of one or more of these parties;
- determine the amount of the overpayment including the time period for which an overpayment occurred;
- estimate the costs of recovery; and
- determine whether the overpayment rises to the level of fraud.

The district must attempt to recover overpayments when:

- the overpayment resulted from fraud (regardless of the amount of overpayment or whether the parent/caretaker is a current or former recipient);
- the parent/caretaker is currently receiving child care benefits (regardless of the amount of overpayment); or
- the estimated cost of recovery of the overpayment from a former recipient is less than or equal to the amount of overpayment.

However, when an overpayment occurs as a result of a district’s failure to act within 60 days on information provided by a parent/caretaker regarding the circumstances affecting child care benefits, no recovery may be made from the party who provided such information. State reimbursement and FFP cannot be claimed for child care overpayments if the district did not act promptly to correct the overpayment.

**d) Mechanism of Recovery**

A district must determine the mechanism by which to collect a child care overpayment. Recovery of an overpayment may occur through:

- Repayment to the district by the child’s parent/caretaker or provider, whomever is the responsible party.
- Increase in family share. When a child care overpayment occurs with a TA recipient the overpayment can be recouped by imposing a family share on the TA recipient.
- Reduction in the district’s payment to the child care provider and increase in the parent/caretaker’s family share except where a contract for such services obligates the district to make full payment.
Recovery of overpayments can be made only from child care benefits unless the recipient voluntarily requests that it be made from his/her available income. If the family is currently in receipt of benefits, the district may reduce the amount of the child care benefit and increase the amount of the family share owed by the parent. Alternatively, the district may continue to pay the same benefit level to the provider but instruct the parent/caretaker to pay the family share directly to the district.

When it has been determined that a child care overpayment to a recipient or former recipient has occurred, which does not involve fraud, districts must complete Attachment D, OCFS/LDSS-7009, Notice of Child Care Assistance Overpayment and Repayment Requirements. This notice includes information on the time frame, amount and reason for the overpayment; the mechanism for collection of the overpayment; and the right to an agency conference and fair hearing if the recipient disagrees with the district’s determination of the overpayment. The district must give the parent/caretaker the completed form and keep a copy of the signed form in the case record.

In recovering overpayments for child care services from child care recipients, the district must see that child care recipients retain a reasonable amount of funds for any given month. Recovery attempts and amounts must be reasonable. Ideally, complete recovery of all child care overpayments should occur within 12 months. However, in no event can the monthly recovery amount exceed 10% of the monthly gross income of the family. If the recovery amount would exceed 10% of the gross income, the recovery period must be extended beyond 12 months. A parent/caretaker may elect to waive the above limitations and pay back a child care overpayment in a lump sum, over a period of less than 12 months or in amounts that exceed 10% of his or her gross income. Alternatively, districts should consider those circumstances when a parent/caretaker requests that recovery amounts be reduced to less than 10% of the monthly gross income and collection periods be extended beyond 12 months because of undue hardship. In cases in which a TA recipient has no income beyond the TA grant, the district should delay recovery of the overpayment until the family has income in addition to the TA grant. Monthly gross income for a TA recipient includes the amount of the TA cash grant and any earned or unearned income.

When a parent/caretaker or provider is deemed responsible for the child care overpayment, due to acts of commission or omission, the overpayment must be recovered from the parent/caretaker on whose behalf the payments were made or the provider who received payment for such services, whoever is responsible for the overpayment. Overpayments to child care providers or former recipients of child care services who refuse to repay may be recovered in accordance with the legal remedies available under State law.

Underpayments and overpayments may be offset against each other. Districts must collect and maintain information on the collection of overpayments and make appropriate adjustments when claiming Federal Financial Participation (FFP) and State reimbursement, and when satisfying the district’s maintenance of effort requirement under the NYSCCBG program. FFP and State reimbursement cannot be claimed for overpayments where no repayment is made and no recovery occurs.

e) APPLICANTS WITH OUTSTANDING OVERPAYMENTS

An applicant for child care services who has not re-paid past overpayments for previous child care services that resulted from the failure to notify the district of a change in circumstances or from fraud, must agree to and comply with a plan to make full repayment of such child care overpayments as a condition of being eligible for the new child care services.
**f) SUSPENDING OR Terminating Benefits**

With the exception of child care services authorized as a child protective or a preventive service, a recipient of child care services who fails to comply with an agreed upon plan, must have his or her family’s child care benefits suspended or terminated until such time as the recipient comes into compliance with such a plan.

In this situation, districts have the option to either suspend child care benefits or to reduce child care benefits. The OCFS/LDSS-4782, Notice of Intent to Discontinue Child Care Benefits, must be sent prior to any action being taken on the recipient’s child care benefits. However, districts must take into account that TA recipients cannot be sanctioned for non-participation in a work activity, if they do not have affordable child care. This situation must be examined when determining any reduction in child care benefits for TA families.

**14. FRAUD**

With the exception of child care services authorized as a child protective or child preventive service, a recipient or former recipient of child care services who has been convicted of or has voluntarily admitted to, on or after May 15, 2004, fraudulently receiving child care services is subject to a disqualification from the child care subsidy program.

**a) Voluntary Admission of Child Care Fraud**

For the purpose of a voluntary admission by a recipient or former recipient, fraudulently receiving child care assistance means that an applicant or recipient applies for or receives child care assistance and intentionally misrepresents, conceals or withholds facts for the purpose of establishing or maintaining eligibility for or increasing the level of child care assistance. The district must obtain a written agreement signed by the individual in which the individual:

- understands and agrees that he or she or a member of the CCSU made a false or misleading statement or committed an act intended to mislead, misrepresent, conceal or withhold facts concerning eligibility for child care assistance;
- describes the fraudulent activity in which he or she participated;
- is notified of the disqualification penalties;
- is held responsible, along with members of the CCSU, for the repayment of any overpayment that resulted from the fraud; and,
- agrees that he or she understands the consequences of signing the agreement.

**b) Disqualification Penalties**

A recipient or former recipient who has been convicted of or has voluntarily admitted to fraudulently receiving child care services, and the CCSU for which he or she is a member, are disqualified from receiving child care services for a period of time to be determined in accordance with the following time periods established for an Intentional Program Violation in the TA program as set forth in 18 NYCRR 359.9(a):

1. for six months, for the first admission or conviction of child care fraud;
(2) for 12 months, for the second admission or conviction of child care fraud, or when the offense results in the wrongful receipt of benefits in an amount between $1,000 and $3,900;

(3) for 18 months, for the third admission or conviction of child care fraud or when the offense results in the wrongful receipt of benefits in an amount in excess of $3,900; or

(4) for five years, for the fourth or any subsequent admission or conviction of child care fraud.

The disqualification penalty will be applied as follows:

(1) For a family applying for child care services on or after May 15, 2004 who admitted or was convicted of child care fraud at any time in the past, the district will apply the appropriate disqualification penalty to the applicant and CCSU.

(2) For a family who applied for child care services prior to May 15, 2004 who admitted or was convicted of child care fraud at any time in the past and the district makes the determination of eligibility on or after May 15, 2004, the district will apply the appropriate disqualification to the applicant and CCSU.

(3) For a current recipient who was authorized for child care services prior to May 15, 2004 and who admitted or was convicted of child care fraud on or after May 15, 2004, the district will apply the appropriate disqualification penalty to the recipient and CCSU.

(4) For a current recipient who was authorized for child care services prior to May 15, 2004 and who admitted or was convicted of child care fraud prior to May 15, 2004, the district may not apply a disqualification penalty to the recipient and CCSU.

The disqualification penalty is applied to applicants or recipients that are otherwise eligible for a child care subsidy. If an application for child care is denied or a case is closed because the applicant/recipient is not otherwise eligible, then the disqualification is pended until the individual reapplies and is found eligible for child care subsidies.

If a recipient of TA needs child care in order to participate in an activity required by the district, the disqualification of eligibility for child care services based on a child care fraud conviction or voluntary admission will be suspended during the recipient’s participation in the required activity. However, the disqualification period will commence once the recipient is no longer participating in a required activity.

The district must notify applicants, recipients and former recipients when they are subject to a disqualification for child care fraud by using the Attachment E, OCFS/LDSS-7010, Notice of Fraud Determination, Disqualification for Child Care Benefits and Repayment Plan. The district must give the parent/caretaker the completed form and keep a copy of the signed form in the case record.

F. SPECIAL PROVISIONS RELATING TO TEMPORARY ASSISTANCE RECIPIENTS

The following provisions apply to TA recipients:

(1) Child care services are guaranteed to a family who has applied for or is in receipt of temporary assistance when such services are needed for a child under thirteen years of age in order to enable the child’s custodial parent or caretaker relative to participate in activities required by a social services official pursuant to title 9-B of article 5 of the Social Services Law.
(2) A district may not reduce or terminate TA to an individual or an individual and the family of such individual based on a refusal of the individual to comply with applicable work requirements if the individual is a custodial parent or caretaker relative of a child under 13 years of age and the individual has a demonstrated inability, as determined by the district, to obtain child care needed to comply with such work requirements due to the following reasons:

(a) Unavailability of appropriate and accessible child care within a reasonable distance from the individual's home or work site;

(b) Unavailability or unsuitability of informal child care by a relative or under other arrangements; and

(c) Unavailability of appropriate and affordable formal child care arrangements.

(3) For the purposes of this section, the following definitions apply:

(a) **Applicable** child means a child under thirteen years of age who is residing with a custodial parent or caretaker relative and who needs child care in order for the parent or caretaker relative to comply with the applicable work requirements.

(b) **Appropriate** means the child care provider(s) is open for the hours and days the parent or caretaker relative would need child care in order to comply with the applicable work requirements and the provider(s) is able and willing to provide child care services to the applicable child including addressing any special needs of the applicable child.

(c) **Accessible** means the parent or caretaker relative is able, by available public or private transportation, to get the applicable child to and from the child care provider(s) taking into consideration the age and any special needs of the child.

(d) **Reasonable distance** means the child care provider(s) is located within a reasonable distance from the parent or caretaker relative’s home and work activity, based on locally accepted community standards, as defined in the district’s CSP/ICP.

(e) **Unsuitability** of informal child care means the physical condition of the home in which care would be provided, or the physical or mental condition of the informal provider, would be detrimental to the health, welfare and/or safety of the applicable child.

(f) **Affordable** means the parent or caretaker relative would have sufficient income to pay the family share for the child care services, if required, and/or to pay the cost of care above market rate, if applicable. If the potential provider is a provider of informal child care who would be providing care in the child’s home, affordable also means that the parent or caretaker relative would have sufficient income to pay the provider at least minimum wage, if required by State and/or federal law, and to provide such provider with all employment benefits required by State and federal law.

(4) The district must inform the family:

(a) About the exception to the penalties associated with the work requirement if the family is unable to locate child care needed to comply with applicable work requirements. The district must explain the procedures used to demonstrate an inability to obtain child care and the definitions of the terms “appropriate” “accessible”, “reasonable distance”, “unsuitability of informal child care” and “affordable”; and
(b) That any family assistance received during the time the parent or caretaker relative receives an exception from the work requirements under this section will count toward the family’s 60 month limit on receiving such benefits.

(5) It is the responsibility of the parent or caretaker relative to locate child care needed to comply with such work requirements.

(6) If the parent or caretaker relative cannot locate the needed child care on his or her own, the parent or caretaker relative must inform the district of his or her efforts to locate such care and request additional assistance in locating care.

(7) When a parent or caretaker relative requests assistance from the district in locating child care due to an inability to locate the needed child care on his or her own, the district must:

(a) Assist the family by referring the parent or caretaker relative to the child care resource and referral agency that is responsible for the areas in which the parent or caretaker relative lives and/or would be expected to work or to another appropriate child care referral agency; and/or

(b) Provide the parent or caretaker relative with a list of names, addresses and telephone numbers of eligible providers.

(8) The parent or caretaker relative must follow-up on all referrals from the district, child care resource and referral agency and/or other child care referral agency, as applicable, and must report his or her success or failure to the district. In order to be excused from complying with the applicable work requirements, the parent or caretaker relative must have a demonstrated inability, as determined by the district, to locate the needed child care for the applicable child(ren) despite the referrals from the district, the child care resource and referral agency and/or any other child care referral agency, as applicable.

(9) If the parent or caretaker relative has a demonstrated inability, as determined by the district, to locate the child care needed for the applicable child(ren) despite such referrals, the district must offer the parent or caretaker relative two choices of eligible child care providers at least one of which must be a licensed or registered provider.

If the parent or caretaker relative is unwilling to accept child care services from either of these providers; is unable to demonstrate, as determined by the district, that such child care is not appropriate, accessible, suitable, affordable or a reasonable distance from the individual’s home or work site; and the individual fails to comply with the applicable work requirements, then the district may reduce or terminate temporary assistance to such parent or caretaker relative and/or that individual’s family in accordance with applicable statutory or regulatory provisions.

(10) A district must determine that a parent or caretaker relative has a demonstrated inability to locate needed child care if all of the following conditions are met:

(a) The parent or caretaker relative has provided an attestation that he or she has contacted those accessible and suitable friends, neighbors and relatives who are within a reasonable distance of the individual’s home or work site and who have the potential to act as informal child care providers for the applicable child(ren) but those individuals are not appropriate or affordable. The attestation must include a list of the names of the friends, neighbors and relatives the parent or caretaker relative contacted; and
(b) The parent or caretaker relative has provided an attestation that he or she has contacted all of the child care providers to which the parent or caretaker relative was referred by the district, a child care resource and referral agency and/or any other child care agency, as applicable. The attestation must specify the names of each potential provider contacted and the reasons why that provider is not appropriate, accessible, suitable, affordable or a reasonable distance from the individuals home or work site.

(11) The district must review and verify the attestations provided by the parent or caretaker relative. If the attestations validly document the unavailability of appropriate, accessible, suitable, affordable child care within a reasonable distance from the individual's home or work site, the district must excuse the parent or caretaker relative from the applicable work requirements.

(12) A parent or caretaker relative who has been excused from the applicable work requirements due to a demonstrated inability to locate needed child care for his or her applicable child(ren) will be excused from the work requirements only for so long as that demonstrated inability continues to exist.

The parent or caretaker relative must document to the district, through the submission of new attestations on a periodic basis as set forth by the district, that the parent or caretaker relative is continuing to attempt to locate the needed child care including following-up on all new referrals from the district, child care resource and referral agency, and/or any other child care agency, as applicable, and by responding to all offers of child care from the district. New attestations must be submitted in accordance with a schedule developed by the district based on the parent’s or the caretaker relative’s employment plan.

G. CHILD SUPPORT REQUIREMENTS

This section replaces the child care sections of 99 ADM-5 and 00 INF-2.

1. RESPONSIBILITIES OF PARENT/CARETAKER

For all households in which a parent is continually absent, the custodial parent/caretaker seeking a child care subsidy must demonstrate that: he or she has court-ordered child support in place, he or she is actively pursuing a court order for child support, or he or she has good cause not to actively pursue child support (see additional information in the section III.G.5, Good Cause of this ADM for criteria on establishing good cause). Voluntary payment of child support on the part of the non-custodial parent or alleged non-custodial parent, without a written separation agreement signed by both parties or a court order specifying child support, does not meet the child care requirement to actively pursue child support. The requirement to actively pursue child support pertains to all children in the CCSU even if the custodial parent/caretaker is not requesting a child care subsidy for each and every child under 13 years of age. However, no amendment to a child support order should be sought to add child care expenses for any child age 13 years or older.

A custodial parent/caretaker can demonstrate to the child care unit that he or she is actively pursuing child support either by:
a. providing documentation that he or she has applied for services from the Child Support Enforcement Unit (CSEU); or

b. providing documentation that he or she is actively pursuing child support privately.

In some circumstances, the custodial parent/caretaker may be asked to actively pursue a modification of an order that does not specifically address child care expenses (see section III.G.6.d, Establishing and Modifying Child Support Orders of this ADM).

Once court-ordered child support is in place, the custodial parent/caretaker must continue to actively pursue support by modifying and enforcing the order, if appropriate. If the custodial parent/caretaker has applied for child support services from the CSEU, the CSEU will provide services to establish, modify or enforce the child support order.

A custodial parent/caretaker, who has chosen not to actively pursue support by applying for child support services through the CSEU, must demonstrate the actions he or she, or his or her legal representative, is taking to establish, modify, or enforce child support.

The custodial parent/caretaker must demonstrate to the child care worker that he or she is continuing to actively pursue child support. Copies of subpoenas, petitions, and scheduled court dates must be provided by the custodial parent/caretaker to the child care worker to demonstrate the custodial parent/caretaker is continuing to actively pursue support.

**a) Intact Households - Parents of Children Born Out of Wedlock**

The court will not order child support when both parents are living with the child because there is no non-custodial parent to be held chargeable under a court order for child support. While the district may encourage these parents to legally establish paternity, there is no child care eligibility requirement to establish paternity or to seek child support so long as the parents and child(ren) reside together. If one of the parents moves out of the household, the custodial parent must actively pursue child support from the non-custodial parent in order to be eligible for child care subsidy, unless a good cause exception exists.

**b) Custodial Parents in Receipt of Temporary Assistance**

If the custodial parent or caretaker relative is already pursuing court-ordered support through the CSEU under the requirements of the TA program, his or her continued compliance under the TA program will meet the child care requirement to actively pursue child support. If the custodial parent or caretaker relative has a good cause exception and/or a child support waiver due to domestic violence, the custodial parent or caretaker relative does not need to cooperate with child support requirements in order to receive child care while the good cause exception and/or waiver are in effect.

In addition, a custodial parent or caretaker relative, who receives TA and needs child care in order to participate in an activity required by the district, is guaranteed child care services even if the children are not in receipt of TA (such as those in receipt of SSI), and even if the custodial parent or caretaker relative fails to cooperate with TA child support requirements. The guarantee of child care for the TA custodial parent or caretaker relative supersedes the child care requirement to pursue child support.

However, a custodial parent or caretaker relative who is receiving TA, but is not required by TA to pursue child support, and who needs child care for a purpose not covered by the child care guarantee, must actively pursue child support in order to be eligible for child care services. This circumstance may
occur when the child is in receipt of SSI and the custodial parent or caretaker relative needs child care in order to participate in an activity that is not required by the district (e.g., to attend college in addition to meeting their TA work requirements). The child care guarantee would apply to the time the custodial parent or caretaker is working. However, since attending college is an optional activity that is in addition to his or her required TA activity, the child care guarantee would not apply for care needed to attend college. In order to receive child care for college attendance in addition to child care for his or her TA work requirement, the district must have included this activity in its CSP/ICP, have child care funds available and the custodial parent or caretaker relative must actively pursue child support.

c) **Custodial Parents in Receipt of Medical Assistance**

If the custodial parent/caretaker is in receipt of Medical Assistance (MA) for the child and is already actively pursuing child support, his or her continued compliance will meet the child care requirement to actively pursue child support. This assumes that the parent/caretaker is pursuing cash support as well as medical support. If the parent/caretaker is not pursuing cash support for the child, he or she will be required to do so for purposes of the child care subsidy eligibility. If the custodial parent/caretaker has a good cause exception, the custodial parent/caretaker does not need to actively pursue child support requirements in order to receive child care benefits while the good cause exception is in effect. See additional information in the section III.G.5, Good Cause of this ADM for criteria on establishing good cause.

d) **Transitioning Clients and Clients Eligible for “Child Care in Lieu of TA”**

Transitioning clients who meet the eligibility criteria for the transitional guarantee and clients who are eligible for the “child care in lieu of TA” guarantee must actively pursue child support. The child care guarantee in these cases does not supersede the requirement to actively pursue child support.

The custodial parent or caretaker relative may still claim the good cause exception. Additionally, if the client can demonstrate that there was a child support waiver due to domestic violence (DV) at the time of the TA case closing, the child care worker must evaluate with the custodial parent or caretaker relative whether good cause still exists. A DV waiver that is dated within the last 12 months is sufficient evidence to demonstrate good cause. See additional information in the section III.G.5, Good Cause of this ADM for criteria on establishing good cause.

e) **Custodial Parents Not in Receipt of TA**

A custodial parent/caretaker who is applying for or receiving child care but is not receiving TA must demonstrate that he or she is actively pursuing child support unless he or she has a good cause exception (see additional information in the section III.G.5, Good Cause of this ADM for criteria on establishing good cause). In order to meet this requirement, the custodial parent/caretaker may apply for child support services through the CSEU, or may pursue child support by hiring a legal representative or pursue court-ordered child support on his or her own behalf. If he or she chooses to apply for child support services through the CSEU, he or she must complete the DSS-2521, Application for Child Support Services, and must voluntarily continue to actively pursue child support as described in section III.G.2, Actively Pursuing Child Support Through the CSEU of this ADM. In the absence of voluntary compliance with child support activities, the CSEU will close the child support case. In these cases, in order to maintain eligibility for child care services, the custodial parent/caretaker must demonstrate to the child care worker that he or she is actively pursuing child support through other legal means (i.e.
privately) or demonstrate good cause not to actively pursue child support.

**f) Non-Custodial Parents Who Have Signed a Consent for Adoption and/or Have Voluntarily Surrendered Their Parental Rights**

If a non-custodial parent has signed a consent for adoption and/or surrendered his or her parental rights, the custodial parent/caretaker will not be required to pursue child support for this child in order to be eligible for child care benefits.

**g) Caretakers Who are Not the Child’s Parents**

A caretaker, legal guardian and other individual acting in loco parentis of a child and applying for child care services, is required to demonstrate that he or she is actively pursuing child support from the child’s parents unless there is a good cause exception not to do so (see additional information in the section III.G.5, Good Cause of this ADM for criteria on establishing good cause). Child care workers should carefully consider the circumstances under which the child was placed in the household of the caretaker. In many of these cases, the caretaker may have good cause not to actively pursue child support.

**h) Foster Parents**

Foster parents, caring for a child who is in the care and custody of the local social services district, that apply for a child care subsidy for such a foster child are exempt from child support requirements for that foster child. This exemption only applies to the foster child. If the foster parents need child care services for their own children, they must actively pursue child support for their own children parents unless there is a good cause exception not to do so (see additional information in the section III.G.5, Good Cause of this ADM for criteria on establishing good cause).

2. **Actively Pursuing Child Support Through the CSEU**

Obtaining an appointment with the CSEU may be the first step in actively pursuing child support and should be considered acceptable proof of intent to comply with the requirement to actively pursue child support until it is shown or evidence appears to the contrary. Actively pursuing child support through the CSEU means that the custodial parent/caretaker: applies for child support services by completing the DSS-2521, Application for Child Support Services; takes any necessary steps to establish the paternity of a child born out of wedlock; establishes and enforces orders of child support; and modifies orders of child support, where appropriate, to be consistent with the Child Support Standards Act, which includes a provision for the payment of reasonable child care expenses. The custodial parent/caretaker may need to seek the assistance of the CSEU when an order needs to be modified; may have to appear in court; and, in some districts, will be responsible for filing the petition.

It is the responsibility of the custodial parent/caretaker to demonstrate he or she is actively pursuing support through the CSEU by providing documentation that he or she has applied for CSEU services. The custodial parent/caretaker must write and submit a status report and provide copies of supporting documentation to the child care worker. The status reports must, where applicable and appropriate: indicate when petitions will be filed and court dates have been scheduled, provide proof of attendance at required court dates, provide reasons for any delays granted by the court and provide any other information that would demonstrate the custodial parent/caretaker’s active pursuit of child support based
on the stage of the child support enforcement process. If a custodial parent/caretaker is unable to provide verification to the child care worker, the district should determine whether the custodial parent/caretaker should seek assistance from the CSEU or the Family Court in obtaining copies of documents to demonstrate active pursuit of child support.

With the exception of legal services, child support services through the CSEU are provided free of charge. Custodial parents/caretakers who choose to receive legal services in addition to child support services, must sign the Right to Recovery section of the DSS-2521. The costs of any legal services will be recovered only when child support is collected. A custodial parent/caretaker is not required to obtain legal services as part of his or her active pursuit of child support. He or she may choose to represent himself or herself, request legal services from the CSEU or hire his or her own attorney.

Actively pursuing support through the CSEU is one of two ways to demonstrate to the child care unit that the custodial parent/caretaker is actively pursuing child support. In the event that the custodial parent/caretaker elects not to continue to actively pursue support through the CSEU, the CSEU will close the child support services case based on established child support case closure procedures. The custodial parent/caretaker must then demonstrate to the child care worker that he or she is actively pursuing support privately in order to maintain child care eligibility or demonstrate that he or she has good cause not to pursue child support (see additional information in the section III.G.5, Good Cause of this ADM for criteria on establishing good cause).

3. ACTIVELY PURSUING CHILD SUPPORT PRIVATELY

Actively pursuing child support privately means the custodial parent (either on his or her own or through the assistance of an attorney) is actively participating in the activities that will lead to the establishment, modification or enforcement of court-ordered child support within a reasonable period of time.

Initially, the custodial parent/caretaker must submit in writing to the district a plan of activities and timeframes for the accomplishment of the establishment, modification or enforcement of a child support order. Such a plan must demonstrate the activities and timeframes for completion are reasonable.

The custodial parent/caretaker must also provide a written update to the plan of activities, no less frequently than at recertification, to demonstrate that he or she is actively engaged in and completing the activities in the plan. The update must include documentation, where applicable and appropriate, that:

- petitions to establish, modify or enforce child support have been or are being filed (including copies of petitions);
- court dates have been arranged and the custodial parent/caretaker or the legal representative has appeared in court on those dates; or
- the acknowledgment of paternity or order of filiation has been completed; and
- the custodial parent/caretaker has obtained a court order for child support.

4. LACK OF INFORMATION

The district must establish procedures for interviewing the custodial parent/caretaker who indicates an
inability to provide sufficient information. These procedures must address providing the custodial parent/caretaker with an opportunity to sign the LDSS-4281, Attestation to Lack of Information form. This activity may be conducted by the child care worker or district designee and may be charged to program costs under the NYSCCBG.

If the custodial parent/caretaker claims lack of information after applying for CSEU services, the district must either:

- refer the custodial parent/caretaker to the child care unit to sign the LDSS-4281, Attestation to Lack of Information and close the child support services case, if one had been opened; or
- the CSEU may complete and return the LDSS-4281, Attestation to Lack of Information form to the child care worker and close the child support services case. However, completing the LDSS-4281 is not a required activity under the IV-D program (i.e. for non-TA families). Therefore, this activity must be time studied and cannot be claimed as a child support activity.

If the custodial parent/caretaker has completed, signed and submitted the LDSS-4281 to the child care worker, the custodial parent/caretaker will be excused from actively pursuing child support.

5. GOOD CAUSE

a) OPPORTUNITY TO CLAIM GOOD CAUSE

An applicant for, or recipient of, child care services has the right to claim good cause for not actively pursuing child support. This is explained in the OCFS/LDSS-7013, Child Support Requirements Notification Letter, Attachment F. The applicant/recipient can make a good cause claim by completing and returning to the district, the OCFS/LDSS-7011, Agreement to Actively Pursue Child Support or Good Cause Claim, Attachment G. The district must provide the OCFS/LDSS-7013, Child Support Requirements Notification Letter to the client along with the OCFS/LDSS-7011, Agreement to Actively Pursue Child Support or Good Cause Claim form. A signed copy of the OCFS/LDSS-7011, Agreement to Actively Pursue Child Support or Good Cause Claim form must be filed in the case record.

If a custodial parent/caretaker is claiming a good cause exception, the case must not be referred to the CSEU pending the determination of whether good cause exists by the child care worker or designee. If the claim of good cause is not raised by the custodial parent/caretaker until after he or she has submitted an application for child support services and raises the good cause issue with the CSEU, the child support worker must assess whether the custodial parent/caretaker wishes to have the CSEU continue with child support services and if not, close the child support case. In addition, the child support worker should refer the case to the child care unit for a determination of good cause.

For child care purposes, good cause exists if pursuing child support would adversely affect the health, safety or welfare of the child or of other persons in the child’s household.

If a district so chooses, it may contract with not-for-profit or other agencies or organizations to review and make determinations of good cause. Districts may use NYSCCBG subsidy program funds to pay for contractual services relative to the determination of good cause.
b) **APPLICANT OR RECIPIENT REQUIREMENT TO ESTABLISH EXISTENCE OF GOOD CAUSE**

An applicant or recipient who refuses to actively pursue child support and who claims to have good cause for not actively pursuing child support must establish that good cause exists and will be required to:

1. Specify the circumstances that the applicant or recipient believes provide sufficient good cause for not actively pursuing child support;
2. Corroborate the good cause circumstances; and
3. If requested, provide sufficient information to permit an investigation of the good cause claim.

**c) CIRCUMSTANCES UNDER WHICH ACTIVE PURSUIT OF CHILD SUPPORT IS AGAINST THE BEST INTEREST OF THE CHILD OR OTHER MEMBERS OF THE HOUSEHOLD**

The following are considered to be circumstances under which the active pursuit of child support would be against the best interest of the child because it would adversely affect the health, safety or welfare of the child on whose behalf such child support payments are to be made or would adversely affect the health, safety or welfare of another person in the child’s household:

1. Active pursuit of child support is expected to result in physical harm to the child for whom support is sought;
2. Active pursuit of child support is expected to result in emotional harm to the child for whom support is sought;
3. Active pursuit of child support is expected to result in physical or emotional harm to the custodial parent/caretaker sufficient to impair the custodial parent/caretaker’s ability to care for the child adequately;
4. Active pursuit of child support is expected to result in physical or emotional harm to any other member of the child’s household;
5. The child for whom child support is sought was conceived as a result of incest or forcible rape;
6. Legal proceedings for the adoption of the child are pending before a court of competent jurisdiction;
7. The custodial parent/caretaker is currently being assisted by a public or licensed private social agency to resolve the issue of whether to keep the child or relinquish the child for adoption, and discussions have gone on for less than three months; or
8. The non-custodial parent’s rights have been terminated or voluntarily surrendered.

Physical harm and emotional harm must be of a serious nature in order to justify a finding of good cause. A finding of good cause for emotional harm may only be based on a demonstration of an emotional impairment that substantially affects the individual’s functioning.

**Special Considerations Related to Emotional Harm**

For each good cause claim that is based in whole or in part upon the anticipation of emotional harm, the child care worker or designee must consider the following:
(1) The present emotional state of the individual subject to emotional harm;
(2) The emotional history of the individual subject to harm;
(3) The intensity and probable duration of the emotional upset;
(4) The degree of active pursuit required; and
(5) The extent of the involvement of the child or individual subject to emotional harm in paternity establishment or support enforcement activity to be undertaken.

The child care worker or appropriate designee must document the findings with respect to the above factors in the case record.

d) **SPECIAL CONSIDERATIONS WHEN GOOD CAUSE INVOLVES DOMESTIC VIOLENCE**

The child care worker should review the documentation provided by the custodial parent/caretaker. If the documentation is sufficient to verify the good cause claim, the child care worker should make the determination at that time.

If there is no documentation or insufficient documentation, the custodial parent/caretaker may be referred to the domestic violence liaison (DVL) for a more complete assessment. The DVL will make a recommendation regarding the credibility of the claim that the DV situation represents a danger to the custodial parent/caretaker, the child or another member of the household and notify the child care worker of the recommendation. Based on the findings and recommendation of the DVL, the child care worker and supervisor will make the final determination on the good cause claim.

A referral may also be made to the DVL or a local community based domestic violence services organization for information and referral for domestic violence services. The referral for information and services should only be made if the custodial parent/caretaker agrees to such a referral. It is the decision of the custodial parent/caretaker whether or not to seek domestic violence services.

e) **PROOF OF GOOD CAUSE CLAIM**

The applicant or recipient who claims good cause must provide corroborative evidence within 20 days from the day the claim was made on the OCFS/LDSS-7011, Agreement to Actively Pursue Child Support or Good Cause Claim. If the child care worker or appropriate designee determines that the applicant or recipient requires additional time because of the difficulty of obtaining the corroborative evidence, upon supervisory approval, the child care worker or appropriate designee must allow a reasonable additional period of time.

Good cause may be corroborated with the following types of evidence:

1. Court, medical, criminal, child protective services, social services, psychological or law enforcement records indicating that the alleged non-custodial parent might inflict physical or emotional harm on the child or custodial parent/caretaker or other member of the household;
2. Medical records indicating that the child, custodial parent/caretaker or other household member has an emotional health history and a present emotional health status which indicates that pursuing child support would be detrimental to the mental and/or emotional health of the applicable individual;
(3) A domestic violence waiver issued to a former TA recipient and dated within the last 12 months will be considered a demonstration of good cause. Once the date of the waiver exceeds 12 months, good cause will need to be redetermined by the child care worker or appropriate designee;

(4) A birth certificate, medical record or law enforcement record indicating that the child was conceived as the result of incest or forcible rape;

(5) Court or other documents indicating that legal proceedings for adoption are pending before a court of competent jurisdiction;

(6) A written statement from a public or licensed private social agency that it is assisting the custodial parent/caretaker to decide whether to keep the child or release the child for adoption; or

(7) Sworn statements from individuals (other than the applicant or recipient) with knowledge of the good cause circumstances, which provide the basis for the good cause claim. A “sworn” statement is signed before, and witnessed and signed by, a person who is empowered to administer an oath to the testifier. Persons authorized to administer such oaths include public notaries, commissioners of deeds, judges, town justices, and justices of the peace. The sworn statement must attest to circumstances that would indicate that pursuing child support would adversely affect the health, safety or welfare of a household member.

f) THE NEED FOR ADDITIONAL CORROBORATIVE EVIDENCE

If after examining the corroborative evidence submitted by the applicant or recipient, the child care worker or appropriate designee determines that additional corroborative evidence is needed to make a good cause determination, the child care worker or appropriate designee will:

(1) Promptly notify the applicant or recipient that additional corroborative evidence is needed; and

(2) Specify the type of document needed.

If requested by the applicant or recipient, the child care worker or appropriate designee must advise the applicant or recipient how to obtain the necessary documents. Additionally, if requested by the applicant, the child care worker or appropriate designee must make a reasonable effort to obtain any specific documents that the applicant or recipient is not reasonably able to obtain without assistance.

g) INVESTIGATION OF GOOD CAUSE CLAIM WHEN INSUFFICIENT CORROBORATIVE EVIDENCE PRESENTED

The child care worker or appropriate designee may further verify the good cause claim by conducting an investigation if the applicant’s or recipient’s statement of the claim, together with the corroborative evidence, does not provide sufficient information. In domestic violence situations, the parent/caretaker may be referred to the DVL for a more complete assessment.

h) LACK OF CORROBORATIVE EVIDENCE FOR CLAIM BASED ON THE APPLICANT’S/RECIPIENT’S ANTICIPATION OF PHYSICAL HARM

Where a good cause claim is based on the applicant’s or recipient’s anticipation of physical harm and
corroborative evidence is not submitted in support of the claim:

1. The child care worker or an appropriate designee will investigate the good cause claim when the child care worker or appropriate designee believes the claim is credible without corroborative evidence, and corroborative evidence is not available;

2. Good cause will be found if the claimant’s sworn statement and the investigation which is conducted satisfy the child care worker, or appropriate designee, that the applicant or recipient has good cause for refusing to actively pursue child support;

3. Supervisory personnel must approve the determination of good cause and note that approval in the case record; and

4. Anticipated physical harm must be of a serious nature in order to justify a finding of good cause. In domestic violence situations, the parent/caretaker may be referred to the DVL for a more complete assessment.

i) Child Care Assistance Pending a Good Cause Determination

The child care worker or appropriate designee must not deny, delay or discontinue child care assistance pending a determination of good cause for not actively pursuing child support if the applicant or recipient has complied with the requirement to furnish corroborative evidence and information or has been referred to the domestic violence liaison for a more complete assessment.

An application or recertification for child care services must be authorized for a maximum period of three months pending a good cause determination. If good cause exists, the authorization for purchase of services must be extended to the normal six-month or twelve-month redetermination period.

j) Final Determination and Notification of Good Cause

The child care worker or appropriate designee’s determination of whether good cause exists and the basis for the determination must be approved by a supervisor. The final determination of good cause must be in writing; contain the findings and basis for the determination; and be entered in the case record.

The final determination must be made within 30 days from the day the good cause claim is made. The child care worker or appropriate designee may exceed 30 days when the case record documents that additional time is needed because information required to verify the claim cannot be obtained within the 30 days or the custodial parent/caretaker did not provide corroborative evidence within 20 days.

Notification of the good cause determination must be given to the custodial parent/caretaker in writing (see Attachment H, OCFS/LDSS-7012, Notice of Good Cause Determination). A notification that good cause was found to exist excuses the custodial parent/caretaker from actively pursuing child support. The good cause exception from actively pursuing child support may be temporary or permanent depending on the circumstances of the good cause claim. See section III.G.5.k, Periodic Review of Good Cause of this ADM for additional information.

If the determination is that good cause does not exist:

1. The child care worker or appropriate designee must notify the applicant or recipient (see Attachment H, OCFS/LDSS-7012, Notice of Good Cause Determination) and afford the applicant or recipient the opportunity to demonstrate he or she will actively pursue child support.
support, withdraw his or her application for child care, or have his or her child care case closed. The custodial parent/caretaker must be informed of his or her right to an agency conference or fair hearing to contest the determination that good cause does not exist. No action to deny or discontinue child care benefits can be made on the basis of the OCFS/LDSS-7012;

(2) if the applicant or recipient continues to refuse to actively pursue child support absent a fair hearing decision issued in his or her favor, the child care worker or appropriate designee must send the applicant a denial of his or her application for child care benefits, OCFS/LDSS-4780, Denial of Your Application for Child Care Benefits. If the custodial parent/caretaker is a recipient, the child care worker or appropriate designee must send the custodial parent/caretaker the OCFS/LDSS-4782, Notice of Intent to Discontinue Child Care Benefits. The child care applicant or recipient then has the option to allow the case action of denial or case closing to take place, or contest the decision to deny or discontinue child care benefits by requesting a fair hearing, or demonstrate he or she is actively pursuing child support.

All of the above-referenced notices must be both adequate and timely.

k) PERIODIC REVIEW OF GOOD CAUSE

The child care worker or appropriate designee must periodically review, no less frequently than at each recertification, those cases in which the child care worker or appropriate designee determined that good cause exists based on a circumstance that is subject to change. In those cases, it is the parent/caretaker’s responsibility to provide documentation to support a determination that good cause continues to exist. If the child care worker determines that circumstances have changed to the extent that good cause no longer exists, the district must provide the custodial parent/caretaker with the notice specified above in section III.G.5.j, Final Determination and Notification of Good Cause of this ADM.

l) CONFIDENTIALITY

If the good cause exception stems from a claim of domestic violence, child protective or adult protective issues, the district must take precautions to see that this information is secured in the case file and maintained in a confidential manner. 18 NYCRR 357.3(i) and NYS policy stated in 98 ADM-3 Section IV-I on confidentiality related to victims of domestic violence; 18 NYCRR 457.16 on confidentiality related to adult protective services; and, 18 NYCRR 432.7 on confidentiality related to child protective services state that local district social service employees may not reveal information obtained in the course of administering assistance or services to unauthorized sources. Client information that must be safeguarded includes: applications, eligibility status, benefit issuance, investigations and contents of the case record or file. The confidentiality policy applies to all client information maintained and secured by the district whether it is contained in a written record or exchanged verbally.
6. CHILD CARE WORKER RESPONSIBILITIES

a) NOTIFYING CUSTODIAL PARENTS/CARETAKERS

In cases where there is a non-custodial parent, child care workers must inform the custodial parent/caretaker, in writing, of the custodial parent/caretaker’s responsibility to actively pursue child support through the CSEU or privately.

The child care worker must first ascertain whether or not the custodial parent/caretaker has previously applied for child support services and, if so, must determine the current status of the child support case. If the custodial parent/caretaker has an active child support case with the CSEU, the custodial parent/caretaker must provide the child care worker with a status report demonstrating that he or she continues to actively pursue support through the CSEU. If the CSEU has sent the custodial parent/caretaker the Contact Notice or the Notice of Intent to Close, and the custodial parent/caretaker has not responded to the CSEU, the custodial parent/caretaker is not considered to be actively pursuing child support.

If the custodial parent/caretaker had previously applied for child support services but the child support case is closed, the child care worker must determine the reason for the child support case closing. Districts may determine whether to obtain information on case closings from the custodial parent/caretaker or from the CSEU. If the case was closed by the CSEU for any of the following reasons, the custodial parent/caretaker is excused from the requirement to actively pursue child support:

- the non-custodial parent is deceased and no further action, including a levy against the estate, can be taken;
- paternity cannot be established;
- the non-custodial parent’s location is unknown and regular attempts have been made unsuccessfully to locate the non-custodial parent over a three year period;
- the non-custodial parent cannot pay support for the duration of the child’s minority because the non-custodial parent has been institutionalized in a psychiatric facility, is incarcerated with no chance for parole, or has a medically verified total and permanent disability with no evidence of support potential; or
- the non-custodial parent is a citizen of, and lives in, a foreign country, does not work for the federal government or a company with headquarters or offices in the United States, has no reachable domestic income or assets, and reciprocity has not been established with such foreign country.

If the child support services case was closed at the custodial parent/caretaker’s request or was closed due to the custodial parent/caretaker’s failure to cooperate with the CSEU, the custodial parent/caretaker is not considered to be actively pursuing child support. The custodial parent/caretaker must then demonstrate that he or she is actively pursuing child support privately or has re-applied for child support services from the CSEU in order to meet the child care eligibility requirement of actively pursuing child support or demonstrate good cause not to actively pursue child support.

The child care worker or appropriate designee must notify the applicant or recipient in writing of the right to claim good cause as an exception to the requirement to actively pursue child support and of all the requirements applicable to a good cause determination.
Districts must use the model letter, the OCFS/LDSS-7013, Child Support Requirements Notification Letter, Attachment F, or a local equivalent to notify custodial parents/caretakers of their responsibilities regarding child support.

Such notice must inform:

- the custodial parent/caretaker of his or her responsibility to actively pursue child support which may include establishment of paternity;
- the custodial parent/caretaker of the things he or she may have to do to demonstrate he or she is actively pursuing child support;
- the custodial parent/caretaker how to document that he or she is actively pursuing child support;
- the custodial parent/caretaker of what he or she needs to do if he or she does not have a court order for child support;
- the custodial parent/caretaker that he or she may need to modify the court order if the order does not include child care expenses;
- the custodial parent/caretaker, if he or she has a court order but is not receiving child support payments, that he or she must initiate and follow through with steps to enforce the order, if appropriate;
- the custodial parent/caretaker of his or her right to make a good cause claim at any time by informing his or her worker;
- the custodial parent/caretaker of the procedures for claiming good cause not to actively pursue child support; and
- the mother of the father’s rights if paternity is established.

The notification letter must be accompanied by the OCFS/LDSS-7011, Agreement to Actively Pursue Child Support or Good Cause Claim, Attachment G. A copy of the written notification must be maintained in the custodial parent/caretaker’s case record.

b) **Submittal of the DSS-2521: Application for Child Support Services**

Child care applicants choosing to go to the CSEU for assistance in actively pursuing child support, must complete and sign the DSS-2521. If the applicant, including one who will be placed on a waiting list for a child care subsidy, submits the DSS-2521 to the child care worker, the child care unit must forward the completed DSS-2521 to the CSEU. When child care workers submit the DSS-2521, workers can include their name as the name of referring official (in the agency use only box at the top of the DSS-2521).

No action will be taken to approve the child care application until the child care applicant documents that he or she has requested an appointment from the CSEU or has submitted the DSS-2521 to the child care worker or the CSEU; or documents that he or she is actively pursuing child support order privately. Once the documentation is received demonstrating that the applicant is actively pursuing child support, the child care application can be processed. If the child care applicant cannot demonstrate he or she is actively pursuing child support within 30 days of submitting the child care application, the application must be denied for failure to comply with the requirement to actively pursue child support unless there is good cause not to actively pursue child support.
There is an exception for child care applicants who are claiming good cause. If the child care applicant has submitted the OCFS/LDSS-7011, Agreement to Actively Pursue Child Support or Good Cause Claim, Attachment G, indicating he or she has good cause not to pursue child support, and he or she is otherwise eligible for child care, the child care must be authorized pending the good cause determination. An application by a custodial parent/caretaker who is claiming good cause must be acted upon within 30 days. If the custodial parent/caretaker is otherwise eligible but additional time is needed to demonstrate good cause, child care may be authorized for up to three months while the good cause determination is pending. Districts cannot delay approval of a child care application while a good cause determination is pending so long as the applicant has complied with the requirement to furnish corroborative evidence and information.

If an applicant has a child support order in place that does not include child care expenses, the applicant may be required to pursue modification of the order. Refer to section III.G.6.d, Establishing and Modifying Child Support Orders of this ADM for additional information on modifications.

c) GRACE PERIOD DURING INITIAL YEAR OF IMPLEMENTATION (MAY 15, 2004 - MAY 14, 2005)

In a case where there is a non-custodial parent, the district must notify each non-TA child care recipient (with an open child care case on May 14, 2004) of the requirement to actively pursue child support. A due date must be included in the notification letter. The due date is based on the timeframe for implementation of the child support requirements for non-TA recipients that is selected by district in its CSP/ICP. The OCFS/LDSS-7013, Child Support Requirements Notification Letter, Attachment F of this ADM, includes important information for the custodial parent/caretaker including the opportunity to claim good cause.

For a recipient (with an open child care case on May 14, 2004) who, in response to the OCFS/LDSS-7013, Child Support Requirements Notification Letter, Attachment F, applies for child support services through the CSEU or demonstrates that he or she is actively pursuing child support privately, the district will authorize the child care subsidy case for the normal six-month or twelve-month recertification period.

For a recipient who, in response to the OCFS/LDSS-7013, Child Support Requirements Notification Letter, Attachment F, indicates on the OCFS/LDSS-7011, Agreement to Actively Pursue Child Support or Good Cause Claim, Attachment G, that he or she is making a good cause claim will be recertified for three months. The recipient must send corroborative evidence to support the good cause claim within 20 days from the day the good cause claim was made unless given an extension. The district must notify the recipient of the good cause determination using the OCFS/LDSS-7012, Notice of Good Cause Determination, Attachment H. If the determination is that good cause does not exist or cannot be established, the custodial parent/caretaker must be notified of the option to demonstrate he or she is actively pursuing support by providing necessary documentation to the district within ten days of the notice of good cause determination. If no such documentation is provided, the child care recipient must be sent an OCFS/LDSS-4782, Notice of Intent to Discontinue Child Care Benefits.

A recipient who, in response to the OCFS/LDSS-7013, Child Support Requirements Notification Letter, Attachment F, does not apply for child support services through the CSEU, cannot demonstrate that he or she is actively pursuing support privately and has not claimed good cause, will, if otherwise eligible, be recertified for three months provided that he or she indicates on the OCFS/LDSS-7011, Agreement to Actively Pursue Child Support or Good Cause Claim, Attachment G, that he or she will actively pursue child support. The recipient must demonstrate by the end of the three-month period that he or she is
actively pursuing child support. If the recipient fails to demonstrate that he or she is actively pursuing child support, the child care recipient must be sent an OCFS/LDSS-4782, Notice of Intent to Discontinue Child Care Benefits.

**d) Establishing and Modifying Child Support Orders**

Child care workers should be aware of the following when guiding custodial parents/caretakers in actively pursuing child support orders with a provision for child care expenses.

**Child Care and Child Support Orders**

Child support orders are determined under the State’s child support guidelines known as the Child Support Standards Act or “CSSA”. The CSSA is codified in Section 413 of the Family Court Act (FCA), which governs actions in Family Court, and in Section 240 of the Domestic Relations Law (DRL), which governs actions in the Supreme Court. Seeking child care in the order of support is applicable to both establishing orders of support and modifying orders of support. Under the CSSA, there are circumstances where the court must order an amount to be paid for child care expenses and there are circumstances where the court has discretion to order an amount to be paid for child care expenses. The reasonable child care expenses will generally be prorated between the parties in accordance with the parties’ relative incomes. This section provides a general discussion of the rules governing application of the child support guidelines.

**Child care provisions should be sought and ordered by the court:**

When the custodial parent/caretaker is working; receiving elementary, secondary or higher education; or participating in vocational training that the court determines will lead to employment, and incurs child care expenses as a result of the above, the court must order reasonable child care expenses. The reasonable child care expenses will generally be prorated between the parties in accordance with the relative incomes of the parties.

**Child care provisions should also be sought and may be ordered:**

When the custodial parent/caretaker is seeking work and incurs child care expenses as a result thereof, the court may determine reasonable child care expenses and apportion the expenses between the parties.

**There are exceptions to when a child care worker should require the custodial parent/caretaker to seek a modification to obtain a child care provision in the parent/caretaker’s existing order of child support. If any of the following applies, the child care worker should NOT direct the custodial parent/caretaker to seek a modification.**

*Modification of a child support order should NOT be sought if:*

1. The custodial parent/caretaker is receiving TA; or
2. The child care worker is aware that the non-custodial parent’s income is at or below the self support reserve, which is 135% of the federal poverty level. For 2005, this amount is $12,920. It is updated annually and is available from the OTDA website. Thus, in cases where it is clear that the non-custodial parent’s income is at or below the self-support reserve and he or she does not have the ability to earn more income, the custodial parent/caretaker should not pursue a modification of an order of child support for the purposes of adding a provision for child care expenses; or
3. When the order of child support was entered or last modified, child care expenses existed and the court did not provide for child care expenses and there has been no substantial change in the parties’ circumstances since the order of support was entered or last modified which would justify a modification (e.g. the obligor’s income has not increased or the child’s need for child care has not changed since the entry of the last order); or

4. The circumstances of the non-custodial parent indicate that the court is unlikely to modify the order due to the limited resources of the non-custodial parent. Such situations should be assessed on a case-by-case basis and may include but are not limited to: incarceration of the non-custodial parent or the non-custodial parent is disabled or unemployed; or

5. The custodial parent/caretaker needs child care for an activity other than employment, educational or vocational training or seeking employment; or

6. The order addresses only the family share and not the total child care expenses.

Note: When the custodial parent is seeking employment and incurs child care expenses as a result thereof, the court may order reasonable child care expenses. While child care expenses are not mandated in this case, the district can request the non-TA custodial parent to pursue a modification of an order that does not address child care expenses. However, the court may not grant the request for a modification in these cases, depending on the circumstances, because child care expenses are not mandated under these circumstances.

Orders Stated in Terms of a Percentage of Child Care Expenses

A custodial parent/caretaker will not be asked to pursue modification of an order that does not contain a sum certain (i.e. exact dollar) amount for the child care expenses. Where child care costs fluctuate, the custodial parent/caretaker must report any adjustments needed to their child support to the non-custodial parent. In cases where the custodial parent/caretaker has applied for child support services, the CSEU may be consulted if the custodial parent/caretaker is unable to collect the adjustments from the non-custodial parent. If the non-custodial parent is not compliant, it may become necessary to enforce the amounts not paid by petitioning the court.

e) Custodial Parent/Caretaker Who Seeks a Reduction in Child Support

A custodial parent/caretaker who obtains a reduction in the amount of a child support order for the purpose of qualifying for, or increasing the amount of, a child care subsidy will not be considered to be actively pursuing child support and will, therefore, be ineligible for a child care subsidy.

f) Exchange of Information Between Child Care and Child Support Units

The district is responsible for determining the mechanism for exchange of information between the child care unit and CSEU. The district must establish procedures to obtain information from the custodial parent/caretaker to document that the custodial parent/caretaker is actively pursuing child support. The first step in establishing that the custodial parent/caretaker is actively pursuing support is documentation provided by the custodial parent/caretaker verifying that the custodial parent/caretaker has submitted a signed application for CSEU services or has an appointment with the CSEU. If the custodial parent/caretaker is unable to provide the documentation, the child care worker may request verification
from the CSEU that an application for child support services has been submitted and/or an appointment has been scheduled.

In applying for child care services, a custodial parent/caretaker signs either the LDSS-2921-Application or a State approved local equivalent. These forms contain the following consent language regarding information needed to determine eligibility:

“I understand that by signing this application form, I agree to any investigation made by the Department of Social Services to verify or confirm the information I have given or any other investigation made by them in connection with my request for assistance.”

No additional consent for release of information from the CSEU or the client’s attorney (if pursuing child support privately) is needed.

g) CONTINUED VERIFICATION OF ACTIVE PURSUIT OF CHILD SUPPORT
The child care worker must verify that the custodial parent/caretaker is continuing to actively participate in child support activities to obtain child support either through the CSEU or privately; already has a child support order and is actively participating (as required by the CSEU or privately) to enforce the order; or has a good cause exception. The custodial parent/caretaker must provide documentation to verify that he or she continues to actively pursue child support. The custodial parent/caretaker must verify where applicable and appropriate that:

- if applying for child support services through the CSEU, the custodial parent/caretaker has submitted the DSS-2521 as required by the district;
- the custodial parent/caretaker has submitted himself or herself and the child(ren) for genetic testing when required to establish paternity;
- the custodial parent/caretaker has filed a petition with family court to obtain an order of child support;
- the custodial parent/caretaker has obtained a court date;
- the custodial parent/caretaker has attended the court appearance as required or that the hearing was postponed for a legitimate reason;
- a child support order has been issued or modified by the court;
- child support payments are being made; and
- an enforcement petition has been filed, if required.

h) CALCULATING NEED AND CHILD CARE BENEFIT AMOUNTS FOR LOW INCOME FAMILIES
With the exception of any child care expenses ordered to be paid by the non-custodial parent to a low income custodial parent/caretaker, child support is treated as income when determining child care eligibility for the low income (i.e. non-TA) custodial parent/caretaker. In a low income child only case, the child support is considered income to the child.

The amount the non-custodial parent is required to pay for child care expenses as part of the child support order reduces the low income custodial parent/caretaker’s need for child care. The child care benefit for the low income custodial parent/caretaker is determined by taking the full amount charged by
the child care provider, up to the market rate, and subtracting the non-custodial parent’s court-ordered amount of the child care expenses. The child care benefit is further reduced by any family share required of the low income custodial parent/caretaker.

\[ \text{i) Support Orders That Address Only Family Share Rather Than Child Care Costs} \]

The amount of child care expenses in the child support order should be the full cost of child care. However, districts must follow the terms specified in the court order. In some cases, the court order fails to address the full child care expenses and instead looks only at the custodial parent’s family share of the subsidy rather than the full child care cost. In these cases, the child support order either specifies an exact dollar amount or refers to the custodial parent’s family share of “out of pocket expenses” rather than the full child care expenses. The district must follow the court order as written even if it fails to address the full child care costs.

\[ \text{j) Fluctuating Child Support Income and Lump Sum Child Support Payments} \]

18 NYCRR 404.5(b)(3) requires that if income fluctuates significantly, the average monthly amount used for determining financial eligibility for child care subsidy must be computed based on income received during a period of not less than three nor more than six months. Child support income received on an irregular basis in an amount that varies significantly, during the three to six month period the district chooses, from the amount in the child support order will be treated as fluctuating income. However, the amount of lump sum or other payments received for child support arrears is not counted as income for the purpose of determining eligibility of the custodial parent/caretaker for child care benefits.

\[ \text{k) Increasing Child Care Benefits When Child Support Payments Are Delinquent} \]

If child support payments are delinquent, the applicant or recipient must take appropriate action to enforce the child support order. So long as appropriate attempts are being made to enforce the child support order, the district must recalculate the low income custodial parent/caretaker’s income excluding the amount of the delinquent child support.

Districts must determine when to make an adjustment to the child care benefit amount when child support payments are past due. In most cases, no adjustment to the child care benefit should occur until the support is at least 30 days past due. However, in situations where the child care arrangement is jeopardized due to the delay in payment, the district may make adjustments to the child care benefit amount before the payment is delinquent by 30 days. The adjustment to the child care benefit amount must retroactively cover the period of time support was not received.

The custodial parent/caretaker must be informed that he or she may be required to return some or all of payments for child support arrears to replace adjustments in child care benefits that the district made to cover the non-custodial parent’s delinquent payments. In such cases, the district must add the following language to the OCFS/LDSS-4779, Approval of Your Application for Child Care Benefits, or OCFS/LDSS-4781, Notice of Intent to Change Child Care Benefits:

“Your child care benefit is increased by $_____ based on your report of non-receipt of child support. You will be required to pay back the increases in child care benefits when you receive some or all of the back due child support. You must continue to actively pursue child support including enforcement of your child support order to remain eligible for child care benefits. Any change in your income, including receiving back due child support, must be reported to the ________________________

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I) RETURN OF CHILD CARE BENEFITS ADJUSTED DUE TO DELINQUENT CHILD SUPPORT PAYMENTS

If child care benefits had been increased to cover delinquent child support payments due from the non-custodial parent, and the non-custodial parent begins paying the delinquent payments, the district must request the custodial parent/caretaker to return some or all of payments for child support arrears to the child care worker to replace the amount of increase in child care benefits that the custodial parent/caretaker received. The district must attempt to recover the increase in child care benefits in all cases in which the amount of increase equals or exceeds the cost of recovery.

When requesting a return of some or all of the lump sum or arrears payment, the district must notify the parent/caretaker in writing of the amount of overpayment that must be returned. Districts must issue the OCFS/LDSS-7009, Notice of Child Care Assistance Overpayment and Repayment Requirements, Attachment D, indicating the reason for the overpayment. The following information must be inserted in the space provided for the reason the overpayment occurred in Section I of the OCFS/LDSS-7009, Notice of Child Care Assistance Overpayment and Repayment Requirements:

“Your child care benefits were increased based on delinquent child support from your child’s non-custodial parent. You now have received the delinquent child support. The increase to your child care benefits resulted in an overpayment as described below.”

Such notice must include the calculations used to determine the overpayment and repayment amount, the date that it must be repaid and the rights to an agency conference and fair hearing. Refer to section III.E.13.d, Child Care Overpayments-Mechanisms of Recovery of this ADM for more information on repayment plans. A copy of the original OCFS/LDSS-4779, Approval of Your Application for Child Care Benefits, or OCFS/LDSS-4781, Notice of Intent to Change Child Care Benefits, issued to the custodial parent/caretaker when child care benefits were increased (which included the notification language described in section III.G.6.k, Increasing Child Care Benefits When Child Support Payments Are Delinquent of this ADM) must be included with the request for repayment.

The amount of lump sum or other payment received for child support arrears is not counted as income for the purpose of determining eligibility of the custodial parent/caretaker for child care benefits. Once child support payments are received on a regular basis, the district must include child support as income and determine eligibility for child care benefits, the amount of the child care benefit and the family share prospectively. The OCFS/LDSS-4781, Notice of Intent to Change Child Care Benefits must be provided to the custodial parent/caretaker.

m) DENIAL OR DISCONTINUATION OF CHILD CARE BENEFITS

If a status report from the custodial parent/caretaker or CSEU indicates a failure to actively pursue child support, the child care recipient must be sent an OCFS/LDSS-4782, Notice of Intent to Discontinue Child Care Benefits, for failure to actively pursue child support without good cause.

In the case of a custodial parent/caretaker who is not actively pursuing child support and cannot demonstrate that a good cause exception exists, the district must deny or discontinue child care benefits. Districts must use the OCFS/LDSS-4780, Denial of Your Application for Child Care Benefits or the OCFS/LDSS-4782, Notice of Intent to Discontinue Child Care Benefits, as appropriate. These notices include information regarding the parent/caretaker’s rights to appeal the district’s decision. The denial or discontinuation notice must include the following statement: “You did not actively pursue child support.”
support for (name of child) and did not show that you have good cause for not actively pursuing child support as required by Title 18 of the New York State Codes, Rules and Regulations, Section 415.3.”

7. **CHILD SUPPORT WORKER RESPONSIBILITIES**

The child support worker has responsibilities only for the custodial parent/caretaker who applies for child support services through the CSEU. Upon receipt of the DSS-2521, the CSEU should provide any appropriate services to establish paternity or to establish, modify or enforce a child support order.

   a) **ATTESTATION TO LACK OF INFORMATION**

If, after the CSEU investigative interview, a custodial parent/caretaker disavows knowledge of information necessary to identify and locate the alleged non-custodial parent, the CSEU worker would close the child support case. The CSEU must either complete the LDSS-4281, Attestation to Lack of Information form, or refer the custodial parent/caretaker back to the child care worker or designee for completion of the LDSS-4281. A copy of the completed form must be given to the custodial parent/caretaker and will be kept in the child care record as documentation that the custodial parent/caretaker is excused from actively pursuing child support.

   b) **PROVIDE INFORMATION TO THE CHILD CARE UNIT**

The custodial parent/caretaker will be required to document to the child care worker that he or she is actively pursuing child support. However, in some circumstances, the custodial parent/caretaker may lack the documentation needed to verify that he or she is actively pursuing child support. In these cases, the custodial parent/caretaker or the child care worker may ask the CSEU worker to provide information via the Child Support Information Transmittal form (LDSS-2859) or a local equivalent.

   c) **DISTRIBUTION OF CHILD SUPPORT COLLECTIONS**

For all non-TA child care cases, child support collected by the CSEU will be sent to the custodial parent/caretaker. In the event the non-TA custodial parent/caretaker is a former TA recipient, there may be assigned arrears that will be retained for reimbursement of assistance by the district in accordance with the child support distribution rules. Similarly, in TA cases, child support collections will be retained for reimbursement of assistance by the district in accordance with the child support distribution rules. The instruction provided in the Division of Child Support Enforcement (DCSE’s) Dear Colleague Letter (DCL) dated January 19, 2000 for creating a non-public assistance child care support ledger in TA cases is cancelled. Child care ledgers in TA cases should be coded as 21CB or 22CB ledgers as appropriate.

For non-TA cases only, any child care expenses paid to the family as child support reduces the family’s need for a child care subsidy. Because of the potential impact on the child care benefit amount, the child support worker may receive and must respond to a request for information from the child care worker regarding any child care expenses that have been court ordered and are being passed on from the CSEU to the family.
d) **Notification of Child Support Case Closings**

There may be circumstances where a custodial parent had previously applied for child support services and his or her child support case was subsequently closed. The reason for the case closure may impact the custodial parent’s requirement to actively pursue child support and the custodial parent’s eligibility for child care services.

If the custodial parent/caretaker had requested his or her child support case be closed, the custodial parent/caretaker will be required to demonstrate that he or she is actively pursuing child support privately or the custodial parent/caretaker may reapply for child support services through the CSEU. If circumstances have changed, the custodial parent/caretaker may claim good cause.

There are other circumstances where a child support case may have been closed and the custodial parent/caretaker should be excused from actively pursuing child support for child care eligibility purposes. If a previous child support services case was closed due to any of the following reasons, the custodial parent/caretaker is excused from actively pursuing child support:

- the non-custodial parent is deceased and no further action, including a levy against the estate, can be taken;
- paternity cannot be established;
- the non-custodial parent’s location is unknown and regular attempts have been made unsuccessfully to locate the non-custodial parent over a three year period;
- the non-custodial parent cannot pay support for the duration of the child’s minority because the non-custodial parent has been institutionalized in a psychiatric facility, is incarcerated with no chance for parole, or has a medically verified total and permanent disability with no evidence of support potential; or
- the non-custodial parent is a citizen of, and lives in, a foreign country, does not work for the federal government or a company with headquarters or offices in the United States, has no reachable domestic income or assets and the State has been unable to establish reciprocity with such foreign country.

The child care worker will ask the custodial parent/caretaker to provide a copy of the child support case closure notice. However, there may be circumstances where the custodial parent/caretaker is unable to provide a copy of the notice. In these cases, the child care worker may contact the CSEU to confirm that the case was closed.

8. **Implementation Time Frames**

The new child support requirement for child care applicants was effective May 14, 2004. Districts were allowed to choose to implement the new child support requirement for recipients (with an open child care case on May 14, 2004) either effective May 15, 2004 or at next case action or recertification, whichever comes first. The district must have indicated which option it selected in its CSP/ICP. Districts were allowed to request a waiver to extend the implementation timeframe for no more than six months. However, the waiver will pertain only to implementation of this requirement for families in receipt of child care services as of May 14, 2004.
H. METHOD OF MAKING PAYMENTS FOR CHILD CARE SERVICES

1. NEW YORK STATE CHILD CARE BLOCK GRANT

For child care services provided under the NYSCCBG program, payment may be paid by the following methods:

(1) by advance cash payments, cash reimbursements or vouchers to the child’s custodial parent/caretaker for care provided by an eligible provider and supported by a bill signed by both the child’s custodial parent/caretaker and the provider. However, a caregiver of informal child care or of legally-exempt group child care must be enrolled with the district before payment may be made for such services.

(2) by a purchase of services contract or letter of intent in accordance with 18 NYCRR 405.3 or by advance cash payments, cash reimbursements or vouchers to an eligible provider. However, a caregiver of informal child care or legally-exempt group child care must be enrolled with the district before payment may be made for such services. A district cannot require a provider to enter into a purchase of services contract or letter of intent as a condition of receiving payment under NYSCCBG.

A district must establish at least one method of payment by which payment for child care services arranged by the child’s custodial parent/caretaker can be made. A district has the option to vary such method on a case-by-case basis to reflect individual case circumstances. However, the district may not vary payment methods if this will result in a limitation on the custodial parent/caretaker's choice of provider. For example, a district that has a policy of paying the custodial parent/caretaker whenever he or she uses a legally-exempt family child care provider or a legally-exempt group child care provider can choose to pay some of these providers directly, if the custodial parent/caretaker has a history of not paying the provider or frequently switching providers. As another example, a district that has a policy of having the custodial parent/caretaker pay the family share to the provider may require the custodial parent/caretaker to pay the family share to the district, if the custodial parent/caretaker has a history of not paying providers. However, the district must treat equally situated families the same.

2. TITLE XX

For child care services provided under Title XX of the federal Social Security Act, or provided as child protective services or child preventive services funded other than under the NYSCCBG program, payment must be made by a purchase of service contract or letter of intent with a licensed or registered provider, or with a public school district operating a child care program which meets State and federal requirements.

I. REIMBURSEMENT FOR CHILD CARE EXPENDITURES

1. PAYMENT FOR CHILDREN’S ABSENCES

This section of the ADM on payment for children’s absences replaces 92 ADM-8, Child Care: Reimbursement for Payments for Children’s Absences.
A district has the option to choose whether it wants to issue payments on behalf of children who are temporarily absent from child care. Reimbursement is available for any absence, regardless of the reason for the absence, unless limitations are specified in the approved CSP/ICP, or the number of absences exceeds the maximum allowed for routine circumstances.

Reimbursement for such payments is allowable subject to the following conditions.

**a) Selection of Providers**

The district must specify in its approved CSP/ICP to which providers such payments will be made, in accordance with one of the options below:

- To only those child care providers with which the district has a contract or letter of intent; *or*
- To all eligible providers of subsidized child care services, except for legally-exempt family day care and legally-exempt in-home providers.

The provider rendering the child care services must be duly licensed or registered to provide child care services, or an enrolled provider of legally-exempt group care. Such providers include: licensed day care centers; registered small day care centers; registered family day care providers; licensed group family day care providers; registered school-age child care programs; public schools providing care to pre-school aged children in accordance with a contract entered into between a public school district and the social services district; and enrolled legally-exempt group providers.

In order to be paid for absences, the provider must require payment for absences from families who are not receiving a child care subsidy, as well as those who are receiving a subsidy. Additionally, the provider must be open and available to provide care on the day the child is absent.

The district must state as part of a contract or agreement or through written notice to the provider that payment is allowable in cases of temporary absences from child care.

**b) Selection of Base Period for Determining Number of Absences**

A district must select either a three-month or six-month period as the basis on which it will maintain records and calculate the number of allowable absences. The base period must be identified in the district’s CSP/ICP and approved by the Office.

A district must establish a three-month or six-month base period for use in determining maximum temporary absences based on either of the following:

- beginning on the date of a child’s admission to child care and ending three or six months later depending on the period selected; or
- beginning on a fixed calendar date for all children entering child care and ending three or six months later depending on the period selected. If this basis is chosen, a child entering child care during a quarterly or semiannual cycle may, during that initial cycle, receive a prorated number of days of absence beginning on the date of entry and ending on the last day of the quarterly or semiannual cycle. All temporary absences thereafter will be computed using the normal quarterly or semiannual cycle.
c) **Maximum Number of Absences—Routine Circumstances**

The district must specify in its approved CSP/ICP the number of absences for which providers will be reimbursed. Except in cases of extenuating circumstances defined below, payment for temporary absences from child care are allowed for up to 12 days in any one calendar month; provided, further, that such absences may total no more than 12 days in any three-month period, if the district selects a three-month base period for determining maximum temporary absences; or 24 days in any six-month period, if the district selects a six-month base period for determining maximum temporary absences.

Claims for reimbursement for absences cannot be made for days of absence that occur after the date the child was withdrawn from the child care program. The district should prescribe guidelines for the reporting of a child’s absence in its agreement with child day care providers.

d) **Extenuating Circumstances**

A district may also choose to pay for absences that are in addition to routine absences when extenuating circumstances exist. If a district chooses to pay for absences in extenuating circumstances, it must specify such in its approved CSP/ICP and include any limitations that apply. Extenuating circumstances means a situation or occurrence verified by the district and noted in the case record in which a child is temporarily absent from child care for one or more of the following reasons:

- the district determines that the child is unable to attend child care because it is necessary for the child or the child’s custodial parent/caretaker to appear in court or to keep other appointments related to the provision of preventive, foster care, adoption, child protective services, or other needs as set forth in the child’s services plan;
- the child is ill, has a handicapping or other condition which requires medical care and/or treatment, or the child requires other medical care and/or treatment;
- the child’s family is homeless, and the homelessness necessitates the child’s absence from child care; or
- the child’s custodial parent/caretaker is participating in an approved education or training program and the child’s absences coincide with a temporary suspension of such program for purposes including, but not limited to, holidays, school conferences and snow days.

e) **Maximum Number of Absences—Extenuating Circumstances**

Where it is determined that extenuating circumstances for absences exist, reimbursement is allowed for an additional three days above the maximum for routine absences, for a maximum of 15 days of absence in any one calendar month; provided that all absences may total no more than 20 days in any three-month period, if the district selects a three-month base period for determining maximum temporary absences; or 40 days in any six-month period, if the district selects a six-month base period for determining maximum temporary absences.
**f) Chart Summarizing Maximum Number of Absences Allowed by Regulation**

The chart below summarizes the maximum number of reimbursable days of absence allowed for each period, according to regulation.

<table>
<thead>
<tr>
<th>Period</th>
<th>Routine (Maximum number of days)</th>
<th>Additional Absences Due to Extenuating Circumstances (Maximum number of days)</th>
<th>Total (Maximum number of days)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Month</td>
<td>12</td>
<td>3</td>
<td>15</td>
</tr>
<tr>
<td>Base Period of 3 Months</td>
<td>12</td>
<td>8</td>
<td>20</td>
</tr>
<tr>
<td>Base Period of 6 Months</td>
<td>24</td>
<td>16</td>
<td>40</td>
</tr>
</tbody>
</table>

**g) Absences in Excess of Limits for Extenuating Circumstances**

A district that wishes to claim reimbursement for temporary absences in excess of the limits for extenuating circumstances must submit a written request to the Office for approval. Such requests must be client-specific and must indicate the number of additional absences, the reason for the additional absences and justification for reimbursement. A copy of the written Office approval for reimbursement of child absence in excess of the limits for cases with extenuating circumstances must be maintained as part of the case record.

**h) Child Absent from Care, But Receiving Care from Another Provider**

Reimbursement is not available for a day a child is absent from care if the provider ordinarily charges the custodial parent/caretaker on a daily or part-time basis and the child for whom reimbursement is requested is otherwise in need of and receives subsidized child care from a different provider on the same day.

**2. Program Closures-Licensed, Registered or Legally-Exempt Group Programs**

A district has the option to choose whether it wants to issue payments on behalf of children when a child care program is closed due to specified circumstances. Reimbursement for payments to licensed, registered or legally-exempt group programs during program closures is allowable subject to the following conditions:

**a) Selection of Providers**

The district must identify, in its approved CSP/ICP, the type of providers that are eligible for payment for program closures. The district may choose to make such payments either to those child care providers with which the district has a contract or letter of intent or to all eligible providers of subsidized
child care services with the exception of legally-exempt family day care and legally-exempt in-home providers.

b) Reasons for Program Closure

The district must identify in its approved CSP/ICP the specific holidays and/or circumstances for which it will make payments for program closures. A program closure is allowable for reimbursement if it is due to a State, federal or nationally recognized holiday or due to extenuating circumstances beyond the provider’s control including but not limited to:

- natural disaster;
- severe weather; or
- other emergency closings that are due to circumstances other than a substantiated regulatory violation.

Reimbursement is available only for children in receipt of a child care subsidy who would otherwise be present at the child care program. Reimbursement is not available for a day the program is closed if the provider ordinarily charges the custodial parent/caretaker on a daily or part-time basis and the child for whom reimbursement is requested is otherwise in need of and receives subsidized child care services from a different provider on the same day.

The maximum number of days for which reimbursement is allowable due to program closure is five per year.

The district must maintain a record of the payments made under this provision for each provider in order to receive reimbursement.

3. Registration Fees and Deposits

Federal and State reimbursement is available for payment of a registration fee and for deposits so long as the provider requires payment of such expenses of private-paying families. The provider rendering the child care services must be duly licensed or registered to provide child care services, or an enrolled provider of legally-exempt group child care. These costs may be claimed as program costs.

4. Market Rates

Market rates are updated biennially. The most recent went into effect on October 1, 2003. They may be viewed at the Office’s Internet site: http://www.ocfs.state.ny.us/main. For a comprehensive discussion of maximum reimbursement for child care subsidy expenditures under the NYSCCBG and Title XX Social Services Block Grant and how to apply the market rates, please refer to 04 OCFS LCM-07.

5. Special Needs Payments to Legally-Exempt Providers

In order to assist children with special needs, districts are no longer required, as per 91 ADM-34, to request approval from the Office to apply the special needs market rate to legally-exempt providers funded under the NYSCCBG subsidy program. All the other requirements of 91 ADM-34 still apply,
with the exception of the amount of the special needs market rate, which is set forth in 04 OCFS LCM-07.

6. PAYMENTS FOR TRANSPORTATION EXPENSES

Child care providers that also furnish transportation services have the option to include this expense in their rates or to create a separate charge for these services. If these services are included in the rate, it is reimbursable as long as their rate is within the market rate. If the rate exceeds market rate, the amount in excess of market rate is non-reimbursable. A district may choose to cover these excess costs at local cost or may require the custodial parent/caretaker to pay this excess amount.

If a provider charges transportation expenses as a separate charge to all families including private payers, a district is permitted to make payments for this extra fee as a program cost provided it is indicated in its approved CSP/ICP.

The time spent by the custodial parent/caretaker transporting a child to the child care program is not to be counted as time in which the child is in care.

J. REIMBURSEMENT FOR CLAIMS

1. MAINTENANCE OF EFFORT - NYSCCBG

In order to access funding under the NYSCCBG, each district must maintain the amount of local funds spent for child care assistance under the NYSCCBG at a level equal to or greater than the amount the district spent for child care assistance during federal fiscal year 1995 under Title IV-A of the federal Social Security Act, the federal Child Care and Development Block Grant program, and the State Low Income Child Care program. Each district’s claims submitted under the NYSCCBG will be processed in a manner that maximizes the availability of federal funds and ensures that the district meets its Maintenance of Effort (MOE) requirement in each applicable federal fiscal year.

Each district must meet its MOE in cash on a federal fiscal year basis, October through September. If the district is not meeting its MOE, reimbursement of claims for expenditures under the NYSCCBG will be adjusted so that the MOE is being met.

The MOE level for districts are issued along with the district allocation of NYSCCBG funds, in a separate Local Commissioners Memorandum (LCM) after the passage of the State Budget each year.

2. REIMBURSEMENT LEVELS

a) NYSCCBG

Claims for expenditures for child care services provided under NYSCCBG are eligible for the following levels of State and federal reimbursement up to the district's NYSCCBG allocation:

(1) Reimbursement is provided for 75% of allowable costs for families on TA.

(2) Reimbursement for all other eligible families is available for 100% of allowable costs,
provided that the district's maintenance of effort is being met.

(3) Allowable program costs include the following costs of providing child care services:
   (a) eligibility determinations and re-determinations;
   (b) participation in adjudicatory and judicial hearings;
   (c) child care placements including transportation to such placements;
   (d) inspection, review and supervision of child care placements including monitoring compliance with any additional local child care requirements imposed pursuant to 18 NYCRR section 415.4(f);
   (e) training of district staff; and
   (f) the establishment of computerized child care information systems.

(4) A district must expend its allocation from the NYSCCBG in a manner that provides for equitable access to child care services funds to eligible families.

(5) A district may spend no more than five percent of its annual NYSCCBG allocation for administrative activities. The term “administrative activities” does not include the costs of providing child care services set forth under “program costs” above. Administrative activities include, but are not limited to the following:
   (a) providing local officials and the public with information about the program;
   (b) conducting public hearings;
   (c) monitoring program activities for compliance with program requirements;
   (d) maintaining substantiated complaint files;
   (e) coordinating the resolution of audit and monitoring findings;
   (f) evaluating program results;
   (g) managing or supervising persons with responsibilities set forth in paragraphs (a) through (f) of this paragraph;
   (h) travel costs incurred for official business in carrying out the program; and
   (i) other costs for goods and services required for the administration of the program including rental or purchase of equipment, utilities, and office supplies.

b) Title XX Social Services Block Grant

Federal reimbursement for child care services provided under Title XX will be available for 100% of allowable costs up to the district’s annual Title XX Social Services Block Grant allocation.

IV. Systems Instructions

Procedures for the authorization of payment for child care services in the Welfare Management System (WMS) are as follows:

For child care payments for eligible families applying for or receiving temporary assistance, a district can continue to use the DSS-3209, IM/WMS Authorization. A district may, at its option, utilize the
DSS-2970 WMS/Services Authorization to authorize payment for child care for temporary assistance families. Service Type Suffix Code (Data Element #23021) value "S" designates child care services funded under NYSCCBG for temporary assistance applicants/recipient and reimbursed at 75% federal and State share up to the district's allocation ceiling.

A district has the option to authorize payments for child care for NYSCCBG eligible families not in receipt of temporary assistance on the DSS-3209 for Food Stamps and Medical Assistance only cases. These payments are reimbursed at 100% federal and State share up to the district's allocation ceiling.

For all other eligible families, a district must authorize payment in WMS/Services by using Service Type Suffix Code value "R" on the DSS-2970 WMS/Services Authorization that designates child care services funded under NYSCCBG for non-temporary assistance families and reimbursed at 100% federal and State share up to the district's allocation ceiling.

In circumstances of an adult only temporary assistance case in which the children are not included in the temporary assistance filing unit, child care payment is authorized as a temporary assistance family and reimbursed at 75% federal and State share up to the district’s allocation ceiling. For cases in which children are in receipt of temporary assistance but the caretaker is not included in the temporary assistance filing unit, child care is authorized in WMS Services and reimbursed at 100% federal and State share up to the district's allocation ceiling.

WMS/Services continues to support monitoring the issuance and return of child care certificates. Instructions for the child care certificate are included in 92 LCM-138 and in the Benefits Issuance Control System (BICS) Operations Manual, page A-82, BICS Production Request 32, in the addition dated April 1, 1993. Information is also provided in the BICS Services Payment Processing Manual, II. Authorizations, E., Self Selected Day Care Certificates, pages II 25-27.

V. Claiming Instructions

NYSCCBG expenditures for child care subsidies for families receiving temporary assistance are claimed on Schedule H Non-Title XX Services for Recipients (LDSS-4283), line 2 (Day Care Services for Children), column 13 (Day Care Block Grant 75%). NYSCCBG program expenditures for child care subsidies for all other eligible families and for allowable program costs are claimed on the Schedule H, line 2, column 12 (Day Care Block Grant 100%). Refer to the Fiscal Reference Manual, Volume 2, and Chapter 3 for detailed instructions for completing the Schedule H.

NYSCCBG child counts and expenditures also must be reported on the Schedule G-2 Summary of Payments for Day Care (LDSS-2109EL). Expenditures made under the services types allowed must be reported on the Schedule G-2, via the Automated Claiming System. The BICS Schedule G-2 report provides the information needed to file the report. Refer to the Fiscal Reference Manual, Volume 2, and Chapter 3 for Schedule G-2 instructions.

Administrative expenditures for the NYSCCBG are claimed in accordance with the services Random Moment Survey (RMS) as Child Care Block Grant costs on line 6, section 1 (associated A-87 costs are claimed on line 4, section 2) of the Schedule D-2, Allocation for Claiming of General Services Administration Expenditures (LDSS-2347B). Instructions for completing the Schedule D-2 are contained in Chapter 9 of Volume 3 of the Fiscal Reference Manual County Cost Allocation Plan for districts outside of New York City. For New York City, the instructions are contained in Chapter 9 of Volume 4 of the Fiscal Reference Manual.
Claiming instructions for district administrative expenditures related to the training of employees which
are claimed on the Schedule D-6 "Reimbursement For Training" (LDSS-2347-C) for the NYSCCBG
program are covered in Chapter 13 of Volume 3 of the Fiscal Reference Manual for districts outside of

VI. Other

A. WAIVERS

With the exception of the local child care market rates, a district may request a waiver of any non-
statutory child care regulation. The waiver must be described in the district's CSP/ICP and must be
approved by the Office prior to its implementation.

B. EFFECTIVE DATE

The regulations were effective on May 15, 2004. Implementation was effective immediately, except for
those districts which have requested in their CSP/ICP and received Office approval to implement the
new child support provisions (with regard to existing child care cases only) and/or changes in the child
care services unit (CCSU) at next case action or recertification, whichever comes first. The new legally-
exempt provider certifications must be implemented immediately for providers enrolling on or after May
15, 2004. Districts must notify legally-exempt providers that were enrolled as of May 14, 2004 of the
need to sign and return the new attestations no later than the next case action or recertification.

If a district has requested and received approval from the Office for a waiver to delay implementation of
any other non-statutory provision, the effective date will be based on the approved waiver.

Larry G. Brown  s/s

Larry G. Brown
Deputy Commissioner
Division of Development & Prevention Services
GUIDELINES FOR REVIEW OF ENROLLMENT FORMS FOR PROVIDER OF LEGALLY-EXEMPT CARE:
History of Article 10 Removal; Termination of Parental Rights; and Denial, Revocation and/or Suspension of a Child Day Care License or Registration

I. ENROLLMENT REQUIREMENTS

The previous enrollment requirements specified in 01 OCFS LCM 11 remain in effect and new health and safety assessment requirements have been added to the regulations (18 NYCRR, part 415.4 (f) (7) (iii) and (iv)). In order to be enrolled by a district to provide child care services under the NYS Child Care Block Grant Program, a provider of informal child care or a provider of legally-exempt group child care which is not required to be operated under the auspices of another Federal, State or local government agency must attest and certify in writing regarding the following health and safety categories:

- Whether the provider has ever had a child(ren) removed from his or her care by court order under Article 10 of the Family Court Act (FCA); and/or
- Whether the provider has ever had his or her parental rights terminated, and/or
- Whether the provider has ever been denied a license or registration to operate a school-age child care program, day care center, family day care home or group family day care home, or had such a license or registration suspended or revoked.

For any provider who has a history of the above health and safety concerns, the district must assess, in accordance with these guidelines issued by OCFS, whether the enrollment of such provider poses an unreasonable risk to the health, safety or welfare of the children in the provider’s care.

A. REVISED ENROLLMENT FORMS

Changes have been made to the enrollment forms to include the new certifications. The forms that have been modified are:

- OCFS/LDSS-4699, Enrollment Form for Provider of Legally-Exempt Family Child Care and Legally-Exempt In-Home Child Care, and
- OCFS/LDSS-4700, Enrollment Form for Provider of Legally-Exempt Group Child Care.

New sections have been added to each of the enrollment forms to address the provider’s history of Article 10 removals, termination of parental rights (TPR) and denial, revocation and/or suspension of a license or registration to operate a day care program. The provider must sign a certification for category.

II. THE NEW HEALTH AND SAFETY CATEGORIES

A. COMPLETION OF OCFS/LDSS-4699, THE ENROLLMENT FORM FOR A PROVIDER OF LEGALLY-EXEMPT FAMILY CHILD CARE AND LEGALLY-EXEMPT IN-HOME CHILD CARE

1. History of Court-Ordered Article 10 Removal of a Child (Section V)

   Background

   Article 10 refers to a section in the Family Court Act that addresses abuse and neglect (child protective) proceedings. The removal of a child under FCA Article 10 is a reversible action intended to protect a child from imminent danger (immediate danger of serious harm) or imminent risk to the child’s life or health. Before removing a child to foster care, a judge must consider whether the issuance of a temporary order of protection would eliminate the need for the removal.
A removal may occur without a fact-finding hearing and, in itself, a removal does not establish or prove wrongdoing by the parent/caretaker. A judicial finding, or adjudication, establishes the culpability of the parent/caretaker, in that the abuse or neglect was satisfactorily proven, admitted or consented to in family court. The definitions of abused child and neglected child are found in the Family Court Act, Section 1012.

The reasons for the length of placement may be linked to the resolution of the underlying cause of the removal. Shorter placements may occur when the parent/caretaker’s underlying issues are more easily resolved or the extended family has become a placement resource for the child. Because child welfare staff must work towards a goal of reunification of children in foster care with their families as soon as the children can be safely returned home, a long foster care placement may be indicative of more severe factors underlying the removal. A placement lasting 15 months or more has additional significance because when a child has been in foster care for 15 of the preceding 22 months the district may be required to file a petition to terminate parental rights.

a) Provider History

Question 1: The provider must indicate whether he or she has ever had a child removed by court order in an Article 10 proceeding. If the provider has had a child removed by court order in an Article 10 proceeding, the provider must check the second response and must answer questions 2 through 5. These questions apply to any child removed from the person’s care under Article 10. The provider may or may not be related to such child, but must have been considered “legally responsible” for the child’s care at the time. For example, a woman may have been caring for her boyfriend’s son and had the child protectively removed from her care. Another example is a child who was living with a friend of her mother’s while the mother was away for 2 months and the child was removed from the care of the mother’s friend and placed in foster care under court order in an Article 10 proceeding.

Question 2: If the provider has had a child removed, he/she must provide the date that the removal occurred. If the provider has had multiple removals, then all dates should be recorded.

Question 3: The provider must indicate whether, as a result of the Article 10 proceeding, there were judicial findings of abuse or neglect, and if so, what were the specific findings, such as: neglect, abuse or repeated abuse. If there was not a finding of abuse or neglect, the provider must indicate the reason why. An Article 10 removal not accompanied by a judicial finding of neglect or abuse may be an indicator that extenuating circumstances exist in the case.

Question 4: The provider must indicate the length of time that the child was in foster care and/or another out-of-home placement under Article 10. If the child was initially placed under Article 10, but then remained out of the home under another type of family court proceeding, the provider must give an explanation of why this occurred in his or her written statement (see question 5). Legal mechanisms for foster care placement, other than Article 10, include:

- Voluntary Placement under Social Services Law (SSL) 384-a. The care and custody of a child may be transferred to the district by a written instrument/agreement.
- FCA Article 7 allows for the placement of a Person in Need of Supervision (PINS).
- FCA Article 3 allows for the placement of a Juvenile Delinquent (JD).

Question 5: Any provider who indicates a history that includes an Article 10 removal must provide true and accurate information to the district and the child’s parent/caretaker regarding the reasons underlying the child’s removal. The provider must prepare and submit to the district and the child’s
parent/caretaker a written summary that contains enough detail for the district to ascertain the sequence of events, the severity and the underlying reasons for the events. Underlying reasons are likely to include one or more of the following:

- Alcohol misuse/abuse, drug misuse/abuse, or
- Mental health issues, developmental or cognitive disabilities, or
- Sexual offender issues, or
- Anger management problems; batterer's issues; domestic violence issues, or
- Lack of parenting/child care skills; lack of understanding of normal child development, or
- Insufficient coping strategies for managing stress; inadequate support system

The narrative should include a certification that all statements made are true and accurate.

b) Provider Certification

The provider must certify that the statements made are true and accurate.

2. History of Termination of Parental Rights (Section VI)

Background

When it is clear that the natural parent of a child in foster care cannot or will not provide a safe family home for the child and when continued foster care is not an appropriate plan for the child, the child welfare agency may initiate a proceeding to terminate the parental rights under SSL 384-b and FCA Article 6. The purpose of such an action is to permanently terminate the parent’s custodial rights and guardianship, free the child for adoption, and find a permanent alternative home for the child. Grounds for termination of parental rights include: abandonment, permanent neglect, mental illness/mental retardation of the parent, and severe or repeated abuse.

a) Provider History

**Question 1:** The provider who has had his/her parental rights terminated must check the second response, and then complete questions 2 and 3. Any provider who has not had his or her parental rights terminated should go on to part B.

**Question 2:** This question requests the legal basis for termination of the provider’s parental rights. Information regarding the basis for the termination of parental rights may be found in the court petition and dispositional order or in child welfare service plans, a copy of which the provider should have received.

**Question 3:** Any provider who has a history of a termination of parental rights must provide true and accurate information to the district and the child’s parent/caretaker regarding the reasons underlying the termination of parental rights. The provider must prepare and submit to the district and the child’s parent/caretaker a written summary which contains enough detail for the district to ascertain the sequence of events leading to the termination of parental rights and which identifies the underlying causes.

The narrative should include a certification that all statements made are true and accurate.

b) Certification

The provider must sign and date this certification that all the statements on the form are true and accurate.
GUIDELINES FOR REVIEW OF ENROLLMENT FORMS FOR PROVIDER OF LEGALLY-EXEMPT CARE: History of Article 10 Removal, Termination of Parental Rights, and/or Denial, Revocation and/or Suspension of a Child Day Care License or Registration

3. History of Denial, Revocation or Suspension of a License or Registration to Operate a Child Day Care Program (Section VII)

Background

Denial, revocation and/or suspension of a license to operate a child day care program are legal actions, known as enforcement actions, which are initiated by OCFS licensors when a child care provider is out of compliance with the regulations that are put in place to protect the health and safety of children in child day care. Enforcement action may force a provider to comply with OCFS regulations or may remove the provider’s legal authority to operate as a licensed or registered day care provider. However, OCFS may not interrupt the provider’s operation until all due process rights have been exhausted, except in the event of imminent danger immediate danger of serious harm to the children in care. When imminent danger is found, a suspension, an order to immediately cease provision of child care services, may be issued.

a) Provider History

Question 1: A provider who has had a denial of an application or renewal of a license or registration to operate a day care program must check the first or second response, as appropriate. If a provider indicates that he or she is appealing a decision, then the process may not yet be finalized, and the district must take this under consideration.

Question 2: A provider who has had a license or registration revoked or suspended must check the second option, and then complete questions 3 and 4.

Question 3: The information given by the provider will help the district retrieve the provider’s record from the Child Care Facilities System (CCFS) and obtain information from the appropriate regional office that conducted the enforcement and supervised the provider’s program.

Question 4: Any provider who indicates a history including a denial, revocation or suspension of a license or registration to operate a child day care program must provide true and accurate information to the district and to the child’s parent/caretaker regarding the reasons for the denial, revocation and/or suspension. The provider must prepare and submit to the district and to the parent/caretaker, a written summary that contains enough detail for the district to ascertain the sequence and severity of the events and the underlying reasons. Underlying reasons may include some of those found in Article 10 and TPR cases or other factors more specifically pertaining to child care programs, such as:

- Lack of child care skills; lack of understanding of normal child development, or
- Unsafe day care site, or
- Inadequate staffing.

The narrative must include a certification that all statements are true and accurate

b) Certification

The provider must sign and date this certification that all the statements on the form are true and accurate.
4. Parent and Provider Certifications, Section VIII

The new certifications for the provider and the parent are summarized below.

a) Provider Certifications

The provider agrees to allow representatives of the district and the State of New York access to the child care program and understands that refusal to do so may result in the provider becoming ineligible and losing enrollment status.

The provider is informed and acknowledges that he or she may not be eligible to provide care if he or she has a history of an Article 10 removal; termination of parental rights (TPR); or denial, revocation and/or suspension of a license or registration to operate a day care program. The provider is also informed that he or she may request the district review any extenuating circumstances to determine if an exception could be made to allow the provider to provide subsidized care.

b) Parent Certification

The parent is informed of and acknowledges that the district may not be able to pay a provider who has a history of an Article 10 removal, termination of parental rights (TPR) or denial, revocation and/or suspension of a license or registration to operate a day care program. The parent is also informed that he or she may request the district review any extenuating circumstances to determine if an exception could be made to allow the provider to provide subsidized care.

B. COMPLETION OF OCFS/LDSS-4700, THE ENROLLMENT FORM FOR PROVIDER OF LEGALLY-EXEMPT GROUP CHILD CARE

The changes in the OCFS/LDSS-4700 parallel those made in the OCFS/LDSS-4699, however, the section numbers vary. As with the Facilities Safety Checklist, completion of the three sections regarding the provider’s history of Article 10 removal, TPR and denial, revocation or suspension of a day care license or registration is not required for the legally-exempt group providers who operate under the auspices of another Federal, State or local government agency:

- A nursery school, pre-kindergarten or day care program for children three years of age or older or a program for school-age children conducted during non-school hours, operated by a public school district that is providing elementary or secondary education or both in accordance with the compulsory education requirements of the NYS Education Law. The program is located on the same premises or campus where the elementary or secondary education is provided.
- A nursery school that is voluntarily registered with the NYS Education Department and operated in accordance with Part 125 of its regulations.
- A summer day camp operated in accordance with Subpart 7-2 of the State Sanitary Code.
- A day care center, family day care home or other child care program located on federal or tribal property and operated in compliance with applicable federal or tribal laws and regulations.

C. FALSIFICATION OF INFORMATION

If a district has reason to believe a provider is falsifying information on the enrollment forms, the district must make a referral to its fraud investigation unit.
III. EVALUATING PROVIDER HISTORY AND RISK

The district must use the information required by the enrollment form to determine whether to enroll a provider who has:

- had a child removed from his or her care by court order under Article 10 of the Family Court Act (FCA), or
- had his or her parental rights terminated, or
- had his or her license or registration to operate a child day care program denied, revoked or suspended.

Such a history, in nearly all cases, means that the provider has failed to meet the standards for the minimum degree of care of a child while the provider was legally responsible for the child's care, acting either as a child care provider, a parent or a parental substitute. Districts may wish to utilize their own child welfare specialists to assist child care workers in understanding the significance of a particular Article 10 removal or termination of parental rights determination and its implications regarding child caring capability. Districts may utilize the OCFS regional offices for clarification of the circumstances of and reasons underlying the denial, revocation or suspension of a license or registration to operate a day care program.

The district must review the case and if the provider has any of the risk factors that are listed for the high risk group, the provider must be assigned to that group. Assignment to the high risk group, results in a presumptive denial of enrollment, which may be overcome ONLY if the provider demonstrates to the district’s satisfaction that enrollment will not jeopardize the health and safety or welfare of children in the provider’s care. If the provider does not have any of the characteristics of the high risk group, then he or she should belong to the low risk group, and may be considered for enrollment.

A. THE HIGH RISK GROUP

The high risk group includes any provider who has a history of:

- A removal of a child from his/her care by court order under an FCA Article 10 proceeding; or
- A termination of his/her parental rights; or
- A license or registration to operate a child day care program denied, revoked or suspended due to his/her own actions or inactions based on abuse or neglect, a child fatality due to negligence, chronic non-compliance with regulations, lack of supervision resulting in a serious injury to a child, or other serious violation; or
- A provider who has knowingly provided false information on enrollment forms.

1. Enrollment Decision

The enrollment decision is a presumptive denial. The initial district response to any enrollment application submitted by a provider in the high risk group is to deny enrollment of the provider and to notify the parent/caretaker of the decision. The provider and/or the parent/caretaker may request the district to reconsider its decision.

A high risk provider may be reconsidered for enrollment only when the provider demonstrates extenuating circumstances exist. Extenuating circumstances are those extraordinary circumstances, which occurred at the time of the original incidents or since the original incidents, which may
GUIDELINES FOR REVIEW OF ENROLLMENT FORMS FOR PROVIDER OF LEGALLY-EXEMPT CARE: History of Article 10 Removal, Termination of Parental Rights, and/or Denial, Revocation and/or Suspension of a Child Day Care License or Registration

justify enrollment. The following three conditions must be met prior to reconsidering enrolling a provider who has been presumptively denied for enrollment:

- The provider and/or the parent/caretaker must make a written request asking that an exception to the presumption against enrollment be made; and
- The provider must make true, accurate and full disclosure, in writing, of the extenuating circumstances to the parent/caretaker and the district; and
- The parent/caretaker must persist in wanting to use the provider, after receiving full disclosure.

2. Steps for evaluating extenuating circumstances:

a) The district receives the written request for the exception to the denial of enrollment to be made.

b) The district may wish to confirm that the parent/caretaker has received and reviewed the provider’s statement, and still wishes to use this provider to care for his/her child. If the parent/caretaker wishes to use the provider, then advise the provider to submit the explanation of extenuating circumstances.

c) The provider submits a written explanation and any proof of the extenuating circumstances, if these have not already been submitted. Extenuating circumstances may include unusual circumstances surrounding the original incident and/or factors which successfully resolve the underlying causes and tend to eliminate risk.

In Article 10 matters and TPR’s, the provider’s proof should include original paperwork from the family court and child welfare agency, including court petitions, court orders, court summaries/reports, correspondence, service plans, and progress reports. In licensing or registration matters, the proof may include correspondence with OCFS and hearing decisions.

d) The district reviews the explanation of extenuating circumstances and the proof. Districts must determine on a case-by-case basis whether the documentation is appropriate and sufficient. Extenuating circumstances occurring at the time of the original incidents may include things such as:

- An Article 10 removal from a parent/caretaker who was believed to be neglectful or abusive at the time of removal, but later the allegations were found to be unconfirmed. In this type of situation, you would expect to find that there is no adjudication of abuse or neglect against the individual and that the out-of-home placement is short in duration.

For example, a provider states his child was removed from his care but he did not abuse or neglect the child. The provider states that the child was returned to his care within 2 weeks and there was no adjudication against him. The explanation given is that the judge ordered a removal of the child from the custodial father, based on the caseworker’s testimony that the child disclosed she was sexually abused by “daddy”. Upon further investigation, it became clear to the CPS caseworker that the abuse occurred while the child was living with her mother, that “daddy” was the child’s stepfather, and that the custodial father had no involvement. The abuse petition filed against the father by child protective was withdrawn and the child was discharged from foster care to her father’s care and custody.

The father in this example might be able to show the following items as proof of his account: notification letters from Child Protective Services advising of the determination of
the hotline report; family court orders, petitions and court paperwork showing the petition was either withdrawn or dismissed; and/or child welfare service plans.

- In a TPR based on abandonment, it is possible that an estranged parent may not have known that an abandonment proceeding was being conducted, or even that his/her child was in foster care.

Extenuating circumstances occurring after the precipitating incidents include evidence of rehabilitation and successful resolution of underlying causes and other factors which minimize risk. These may include, but are not limited to:

- Successful participation in treatment or counseling (alcohol, drug, mental health, anger management and domestic violence, etc.), or
- Successful participation in parenting skills or child development classes, or
- Demonstration of strategies learned in treatment or class, or
- Development of an appropriate support system and use of effective strategies for coping with stress, or
- A significant period of time has elapsed since the incident and the provider has had significant maturational growth, or
- The provider has had personal achievements which demonstrate the development of relevant skills and knowledge, or
- The provider has not had additional incidents of Article 10 proceedings or termination of parental rights proceedings, or
- The provider has otherwise been rehabilitated.

e) The district must evaluate the severity of the original incident, the underlying causes, what has changed since the incident(s) to reduce risk to children in the provider’s care and any extenuating circumstances. Truthfulness and completeness of disclosure from the provider must be considered.

Due to current regulatory constraints, the child care unit may not be able to receive corroboration (or contradiction) of the provider’s account directly from a child welfare unit. However, the district should consult with its own child welfare specialists as to the adequacy of the statement and documentation submitted for a current or former child welfare case when the district is considering enrollment of a high risk provider.

For licensing or registration issues, the district may corroborate information given by the provider. District staff can access a facility report on CCFS that summarizes compliance violations within the past 24 months and notes any enforcement action taken in the past 5 years. Districts may contact the licensor named in CCFS for additional information. The licensor can confirm the underlying reasons for the enforcement actions.
f) The district addresses identified concerns with the parent/caretaker.

g) Decision: The district must determine whether an exception should be made to the presumption against enrollment, and notify the parent/caretaker and the provider of the decision. The district must not enroll any provider unless the provider has satisfactorily demonstrated that enrollment will not jeopardize the health, safety or welfare of children in the provider’s care.

Failure of the provider to cooperate with the information sharing and evaluative process will result in a denial or termination of enrollment.

h) When the district enrolls any such provider, it must obtain a signed statement from the parent/caretaker stating that the parent/caretaker is aware of the provider’s specific history of an Article 10 removal, TPR, and/or denial, revocation and/or suspension of a license or registration to operate a child day care program; has received the same written information submitted to the district; and knowingly chooses this provider to care for his or her children.

**B. LOW RISK GROUP**

A provider is assigned to the low risk group only if the provider does not have any of the risk factors listed for the high risk group. Those providers belonging to the low risk group may include providers who have had a license or registration to operate a day care program denied, revoked or suspended and the lack of compliance was based on circumstances that the provider was attempting to resolve but was not able to adequately resolve in the time frame allowed and since the denial, revocation or suspension, the problem has been adequately resolved. For example, a family day care was closed down due to an unsafe water source. The provider’s day care program had been using well water which became contaminated. To resolve the issue, the provider moved to a location that meets all regulatory requirements.

1. **Enrollment Decision:**

Providers in the low risk group may be considered for enrollment.

2. **Action to be taken by the district:**

The district must carefully evaluate the provider’s history of the denial, revocation and/or suspension of a license or registration to operate a child day care program and should obtain corroboration of the provider’s account prior to giving it credence.

When the district enrolls any such provider, it must obtain a signed statement from the parent/caretaker stating that the parent/caretaker is aware of the provider’s specific history of an Article 10 removal, TPR, and/or denial, revocation and/or suspension of a license or registration to operate a child day care program; has received the same written information submitted to the district; and knowingly chooses this provider to care for his or her children.
ENROLLMENT FORM FOR PROVIDER OF LEGALLY-EXEMPT
FAMILY CHILD CARE AND LEGALLY-EXEMPT IN-HOME CHILD CARE

Parent/Caretaker’s Name: _____________________________ Case Number: _____________________________

Address: ________________________________________

Telephone: _____________________ Social Security Number*(Not required, please see below):

Provider’s Name: _____________________________ Date Of Birth**: _____________________________

Address Where Care Is Given: _____________________________ Provider’s Address (If Different):

Telephone: ______________ Social Security Number: _____________________________

* The parent/caretaker may, but does not have to list his/her social security number. You cannot be required to disclose your social security number as a condition of eligibility for child care services. If provided, your social security number will be used to assist in identifying your child care file. It may also be used by federal, State and local agencies to prevent duplication of services and fraud, and for federal reporting.

** If the provider is less than 18 years old, the Employment of Minors Form must be completed.

I. PROVIDER’S STATUS

Provider: Check all statements and answers that apply:

1. ☐ I provide care in the child’s home (Provider and parent/caretaker must also complete and submit the Agreement For Legally-Exempt In-Home Child Care.)

2. ☐ I provide care in my own home or another person’s home. (Also check box A, B or C below, whichever applies.)

   A. ☐ I am either the grandparent, great-grandparent, great-great-grandparent, aunt/uncle, great aunt/great uncle, brother/sister or first cousin of all the children in care; OR

   B. ☐ I care for no more than 2 children (not counting my own children or any children older than 13 years); OR

   C. ☐ I care for 3 or more children. However, I never have more than 2 children in care at the same time for more than three hours a day.

3. ☐ I provide care other than choices #1 or #2 above. (Attach an explanation).

4. ☐ I am on temporary assistance, medical assistance, or food stamps. My case # is: _____________________________

How much is the provider charging for each child?

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<th>Child’s Name</th>
<th>Date of Birth</th>
<th>Amount Charged (per hour/day/week)</th>
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☐ I agree that the amount I am charging the parent/caretaker signing this form is NOT MORE THAN the amount I am charging for other children of the same age and similar care.

Who will supply meals and snacks? Meals and snacks may be supplied either by the parent/caretaker or by the provider. Check the box that states what you have agreed to. If you want information about how your child care program can get money to help pay for meals and snacks, call the Child and Adult Care Food Program at 1(800) 942-3858.

☐ The provider will supply snacks and meals.
☐ The parent/caretaker will supply snacks and meals.
☐ Other – Explain: __________________________________________________________________________
II. HOME SAFETY CHECKLIST

Provider and parent/caretaker complete this section together.

A. THE PROVIDER MEETS THESE REQUIREMENTS BEFORE CARING FOR CHILDREN:

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B. THE PROVIDER AGREES TO THE FOLLOWING CONDITIONS:

The provider WILL NEVER use corporal punishment or let others use corporal punishment while children are in care. Corporal punishment means doing things directly to a child’s body to punish them such as: spanking; biting; shaking; slapping; twisting or squeezing; making the child do physical exercises beyond what is normal; forcing the child to stay still for long periods of time; making the child stay in positions that hurt the child or are bizarre; bathing the child in unusually hot or cold water; and forcing the child to eat or have in the child's mouth soap, foods, hot spices or foreign substances.

The provider WILL NEVER use or be under the influence of alcohol or drugs while children are in care and will make sure that children being cared for do not have contact with people using drugs or alcohol.

The provider WILL NOT smoke or allow smoking in indoor areas or other enclosed areas, such as cars or other vehicles, when children are present.

The provider WILL NEVER leave children alone or in the care of other people.

By signing the home safety checklist, the parent/caretaker and provider agree that they have inspected the home and that all statements on the form are true and accurate.

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<tr>
<th>PROVIDER NAME (Print):</th>
<th>PROVIDER SIGNATURE/DATE:</th>
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<table>
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<tr>
<th>PARENT/CARETAKER NAME (Print)</th>
<th>PARENT/CARETAKER SIGNATURE/DATE:</th>
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III. CRIMINAL HISTORY CERTIFICATIONS

To be completed by provider.

I certify to the best of my knowledge and belief that I (Choose one):

- have been convicted of a crime in New York State or any other place.
- have not been convicted of a crime in New York State or any other place.

I certify to the best of my knowledge and belief that any person helping me to care for children (Choose one):

- has been convicted of a crime in New York State or any other place.
- has not been convicted of a crime in New York State or any other place.

If care is provided in a home other than the child’s own home, I certify to the best of my knowledge and belief that any person living in the home who is 18 years of age or older (Choose one):

- has been convicted of a crime in New York State or any other place.
- has not been convicted of a crime in New York State or any other place.

I certify that I have asked each person living in the home (other than the child’s own home) who is 18 or over, each volunteer who is likely to have regular contact with children in care, and each employee if he or she has been convicted of a crime.

If I, or any other person listed below has been convicted of a crime, I or that other person will provide true and accurate information in writing to the parent/caretaker(s) of the children I will be caring for and to the Department of Social Services concerning the crime(s), the date(s) of such convictions and any other relevant information.

I understand that I am not eligible to provide child care if I, or any other person listed below, has been convicted of a felony or misdemeanor against children.

I understand that I am not eligible to provide child care if I, or any such other person listed below, has been convicted of a violent or other serious crime unless extenuating circumstances relating to the conviction(s) exist.

I understand that I may request that the Department of Social Services review any extenuating circumstances to determine if an exception could be made to allow me to provide child care. If I request an exception, I will provide all documents or references required by the Department of Social Services.

List all individuals that will be helping to care for the children and, if care is provided in a home other than the child’s own home, list all household members 18 or older.

INDIVIDUALS CARING FOR CHILDREN: ____________________________

HOUSEHOLD MEMBERS: ____________________________

By signing this form the provider agrees that all statements are true and accurate.

<table>
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<th>PROVIDER NAME (PRINT):</th>
<th>PROVIDER SIGNATURE/DATE:</th>
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### IV. ADMINISTRATION OF MEDICATION

NYS Law restricts the right to administer medication other than over-the-counter topical ointments, sunscreen and topically applied insect repellent to specific medical professionals who are authorized by NYS to administer medication. Some individuals are exempt from this requirement based on their relationship to the child, family or household, and are permitted to administer medications, including:

- The child’s parent/caretaker, step-parent, legal custodian, legal guardian, or member of the child’s household,
- A child care provider employed by the parent/caretaker to provide child care in the child’s home,
- Family members who are related within the 3rd degree of consanguinity to the child’s parent or step-parent, and
- Effective January 31, 2005, child care providers who are trained and authorized by the Office of Children and Family Services (OCFS), under a Health Care Plan for Administration of Medication, approved by a qualified health care consultant, may administer medication when such providers are:
  - operating in compliance with the NYS regulations,
  - authorized by the child’s parent/caretaker, step-parent, legal guardian, or legal custodian to administer medication, and
  - administering medication to subsidized children in care.

To receive OCFS authorization to administer medication, a child care provider must be at least 18 years of age and literate in the language in which the parental permissions and health care provider’s instructions will be given.

Any person who is not authorized by NYS Law, or not exempt from this legal requirement, may only administer over-the-counter topical ointments, sunscreen and topical insect repellent. Examples of medication such providers may not administer include, but are not limited to: Tylenol®, Ritalin®, insulin; antibiotics; and ear, eye or nose drops.

### A. QUALIFICATIONS FOR ADMINISTRATION OF MEDICATION

**Provider must complete.**

1. **Is the provider legally permitted to administer medication to subsidized children when authorized by a parent/caretaker, legal guardian, or legal custodian?**
   - [ ] Yes.
   - [ ] No. You are not authorized or permitted to administer medication other than over-the-counter topical ointments, sunscreen and topically applied insect repellent to the children in your care.

2. **Is an employee or volunteer of the program legally permitted to administer medication to subsidized children when authorized by a parent/caretaker, legal guardian, or legal custodian?**
   - [ ] Yes. Give employee’s or volunteer’s name: ____________________________
   - [ ] No. Your employee/volunteer is not authorized or permitted to administer medication other than over-the-counter topical ointments, sunscreen and topically applied insect repellent to the children in your care.

3. **Give the reason that allows the provider and/or the employee/volunteer to administer medication other than over-the-counter topical ointments, sunscreen and topically applied insect repellent to subsidized children in the program.**
   *Answer this question only if you answered “Yes” to question 1 or 2.*

   Check the box(es) below that show the reason(s) that the provider or the employee/volunteer named above is allowed to administer medication other than over-the-counter topical ointments, sunscreen and topically applied insect repellent to subsidized children in the program. If there is a different answer or reason for different children, the provider must check all answers that apply.

   The provider must attach the documentation required for each answer, as indicated.

   - [ ] **A** I am permitted to give medication because I am employed by the parent/caretaker to provide child care in the child’s home. I am not required to have a Health Care Plan for Administration of Medication.
   - [ ] **B** I am permitted to give medication to the children for whom I am the grandparent, great-grandparent, great-great-grandparent, aunt/uncle (or spouse), great aunt/great uncle (or spouse), brother/sister or first cousin (or spouse). I am not required to have a Health Care Plan for Administration of Medication.
   - [ ] **C** I have a valid professional health care license as a physician, physician assistant, registered nurse or nurse practitioner that authorizes me to administer medication. I am not required to have a Health Care Plan for Administration of Medication.

I have attached a copy of my current medical license.
□ D) My employee/volunteer has a valid professional health care license as a physician, physician assistant, registered nurse, or nurse practitioner that authorizes him/her to administer medication. I am required to have a Health Care Plan for Administration of Medication.

I have attached a copy of the approval page of my Health Care Plan for Administration of Medication, and a copy of my employee/volunteer’s current medical license.

□ E) I have, or my employee/volunteer has, a valid professional license as a practical nurse or certification as an advanced emergency medical technician that allows me, or my employee/volunteer, to administer medication. I am required to have a Health Care Plan for Administration of Medication.

I have attached a copy of my or my employee/volunteer’s current medical license or certification, and a copy of the approval page of the Health Care Plan for Administration of Medication.

□ F) I have, or my employee/volunteer has, met the training requirements of OCFS regulations, 18 NYCRR Part 415.4 (f)(7)(iv)(z). I am required to have a Health Care Plan for Administration of Medication.

I have attached a copy of the approval page of the Health Care Plan for Administration of Medication.

B. INTENT TO SEEK AUTHORIZATION TO ADMINISTER MEDICATION TO SUBSIDIZED DAY CARE CHILDREN

Providers who are not permitted to administer medications and who do not have an employee/volunteer permitted to administer medication must answer this.

Will the provider be seeking authorization to administer medication to children in subsidized care? (Choose one)

□ Yes. I want to learn how to start the process. Ask the Department of Social Services representative or, in New York City, the Human Resources Administration (HRA) or Administration for Children’s Services (ACS) representative, for the following form: Obtaining Authorization to Administer Medication to Children in Legally-Exempt Care.

□ No. I will not be seeking authorization to administer medication at this time.

C. PARENT/CARETAKER AND PROVIDER AGREEMENT FOR ADMINISTRATION OF MEDICATION

Parent/caretaker must complete.

Who will be responsible for administering medication to your child(ren) in the provider’s care? (Check all that apply).

□ The child care provider or qualified employee/volunteer named previously will administer medication to the child.

□ The legally-exempt child care provider or employee/volunteer will not administer medication. Instead, the parent/caretaker will administer medication or choose a person who is permitted under NYS Education Law to administer medication. This may include a member of the child’s household or certain relatives. The relatives who may be authorized include: the child’s grandparent, great-grandparent, great-great-grandparent, aunt/uncle (and spouse), great aunt/great uncle (and spouse), brother/sister or first cousin (and spouse). The parent/caretaker will inform the provider in writing when he or she has chosen a person to give medication to his or her child.

D. PROVIDER CERTIFICATION REGARDING ADMINISTRATION OF MEDICATION

All providers must read and sign.

I will administer medication in compliance with NYS law and only to the extent that I am permitted by NYS law to do so.

If I have employees, I will make sure that each of my employees administers medications in compliance with NYS law and only to the extent permitted by NYS law.

If I have volunteers, I will make sure that each of my volunteers administers medication in compliance with NYS law and only to the extent permitted by NYS law.

By signing this, I agree that all the statements on this form are true and accurate.

PROVIDER SIGNATURE: DATE:
E. PARENT/CARETAKER CERTIFICATION REGARDING ADMINISTRATION OF MEDICATION

Parent/caretaker must review and sign the certification below.

I certify that all statements on this form are true and accurate.

I understand that it is my responsibility to make sure my child(ren) receives any necessary medication. I understand that if I choose a child care provider who is not able to meet all of my child(ren)’s health care needs, I am responsible for making additional arrangements to meet the child(ren)’s needs. I will make all necessary arrangements prior to placing my child in the provider’s care.

My provider has informed me whether he or she (or his/her employee/volunteer) is legally permitted to administer medication. I have read the Qualifications for Administration of Medication, Section IV A, of this enrollment form, and I understand whether or not my provider or his/her employee/volunteer is legally permitted to give medication to my child(ren).

My child care provider and I have discussed who will administer medication to my child(ren) while the child(ren) is in the provider’s care. Our agreement regarding who will be responsible for administering medication to my child(ren) is indicated on this form in Section IV C.

I understand that I may administer medication to my child, or that I may authorize another person that is legally permitted to administer medication to my child. I may authorize a member of my child’s household or certain relatives of the child to administer medication. The relatives who may be authorized include: the child’s grandparent, great-grandparent, great-great-grandparent, aunt/uncle (and spouse), great aunt/uncle (and spouse), brother/sister or first cousin (and spouse).

PARENT/CARETAKER SIGNATURE: DATE:

V. HISTORY OF COURT-ORDERED ARTICLE 10 REMOVAL OF A CHILD

Provider must complete.

A. PROVIDER HISTORY

1. I certify that (choose one):
   - [ ] I have never had a child removed from my care by court order in a proceeding under Article 10 (child protective) of the Family Court Act (FCA). (Go to section B).
   - [ ] I have had a child removed from my care by court order in a proceeding under Article 10 (child protective) of the Family Court Act.

2. Date(s) removal(s) occurred:______________

3. As a result of the FCA Article 10 hearing, was there a judicial finding of abuse or neglect?
   - [ ] Yes, there was a judicial finding of abuse or neglect. (Indicate type of finding below.)
     - [ ] Neglect
     - [ ] Abuse, severe or repeated
     - [ ] Abuse
   - [ ] No, there was no judicial finding of abuse or neglect. (Indicate reason below.)
     - [ ] petition was withdrawn
     - [ ] case was dismissed
     - [ ] Article 10 petition was not filed with the court
     - [ ] Other, explain:______________

4. Length of time that the child(ren) were removed from the home (choose one):
   - [ ] 3 days or less
   - [ ] more than 3 days and as many as 60 days
   - [ ] more than 60 days but less than 15 months
   - [ ] 15 months or longer

5. Provider must attach a written description of what led to the removal and the underlying reasons for the removal.

B. PROVIDER CERTIFICATION REGARDING HISTORY OF ARTICLE 10 REMOVAL

The provider must complete this certification.

By signing this form, I agree that I have provided true and accurate information regarding any history of an Article 10 removal of a child in my care.

SIGNATURE OF PROVIDER: DATE:
VI. HISTORY OF TERMINATION OF PARENTAL RIGHTS

Provider must complete.

A. PROVIDER HISTORY

1. I certify and attest that (Choose one):
   - [ ] I have never had my parental rights terminated. (Proceed to Part B.)
   - [ ] I have had my parental rights terminated.

2. My parental rights were terminated based on: (Check reason below):
   - [ ] Abandonment
   - [ ] Mental illness
   - [ ] Permanent neglect
   - [ ] Mental retardation
   - [ ] Severe or repeated abuse
   - [ ] Other, __________________________________________

3. Provider must attach a written description of what led to the termination of parental rights and the underlying reasons for the termination of parental rights.

B. PROVIDER CERTIFICATION REGARDING HISTORY OF TERMINATION OF PARENTAL RIGHTS

The provider must sign this certification.

By signing this form, I agree that I have provided true and accurate information regarding any history of a termination of my parental rights.

SIGNATURE OF PROVIDER: ___________________________ DATE: __________

VII. HISTORY OF SUSPENSION, REVOCATION OR DENIAL OF A LICENSE OR REGISTRATION TO OPERATE A CHILD DAY CARE PROGRAM

Provider must complete.

(CHILD DAY CARE includes: day care centers, family day care homes, group family day care homes, small day care centers and/or school age child care programs.)

A. PROVIDER HISTORY

1. I certify and attest (Choose all that apply):
   - [ ] I have applied for an initial license or registration to operate a child day care program, and been denied.
   - [ ] I have applied for a renewal of a license or registration to operate a child day care program and been denied.
   - [ ] I have applied for an initial or renewed license or registration to operate a child day care program and I have never been denied an application for or a renewal of a license or registration to operate a child day care program.
   - [ ] I have never applied for a license or registration to operate a child day care program. (Go to Part B.)

2. I certify and attest that (Choose one):
   - [ ] I have never had a license or registration to operate a child day care program revoked or suspended.
   - [ ] I have had a license or registration to operate a child day care program revoked or suspended.

3. If you have ever had a license or registration revoked, suspended or denied, give the name and location of the child day care program(s) for which this action occurred.

4. Provider must attach a written description of what led to the denial, revocation or suspension of the license or registration to operate a child day care program, and the reasons this occurred.

B. PROVIDER CERTIFICATION REGARDING LICENSING/REGISTRATION HISTORY

The provider must sign this certification.

By signing this form, I agree that I have provided true and accurate information regarding my history of denial, revocation, or suspension of a license or registration to operate a child day care program.

SIGNATURE OF PROVIDER: ___________________________ DATE: __________
VIII. PARENT/CARETAKER AND PROVIDER CERTIFICATIONS

A. PROVIDER CERTIFICATIONS

I will notify the Department of Social Services immediately if the hours of care, number of children in my care, or any information provided on the enrollment form or attachments changes.

I agree to collect the family share (fee) if instructed to do so by the Department of Social Services. I will immediately notify the Department of Social Services if the parent/caretaker fails to pay the required family share.

I agree to provide accurate attendance records as required by the Department of Social Services.

I understand that representatives of the Department of Social Services and the State of New York may visit my child care program to confirm that the information on my enrollment form and/or on attendance forms is true and accurate and that child care services are being provided as listed on those forms. I agree to allow representatives of the Department of Social Services and the State of New York access to all areas where child care is provided for a child receiving a child care subsidy. I understand that if I do not allow such access, then I will be considered an ineligible provider. Any child care that I provide to a child receiving a child care subsidy while I am deemed an ineligible provider by the Department of Social Services will not be reimbursed by the Department of Social Services.

I understand that I may not be eligible to provide child care if I have a history of an Article 10 (child protective) removal of a child by court order, termination of parental rights, or denial, revocation and/or suspension of a license or registration to operate a child day care program. I understand that I may request that the Department of Social Services review any extenuating circumstances to determine if an exception could be made to allow me to provide child care. If I request an exception, I will provide all information, documents or references required by the Department of Social Services.

B. PARENT/CARETAKER CERTIFICATIONS

I understand that my provider may not be eligible to provide child care if he or she has a history of an Article 10 (child protective) removal of a child by court order, termination of parental rights, or denial, revocation and/or suspension of a license or registration to operate a child day care program. I understand that I may request that the Department of Social Services review any extenuating circumstances to determine if an exception could be made to allow my provider to provide child care. If I request an exception, the provider must provide all information, documents or references required by the Department of Social Services.

I understand that the Department of Social Services may not be able to pay a provider when:

- The provider, any volunteer who is likely to have regular contact with my children, any employee, or person living in the home (other than the child’s home) age 18 years or older has been convicted of a crime; or
- The provider has a history of an Article 10 (child protective) removal of a child by court order; termination of parental rights; or denial, revocation and/or suspension of a license or registration to operate a child day care program.

If the Department of Social Services determines that payment cannot be made to the provider when any of the above events have occurred, I have the right and responsibility to decide whether I want to use this provider. If I choose to continue using such a provider, I am responsible to pay for the child care myself. I understand that I have the right to select another provider.

I will notify the Department of Social Services if the hours that I need child care or other circumstances related to my need or eligibility for child care change. I agree to pay my family share (fee), if any, as directed by the Department of Social Services.

I certify that I have selected this provider to care for my child(ren). I understand that it is my responsibility to monitor the quality of care furnished to my child(ren).

C. PARENT/CARETAKER AND PROVIDER CERTIFICATIONS

We state that to the best of our knowledge and belief all statements made on this form and any attachments are accurate and true. We understand that providing false information may result in the termination of payments and legal action by the Department of Social Services.

We state that the parent/caretaker has specifically asked the provider if the provider, volunteers who are likely to have regular contact with children in care, employees, and if care is provided in the provider’s home, persons living in the home age 18 years or over, have been the subject of an indicated report of child abuse or maltreatment. The provider has asked volunteers who are likely to have regular contact with children in care, employees, and if care is provided in the provider’s home persons living in the home age 18 years or over, if they have been the subject of an indicated report of child abuse or maltreatment. The provider has given the parent/caretaker true and accurate information in writing regarding any indications of child abuse or maltreatment. The parent/caretaker has considered the information given on child abuse and maltreatment indications and is selecting this provider. The parent/caretaker understands he or she has the right to select another provider.
We state that we completed the Home Safety Checklist together. We understand that payment cannot be made until items marked “No” on the Home Safety Checklist have been corrected. We agree to notify and provide documentation to the Department of Social Services when any item on the Checklist has been corrected or changed.

**By signing this form, the parent/caretaker and provider agree to all of the requirements listed above.**

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<thead>
<tr>
<th>PARENT/CARETAKER SIGNATURE:</th>
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<table>
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<th>PROVIDER SIGNATURE:</th>
<th>DATE:</th>
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NEW YORK STATE
OFFICE OF CHILDREN AND FAMILY SERVICES
ENROLLMENT FORM FOR PROVIDER OF LEGALLY-EXEMPT GROUP CHILD CARE

Parent/Caretaker’s Name:                      Case Number:
Address:                                       
Telephone:                                    Social Security Number*(Not required, please see below):

Provider’s Name:                              Date Of Birth**:
Address Where Care Is Given:                  
Provider’s Address (If Different):             
Telephone:                                    Social Security Number:

* The parent/caretaker may, but does not have to list his/her social security number. You cannot be required to disclose your social security number as a condition of eligibility for child care services. If provided, your social security number will be used to assist in identifying your child care file. It may also be used by federal, State and local agencies to prevent duplication of services and fraud, and for federal reporting.

** If the provider is less than 18 years old, the Employment of Minors Form must be completed.

I. HOW MUCH IS THE PROVIDER CHARGING FOR EACH CHILD (IN THIS CASE)?

<table>
<thead>
<tr>
<th>Child’s Name</th>
<th>Date of Birth</th>
<th>Amount Charged (per hour/day/week)</th>
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☐ I agree that the amount I am charging the parent/caretaker signing this form is NOT MORE THAN the amount I am charging for other children of the same age and similar care.

Who will supply meals and snacks?

Meals and snacks may be supplied either by the parent/caretaker or by the provider. Check the box that states what you have agreed to. If you want information about how your child care program can get money to help pay for meals and snacks, call the Child and Adult Care Food Program at 1(800) 942-3858.

☐ The provider will supply snacks and meals.
☐ The parent/caretaker will supply snacks and meals.
☐ Other – Explain: ___________________________________________________________________
II. TYPE OF PROGRAM

Provider: Check the statement that describes your program:

☐ 1. This program is a nursery school, pre-kindergarten or day care program for children three years of age or older or a program for school-age children conducted during non-school hours, operated by a public school district that is providing elementary or secondary education or both in accordance with the compulsory education requirements of the NYS Education Law. The program is located on the same premises or campus where the elementary or secondary education is provided.

☐ 2. This program is a nursery school that is voluntarily registered with the NYS Education Department and operated in accordance with Part 125 of its regulations. Attach a copy of your registration.

☐ 3. This program is a summer day camp operated in accordance with Subpart 7-2 of the State Sanitary Code. Attach a copy of your permit from the NYS Department of Health to operate a summer day camp.

☐ 4. This program is a day care center, family day care home or other child care program located on federal or tribal property and operated in compliance with applicable federal or tribal laws and regulations.

☐ 5. This is a nursery school, pre-kindergarten or day care program for children three years of age or older or a program for school-aged children conducted during non-school hours, operated by a private school or academy which is providing elementary or secondary education or both in accordance with the compulsory education requirements of the NYS Education Law. The program is located on the same premises or campus where the elementary or secondary education is provided.

☐ 6. This program is a nursery school or program for preschool-aged children operated by a nonprofit agency or organization or a private proprietary agency which is not voluntarily registered with NYS Education Department and which provides services to children for three or less hours per day.

☐ 7. This is a school age program that cares for not more than six children.

☐ 8. None of the above statements describe this program. If this is your answer, you may need to be licensed or registered. Until you are licensed or registered or can provide documentation that you are legally-exempt from licensing and registering requirements, the Department of Social Services cannot pay you to provide child care. For information about licensing, contact the Bureau of Early Childhood Services at 1-800-732-5207.

If your program meets the definition found in statements 1, 2, 3, or 4 above, proceed to Section IV, Criminal History Certifications. You do not need to complete the following sections:

- Section III, Facility Safety Checklist;
- Section V, Administration of Medication,
- Section VI, History of Court Ordered Article 10 Removal of a Child
- Section VII, History of Termination of Parental Rights
- Section VIII, History Of A Suspension, Revocation or Denial of a License or Registration to Operate a Child Day Care Program.

If your program meets the definition found in statements 5, 6, 7 or 8, then you must complete all sections in this enrollment form.

All providers must complete Section IX, Parent/Caretaker and Provider Certifications.
III. FACILITY SAFETY CHECKLIST

Provider and parent/caretaker should complete this together.

A. THE PROVIDER MEETS THESE REQUIREMENTS BEFORE CARING FOR CHILDREN:

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<th>Yes</th>
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Paint and plaster are in good repair so that there is no danger of children putting paint or plaster chips in their mouths or of it getting into food.

There is at least one operating smoke detector on each floor of the facility. The provider will check regularly to make sure all detectors work.

The facility has a portable first aid kit that is easy to get to in an emergency and is kept in a clean container away from children. It is stocked to treat common childhood injuries and problems. The provider will always replace things in the first aid kit as soon as possible after something has been used or is too old to be used.

The parent/caretaker has given the provider signed proof from a doctor or other health care provider that: the child has received all of the immunizations they should have for the child's age; OR that one or more of the immunizations would harm the child's health; OR the child's parent/caretaker provides a statement saying that the child has not been immunized due to the parent/caretaker's religious beliefs.

Stairs, railings, porches and balconies are in good repair.

B. THE PROVIDER AGREES TO THE FOLLOWING CONDITIONS:

The provider WILL NEVER use corporal punishment or let others use corporal punishment while children are in care. Corporal punishment means doing things directly to a child's body to punish them such as: spanking; biting; shaking; slapping; twisting or squeezing; making the child do physical exercises beyond what is normal; forcing the child to stay still for long periods of time; making the child stay in positions that hurt the child or are bizarre; bathing the child in unusually hot or cold water; and forcing the child to eat or have in the child's mouth soap, foods, hot spices or foreign substances.

The provider WILL NEVER use or be under the influence of alcohol or drugs while children are in care and will make sure that children that being cared for do not have contact with people using drugs or alcohol.

The provider WILL NOT smoke or allow smoking in in-door areas or in other enclosed areas, such as in cars or other vehicles, when children are present.

The provider, volunteers, and employees WILL NEVER leave children alone or in the care of other people.

BY SIGNING THE FACILITY SAFETY CHECKLIST, THE PARENT/CARETAKER AND PROVIDER AGREE THAT THEY HAVE INSPECTED THE FACILITY AND THAT ALL STATEMENTS ON THE FORM ARE TRUE AND ACCURATE.

IV. CRIMINAL HISTORY CERTIFICATIONS:

To be completed by provider

A. PROVIDER HISTORY

I certify to the best of my knowledge and belief that I (Choose one):

☐ have been convicted of a crime in New York State or any other place.

☐ have not been convicted of a crime in New York State or any other place.

B. OTHER CAREGIVER (EMPLOYEE AND VOLUNTEER) HISTORY

I certify to the best of my knowledge and belief that any VOLUNTEER, who is likely to have regular contact with children in care, and any EMPLOYEE (Choose one):

☐ has been convicted of a crime in New York State or any other place.

☐ has not been convicted of a crime in New York State or any other place.
C. CERTIFICATION

I certify that I have asked each volunteer, who is likely to have regular contact with children in care, and I have asked each employee, if he or she has been convicted of a crime.

If I, or any other person listed below has been convicted of a crime, I or that other person will provide true and accurate information in writing to the parent/caretaker(s) of the children I will be caring for and to the Department of Social Services concerning the crime(s), the date(s) of such convictions and any other relevant information.

I understand that I am not eligible to provide child care if I, or any other person listed below, has been convicted of a felony or misdemeanor against children.

I understand that I am not eligible to provide child care if I, or any such other person listed below, has been convicted of a violent or other serious crime unless extenuating circumstances relating to the conviction(s) exist.

I understand that I may request that the Department of Social Services review any extenuating circumstances to determine if an exception could be made to allow me to provide child care. If I request an exception, I will provide all documents or references required by the Department of Social Services.

List all employees, and all volunteers who are likely to have regular contact with children in care.

BY SIGNING THIS FORM THE PROVIDER AGREES THAT ALL STATEMENTS ARE TRUE AND ACCURATE.

<table>
<thead>
<tr>
<th>PROVIDER NAME (PRINT):</th>
<th>PROVIDER SIGNATURE:</th>
<th>DATE:</th>
</tr>
</thead>
</table>

If your program is program type 1, 2, 3, or 4 as defined in Section II, proceed to Section IX, Parent/Caretaker and Provider Certifications.

V. ADMINISTRATION OF MEDICATION

NYS Law restricts the right to administer medication other than over-the-counter topical ointments, sunscreen and topically applied insect repellent to specific medical professionals who are authorized by NYS to administer medication. Some individuals are exempt from this requirement based on their relationship to the child, family or household, and are permitted to administer medications, including:

- The child’s parent, step-parent, legal custodian, legal guardian, or a member of the child’s household,
- A child care provider employed by the parent/caretaker to provide child care in the child’s home,
- Family members who are related within the 3rd degree of consanguinity to the child’s parent or step-parent, and
- Effective January 31, 2005, child care providers who are trained and authorized by the Office of Children and Family Services (OCFS), under a Health Care Plan for Administration of Medication, approved by a qualified health care consultant, may administer medication when such providers are:
  - operating in compliance with the NYS regulations,
  - authorized by the child’s parent/caretaker, step-parent, legal guardian, or legal custodian to administer medication, and
  - administering medication to subsidized children in care.

To receive OCFS authorization to administer medication, a child care provider must be at least 18 years of age and literate in the language in which the parental permissions and health care provider’s instructions will be given.

Any person who is not authorized by NYS Law, or not exempt from this legal requirement, may only administer over-the-counter topical ointments, sunscreen and topical insect repellent. Examples of medication such providers may not administer include, but are not limited to: Tylenol®; Ritalin®; insulin; antibiotics; and ear, eye or nose drops.
A. QUALIFICATIONS TO ADMINISTER MEDICATION

**Provider must complete.**

1. **Is the provider legally permitted to administer medication to subsidized children when authorized by a parent/caretaker, legal guardian, or legal custodian?**
   - [ ] Yes.
   - [ ] No. You are not authorized or permitted to administer medication other than over-the-counter topical ointments, sunscreen and topically applied insect repellent to the children in your care.

2. **Is an employee or volunteer of the program legally permitted to administer medication to subsidized children when authorized by a parent/caretaker, legal guardian, or legal custodian?**
   - [ ] Yes. Give employee/volunteer’s name: ____________________________
   - [ ] No. Your employee/volunteer(s) is not authorized or permitted to administer medication other than over-the-counter topical ointments, sunscreen and topically applied insect repellent to the children in your care.

3. **Give the reason that allows the provider and/or the employee/volunteer to administer medication other than over-the-counter topical ointments, sunscreen and topically applied insect repellent to subsidized children in the program.** *Answer this question only if you answered “Yes” to question 1 or 2.
   - Check the box(es) below that show the reason(s) that the provider or the employee/volunteer named above is allowed to administer medication other than over-the-counter topical ointments, sunscreen and topically applied insect repellent to subsidized children in the program. If there is a different answer or reason for different children, the provider must check all answers that apply.
   - The provider must attach the documentation required for each answer, as indicated.
   - [ ] A) I have a valid professional health care license as a physician, physician assistant, registered nurse or nurse practitioner that authorizes me to administer medication. I am not required to have a Health Care Plan for Administration of Medication.
     - I have attached a copy of my current medical license.
   - [ ] B) My employee/volunteer has a valid professional health care license as a physician, physician assistant, registered nurse, or nurse practitioner that authorizes him/her to administer medication. I am required to have a Health Care Plan for Administration of Medication.
     - I have attached a copy of the approval page of my Health Care Plan for Administration of Medication, and a copy of my employee/volunteer’s current medical license.
   - [ ] C) I have, or my employee/volunteer has, a valid professional license as a practical nurse or certification as an advanced emergency medical technician that allows me, or my employee/volunteer, to administer medication. I am required to have a Health Care Plan for Administration of Medication.
     - I have attached a copy of my or my employee’s/volunteer’s current medical license or certification, and a copy of the approval page of the Health Care Plan for Administration of Medication.
   - [ ] D) I have, or my employee/volunteer has, met the training requirements of OCFS regulations, 18 NYCRR Part 415.4 (f)(7)(iv)(z). I am required to have a Health Care Plan for Administration of Medication.
     - I have attached a copy of the approval page of the Health Care Plan for Administration of Medication.

B. INTENT TO SEEK AUTHORIZATION TO ADMINISTER MEDICATION TO SUBSIDIZED DAY CARE CHILDREN

**Providers who are not permitted to administer medications must answer this.**

**Will the provider be seeking authorization to administer medication to subsidized day care children? (choose one).**

- [ ] Yes. I want to learn how to start the process. *Ask the Department of Social Services representative, or in New York City, the Human Resource Administration (HRA) or Administration for Children’s Services (ACS) representative, for the following form: Obtaining Authorization to Administer Medication to Children in Legally-Exempt Care.*

- [ ] No. I will not be seeking authorization to administer medication at this time.
C. PARENT/CARETAKER AND PROVIDER AGREEMENT FOR ADMINISTRATION OF MEDICATION

Parent/caretaker must complete this section.

Who will be responsible for administering medication to your child(ren) in the provider's care? (Check all that apply).

☐ The child care provider or qualified employee/volunteer named previously will administer medication to the child.

☐ The legally-exempt child care provider or employee/volunteer will not administer medication. Instead, the parent/caretaker will administer medication or choose a person who is permitted under NYS Education Law to administer medication. This may include a member of the child's household or certain relatives. The relatives who may be authorized include: the child's grandparent, great-grandparent, great-great-grandparent, aunt/uncle (and spouse), great aunt/great uncle (and spouse), brother/sister or first cousin (and spouse). The parent/caretaker will inform the provider in writing when he or she has chosen a person to give medication to his or her child.

D. PROVIDER CERTIFICATION REGARDING ADMINISTRATION OF MEDICATION

Provider must complete this section:

I will administer medication in compliance with NYS law and only to the extent that I am permitted by NYS law to do so.

If I have employees, I will make sure that each of my employees administers medication in compliance with NYS law and only to the extent permitted by NYS law.

If I have volunteers, I will make sure that each of my volunteers administers medication in compliance with NYS law and only to the extent permitted by NYS law.

By signing this, I agree that the all statements on this form are true and accurate.

PROVIDER SIGNATURE: DATE:

E. PARENT/CARETAKER CERTIFICATION REGARDING ADMINISTRATION OF MEDICATION

I certify that all statements on this form are true and accurate.

I understand that it is my responsibility to make sure my child(ren) receive(s) any necessary medication. I understand that if I choose a child care provider who is not able to meet all of my child(ren)'s health care needs, I am responsible for making additional arrangements to meet the child(ren)'s needs. I will make all necessary arrangements prior to placing my child in the provider’s care.

My provider has informed me whether he or she (or his/her employee/volunteer) is legally permitted to administer medication. I have read the Qualifications For Administration Of Medication, Section V A, of this enrollment form, and I understand whether or not my provider or his/her employee/volunteer is legally permitted to give medication to my child(ren).

My child care provider and I have discussed who will administer medication to my child(ren) while the child(ren) is in the provider’s care. Our agreement regarding who will be responsible for administering medication to my child(ren) is indicated on this form in Section V C.

I understand that I may administer medication to my child, or that I may authorize another person that is legally permitted to administer medication to my child. I may authorize a member of my child’s household or certain relatives of the child to administer medication. The relatives who may be authorized include: the child's grandparent, great-grandparent, great-great-grandparent, aunt/uncle (and spouse), great aunt/great uncle (and spouse), brother/sister or first cousin (and spouse).

PARENT/CARETAKER SIGNATURE DATE:
VI. HISTORY OF COURT-ORDERED ARTICLE 10 REMOVAL OF A CHILD

Provider must complete.

A. PROVIDER HISTORY

1. I certify that (choose one):

☐ I have never had a child removed from my care by court order in a proceeding under Article 10 (child protective) of the Family Court Act (FCA). (Go to section B.)

☐ I have had a child removed from my care by court order in a proceeding under Article 10 of the Family Court Act.

2. Date(s) removal(s) occurred:

3. As a result of the FCA Article 10 hearing, was there a judicial finding of abuse or neglect? (Indicate type of finding below.)

☐ Yes, there was a judicial finding of abuse or neglect.

☐ No, there was no judicial finding of abuse or neglect. (Indicate reason below.)

☐ petition was withdrawn

☐ case was dismissed

☐ Other, explain:

4. Length of time that the child(ren) were removed from the home (choose one):

☐ 3 days or less

☐ more than 3 days and as many as 60 days

☐ more than 60 days but less than 15 months

☐ 15 months or longer

5. Provider must attach a written description of what led to the removal and the underlying reasons for the removal.

B. PROVIDER CERTIFICATION REGARDING HISTORY OF ARTICLE 10 REMOVAL.

The provider must complete this certification.

By signing this form, I agree that I have provided true and accurate information regarding any history of an Article 10 removal of a child in my care.

SIGNATURE OF PROVIDER: DATE:

VII. HISTORY OF TERMINATION OF PARENTAL RIGHTS

Provider must complete.

A. PROVIDER HISTORY

1. I certify and attest that (Choose one):

☐ I have never had my parental rights terminated. (Proceed to Part B.)

☐ I have had my parental rights terminated.

2. My parental rights were terminated based on: (Check reason below):

☐ Abandonment

☐ Mental illness

☐ Permanent neglect

☐ Mental retardation

☐ Severe or repeated abuse

☐ Other:

3. Provider must attach a written description of what led to the termination of parental rights and the underlying reasons for the termination of parental rights.

B. PROVIDER CERTIFICATION REGARDING HISTORY OF TERMINATION OF PARENTAL RIGHTS

The provider must sign this certification.

By signing this form, I agree that I have provided true and accurate information regarding any history of a termination of my parental rights.

SIGNATURE OF PROVIDER: DATE:
VIII. HISTORY OF A SUSPENSION, REVOCATION OR DENIAL OF A LICENSE OR REGISTRATION TO OPERATE A CHILD DAY CARE PROGRAM

(CILD DAY CARE includes: day care centers, family day care homes, group family day care homes, small day care centers and/or school age child care programs.) Provider must complete.

A. PROVIDER HISTORY

1. I certify and attest (Choose all that apply):
   - [ ] I have applied for an initial license or registration to operate a child day care program, and been denied.
   - [ ] I have applied for a renewal of a license or registration to operate a child day care program and been denied.
   - [ ] I have applied for an initial or renewed license or registration to operate a child day care program and I have never been denied an application for or a renewal of a license or registration to operate a child day care program.
   - [ ] I have never applied for a license or registration to operate a child day care program. (Go to Part B.)

2. I certify and attest that (Choose one):
   - [ ] I have never had a license or registration to operate a child day care revoked or suspended.
   - [ ] I have had a license or registration to operate a child day care revoked or suspended.

3. If you have ever had a license or registration revoked, suspended or denied, give name and location of the child day care program(s) for which this action occurred ________________________________

4. Provider must attach a written description of what led to the denial, revocation or suspension of the license or registration to operate a day care program, and the reasons this occurred.

B. PROVIDER CERTIFICATION REGARDING LICENSING/REGISTRATION HISTORY

The provider must sign this certification.

By signing this form, I agree that I have provided true and accurate information regarding my history of denial, revocation or suspension of a license or registration to operate a child day care program.

SIGNATURE OF PROVIDER: ___________________________ DATE: ___________________________

IX. PARENT/CARETAKER AND PROVIDER CERTIFICATIONS

A. PROVIDER CERTIFICATIONS

I will notify the Department of Social Services immediately if the hours of care or number of children in my care changes.

I agree to collect the family share (fee) if instructed to do so by the Department of Social Services. I will immediately notify the Department of Social Services if the parent/caretaker fails to pay the required family share. I agree to provide accurate attendance records as required by the Department of Social Services.

I understand that representatives of the Department of Social Services and the State of New York may visit my child care program to confirm that the information on my enrollment form and/or on attendance forms is true and accurate, and that child care services are being provided as listed on those forms. I agree to allow representatives of the Department of Social Services and the State of New York access to all areas where child care is provided for a child receiving a child care subsidy. I understand that if I do not allow such access, then I will be considered an ineligible provider. Any child care that I provide to a child receiving a child care subsidy while I am deemed an ineligible provider by the Department of Social Services will not be reimbursed by the Department of Social Services.

I understand that I may not be eligible to provide child care if I have a history of an Article 10 (child protective) removal of a child by court order, termination of my parental rights, or denial, revocation and/or suspension of a license or registration to operate a child day care program. I understand that I may request that the Department of Social Services review any extenuating circumstances to determine if an exception could be made to allow me to provide child care. If I request an exception, I will provide all information, documents or references required by the Department of Social Services.
B. PARENT/CARETAKER CERTIFICATIONS

I understand that my provider may not be eligible to provide child care if he or she has a history of an Article 10 (child protective) removal of a child by court order, termination of parental rights, or denial, revocation and/or suspension of a license or registration to operate a child day care program. I understand that I may request that the Department of Social Services review any extenuating circumstances to determine if an exception could be made to allow my provider to provide child care. If I request an exception, the provider must provide all information, documents or references required by the Department of Social Services.

I understand that the Department of Social Services may not be able to pay a provider when:

- The provider, any volunteer, who is likely to have regular contact with my children, or any employee has been convicted of a crime; or
- The provider has a history of an Article 10 removal of a child by court order, termination of parental rights, or denial, revocation and/or suspension of a license or registration to operate a child day care program.

If the Department of Social Services determines that payment cannot be made to the provider when any of the above events have occurred, I have the right and responsibility to decide whether I want to use this provider. If I choose to continue using such a provider, I am responsible to pay for the child care myself. I understand that I have the right to select another provider.

I will notify the Department of Social Services if the hours that I need child care or other circumstances related to my need or eligibility for child care change. I agree to pay my family share (fee), if any, as directed by the Department of Social Services.

I certify that I have selected this provider to care for my child(ren). I understand that it is my responsibility to monitor the quality of care furnished to my child(ren).

C. PARENT/CARETAKER AND PROVIDER CERTIFICATIONS

We state that to the best of our knowledge and belief all statements made on this form and any attachments are accurate and true. We understand that providing false or inaccurate information may result in the termination of payments and legal action by the Department of Social Services.

We state that the parent/caretaker has specifically asked the provider if the provider, volunteers who are likely to have regular contact with children in care, or employees have been the subject of an indicated report of child abuse or maltreatment. The provider has asked all volunteers who are likely to have regular contact with children in care and all employees if they have been the subject of an indicated report of child abuse or maltreatment. The provider has given the parent/caretaker true and accurate information in writing regarding any indications of child abuse or maltreatment. The parent/caretaker has considered the information given on child abuse and maltreatment indications and is selecting this provider. The parent/caretaker understands he/she has the right to select another provider.

If the provider is required to complete the Facility Safety Checklist, we state that we have completed it together. We understand that payment cannot be made until items marked "No" on the Facility Safety Checklist have been corrected. We agree to notify and provide documentation to the Department of Social Services when any item on the Checklist has been corrected or changed.

By signing this form, the parent/caretaker and provider agree to all of the requirements listed above.

<table>
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<tr>
<th>PARENT/CARETAKER SIGNATURE</th>
<th>DATE</th>
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<tr>
<td>PROVIDER SIGNATURE</td>
<td>DATE</td>
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NOTICE OF CHILD CARE ASSISTANCE OVERPAYMENT AND REPAYMENT REQUIREMENTS

Section I-Notice of Child Care Assistance Overpayment
You received more child care benefits than you should have (overpayment) from ________________ to __________________. The amount of the overpayment is $_________________.

The reason the overpayment occurred is:
☐ You or someone in your household failed to inform us of changes that affect your eligibility or benefit level.
☐ We incorrectly gave you more benefits than you should have gotten due to: ____________________________________________
☐ Other: _______________________________________________________________________________________________

Explanation and Calculation of Overpayment: ______________________________________________________________
_____________________________________________________________________________________________________
_____________________________________________________________________________________________________

The regulations that allow us to do this are 18 NYCRR 415.4 (i) and (j).

Section II-Repayment Plan Agreement
If you are requesting a Fair Hearing regarding this decision, you are not required to complete and sign the repayment plan at this time. However, you must complete and sign the Fair Hearing request on the reverse side of this form and return it to the address indicated on the reverse.

You are required to make full repayment by ________________. If you are unable to repay the overpayment as shown below or you want to set up another agreement plan, or if you have any questions please call _____________________________ at _____________________________, right away. Otherwise, sign this agreement, make a copy of it for yourself, and return the agreement to the address at the bottom of this page.

If you do not respond to this notice, your case will be closed.

Your repayment plan is shown below.
☐ Revised Family Share--Recovery will be made from your child care benefits. To repay this debt, you must pay $____________ per week. This is in addition to your current family share of $____________ per week. **Your total family share** is now $____________ per week. You must make this payment each week to your child care provider. Your first payment is due on ______________. We will pay your provider $____________ per week.
☐ You must make weekly payments of $____________ to the Department of Social Services. You must send payment to the address below. Your first payment is due on ______________. We will pay your provider $____________ per week.

I agree to repay by this method. I understand that failure to pay the amount stated on time will result in a discontinuation of my child care benefits and/or legal action may be taken in the court to recover this overpayment.

__________________________________________________________            ______________
Signature                                                                                                                 Date

Return this repayment plan agreement to:

NEW YORK STATE
OFFICE OF CHILDREN AND FAMILY SERVICES
RIGHT TO A CONFERENCE: You may have an agency conference to review these actions. A conference is when you meet with someone from the agency, other than the person who made the decision, to discuss your case. You may request an agency conference by calling the number on the front of this notice, in the upper right hand corner. At the conference, if we discover that we made a wrong decision or if, because of information you provide, we determine to change our decision, we will take corrective action and give you a new notice. Requesting an agency conference is not the same as requesting a fair hearing. Read below for fair hearing information.

RIGHT TO A FAIR HEARING: If you disagree with the decision made by our agency, you may request a fair hearing. At the hearing you will have the opportunity to present written and oral evidence to demonstrate why you think the agency’s decision is wrong and the action should not be taken. You have the right to be represented by legal counsel, a relative, friend or other person, or you may represent yourself. You have the right to bring witnesses and to question witnesses at the fair hearing. You have the right to present written and oral evidence at the hearing, and should bring any documents that may be helpful in presenting your case, such as this notice, pay stubs, receipts, child care bills, medical verification, letters, etc. There is additional information below on how to obtain access to your file and copies of documents in your file.

YOU HAVE 60 DAYS FROM THE DATE OF THIS NOTICE TO REQUEST A FAIR HEARING:
When you request a fair hearing, the State will send you a notice informing you of the time and place of the hearing. You have the right to be represented by legal counsel, a relative, a friend or other person, or, to represent yourself.

TO REQUEST A FAIR HEARING:
Telephoning: 1 800-342-3334  (Please have this notice with you when you call).
Online: Complete an online request form at: http://www.otda.state.ny.us/oah/forms.asp.
Walk In Locations: 14 Boerum Place, Brooklyn, NY OR 330 West 34th Street, Third Floor, Manhattan, NY.
Writing: Complete the following information, sign and mail a copy of this entire notice to the New York State Office of Administrative Hearings, Office of Temporary and Disability Assistance, P.O. Box 1930, Albany, New York 12201. Please keep a copy for yourself.
Faxing: Complete the following information, sign and fax this entire notice to the New York State Office of Administrative Hearings at: 518-473-6735.

☐ I want a fair hearing. The Agency’s action is wrong because:

☐ I understand I may be eligible for aid continuing (current recipients only). My benefits have been stopped and I wish to have my benefits restored (aid continuing) until the hearing decision is issued.
If you request a fair hearing and aid continuing, within ten (10) days of the date of the postmark of the mailing of this notice, your child care will be reinstated and will be unchanged until the fair hearing decision is issued. However, if you lose the fair hearing, you will owe any child care that you should not have received. We are required to recover any child care overpayments. We must make a claim against you for any child care you receive that you were not entitled to, which may be collected by reduction of future child care benefits, through lump sum installment payments, or through legal action. If you want to avoid this possibility you can check the box below. You can also indicate over the telephone or in a letter that you do not want reinstatement of your child care.

☐ I do not want my benefits continued until the hearing decision is issued.

Signature of Client: __________________________ Date: __________________________

LEGAL ASSISTANCE: If you need free legal assistance, you may be able to obtain such assistance by contacting your local Legal Aid Society or other legal advocate group. You may locate the nearest Legal Aid Society or advocate group by checking your Yellow Pages under “Lawyers” or by calling the number indicated on the first page of this notice.

ACCESS TO YOUR FILE AND COPIES OF DOCUMENTS: You have a right to look at your case file, and to receive free copies of the documents that the agency will put into evidence and other documents necessary for you to prepare for the fair hearing. To review your file or receive copies of any documents in your file, you can call us at the Record Access telephone number listed at the top of page 1 of this notice or write to us at the address printed at the top of page 1 of this notice. If you want the documents mailed to you, you must specifically ask that they be mailed. You should ask for documents ahead of time. They will be provided to you within a reasonable time before the date of the hearing.

INFORMATION: If you want more information about your case, how to ask for a fair hearing, how to see your file, or how to get copies of documents, call us at the telephone numbers listed at the top of page 1 of this notice or write to us at the address printed at the top of page 1 of this notice.
NOTICE OF FRAUD DETERMINATION, DISQUALIFICATION FOR CHILD CARE BENEFITS AND REPAYMENT PLAN

NOTICE DATE: 

NAME AND ADDRESS OF AGENCY/CENTER OR DISTRICT OFFICE

CASE NUMBER CIN NUMBER

CASE NAME (And C/O Name if Present) AND ADDRESS

GENERAL TELEPHONE NUMBER FOR QUESTIONS OR HELP

OR Agency Conference
Fair Hearing Information
and Assistance
Record Access
Legal Assistance Information

1-800-342-3334

OFFICE NO. UNIT NO. WORKER NO. UNIT OR WORKER NAME TELEPHONE NO.

YOU HAVE THE RIGHT TO AN AGENCY CONFERENCE AND TO A FAIR HEARING TO APPEAL THIS DECISION. BE SURE TO READ THE BACK OF THIS NOTICE ON HOW TO REQUEST AN AGENCY CONFERENCE AND/OR A FAIR HEARING.

Section I: This notice is to inform you:

1. The Department of Social Services has determined that you have fraudulently received child care benefits and you are disqualified from receiving child care benefits, AND

2. You have received an overpayment and you must repay the overpayment.

The regulation which allows us to do this is: 18 NYCRR 415.4(i).

Section II: Fraud Determination

The Department’s finding of fraudulent receipt of child care benefits was based on:

☐ Your conviction by a court of law on ___________________ of fraudulently receiving child care benefits.

☐ Your signing a voluntarily admission dated ______________________.

The fraudulent activity resulted in an overpayment of $__________________, occurring from _________________ to _________________.

Section III: Length of Disqualification Period

As a result of the fraudulent receipt of benefits, you are disqualified from receiving child care benefits. New York State regulations, 18 NYCRR 415.4(i)(13), establish time periods for suspension or termination of benefits depending on the number of offenses and the amount of fraudulent benefits received.

Your disqualification period is:

☐ Six months, because this is your first offense.

☐ 12 months, because this is your second offense or the amount of fraudulent benefits you received was between $1,000 and $3,900.

☐ 18 months because this is your third offense, or the amount of fraudulent benefits you received was in excess of $3,900.

☐ Five years, because you have committed four or more previous offenses.

☐ Other (State length of period and reason): ________________________________________________________________.

Section IV: Effective Date of Disqualification

Your disqualification will begin on ___________________________ and end on ____________________________.

You will be subject to the above disqualification penalty if you apply for and are found eligible for child care benefits at a future date.

You are required to make full repayment by _________________. If you are unable to repay the overpayment as shown below or you want to set up another agreement plan, or if you have any questions please call ________________________ at ________________________, right away. Otherwise, sign this agreement, make a copy of it for yourself, and return the agreement to the address at the bottom of this page.

Your repayment plan is shown below.

☐ Recovery will be made from your child care benefits. To repay this debt, you must pay $________ per week to your child care provider. This is in addition to your current family share of $________ per week. Effective ________________, your total family share will be $________ per week and the amount we pay to your provider will be reduced to $________.

☐ To repay this debt, you must pay the Department of Social Services $________ per week. Your first payment is due on ________________. The final payment is due on ________________. Send payments to:

☐ You must continue to follow the repayment plan and/or court order that is already in effect, and is attached to this notice.

I agree to repay by this method. I understand that failure to pay the amount stated above on time will result in a discontinuation of my child care benefits and/or legal action may be taken in the court to recover this overpayment.

__________________________________________________________            ______________
Signature                                                                                                                               Date

Return this repayment plan agreement to:

CLIENT/FAIR HEARING COPY

NEW YORK STATE
OFFICE OF CHILDREN AND FAMILY SERVICES

ATTACHMENT E

OCFS-LOSS-7010 (03/2005) – INTERIM VERSION
RIGHT TO A CONFERENCE: You may have an agency conference to review these actions. A conference is when you meet with someone from the agency, other than the person who made the decision, to discuss your case. You may request an agency conference by calling the number on the front of this notice, in the upper right hand corner. At the conference, if we discover that we made a wrong decision or if, because of information you provide, we determine to change our decision, we will take corrective action and give you a new notice. Requesting an agency conference is not the same as requesting a fair hearing. Read below for fair hearing information.

RIGHT TO A FAIR HEARING: If you disagree with the decision made by our agency, you may request a fair hearing. At the hearing you will have the opportunity to present written and oral evidence to demonstrate why you think the agency’s decision is wrong and the action should not be taken. You have the right to be represented by legal counsel, a relative, friend or other person, or you may represent yourself. You have the right to bring witnesses and to question witnesses at the fair hearing. You have the right to present written and oral evidence at the hearing, and should bring any documents that may be helpful in presenting your case, such as this notice, pay stubs, receipts, child care bills, medical verification, letters, etc. There is additional information below on how to obtain access to your file and copies of documents in your file.

YOU HAVE 60 DAYS FROM THE DATE OF THIS NOTICE TO REQUEST A FAIR HEARING
When you request a fair hearing, the State will send you a notice informing you of the time and place of the hearing. You have the right to be represented by legal counsel, a relative, a friend or other person, or, to represent yourself.

TO REQUEST A FAIR HEARING:
Telephoning: 1 800-342-3334 (Please have this notice with you when you call).

Online: Complete an online request form at: http://www.otda.state.ny.us/oah/forms.asp

Walk In Locations: 14 Boerum Place, Brooklyn, NY OR 330 West 34th Street, Third Floor, Manhattan, NY.

Writing: Complete the information below, sign and mail a copy of this entire notice to the New York State Office of Administrative Hearings, Office of Temporary and Disability Assistance, P.O. Box 1930, Albany, New York 12201. Please keep a copy for yourself.

Faxing: Complete the information below, sign and fax this entire notice to the New York State Office of Administrative Hearings at: 518-473-6735.

☐ I want a fair hearing. The Agency’s action is wrong because:
_________________________________________________________________________________________________
_________________________________________________________________________________________________

☐ I understand I may be eligible for aid continuing (current recipients only). My benefits have been stopped and I wish to have my benefits restored (aid continuing) until the hearing decision is issued.
If you request a fair hearing and aid continuing, within ten (10) days of the date of the postmark of the mailing of this notice, your child care will be reinstated and will be unchanged until the fair hearing decision is issued. However, if you lose the fair hearing, you will owe any child care that you should not have received. We are required to recover any child care overpayments. We must make a claim against you for any child care you receive that you were not entitled to, which may be collected by reduction of future child care benefits, through lump sum installment payments, or through legal action. If you want to avoid this possibility you can check the box below. You can also indicate over the telephone or in a letter that you do not want reinstatement of your child care.

I do not want my benefits continued until the hearing decision is issued.
Signature of Client: __________________________ Date: __________________________

LEGAL ASSISTANCE: If you need free legal assistance, you may be able to obtain such assistance by contacting your local Legal Aid Society or other legal advocate group. You may locate the nearest Legal Aid Society or advocate group by checking your Yellow Pages under “Lawyers” or by calling the number indicated on the first page of this notice.

ACCESS TO YOUR FILE AND COPIES OF DOCUMENTS: You have a right to look at your case file, and to receive free copies of the documents that the agency will put into evidence and other documents necessary for you to prepare for the fair hearing. To review your file or receive copies of any documents in your file, you can call us at the Record Access telephone number listed at the top of page 1 of this notice or write to us at the address printed at the top of page 1 of this notice. If you want the documents mailed to you, you must specifically ask that they be mailed. You should ask for documents ahead of time. They will be provided to you within a reasonable time before the date of the hearing.

INFORMATION: If you want more information about your case, how to ask for a fair hearing, how to see your file, or how to get copies of documents, call us at the telephone numbers listed at the top of page 1 of this notice or write to us at the address printed at the top of page 1 of this notice.
Notice Date: ________________________  Case Number: ________________________
CIN Number: ________________________

Dear ___________________________________:

New York State requires that low-income families who are applying for or receiving child care benefits **actively pursue child support**. This is required whenever a non-custodial parent is absent from the home, unless the Department of Social Services determines you have **good cause** not to actively pursue child support. This requirement to actively pursue child support, which became effective on May 15, 2004, is necessary because:

- all children deserve support from both parents;
- child support is an important part of assisting a family to become self-sufficient; and
- by obtaining child support, more families in need of child care benefits may receive them.

You will be ineligible for child care benefits, unless you demonstrate to your child care worker that you are actively pursuing child support or you have good cause not to pursue child support. This requirement applies to all of your dependent children, even if you are not applying for child care for each child.

Enclosed with this letter is information on:

- Actively pursuing child support;
- Documenting your efforts to actively pursue child support;
- Claiming good cause not to actively pursue child support;
- Proving that good cause exists; and
- A father’s rights when paternity is established.

Also enclosed is the **Agreement to Actively Pursue Child Support or Good Cause Claim** form, OCFS-LDSS-7011, which you should complete after you read the other enclosures. On this form you must indicate either your willingness to actively pursue child support or your inability to actively pursue child support because you are claiming good cause. **By ________________, you must return the enclosed form, OCFS/LDSS-7011, and either demonstrate that you are actively pursuing child support or claim good cause not to actively pursue child support.** You have 20 days to submit proof of your good cause claim. If you are claiming good cause and need additional time to gather documentation, please tell your child care worker.

If you have any questions regarding the child support requirements, please call ________________, at ________________.

Sincerely,

______________________________________

NEW YORK STATE
OFFICE OF CHILDREN AND FAMILY SERVICES

ATTACHMENT F
Actively Pursuing Child Support

You can actively pursue child support in the following ways:

- Establish paternity for your child (legally determining the child’s father),
- Obtain a court order of child support, and
- Get the child support owed to you.

Things you may be required to do when actively pursuing child support include, but are not limited to:

- Provide information to identify and locate the non-custodial parent,
- Provide information or documentation needed to establish paternity (legally determining the child’s father),
- Take all actions deemed necessary for genetic testing for yourself and the child,
- Take all actions deemed necessary to establish child support orders,
- Take all actions deemed necessary to modify an existing order that does not address child care,
- Take all actions deemed necessary to enforce an existing child support order when you are not receiving the support payments as ordered,
- Appear as a party/witness at a court proceeding, and
- Provide additional information as needed or attest to the lack of information under penalty of perjury.

You can do this by:

- Hiring private legal counsel who will prepare and file petitions, represent you in court and work to actively pursue support,
- Doing these things on your own, or
- Applying for child support enforcement services with the Department of Social Services’ Child Support Enforcement Unit (CSEU). With the exception of legal services, child support services through the CSEU are provided free of charge.
Documenting Your Efforts

If you do not have a court order for child support:

- Show your child care worker that you have an appointment with or have applied for child support services from the CSEU and are actively pursuing support; or
- Submit your detailed written plan of activities and timeframes which includes the actions you or your legal representative have taken or will take to actively pursue child support, and documentation which supports these actions.

If you have a court order for support:

- Show your child care worker a copy of the court order for child support and evidence of child support payments, such as deposit records of child support payment checks or other payment records; OR
- Show your child care worker a copy of the court order for child support. If support is not being received, document your attempts to have the child support order enforced. Proof may include court documentation such as a copy of the violation petition, court summonses, court orders following the violation.

You must provide a report at case opening and at each recertification to show you are actively pursuing child support. Your worker may require more frequent reports depending on your case circumstances. The report must list the actions you have taken and/or will take to pursue child support, and when you expect to complete these actions. You must document the actions you describe in the report.
Claiming Good Cause Not To Actively Pursue Child Support

You have the right to claim good cause not to actively pursue child support if pursuing child support would adversely affect your health, safety or welfare; the health, safety and welfare of the child on whose behalf child care payments are to be made; or the health, safety and welfare of other persons in the child’s household. Some of the reasons that may be considered good cause include:

- Your active pursuit of child support is likely to cause physical or emotional harm to you, your child, or someone living in your household; OR
- Your child came from a pregnancy due to incest or rape; OR
- You are working with the court or an authorized adoption agency to have your child adopted.

To establish that good cause exists, you must claim good cause on the OCFS/LDSS-7011, Agreement to Actively Pursue Child Support or Good Cause Claim form and submit it to the Department of Social Services. Then, you must prove that good cause exists by providing documentation.

If you are claiming good cause, your application or recertification for child care benefits will be processed for a maximum authorization period of three months, while the good cause determination is made. The Department of Social Services will inform you of its decision on the OCFS/LDSS-7012, Notice of Good Cause Determination. If good cause is established, the authorization period will be extended to the normal six or twelve month reauthorization period.

You have the right to make a good cause claim at any time by telling your child care worker about your concern.

Proving That Good Cause Exists

In addition to submitting your claim of good cause, you must prove to the Department of Social Services that good cause exists. To do this, you must explain the circumstances and provide evidence by the date it is required. If you need additional time to gather evidence, you must tell your worker. The Department of Social Services may give you up to an additional 20 days to obtain the evidence.

Examples of evidence you can give for a good cause claim include:

- Birth certificate, medical or law enforcement records which show that your child came from a pregnancy due to incest or rape;
- Court records or other records that show that a legal adoption proceeding is pending in court;
- Court, medical, criminal, child protective, social services, psychological or law enforcement records which show that the non-custodial parent might physically or emotionally harm you, the child or another household member;
- Medical records indicating that the child, custodial parent/caretaker or other household member has an emotional health history and a present emotional health status which indicates that pursuing child support would be detrimental to the mental and or emotional health of that person;
- A written statement from a public or private agency that you are being aided in a decision on whether to keep or put your child up for adoption;

- Sworn statements from individuals, other than yourself, with knowledge of the good cause circumstances. Such individuals might include friends, relatives, neighbors, clergy, social workers and medical staff. The sworn statement must attest to circumstances that indicate pursuing child support would adversely affect the health, safety or welfare of the child on whose behalf child care payments are to be made or of other person’s in the child’s household. It must be signed in front of and witnessed by a person who is empowered to administer an oath to the testifier. Persons authorized to administer an oath include public notaries, commissioners of deeds, judges, town justices, and justices of the peace; or

- A domestic violence waiver received while you were getting Temporary Assistance. The domestic violence waiver must be dated within the last 12 months of your application or recertification for child care.

If you need help, ask the Department of Social Services. If your good cause claim is due to physical harm, the Department of Social Services may still be able to approve your good cause claim if you cannot get the evidence.

You must submit your evidence within 20 days of completing the good cause claim. If you need additional time to get the evidence, ask your child care worker if you can be granted an extension.

Once you make a good cause claim and submit your evidence, the Department of Social Services will examine the evidence and notify you if additional evidence is needed. If you do not submit any evidence or no evidence exists, and your good cause claim is based on anticipated physical harm, the Department of Social Services may still investigate the good cause claim even without evidence, as long as you submit a sworn statement signed by an individual other than yourself and the Department of Social Services feels the sworn statement is credible.

The Department of Social Services will determine whether good cause exists based on the parent/caretaker’s evidence and the investigation by the Department of Social Services, if needed. You will receive notification of the decision made by the Department of Social Services on the OCFS/LDSS-7012, Notice of Good Cause Determination.

A final good cause determination will be made within 30 days after you sign and submit the Good Cause Claim, unless the Department of Social Services allows you additional time to provide documentation. If additional time is allowed for you to submit documentation, the final determination of good cause will be made within 10 days following the extended due date.

If you do not provide the required information by the required date, you will receive a notice that the Department of Social Services intends to deny or discontinue your child care benefits because you have not actively pursued child support and have not demonstrated good cause not to pursue support.

If the Department of Social Services determines that good cause does not exist, refusal to actively pursue support will result in the Department of Social Services denying your application or closing your child care case. If this happens, you will be notified of your right to request a fair hearing to review the Department of Social Services’ decision in this matter.


**A Father’s Rights When Paternity is Established**

Prior to establishing an order for child support it may be necessary to legally establish the child’s father. This is known as establishing paternity. A court may establish paternity by naming the legal father of a child, or paternity may be established when the mother and father acknowledge a child’s father by signing an acknowledgment of paternity form anytime after the child is born. Your child care worker will need to verify that the form was properly filed and the father is registered in the Putative Father Registry.

Establishing paternity provides a father legal responsibilities *and* legal rights to a child, including:

- The right to seek custody of the child;
- The right to seek visitation with the child;
- The right to take part in any adoption or foster care plans for the child;
- The right to object to any adoption or foster care placements of the child; and
- The right to inherit from the child.
# Agreement to Actively Pursue Child Support or Good Cause Claim

## 1) Applicant/Recipient Information

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<tr>
<th>Address</th>
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</table>

## 2) Child Support Requirements Notification Letter

The Child Support Requirements Notification Letter explains that you are required to actively pursue child support for your children and any child living with you, unless the Department of Social Services determines that you have "good cause" not to pursue such support. Please read the letter and make sure you understand your rights and responsibilities regarding child support, before you complete and sign this form.

*Indicate below if you have received the Child Support Requirements Notification Letter.*

- [ ] I have received the Child Support Requirements Notification Letter.
- [ ] I have not received the Child Support Requirements Notification Letter.

## 3) Active Pursuit of Child Support or Good Cause Claim

**Active Pursuit of Child Support**

Will you actively pursue child support? Choose one.

- [ ] Yes. Complete 3A, the Agreement to Actively Pursue Child Support.
- [ ] No. I cannot pursue child support as it would expose myself, my child or another household member to physical or emotional harm. Complete 3B, the Good Cause Claim. The Department of Social Services will inform you of its decision on the OCFS/LDSS-7012, Notice of Good Cause Determination.

### 3A) Agreement to Actively Pursue Child Support

I agree to actively pursue child support. I can actively pursue child support without exposing myself, my child or anyone in my household, to physical or emotional harm.

I will actively pursue child support in the following way: Choose one.

- [ ] I will pursue child support through the Child Support Enforcement Unit (CSEU). I understand that, with the exception of legal services, CSEU services are provided free of charge. I understand I must give my child care worker a written report which includes: the actions I have taken to actively pursue child support and the documentation which confirms these actions.
- [ ] I will pursue support on my own behalf or hire an attorney to represent me. I understand I must give my child care worker a detailed written plan of activities and timeframes which includes the actions I (or my attorney) have taken or will take to actively pursue child support and documentation which confirms these actions. I understand if circumstances change, that I may claim good cause at any time by informing my child care worker.

### 3B) Good Cause Claim

I am making a Good Cause Claim. I cannot pursue child support for one or more of the following reasons:

- It would expose myself, my child or another household member to physical or emotional harm;
- The child for whom child support is sought was conceived as a result of incest or forcible rape;
- A legal proceeding for the adoption of the child is pending before a court;
- I am being assisted by a public or licensed private social agency to resolve the issue of whether I will relinquish my child for adoption; and discussions have gone on for less than 3 months; or
- The non-custodial parent’s rights have been terminated or voluntarily surrendered.

*Indicate below if you have enclosed documentation of your good cause claim.*

- [ ] I have enclosed the following documentation (proof) of my good cause claim: ________________________________
  ________________________________________________________________________________________________
- [ ] I have not enclosed documentation of my good cause claim.

I understand I have 20 days to submit proof of my good cause claim. I understand that I may ask my child care worker for additional time if the documents I need to prove my good cause claim cannot be obtained within 20 days.

## 4) Certification

I certify and attest that all statements made on this form are true and accurate.

Signature of Applicant/Recipient: ____________________________

Date: ____________________________

Return this form to:
NOTICE OF GOOD CAUSE DETERMINATION

NAME AND ADDRESS OF AGENCY/CENTER OR DISTRICT OFFICE

CASE NUMBER | CIN NUMBER
-------------|-------------

CASE NAME (And C/O Name if Present) AND ADDRESS

OFFICE NO. | UNIT NO. | WORKER NO. | UNIT OR WORKER NAME | TELEPHONE NO.
-------------|----------|------------|---------------------|------------------

☐ Good Cause Found
The Department of Social Services has reviewed the documentation you provided and has determined that you have good cause not to actively pursue child support. Therefore, you have been granted a good cause exception from the child support requirement to actively pursue child support, which means you do not have to actively pursue child support. You are required to immediately notify your worker of any change in circumstances that may affect your good cause exception. Your good cause exception will be reassessed no later than ____________________.

This decision was based on 18 NYCRR 415.3(c).

☐ Good Cause NOT Found
☐ You have not been granted a good cause exception from the child support requirement. The Department of Social Services has reviewed the documentation used to support your claim of good cause and determined that you do not qualify for a good cause exception from the child support requirement.

☐ You have not been granted a good cause exception from the child support requirement because you did not provide evidence within 20 days of submitting the good cause claim form (or by the date required if you were granted an extension).

This decision was based on 18 NYCRR 415.3(c).

If you think the agency’s determination is incorrect, please see the information on the reverse of this form, which provides you with instructions for requesting an agency conference or fair hearing to challenge the agency’s good cause exception determination.

If your good cause claim has been denied, please read the additional information below.

Because your good cause claim has been denied, you must actively pursue child support to be eligible for child care benefits. Refusal to actively pursue child support, without a good cause exception, will result in the Department denying your application or closing your child care case.

You are required to demonstrate no later than ________________ that you are actively pursuing child support.

You can actively pursue child support from the non-custodial parent through the Child Support Enforcement Unit (CSEU) or by private legal means.

- Actively pursuing a court order for child support through the CSEU means that you must: obtain an appointment with the CSEU, if necessary; complete the DSS-2521, Application for Child Support Services; and continue to participate in child support activities, as required.
- If pursuing a child support order privately, you (or your legal representative) must participate in child support activities that will lead to the establishment, modification or enforcement of court-ordered support within a reasonable period of time. You must give your child care worker a detailed written plan of activities and timeframes which includes the actions you (or your legal representative) have taken to actively pursue child support, documentation which confirms these actions; and, the actions you (or your legal representative) plan to take to actively pursue child support in the future.

YOU HAVE THE RIGHT TO APPEAL THIS DECISION.
BE SURE TO READ THE BACK OF THIS NOTICE ON HOW TO APPEAL THIS DECISION

CLIENT/FAIR HEARINGS COPY
RIGHT TO A CONFERENCE: You may have an agency conference to review these actions. A conference is when you meet with someone from the agency, other than the person who made the decision, to discuss your case. You may request an agency conference by calling the number on the front of this notice, in the upper right hand corner. At the conference, if we discover that we made a wrong decision or if, because of information you provide, we determine to change our decision, we will take corrective action and give you a new notice. Requesting an agency conference is not the same as requesting a fair hearing. Read below for fair hearing information.

RIGHT TO A FAIR HEARING: If you disagree with the decision made by our agency, you may request a fair hearing. At the hearing you will have the opportunity to present written and oral evidence to demonstrate why you think the agency's decision is wrong and the action should not be taken. You have the right to be represented by legal counsel, a relative, friend or other person, or you may represent yourself. You have the right to bring witnesses and to question witnesses at the fair hearing. You have the right to present written and oral evidence at the hearing, and should bring any documents that may be helpful in presenting your case, such as this notice, pay stubs, receipts, child care bills, medical verification, letters, etc. There is additional information below on how to obtain access to your file and copies of documents in your file.

YOU HAVE 60 DAYS FROM THE DATE OF THIS NOTICE TO REQUEST A FAIR HEARING
When you request a fair hearing, the State will send you a notice informing you of the time and place of the hearing. You have the right to be represented by legal counsel, a relative, a friend or other person, or, to represent yourself.

TO REQUEST A FAIR HEARING:
Telephoning: 1 800-342-3334 (Please have this notice with you when you call).
Online: Complete an online request form at: http://www.otda.state.ny.us/oah/forms.asp.
Walk In Locations: 14 Boerum Place, Brooklyn, NY     OR     330 West 34th Street, Third Floor, Manhattan, NY.
Writing: Complete the information below, sign and mail a copy of this entire notice to the New York State Office of Administrative Hearings, Office of Temporary and Disability Assistance, P.O. Box 1930, Albany, New York 12201. Please keep a copy for yourself.
Faxing: Complete the information below, sign and fax this entire notice to the New York State Office of Administrative Hearings at: 518-473-6735.

☐ I want a fair hearing. The Agency’s action is wrong because:
________________________________________________________________________________________________
________________________________________________________________________________________________
________________________________________________________________________________________________

☐ I understand I may be eligible for aid continuing (current recipients only). My benefits have been stopped and I wish to have my benefits restored (aid continuing) until the hearing decision is issued.
If you request a fair hearing and aid continuing, within ten (10) days of the date of the postmark of the mailing of this notice, your child care will be reinstated and will be unchanged until the fair hearing decision is issued. However, if you lose the fair hearing, you will owe any child care that you should not have received. We are required to recover any child care overpayments. We must make a claim against you for any child care you receive that you were not entitled to, which may be collected by reduction of future child care benefits, through lump sum installment payments, or through legal action. If you want to avoid this possibility you can check the box below. You can also indicate over the telephone or in a letter that you do not want reinstatement of your child care.

☐ I do not want my benefits continued until the hearing decision is issued.

Signature of Client: ____________________________ Date: ____________________________

LEGAL ASSISTANCE: If you need free legal assistance, you may be able to obtain such assistance by contacting your local Legal Aid Society or other legal advocate group. You may locate the nearest Legal Aid Society or advocate group by checking your Yellow Pages under “Lawyers” or by calling the number indicated on the first page of this notice.

ACCESS TO YOUR FILE AND COPIES OF DOCUMENTS: You have a right to look at your case file, and to receive free copies of the documents that the agency will put into evidence and other documents necessary for you to prepare for the fair hearing. To review your file or receive copies of any documents in your file, you can call us at the Record Access telephone number listed at the top of page one of this notice or write us at the address printed at the top of page 1 of this notice. If you want the documents mailed to you, you must specifically ask that they be mailed. You should ask for documents ahead of time. They will be provided to you within a reasonable time before the date of the hearing.

INFORMATION: If you want more information about your case, how to ask for a fair hearing, how to see your file, or how to get copies of documents, call us at the telephone numbers listed at the top of page one of this notice or write to us at the address printed at the top of page one of this notice.
18-OCFS-LCM-03

Guidelines and Instructions for Preparing the Child and Family Services Plan Update

The purpose of this Local Commissioners Memorandum (LCM) is to provide guidance to local departments of social services (LDSSs) for the completion of the required county Child and Family Services Plan (CFSP) for the five-year plan cycle covering the period April 1, 2018, to March 31, 2023. LDSSs in collaboration with county youth bureaus and other local stakeholders are required by statute to develop and submit to the New York State Office of Children and Family Services (OCFS) a local, multi-year plan for the provision of services and the allocation of resources. The plan must include the required Persons in Need of Supervision (PINS) Diversion Services Plan that is developed by the LDSS, county youth bureau, and county probation department.

See https://ocfs.ny.gov/main/childcare/plans/plans.asp to view current county Child and Family Services Plans and Annual Plan Updates

See http://ocfs.state.nyenet/cfsp/login.asp to view the current instructions for accessing and using the County Plan System. Navigate to the intranet Child and Family Services Plan page.
Local Commissioners Memorandum

I. Purpose

The purpose of this Local Commissioners Memorandum (LCM) is to provide guidance to local departments of social services (LDSSs) for the completion of the required county Child and Family Services Plan (CFSP) for the five-year plan cycle covering the period April 1, 2018, to March 31, 2023. LDSSs in collaboration with county youth bureaus and other local stakeholders are required by statute to develop and submit to the New York State Office and Children and Family Services (OCFS) a local, multi-year plan for the provision of services and the allocation of resources. The plan must include the required Persons in Need of Supervision (PINS) Diversion Services Plan that is developed by the LDSS, county youth bureau, and county probation department.

II. Background

The county planning process is designed to reflect the following principles and objectives:

- Support and acknowledge a local collaborative planning process that includes broad stakeholder involvement.
- Encourage a planning process that has meaning and utility locally, while preserving accountability to state and federal requirements.
• Support a process that focuses on outcomes for children, youth, families, adults, and communities.
• Support the important respective administrative roles and responsibilities of county youth bureaus and LDSSs.
• Streamline and improve the design of the plan.

In 2016, New York State participated in the federal Child and Family Services Review (CFSR), and New York State’s performance was identified as below the national average on six of the seven safety and permanency indicators. The on-site review portion of the 2016 New York State CFSR identified several areas in need of improvement. Therefore, the federal Children’s Bureau required OCFS to submit a CFSR Program Improvement Plan (PIP) that includes strategies and measurable indicators designed to improve outcomes.

Throughout 2017, OCFS provided LDSSs support and guidance to fully engage in a data-driven needs assessment process, including the development of targeted strategies designed to positively impact key safety and permanency outcomes set forth in the federal CFSR. The resulting CFSP will serve as each LDSS’s PIP.

III. Program Implications

Submission Process

The April 1, 2018, to March 31, 2023, CFSP is comprised of the following sections:

I. Certification Requirements
   o Signature Page/Attestation
   o Public Hearing Requirements
   o MOU Between District Attorney’s Office and Child Protective Services (CPS)

II. Strategic Component
   o LDSS Overview: Mission, Demographics, Success/Achievements, Financial Process, Relationship Between LDSS Outcomes and Title IV-B Federal Goals
   o Welfare of Children and Youth
     ▪ Safety/Prevention
     ▪ Permanency/Prevention
     ▪ Youth and Young Adult
   o Juvenile Justice
     ▪ PINS Diversion Services
   o Adult Services

III. Technical Component
   o Child Care
   o Non-Residential Domestic Violence Services

IV. Appendix F
   o Title XX Program Services Matrix
Since this is the beginning of a new five-year plan, all sections of the plan must be completed; no sections will be pre-filled from previous plans.

LDSSs are required to submit the county CFSP electronically using the County Plan System that can be found on the OCFS intranet under the Child and Family Services Plan page. The system will be available on January 30, 2018 for the input of the five-year CFSP information. LDSS commissioners and directors of services will be informed by email when the system is available. To access the CFSP directly, use the following link: https://countyplans.ocfs.ny.gov/. Instructions for accessing and using the County Plan System will be available on the intranet Child and Family Services Plan page. Designated users will receive a system-generated email with instructions for creating an account and sending invitations to other users to participate in the development of this year's county plans.

Submission Timeline

The County Plan System allows for sections of the plan to be submitted and approved separately. Submission of the plan sections can begin on January 30, 2018, and are expected to be completely submitted and state approved by April 1, 2018.

IV. Technical Assistance Contacts

Staff from the regional offices and program areas listed below are available to assist you.

**Regional Office – Child Welfare and Community Services (CWCS)**
- BRO – Amanda Darling (716) 847-3145 Amanda.Darling@ocfs.ny.gov
- RRO – Karen Lewter (585) 238-8201 Karen.Lewter@ocfs.ny.gov
- SRO – Sara Simon (315) 423-1200 Sara.Simon@ocfs.ny.gov
- ARO – John Lockwood (518) 486-7078 John.Lockwood@ocfs.ny.gov
- NYCRO – Ronni Fuchs (212) 383-4873 Ronni.Fuchs@ocfs.ny.gov
- SVRO – Yolanda Désarmé (845) 708-2498 Yolanda.Desarme@ocfs.ny.gov

**Questions on content areas may be directed to:**
- Child Care – Joe Ziegler (518) 402-6520 Joe.Ziegler@ocfs.ny.gov
- Domestic Violence – Pamela Jobin (518) 474-4787 Pamela.Jobin@ocfs.ny.gov
- Adult Services – Paula Vielkind (518) 474-9590 Paula.Vielkind@ocfs.ny.gov
- Youth and Young Adult and PINS – Jennifer Bargy (518) 474-9441 Jennifer.Bargy@ocfs.ny.gov
- Native American Services – Heather LaForme (716) 847-3123 Heather.LaForme@ocfs.ny.gov

For technical support on the web-based system, use the following link: https://countyplans.ocfs.ny.gov/contact.cfm.

/s/ Laura M. Velez

Issued By:
Name: Laura M. Velez
Title: Deputy Commissioner
Division/Office: Child Welfare and Community Services
The purpose of 14-OCFS-INF-01, Website Postings of Changes to Child Care Services is to advise social services districts (districts) of a new public notice requirement when a district proposes an amendment to the child care portion of its Child and Family Services Plan (CFSP) that reduces eligibility or increases the family share percentage and when a district implements its child care case closing process under its approved CFSP.
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I. Purpose

The purpose of this Local Commissioners Memorandum is to advise social services districts (districts) of a new public notice requirement when a district proposes an amendment to the child care portion of its Child and Family Services Plan (CFSP) that reduces eligibility or increases the family share percentage and when a district implements its child care case closing process under its approved CFSP. In addition to the public notice requirement for a plan amendment found in Title 18 of New York Code of Rules and Regulations (NYCRR) §407.10, a district will now be required to post to its website in a prominent place any proposed plan amendment that reduces eligibility or increases the family share percentage for child care services. Furthermore, any district that implements the process for closing child care cases, as set forth in its approved CFSP, must also prominently post a notice of such action to its website at the time the district begins to notify affected families. Any such notice must describe the categories of families whose cases will be impacted. A district will also be required to provide a copy of any such notice to the New York State Office of Children and Family Services (OCFS) for posting on the OCFS website.
II. Background

Title 18 of NYCRR §407.10 allows a district to propose amendments to its consolidated services plan or integrated county plan (now referred to as the CFSP) at any time. If a reduction in services, change in eligibility, or change in fees is proposed, the amendment must be published for public comment and be presented to the local advisory council for review, prior to its submission to OCFS. A district is required to provide sufficient time for the public to make comments. OCFS has advised districts that 30 days following publication provides a sufficient time period for public comments. There currently is no public notice requirement related to a district implementing the child care case closing process set forth in its CFSP.

III. Program Implications – Effective April 28, 2014

If a district proposes an amendment to the child care portion of its CFSP that reduces eligibility or increases the family share percentage for child care services, in addition to complying with the public notice requirements found in 18 NYCRR § 407.10, the district also must:

- no later than the first day the public notice appears in a newspaper, prominently post on the district’s website a notice of the proposed amendment describing the categories of families whose cases will be impacted; and
- at the time the public notice is submitted to the newspaper for publication, provide a copy of such notice to OCFS.

In addition, if a district implements its process for closing child care cases, as set forth in its approved CFSP, due to the district determining that it cannot maintain its current caseload because all of the available funds are projected to be needed for open cases, the district must:

- no later than the day the district begins to send individual notices to impacted families that their child care cases will be closed, prominently post a notice on the district’s website that the district is implementing the child care case closing process set forth in its approved CFSP and describing the categories of families whose cases will be closed; and
- immediately provide OCFS with a copy of such notice.

OCFS will prominently post copies of each such notice on its website (ocfs.ny.gov).

/s/ Janice M. Molnar, Ph.D.

Issued By:
Janice M. Molnar, Ph.D.
Deputy Commissioner
Division of Child Care Services
15-OCFS-INF-10
Child Care Subsidy Program
Improper Authorization for Payment

The purpose of 15-OCFS-INF-10 is to inform local social services districts (districts) of the results of a comprehensive review of child care subsidy cases that was performed by the Office of Children and Family Services (OCFS), Office of Audit and Quality Control (AQC) during 2015, and to help prepare districts for the next review.
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# Informational Letter

<table>
<thead>
<tr>
<th>Transmittal:</th>
<th>15-OCFS-INF-10</th>
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<tbody>
<tr>
<td>To:</td>
<td>Commissioners of Social Services</td>
</tr>
<tr>
<td>Issuing Division/Office:</td>
<td>Division of Child Care Services</td>
</tr>
<tr>
<td>Date:</td>
<td>December 16, 2015</td>
</tr>
<tr>
<td>Subject:</td>
<td>Child Care Subsidy Program - Improper Authorization for Payment Review</td>
</tr>
</tbody>
</table>
| Suggested Distribution: | Directors of Services  
  Supervisors of Services  
  Child Care Assistance Staff  
  Accounting |
| Contact Person(s): | For questions pertaining to the Improper Authorization for Payment Review:  
  Christopher Covas, Office of Audit and Quality Control  
  (212) 383-1967, Christopher.Covas@ocfs.ny.gov  
  For questions pertaining to the Child Care Subsidy Program:  
  Rhonda Duffney, Division of Child Care Services  
  (518) 474-9454 or Rhonda.Duffney@ocfs.ny.gov |
| Attachments: | None |

### Filing References

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<tbody>
<tr>
<td>13-OCFS-INF-04</td>
<td>18 NYCRR Parts 404 and 415</td>
<td>SSL Section 410</td>
<td></td>
<td>13-OCFS-INF-04</td>
<td></td>
</tr>
<tr>
<td>10-OCFS-INF-04</td>
<td></td>
<td>45 CFR, Parts 98 and 99</td>
<td></td>
<td>10-OCFS-INF-04</td>
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## I. Purpose

The purpose of this Informational Letter (INF) is to inform local social services districts (districts) of the results of a comprehensive review of child care subsidy cases that was performed by the Office of Children and Family Services (OCFS), Office of Audit and Quality Control (AQC) during 2015, and to help prepare districts for the next review.
II. Background

The Improper Payment Review was conducted by AQC pursuant to the requirements of the federal Improper Payments Elimination and Recovery Improvement Act of 2012, which mandates that federal agencies review programs and activities that may be susceptible to significant improper payments. Additionally, Title 45, Parts 98 and 99 of the Code of Federal Regulations, requires states to measure, calculate and report improper payments, and identify strategies for reducing future improper payments. Based on these requirements, the Office of Child Care of the Department of Health and Human Services' Administration for Children and Families (ACF) directed all states to review their respective child care subsidy programs to measure improper authorizations for payment of child care subsidies. In accordance with instructions received from ACF, OCFS selected for review a random sample of 276 child care subsidy authorizations, which were divided into twelve monthly sampling frames of 23 child-specific authorizations for payment covering the period October 1, 2013 through September 30, 2014.

The methodology for measuring improper authorizations for payment focused on client eligibility and employed a case record review process to determine whether child care subsidies were properly paid. Eligibility determination and authorization are the first steps in the child care subsidy process and mistakes made at this stage of the process can result in the inappropriate expenditure of federal, state and local funds.

Because the U.S. Department of Health and Human Services requires that the reviews be conducted every three years, AQC will initiate another review in 2017 that will focus on child care subsidy cases paid for one or more months during the period October 1, 2016 through September 30, 2017. The subsidy cases randomly selected for the review in 2015 involved child care payments made by 32 local districts (note count of 32 includes The New York State Agriculture and Markets (AGMKT), State University of New York (SUNY) and both Administration of Children's Services (ACS) and Human Resources Administration (HRA). It is likely that some districts that did not have any cases selected for the 2015 review will have cases selected for the next review, due to the random nature of the sampling process. Therefore, it is important that all districts be prepared for the next review.

III. Findings

Of the 276 cases reviewed, 177 cases were from New York City and 99 cases were from the rest of the state. Statewide, the error rate was 34 percent. The rate of one or more errors per case was 33 percent in New York City as compared to 37 percent for the rest of state.

Of the 95 sample cases that were cited with at least one error of any type, 58 (61 percent) were New York City cases. Of a total of 49 payment errors across the state as a whole, 37 (76 percent) were New York City cases.

Not all districts had child care payments included in the sample as a result of the random selection process. There will be a new sample selected for the next review, covering the period October 1, 2016 through September 30, 2017. AQC urges all districts to more carefully perform eligibility determinations and fully document circumstances leading to child care subsidy payments moving forward. The failure of some districts to accurately determine whether caretakers were engaged in an approved activity such as employment,
training or education, and failure to fully document that determination, were among the more frequent and critical errors found.

Many other types of errors were also made that resulted in over-payments being identified by AQC and reported to ACF. The following is a list of the types of errors identified by AQC during the review:

| Errors Identified by AQC during the Improper Authorization for Payment Review |
|---|---|
| **New York City** | |
| **Error Type** | **Count** |
| Eligibility Determination/Payment Error: Full-time care incorrectly paid in a two parent household when part-time care was warranted based on documentation provided | 7 |
| Eligibility Determination/Payment Error: Full-time care incorrectly paid in a single parent household when part-time care was warranted based on documentation provided | 4 |
| Child Care payment was below both the applicable market rate and the amount the caregiver billed. | 6 |
| Eligibility Determination Error: Insufficient evidence that child care was needed based on New York City medical assessment and rehabilitation program documentation provided. | 5 |
| Eligibility Determination/Authorization Error: Missing Case Record (or portion of the case record containing information related to the authorization for payment was not available for review) | 5 |
| Eligibility Determination Error: Insufficient evidence that full-day time child care was needed in a single parent family | 4 |
| Eligibility Determination Error: Insufficient evidence that full-day time child care was needed in a two-parent family | 3 |
| Eligibility Determination Error: Insufficient evidence that part-day time child care was needed in a two-parent family | 3 |
| Eligibility Determination Error: Insufficient evidence that part-day time child care was needed in a single parent family | 2 |
| Eligibility Determination/Payment Error: Income used to determine the need for child care was below the NYS Minimum Wage and is excluded in the determination of the need for child care. | 3 |
### Error Type

<table>
<thead>
<tr>
<th>Error Type*</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family Share Not Charged:</td>
<td>4</td>
</tr>
<tr>
<td><strong>Eligibility Determination Error:</strong> Income and family share determined using the required number of weeks of paycheck stubs, but the stubs were not for consecutive weeks.</td>
<td>3</td>
</tr>
<tr>
<td>Miscellaneous Other Errors</td>
<td>12</td>
</tr>
<tr>
<td><strong>Total Number of Errors</strong></td>
<td>61</td>
</tr>
</tbody>
</table>

* More than one error type may be cited for a given error. Three cases had more than one error. For example, failing to include all required paystubs in the income eligibility determination also impacts the family share calculation.

#### Rest of State

<table>
<thead>
<tr>
<th>Error Type*</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Administrative Error:</strong> Unapproved local equivalent application and/or recertification form.</td>
<td>10</td>
</tr>
<tr>
<td><strong>Administrative Error:</strong> Recertification form missing data or signature</td>
<td>7</td>
</tr>
<tr>
<td><strong>Income Calculation Error:</strong></td>
<td>7</td>
</tr>
<tr>
<td><strong>Incorrect Family Share Applied:</strong> The family share was correctly calculated, but an incorrect amount was charged for the review month.</td>
<td>3</td>
</tr>
<tr>
<td><strong>Eligibility Determination Error:</strong> Insufficient evidence that the child care provided was needed.</td>
<td>6</td>
</tr>
<tr>
<td><strong>Eligibility Determination Error:</strong> Insufficient evidence that the sample child was a US citizen or resident alien.</td>
<td>3</td>
</tr>
<tr>
<td><strong>Eligibility Determination Error:</strong> When income fluctuated significantly, gross annual income not calculated on a 3- to 6-month period, as required or non-consecutive paystubs were used to determine average income.</td>
<td>2</td>
</tr>
<tr>
<td><strong>Eligibility Determination/Payment Error:</strong> Full-time care incorrectly authorized and paid when part-time care was warranted based on documentation provided.</td>
<td>2</td>
</tr>
<tr>
<td>Miscellaneous Other Errors</td>
<td>7</td>
</tr>
<tr>
<td><strong>Total Number of Errors</strong></td>
<td>47</td>
</tr>
</tbody>
</table>

* More than one error type may be cited for a given error. Eight cases had more than one error.
IV. Future Action

The next review to be conducted will involve child care subsidy payments made for services provided during the review period October 1, 2016 through September 30, 2017. Once again, a total of 276 monthly payments will be reviewed. AQC expects to commence the first monthly review in January 2017. All districts with child care subsidy payments that are selected for review will be contacted by telephone and in writing prior to the on-site review so that AQC auditors can make appropriate logistical arrangements.

It is important that prior to the start of the next review period, all districts review their respective child care subsidy programs to determine if any of the errors cited in this INF are occurring in their programs. If any such errors are noted, appropriate remedial action should be implemented immediately.

Janice M. Molnar, Ph.D.

Issued By:
Janice M. Molnar, Ph.D.
Deputy Commissioner
Division of Child Care Services

5
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14-ADM-05

Automated Information Exchange Agreement Between OTDA, OCFS, DOH and DOL—Unemployment Insurance Benefit Information

A Memorandum of Understanding (MOU) was signed by the New York State Office of Temporary and Disability Assistance (OTDA), the New York State Department of Health (DOH), the New York State Office of Children and Family Services (OCFS) and the New York State Department of Labor (DOL) (hereafter “the Agencies”) in August 2012. This MOU agreed to continue an automated information exchange of Unemployment Insurance (UI) claim information in order to verify eligibility for benefits, conduct fraud investigations, and for the purposes of maintaining program integrity and quality control in the following covered programs: Temporary Assistance to Needy Families (TANF), Safety Net Assistance (SNA), Medicaid, Home Energy Assistance Program (HEAP), Supplemental Nutrition Assistance Program (SNAP) (formally Food Stamps) and the Child Care Subsidy Program (CCSP).
# Administrative Directive

## Section 1

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<td>Local District Commissioners</td>
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<td>Issuing Division/Office:</td>
<td>Center for Employment and Economic Supports (CEES)</td>
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<td>Audit and Quality Improvement (A&amp;QI)</td>
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<td>Office of Legal Affairs (OLA)</td>
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<tr>
<td>Date:</td>
<td>August 29, 2014</td>
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<td>Supplemental Needs Assistance Program (SNAP) Directors</td>
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<td>Office of Legal Affairs (OLA) 518-474-9502</td>
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<td>18 NYCRR Parts 351, 352.12 and 357</td>
<td>SSL §132, §136; §1137 of the Social Security Act; NYS Labor Law §537; 20 CFR §603.21; §42 USC §1320-b-7</td>
<td>TASB Chapter 19</td>
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I. Summary

A Memorandum of Understanding (MOU) was signed by the New York State Office of Temporary and Disability Assistance (OTDA), the New York State Department of Health (DOH), the New York State Office of Children and Family Services (OCFS) and the New York State Department of Labor (DOL) (hereafter “the Agencies”) in August 2012. This MOU agreed to continue an automated information exchange of Unemployment Insurance (UI) claim information in order to verify eligibility for benefits, conduct fraud investigations, and for the purposes of maintaining program integrity and quality control in the following covered programs: Temporary Assistance to Needy Families (TANF), Safety Net Assistance (SNA), Medicaid, Home Energy Assistance Program (HEAP), Supplemental Nutrition Assistance Program (SNAP) (formally Food Stamps) and the Child Care Subsidy Program (CCSP).

Under the MOU, the DOL agreed to continue to provide direct access to UI claim information maintained in DOL’s benefit claimant inquiry system (BCIQ) and conduct real-time automated and batch file information exchange through the OTDA eligibility systems, including the Welfare Management System (WMS) and myWorkspace, for the purposes of verifying eligibility, conducting fraud investigations, and maintaining program integrity and quality control for the covered programs. All agencies agreed to comply with any and all applicable confidentiality, use and disclosure requirements in State and Federal statutes and regulations pertaining to the UI and covered data.

As required in the MOU, the Agencies also agreed to provide this Administrative Directive to the Social Services Districts (SSDs) as direction to their employees and contractors regarding the proper access and use of UI information, appropriate remedial action for unauthorized access and use, monitoring the safeguarding of disclosed confidential UI information and required staff training.

II. Purpose

This Administrative Directive is to provide an overview on the Agencies and the SSDs’ responsibilities in regard to the legally authorized usage of DOL’s UI data. The Agencies are required to monitor and protect the confidentiality and security of the UI data accessed by their respective staff and to only allow access to UI data to verify eligibility for benefits for the covered programs and to prevent fraud.

III. Background

OTDA is the State office responsible for the oversight and supervision of the SSDs in their administration of Temporary Assistance to Needy Family (TANF), Supplemental Nutrition Assistance Program (SNAP), the Home Energy Assistance Program (HEAP) and the Safety Net Assistance (SNA) Programs. DOH is the State office responsible for the administration and overall supervision of the Medicaid program. OCFS is the State office responsible for the administration and overall supervision of the Child Care Subsidy Program (CCSP). SSD officials are required by Social Services Law §132 to include in their investigation of each application for public assistance and care a written request to
the Commissioner of the Department of Labor for information as to the applicant’s status in respect to unemployment insurance benefits, unless the social services official is in possession of positive proof that the applicant is receiving or eligible to receive unemployment insurance benefits and the amount thereof. OTDA, DOH and OCFS staff are also required by state and federal statutes, regulations, and policies to utilize all available income and resource data, such as the unemployment insurance (UI) information in their oversight and supervisory roles for purposes such as audit, fraud investigations, and case reviews. The Social Security Act requires State agencies administering federally assisted benefit programs to have in effect an Income and Eligibility Verification System (IEVS) under which information is requested and exchanged for the purpose of verifying eligibility for, and the amount of, benefits available under several federally assisted programs, including TANF, Medicaid, and SNAP programs. New York State law authorizes OTDA to provide UI claim information to the SSDs so that they are able to make timely and accurate determinations of eligibility for benefits under the covered programs.

DOL is the State agency charged with the responsibility for administering the State Unemployment Insurance program and the payment of UI benefits, including any UI benefits payable under State law, Federal unemployment compensation law, or allowances administered by DOL under an agreement with the U.S. Department of Labor. New York State Labor Law authorizes DOL to provide UI claim information maintained by DOL to certain State agencies which are entitled to receive such information for performing certain functions under Federal law and its implementing regulations, subject to a number of restrictions to require the security of such information.

DOL has agreed to provide the Agencies and the SSDs an automated information exchange for the purposes of obtaining unemployment insurance claim information required by IEVS in order to verify eligibility for benefits and prevent fraud in the covered programs. DOL has agreed to provide direct access to unemployment insurance claim information maintained in DOL’s benefit claimant inquiry system (BCIQ) to employees and contractors of State and local agencies, working in the SSD, for the purpose of verifying eligibility and preventing fraud under the covered programs. The real-time automated information exchange available through myWorkspace and the batch-file information contained in the WMS Resource File Integration (RFI) system is for the purposes of obtaining pending, active, suspended, terminated, expired and denied UI claim information in order to verify eligibility, facilitate fraud investigations, and for the purposes of maintaining program integrity and quality control for the covered programs.

IV. Program Implications

The Agencies and the SSDs are required to comply with the confidentiality requirements in federal and state law, regulations and policy to safeguard UI information against unauthorized access or re-disclosure. The Agencies and the SSDs shall utilize and have access to UI data only for the purposes of verification of eligibility for the covered programs and the prevention of fraud. The Agencies shall only utilize and have access to UI information for the eligibility or fraud related activities relative to individuals who are applicants and/or recipients or household members for the covered programs (TANF, SNA, HEAP, Medicaid, SNAP and CCSP). However, it should be noted that certain UI information may be utilized in a fair hearing context to support a program eligibility
decision made by the SSD or the UI information could be scanned into the Imaging Electronic Document Retrieval (IEDR) for retention in the assistance case record. In addition to administrative hearings, re-disclosure is also permitted in the following instances: (1) when there is a notarized release by the applicant/recipient that specifically references UI information, (2) when presented by the State Attorney General’s office in court, or (3) when to federal, state or local law enforcement agency in accordance with a proper judicial order or grand jury subpoena.

V. Required Action

The Agencies are required to monitor their respective employees and contractors’ access and usage of UI information. The SSDs are required to establish and document processes and procedures to monitor their employees and contractors access and use of UI information. The processes and procedures established by the SSDs to monitor the safeguarding of disclosed confidential UI information are the following:

i) only authorized personnel are given access to UI information stored in computer systems for the purpose of performing their assigned duties, and that access is terminated immediately upon changes in job functions or leaving the position that required such access;

ii) employees and contractors are using the disclosed information only for purposes authorized by law and consistent with the purpose outlined in this ADM;

iii) employees and contractors access and process the disclosed information in a place physically secure from access by unauthorized persons, and adequate controls are established to prevent unauthorized persons from viewing, accessing or examining UI information in either paper or electronic format;

iv) documents and other material containing UI information are secured in locked drawers or cabinets when not in use;

v) employees and contractors are properly disposing of disclosed information after the purpose for which the information is disclosed is served;

vi) incidents involving unauthorized access or use of UI information are reported immediately to the SSD’s management and respective state agency’s Information Security Officer and then the agency shall notify DOL of any such breach of the security of their system immediately following discovery of such breach;

vii) employees and contractors will make best efforts to notify DOL Counsel’s Office of any request for records or information that includes UI Information, including FOIL requests and subpoenas.
Additionally, any employee or contractor of the Agencies or the SSD who has access to UI information through the DOL UI direct access system, the Welfare Management System (WMS) Resource File Integration (RFI) system, or myWorkspace is required to complete the DOL UI Confidentiality Training Modules I and II. The SSD must document that all employees and contract staff who have been granted access to UI have completed the online UI training and be prepared to produce this documentation upon the periodic monitoring review by the respective State Agency.

Current State employees or contractors should access the Confidentiality Training Modules through the Governor’s Office of Employee Relations (GOER) Statewide Learning Management System (SLMS). All SSD employees or their contractors who use UI information are required to self-register and gain access to the GOER SLMS system through the Internet at https://nyslearn.ny.gov/. All SSD employees or contractors should register as Non-State Employees to obtain an SLMS account and then search for UI Confidentiality Training Modules. Technical assistance with the training can be found by calling the GOER SLMS Helpdesk at 518-473-8087.

VI. Systems Implications

None

VII. Additional Information

OTDA A&QI is responsible for monitoring the SSDs’ safeguarding of UI information as it pertains to OTDA program areas. OCFS’ Bureau of Audit and Quality Control (A&QC) will be responsible for monitoring the SSD’s use of UI information with regard to the Child Care Subsidy Program. DOH will be responsible for monitoring its staff and the SSD’s use of UI information as it pertains to the DOH program areas. This monitoring will consist of periodic on-site reviews of select districts to ascertain that adequate processes and procedures have been established and documented to comply with the access, usage and storage requirements outlined in this ADM. Additionally, the MOU requires that each district complete an annual Self-Assessment survey designed to assess and report compliance with these requirements. OTDA will conduct and administer the survey for its respective program areas and on behalf of OCFS for the Child Care Subsidy Program. DOH will conduct and administer the survey for their respective program area. OTDA, DOH and OCFS will provide separate guidance on monitoring in their respective program areas.

VIII. Effective Date: Immediately

Issued By:

Name: Phyllis D. Morris
Title: Deputy Commissioner, Center for Employment and Economic Supports
Division/Office: NYS Office of Temporary and Disability Assistance

Name: Janice M. Molnar, Ph.D.
Title: Deputy Commissioner, Division of Child Care Services
Division/Office: NYS Office of Children and Family Services

Name: Howard A. Zucker, M.D., J.D.
Title: Acting Commissioner
Division/Office: NYS Department of Health
10-LCM-17-T

Use and Protection of Confidential Information

The purpose of this Local Commissioners Memorandum (LCM) is to remind local departments of social services (local districts) of the requirement to assure appropriate protection, access to, and disclosure of confidential information maintained in State and County systems/databases.
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Local Commissioners Memo

Section 1

| Transmittal:  | 10-LCM-17-T |
| To:           | Local District Commissioners |
| Issuing Division/Office: | OTDA Office of Legal Affairs |
| Date:         | March 14, 2014 |
| Subject:      | Use and Protection of Confidential Information |
| Contact Person(s): | Krista Rock, OTDA General Counsel (518) 474-9502 or via email at otdalegalsi@otda.ny.gov |
| Attachments:  | None |
| Attachment Available On – Line: | N/A |

Section 2

I. Purpose

The purpose of this Local Commissioners Memorandum (LCM) is to remind local departments of social services (local districts) of the requirement to assure appropriate protection, access to, and disclosure of confidential information maintained in State and County systems/databases.

NOTE: This LCM revises and supersedes 09-LCM-01 Protection of Confidential Information, originally issued February 3, 2009 and 10-LCM-17 Use and Protection of Confidential Information, originally issued November 5, 2010.

II. Background

A number of incidents have come to our attention recently regarding inappropriate access to, and disclosure of confidential information stored in State and local district systems/databases.
The confidential information maintained in and/or obtained from OTDA-owned systems/databases, which are maintained by the Office of Information Technology Services (OITS), such as, but not limited to the Welfare Management System (WMS), Child Support Management System (CSMS/ASSETS), Benefits Issuance Control System (BICS), COGNOS, Commissioners Dashboard, and other such systems, is protected by a myriad of Federal and State statutes and regulations. Access to and use of such information by State and local district agencies is **strictly limited to authorized employees and legally designated agents, for authorized purposes only.**

Authorized entities must maintain the confidentiality and security of personal, private, and sensitive information in accordance with Federal and State laws and regulations. Use and disclosure of such information is strictly limited for authorized purposes, such as uses directly related to the administration and delivery of program services.

**III. Program Implications**

Federal and State program-specific confidentiality and information security rules prohibit unauthorized access and inappropriate dissemination of confidential information. They also limit the access to and/or dissemination of such information for authorized, legitimate business purposes. For example:

1. Authorized users may not access their own active, closed or archived case records, or those involving a relative, acquaintance, neighbor, friend, partner, co-worker, or other individuals to whom they have no official assignment.

2. Authorized users may not disclose information received in their official capacity, except in the performance of official job duties and for authorized purposes.

3. In certain circumstances, individuals may authorize a third party, such as an attorney or child eighteen years or older, to access their confidential information. In some cases, written authorization is required (i.e., child support information).

Unauthorized access to, or release of such data, may result in civil liability and/or criminal prosecution. Individuals who access such information without authorization, or disclose it beyond authorized official purposes, may also be subjected to employment disciplinary actions and/or termination.

Local district management is responsible for ensuring that all individuals with access to personal, private, and sensitive information understand the laws and policies related to its use. Local district management must also ensure that employees accessing such information receive training on the proper use, handling and safeguarding of such data. Training requirements can be met through the completion of the SANS Security Awareness and Compliance Training available through the New York State
Governor's Office of Employee Relations (GOER) (http://www.goer.ny.gov/Training_Development/index.cfm) or through a locally provided equivalent, provided that records related to training completion are retained for review and auditing purposes.

Additional training regarding access to unique specific data, such as information provided by the Internal Revenue Service (IRS) and Social Security Administration (SSA), may also be required, along with the requirement to sign Acknowledgement of Confidentiality Agreements.

Local district management must ensure proper account and access management practices are strictly followed by local administrators and staff. Access must be limited to only those individuals whose job duties require it. Local district management must promptly disable and/or retract employee access when such access is no longer warranted – i.e. the individual leaves the agency or their job functions change.

Local district management must also ensure the confidentiality and security of such information by employees and third parties, including but not limited to contractors, consultants, temporary employees, researchers and other workers affiliated with third parties who are performing administrative or technical services on behalf of the local district.

Prior to granting a third party individual access to any State information system or confidential information, local district management must ensure that a duly authorized representative of the third party individual’s organization with whom the local district contracts for services and the specific individual(s) who will be granted access, sign a Non-Disclosure Agreement that defines access terms and conditions.

Disclosures made in the course of service delivery through a contractual agreement with an agency are governed by the terms of the separate contractual agreements. All such contracts must include clear language requiring the contractor to properly safeguard and maintain the confidentiality, privacy and security of all such information in accordance with all applicable Federal and State laws and regulations, and any other contract terms required by OTDA. In addition, contracts that involve access to federal tax information must be pre-approved by the OTDA Center for Child Well-Being, and must include specific language as required by the Internal Revenue Service (IRS Publication 1075).

IV. Fair Hearing Implications

Confidentiality and informational security rules prohibit unauthorized access and inappropriate dissemination of confidential information in the fair hearing process. For example:
1. Clients and their authorized representatives have the right to review their case records before the fair hearing (18 NYCRR 358-3.7). A careful and thorough review of the case record must be performed before the record is made available for review by the client or authorized representative, to ensure confidential information relating to other clients/cases is not included in the client’s case record.

2. A representative of the social services agency must appear at the fair hearing with the client’s case record, and provide a complete copy of the documentary evidence to the hearing officer, and to the client or authorized representative (18 NYCRR 358-4.3). A careful and thorough review of the case record must be performed before the record is turned over to the client or authorized representative, to ensure confidential information relating to other clients/cases is not included in the client’s case record.

V. Information Security and Incident Reporting

OTDA has prioritized the safeguarding of confidential, personal, private, and sensitive information in order to reduce the risk of informational security breaches and to ensure ongoing compliance with State and Federal laws, regulations, and policies. Local district management and staff share this critical responsibility, and must fully comply with and abide by Federal and State confidentiality and information security rules.

Local district management and staff must at all times be aware of their ongoing duty to ensure that access to confidential, personal, private, and/or sensitive data is strictly limited to authorized individuals. Local district management and staff must be cognizant that the data accessed may only be used for legitimate program purposes. Failure to do so may result in termination of critical data exchanges, such as the computer matches between OTDA and SSA and IRS, the triggering of informational security incident reporting and notification of affected individuals, and/or penalties including, but not limited to, the loss of access, loss of employment, and/or civil or criminal charges.

Incidents involving the unauthorized access or disclosure of the confidential information in OTDA-owned and OITS maintained systems/databases must be reported immediately, but in no event more than one (1) business day following the incident’s initial discovery, to the OTDA Counsel’s Office and OITS Human Services Cluster Information Security Officer, Christine Tolcser at Christine.Tolcser@its.ny.gov or (518) 457-6970.

When reporting an incident, please be prepared to provide a central point of contact, telephone number, and details as to the nature, location, date, time and individuals involved in the security breach. Additional information may be collected to assess the incident and to determine the appropriate response, reporting and corrective actions.
Further information regarding information security incident reporting policies and procedures is available on the OTDA intranet at http://otda.state.nyenet/dla/iso/incident-reporting.asp and http://www.its.ny.gov/eiso.

VI. Legal and Regulatory References

This policy addresses and incorporates compliance with a variety of Federal and State statutory, regulatory and policy requirements related to confidentiality, privacy and information security, including but not limited to the following:

Child Support
1. General rules: 42 U.S.C. § 654(26); 45 C.F.R. § 303.21; SSL § 111-v; 18 NYCRR 346.1(e), 347.19

Child Support Management System (CSMS) data: 42 U.S.C. § 654a(c), (d); 45 C.F.R. § 307.13; SSL § 111-v

Domestic Violence Indicators: 42 U.S.C. § 653(b)(2); 42 U.S.C. § 654(26)(e); SSL § 111-v(2)(a)

Federal and State Case Registry: 42 U.S.C. §§ 653(h), (m); 42 U.S.C. § 654a(e); SSL § 111-b(4-a)

Federal Parent Locator Service/State Parent Locator Service: 42 U.S.C. §§ 653(a)–(c), (l), (m); 42 U.S.C. § 654(8); 42 U.S.C. § 663; SSL § 111-b(4)

Financial Institution records: 42 U.S.C. §§ 666(a)(17); 42 U.S.C. § 669a(b); SSL § 111-0

Government Agency and Private records: 42 U.S.C. § 666(c)(1)(D); SSL § 111-s


New Hires Data: 42 U.S.C. §§ 653(i), (j)(2), (l), (m); 42 U.S.C. 653a(h); SSL § 111-m
Public Assistance

- Fair Hearing records: 45 C.F.R. § 205.10(a)(19); 18 NYCRR 357; 18 NYCRR 358-3.7; 18 NYCRR 358-4.3; 18 NYCRR 358-5.11(b); 18 NYCRR 387.2(j)

- General rules: SSL § 136; 18 NYCRR §§ 357.1 – 357.6


- Welfare Management System (WMS) data: SSL § 21

Medical Assistance:


Supplemental Nutrition Assistance Program (SNAP)

General Rules: 7 U.S.C. § 2020(e)(8); 7 C.F.R. § 272.1(c); 7 C.F.R. § 278.1(q); 18 NYCRR 387.2(j); 18 NYCRR 357

Other Statutes and Policies

- Criminal Offenses involving Computers (including governmental and personal records): NY Penal Law art. 156

- Freedom of Information Law: NYS Public Officers Law, Article 6, §§ 84 – 90

- Internet Security and Privacy Act: State Technology Law 201-208; N.Y.S. Executive Order No. 117, 9 NYCRR 5.117 (Jan. 28, 2002)

- NYS Office of Cyber Security and Critical Infrastructure Coordination Incident Reporting Policy P03-001
NYS Office of Cyber Security and Critical Infrastructure Coordination Information Security Policy P03-002

Personal Privacy Protection Law: NYS Public Officers Law, Article 6-A, §§ 91 – 99

State Archives and Records Administration: Arts and Cultural Affairs Law 57.05 and 57.25

Issued By

Name: Krista Rock
Title: General Counsel
Division/Office: Office of Temporary and Disability Assistance, Office of Legal Affairs
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Sharing of Confidential Client-identifiable Information Between Child Protective Services (CPS) and Protective Services for Adults (PSA)

The purpose of this release is to provide guidance to local departments of social services (LDSS) as to permissible means for the sharing of client-identifiable information between Child Protective Services (CPS) and Protective Services for Adults (PSA) units of an LDSS.
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# Informational Letter

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<td>Commissioners of Social Services</td>
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<td>Issuing Division/Office:</td>
<td>Division of Child Welfare and Community Services</td>
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<tr>
<td>Date:</td>
<td>January 17, 2012</td>
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<tr>
<td>Subject:</td>
<td>Sharing of Confidential Client-identifiable Information Between Child Protective Services (CPS) and Protective Services for Adults (PSA)</td>
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<td>Suggested Distribution:</td>
<td>Directors of Social Services, CPS Supervisors and Staff, PSA Supervisors and Staff, Agency Attorneys</td>
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| Contact Person(s): | Please direct questions about this policy to:  
  - Buffalo Regional Office: Dana Whitcomb (716) 847-3145, Dana.Whitcomb@ocfs.state.ny.us  
  - Rochester Regional Office: Karen Buck (585) 238-8201, Karen.Buck@ocfs.state.ny.us  
  - Syracuse Regional Office: Daniel E. Comins (315) 423-1200, Daniel.Comins@ocfs.state.ny.us  
  - Albany Regional Office: Kerri Barber (518) 486-7078, Kerri.Barber@ocfs.state.ny.us  
  - Spring Valley Regional Office: Raymond Toomer (845) 708-2498, Raymond.Toomer@ocfs.state.ny.us  
  - NYC Regional Office: Pat Beresford (212) 383-1788, Patricia.Beresford@ocfs.state.ny.us  
  - Native American Services: Kim Thomas (716) 847-3123, Kim.Thomas@ocfs.state.ny.us  
  - For questions relating to PSA: Director of Adult Services Alan Lawitz (518) 474-9431, Alan.Lawitz@ocfs.state.ny.us |
| Attachments: | Attachment A: Chapter 440 of the Laws of 2011  
Attachment B: Model letter, Authorization for Information |
| Attachments Available Online: | Attachment A available at: [http://public.leginfo.state.ny.us/menugetf.cgi](http://public.leginfo.state.ny.us/menugetf.cgi)  
Attachment B is posted, in Word format, with this policy at: [http://www.ocfs.state.ny.us/main/policies/external](http://www.ocfs.state.ny.us/main/policies/external) |

## Filing References

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I. Purpose

The purpose of this release is to provide guidance to local departments of social services (LDSS) as to permissible means for the sharing of client-identifiable information between Child Protective Services (CPS) and Protective Services for Adults (PSA) units of an LDSS. The release includes information about a new provision of law, enacted as Chapter 440 of the Laws of 2011, as well as information about other applicable longstanding provisions of law. Some LDSSs have sought clarification of permissible means under current law of sharing client identifiable CPS information with PSA, and the enactment of this new chapter law makes it necessary to provide such guidance at this time.

II. Background

CPS: CPS is a state-mandated service provided without regard to income by the CPS unit in an LDSS. CPS investigates reports of suspected child abuse and maltreatment in order to protect children from further abuse or maltreatment. After an investigation, all CPS reports are either “indicated,” if there is some credible evidence that one or more persons abused or maltreated one or more children, or “unfounded,” where no such evidence is found. Reports of child abuse or maltreatment as well as any other information obtained, reports written or photographs taken concerning such reports of child abuse or maltreatment that are in the possession of an LDSS or OCFS are confidential in accordance with Social Services Law (SSL) Section 422. Such information may only be disclosed where authorized by statute. Unauthorized disclosure of confidential CPS information may subject the individual responsible for such disclosure to criminal and/or civil penalties. CPS information contained in reports pending determination or in indicated reports of child abuse or maltreatment may be disclosed only where and to the extent authorized by SSL Section 422(4)(A)(a)-(aa). Among the exceptions in which disclosures are permitted are disclosures made pursuant to court order or upon the authorization of the subject of the report or other person named in the report.

Another exception to the prohibition on disclosing CPS information in reports pending determination or in indicated reports of child abuse or maltreatment, which may be of particular interest to PSA units, is set forth in SSL Section 422(4)(A)(o). That section permits a CPS or an LDSS to provide CPS information to a provider or coordinator of services to which the CPS or LDSS has referred a child named in a CPS report or the child’s family, or to whom the child or the child’s family have referred themselves at the request of CPS or the LDSS, where the child has been reported to the Statewide Central Register of Child Abuse and Maltreatment. The statute authorizes CPS to provide reports or other information necessary to enable the provider or coordinator of services to establish and implement a services plan for the child or family, to monitor the provision or coordination of services, or to directly provide services to the child or family. Such disclosure may not include information that would identify the source of the report, absent the written consent of the source. CPS information received by the provider or coordinator of services is also subject to limitations on redisclosure, as set forth in SSL Section 422(4)(A).
There is no authority in SSL Section 422(4)(A)(o) for the disclosure to providers or coordinators of services of CPS information from an unfounded report of child abuse or maltreatment.

A PSA unit of an LDSS is considered to be a permissible provider or coordinator of services to which CPS may refer a family involved in a CPS case that is pending determination or that is an indicated report.

A new exception permitting disclosure of certain CPS reports to PSA was enacted pursuant to Chapter 440 of the Laws of 2011. Known for the purposes of this release as the “access while a child” exception, this new provision, signed into law on August 17, 2011, and effective immediately upon enactment, added SSL§422(4)(aa) to provide specific authority for PSA to receive confidential CPS records on pending or indicated reports of child abuse or maltreatment when a social services official who is investigating whether an adult is in need of PSA has reasonable cause to believe such adult may be in need of protective services for adults due to the conduct of an individual or individuals who had access to such adult when such adult was a child, and the child abuse or maltreatment reports and information are needed to further the present PSA investigation. A copy of this new law is attached as Appendix A.

**PSA:** PSA is a state-mandated service which, pursuant to SSL Section 473(1), is provided without regard to income by a PSA unit in an LDSS to assist adults age 18 or older who:

(a) because of mental or physical impairments,
(b) are unable to manage their own resources, carry out the activities of daily living, or protect themselves from physical abuse, sexual abuse, emotional abuse, active, passive or self-neglect, financial exploitation or other hazardous situations without assistance from others, and
(c) have no one available who is willing and able to assist them responsibly.

PSA staff receive and investigate referrals, interview clients and collaterals to determine eligibility for services, assess client risks, develop services plans to address identified risks and, as appropriate, provide or arrange for the provision of protective services in accordance with the services plan. PSA reports, as well as the names of referral sources, photographs and any other information obtained concerning such reports, that are in the possession of the LDSS or OCFS are confidential, pursuant to SSL Section 473-e(2), and may only be disclosed where authorized by that statute. PSA may disclose confidential information to a provider of services of a current or former PSA client when the LDSS believes that such information is necessary to determine the need for or to provide or to arrange for the provision of such services [SSL Section 473-e(2)(b)].
III. Program Implications

PERMISSIBLE MEANS OF SHARING CLIENT IDENTIFIABLE CPS INFORMATION BY CPS TO PSA

A. Referral by CPS to PSA

In accordance with SSL Section 422(4)(A)(o), an LDSS or CPS may disclose client-identifiable CPS information contained in a report pending determination or an indicated report to “a provider or coordinator of services” to which a CPS or an LDSS has referred the child or the child’s family, or to which the child or child’s family has referred themselves at the request of the CPS or LDSS. This authorizes the sharing of CPS information either within the same LDSS or with a PSA unit in a different LDSS to which a referral has been made. PSA is considered to be “a provider or coordinator of services” under this provision.

These provisions apply to an open or indicated CPS report when there is either: (i) a referral made by CPS or the LDSS to PSA of an adult in the child’s family who may be in need of PSA, or (ii) a referral by the child’s family to PSA, made at the request of CPS or an LDSS, where the CPS information is necessary to enable the LDSS PSA to establish and implement a plan of service to a vulnerable adult, or to monitor the provision or coordination of PSA services, or to directly provide PSA services to the child’s family. The term “family” for this purpose includes the children, the parents, and other adults residing in the same household as the children. An example of a situation in which CPS may refer a family to PSA and share CPS information on pending or indicated CPS reports is one where the CPS investigation identifies that there is an adult in the child’s household who may be in need of PSA, as set forth in SSL Section 473. Such referral may be made during or at the conclusion of a CPS investigation. Referral is also appropriate if an individual who is part of a closed CPS case communicates with CPS about an issue relating to the abuse, neglect or financial exploitation of a vulnerable adult.

NOTE:

- CPS information provided to PSA may not include the identity of the source of the report, absent the written consent of the source.
- CPS information may be provided by CPS to the PSA unit as a provider or coordinator of services pursuant to SSL Section 422(4)(A)(o) only where there is a CPS report pending determination or an indicated CPS case, but may not be shared where a CPS case is “unfounded.”

B. Release/Consent to Disclose

In accordance with SSL Section 422(4)(A), the subject of a report (i.e., the person who is named in a report as being responsible for the abuse or maltreatment of the child) or another person named in the report (the child named in the report or the child’s parent, guardian, custodian or other person legally responsible for the child who has not been named in the report as being responsible for the abuse or maltreatment) may consent to the disclosure of client-identifiable CPS information in open (pending determination) or indicated reports.
Such consent may be documented through the execution of a written release that expressly
refers to the disclosure of CPS information.

In accordance with SSL Section 422(5)(a)(iv), the subject of the report may also authorize
the disclosure of an unfounded CPS report to LDSS PSA through a release. Other persons
named in the report may not authorize the disclosure of an unfounded CPS report.

Please refer to Appendix B for a model of a consent form authorizing disclosure of CPS
information.

C. Multidisciplinary Investigative Team
In accordance with SSL Section 422(4)(A)(x), LDSS CPS may disclose client-identifiable
CPS information on pending or indicated CPS reports to members of a local
Multidisciplinary Investigative Team (MDT) established by the LDSS. In accordance
with SSL Section 423(6), LDSS PSA staff may be members of an MDT. Participation in
an MDT would enable LDSS PSA to become aware of CPS reports, including specifically
reports of physical abuse, sexual abuse, child fatalities, and serious and/or ongoing
maltreatment. PSA would be able to participate jointly with CPS and other appropriate
MDT member agencies in the investigation of cases involving vulnerable adults who may
be eligible for PSA.

In accordance with SSL Section 422(5)(a)(iii), members of an MDT have access to legally
sealed unfounded CPS reports when there is a subsequent report involving the same
subject, child, or sibling of a child named in an unfounded report. In such situations,
LDSS PSA staff who are members of an MDT might sometimes obtain access to
unfounded report information in the context of the investigation of a subsequent CPS
report. In accordance with SSL Section 423(6), LDSS PSA staff who are members of an
MDT may share client-identifiable PSA information concerning a child or a child’s family
with other members of the MDT to facilitate the investigation of suspected child abuse or
maltreatment.

D. PSA Requests for Access to CPS Information

The situation may arise in which a PSA unit has reason to believe that there may have
been prior or ongoing CPS involvement with a family that is also being served by the PSA
unit and that the CPS information may be of assistance to the PSA unit in meeting its
statutory and regulatory duties and obligations.

In order for the PSA unit to access CPS information, one of the exceptions to the ban on
sharing information included in SSL Sections 422(4)(A)(a)-(aa) would have to apply. The
applicable exceptions are those pertaining to a court order, MDT, CPS release, provider or
coordinator of services, or the new “access while a child” exception noted on page 3.

A PSA unit would have a right to access CPS information on pending and indicated CPS
cases if the PSA unit is granted a court order allowing such access. This exception is most
likely to occur when the PSA unit is seeking CPS information in the possession of another
LDSS. In addition, the PSA unit would have a right to access CPS information from
pending and indicated reports if the subject of the CPS report or any other person named in such report (including the PSA client) executes a release that specifically includes CPS information, subject to the same limitations noted in section B of this Informational Letter. Where access to CPS information is authorized by either a court order or a CPS-specific release, the PSA unit is not required to provide further justification to the CPS unit to gain access to CPS information.

If the PSA unit is not able to access CPS information by either a court order, a CPS-specific release, or through an MDT, the PSA unit may request that the CPS unit share CPS information using the provider or coordinator of services exception in SSL Section 422(4)(A)(o). For this exception to apply, the family must otherwise satisfy the requirements in Section 422(4)(A)(o), which are that:

- the family was referred to the PSA unit by CPS or an LDSS, or
- the family referred themselves at the request of CPS or an LDSS and, for either type of referral,
  - the PSA unit needs the CPS information to establish and implement a plan of PSA for the family, or to monitor the provision of PSA, or to directly provide PSA, including a PSA investigation.

Should the PSA unit make such a representation to the CPS unit within an LDSS, the CPS unit may share with the PSA unit information on pending and indicated CPS reports regarding such family, subject to the limitations referenced in section A of this Informational Letter. The PSA unit’s request for CPS information should be made in writing to the CPS unit and should set forth the basis for the request. Where CPS information is provided to the PSA unit, the LDSS should document the basis for the transfer of such information.

Finally, the PSA unit may also request confidential CPS records under the “access while a child exception,” where the PSA unit is investigating whether an adult is in need of PSA and has reasonable cause to believe such adult may be in need of protective services due to the conduct of an individual or individuals who had access to such adult when such adult was a child, and such records and information are needed to further the present investigation.

**RECOMMENDED ACTION:**
LDSS staff (Directors of Services, CPS and PSA, together with LDSS attorneys) should review and consider the above mentioned permissible means available under current law to enable CPS, a local or regional MDT, and PSA to share confidential information under certain circumstances; determine how these provisions may apply to future cases; and determine what changes in procedures may be necessary or desirable as a result. In particular, consideration should be given to whether an LDSS may wish to establish an MDT - or expand an existing MDT - to include PSA as well as CPS staff, in order to better address particular PSA cases.

LDSS CPS staff and MDT member agencies should become familiar with the eligibility criteria for PSA, with possible indicators of abuse, neglect and exploitation of vulnerable
adults who may be eligible for PSA, and with the range of services available under PSA. Such information is available under the “Protective Services for Adults” sections of the OCFS Internet and intranet websites; in Publication 1307, “Protecting Adults: A Community Concern”; in Publication 1326, “Protecting Adults From Abuse and Neglect”; and in Publication 4664, “Financial Exploitation of Elderly and Impaired Adults.” More detailed information concerning PSA services, procedures and policies can be found in numerous Administrative Directives, Information Letters and Local Commissioner Memoranda issued in previous years, and may be obtained by contacting the OCFS Bureau of Adult Services.

/s/ Laura M. Velez

Issued By:
Name: Laura M. Velez
Title: Deputy Commissioner
Division/Office: Division of Child Welfare and Community Services
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ATTACHMENT A

STATE OF NEW YORK

7633

2011-2012 Regular Sessions

IN ASSEMBLY

May 11, 2011

Introduced by M. of A. PAULIN, PEOPLES-STOKES, SCARBOROUGH -- read once and referred to the Committee on Children and Families

AN ACT to amend the social services law, in relation to permitting social services officials investigating whether an adult is in need of protective services to have access to certain confidential reports

THE PEOPLE OF THE STATE OF NEW YORK, REPRESENTED IN SENATE AND ASSEMBLY, DO ENACT AS FOLLOWS:

Section 1. Subparagraphs (y) and (z) of paragraph (A) of subdivision 4 of section 422 of the social services law, subparagraph (y) as amended and subparagraph (z) as added by section 1 of part A of chapter 327 of the laws of 2007, are amended and a new subparagraph (aa) is added to read as follows:

(y) members of a citizen review panel as established pursuant to section three hundred seventy-one-b of this article; provided, however, members of a citizen review panel shall not disclose to any person or government official any identifying information which the panel has been provided and shall not make public other information unless otherwise authorized by statute; [and]

(z) an entity with appropriate legal authority in another state to license, certify or otherwise approve prospective foster and adoptive parents where disclosure of information regarding the prospective foster or adoptive parents and other persons over the age of eighteen residing in the home of such prospective parents is required by paragraph twenty of subdivision (a) of section six hundred seventy-one of title forty-two of the United States code[.]; AND

(AA) A SOCIAL SERVICES OFFICIAL WHO IS INVESTIGATING WHETHER AN ADULT IS IN NEED OF PROTECTIVE SERVICES IN ACCORDANCE WITH THE PROVISIONS OF SECTION FOUR HUNDRED SEVENTY-THREE OF THIS CHAPTER, WHEN SUCH OFFICIAL HAS REASONABLE CAUSE TO BELIEVE SUCH ADULT MAY BE IN NEED OF PROTECTIVE SERVICES DUE TO THE CONDUCT OF AN INDIVIDUAL OR INDIVIDUALS WHO HAD ACCESS TO SUCH ADULT WHEN SUCH ADULT WAS A CHILD AND THAT REPORTS AND INFORMATION ARE NEEDED TO FURTHER THE PRESENT INVESTIGATION.

Section 2. This act shall take effect immediately.

EXPLANATION--Matter in ITALICS (underscored) is new; matter in brackets [ ] is old law to be omitted.
ATTACHMENT B

AUTHORIZATION FOR INFORMATION

I, _______________________________________, currently residing at ________________
________________________________________, hereby authorize the New York Statewide Central Register of Child Abuse and Maltreatment to furnish all information which may be contained within the New York Statewide Central Register of Child Abuse and Maltreatment to ______________________________________________________ affiliated with ______________________________________________________ (agency), on my behalf in accordance with the Child Protective Services Act of 1973.

The names and birth dates of the children belonging to the individual listed on the first line of this form as well as previous addresses of this individual are necessary to conduct a thorough and accurate search of the Statewide Central Register database. Please furnish this information below:

Names and birth dates of children:

____________________________________ __________________________________
_______________________________________________________________________
_______________________________________________________________________

Previous addresses starting with most recent:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

_________________________________
Signature

On this _____ day of ______________, 20__, before me personally came ______________
_______________________________________________________________________(individual) to me known and known to be the same person described in
and who executed the within statement, and he/she duly acknowledged to me that he/she executed the same.

_________________________________
Notary Public
12-ADM-01

Requirement to Make Information Available to Non-Parent Caregivers Relating to Available Services and Assistance Programs

The purpose of this ADM is to convey to Social Services Districts their responsibilities required by SSL 392 and provide Social Services Districts with the information that is needed to meet this responsibility.
Section 1

Transmittal: 12-ADM-01
To: Local District Commissioners
Issuing Division/Office: Office of Temporary and Disability Assistance/Center for Employment and Economic Supports
Date: January 4, 2012
Subject: Requirement to Make Information Available to Non-Parent Caregivers Relating to Available Services and Assistance Programs

Suggested Distribution: Temporary Assistance Directors
Staff Development Coordinators

Contact Person(s): Temporary Assistance Bureau at 1-800-343-8859, Extension 4-9344
Attachments: Attachment A-Non-Parent Caregivers (Grandparents, Other Relatives, Friends) Caring for Children

Attachment Available On Line: ☒

Section 2
I. Summary

Social services districts (SSDs) are required by Social Services Law (SSL) § 392 to make available to relative caregivers, caring for children outside of the foster care system, information on financial assistance and services programs and how to apply for them. In order to meet this
requirement the Office of Temporary and Disability Assistance (OTDA) requires that the information in attachment A be made available to all non-parent caregivers (NPCs).

II. Purpose

The purpose of this Administrative Directive (ADM) is to convey to SSDs their responsibilities required by SSL § 392 and provide SSDs with the information that is needed to meet this responsibility.

III. Background

Chapter 58 of the Laws of 2010 added a new section 392 to the SSL. This new section requires SSDs to make available through the SSDs’ websites, or by any other means, information for relatives caring for children outside of the foster care system. This information must include information relating to financial assistance programs and how to apply for them as well as information on OTDA or SSD funded resources, including those that provide supportive services to NPCs.

IV. Program Implications

OTDA recognizes that although this law is specific to relatives caring for children outside of the foster care system, there is a population of non-relatives that also care for children. Therefore, information found in attachment A must be available to all NPCs.

V. Required Action

To ensure that all SSDs comply with SSL § 392, OTDA requires the information in attachment A to be available to all NPCs. The requirement to make this information available to NPCs must be met by one or more of the following methods:

- add the language in attachment A to the SSD’s website; or
- post the language in attachment A in SSD waiting areas; or,
- provide attachment A as a handout.

Also, any additional services the SSDs provide to NPCs should be included as an addendum to the language in attachment A.

VI. Systems Implications

There are no system implications

VII. Effective Date

This ADM is effective immediately

Issued By
Name: Phyllis Morris
Title: Acting Deputy Commissioner
Division/Office: Center for Employment and Economic Supports
Non-Parent Caregivers (Grandparents, Other Relatives, Friends) Caring for Children

Non-parent caregivers, who are caring for children without a parent living in their home, may be eligible for Temporary Assistance. Temporary Assistance for children not living with a parent is often referred to as “non-parent caregiver” or “child-only” grants, and includes Medical Assistance (MA). If the non-parent caregiver wants assistance only for the children, the non-parent caregiver’s income is not used to determine eligibility and there are no Temporary Assistance work requirements for the non-parent caregiver. Non-parent caregivers may apply for temporary assistance at their local social services office.

In addition to financial assistance, non-parent caregivers (also called kinship caregivers) often have a need for information and assistance related to food stamps, the Home Energy Assistance Program (HEAP), custody, guardianship, foster care, adoption, schooling, school enrollment, and other forms of assistance such as child care, social security, respite, case management and service programs.

For information about services and assistance programs please visit the following websites:

- [www.nysnavigator.org](http://www.nysnavigator.org) - The NYS Kinship Navigator’s website offers legal fact sheets, state and local kinship resources, and other information. In addition, the Navigator operates a toll free phone line at 1-877-454-6463. Kinship Specialists are available from 10:00 am to 4:00 pm Monday through Friday. A message may be left during non-business hours and calls will be returned when business hours resume.
- [www.mybenefits.ny.gov](http://www.mybenefits.ny.gov) - MyBenefits is an online tool to help you learn about eligibility for financial assistance and other benefit programs. A simple, 10-minute prescreening from any computer with Internet access at any time, determines whether you are likely to qualify for Food Stamps, HEAP, the Earned Income Tax Credit, child dependent care credits, school lunch and other programs.
- [http://www.ocfs.state.ny.us/kinship/default.asp](http://www.ocfs.state.ny.us/kinship/default.asp) - The NYS Office of Children and Family Services (OCFS) provides contact information and links to the Kinship Caregiver Programs funded through OCFS, as well as a variety of resources for families and staff, including the Kinship Guardianship Assistance Program (KinGAP), a subsidy program available to kinship caregivers who are foster parents.

Your local Social Services District (SSD) and local area Office for the Aging (OFA) are also resources for information on kinship care.
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The purpose of 91-ADM-34, *Child Care: Reimbursement of Payments for Children with Special Needs*, is to advise social services districts of policies and procedures related to the provision of child day care services for children with special needs. These policies and procedures apply to the provision of JOBS, Transitional, Employment-Related, Low-Income, and Title XX Child Care, including Preventive and Protective Child Care.
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ADMINISTRATIVE DIRECTIVE

DIVISION: Family and Children Services

TO: Commissioners of Social Services

DATE: August 23, 1991

SUBJECT: Child Care: Reimbursement of Payments for Children with Special Needs

SUGGESTED DISTRIBUTION:
- Services Supervisors
- Day Care Staff
- Income Maintenance Supervisors
- Staff Development Coordinators

CONTACT PERSON: Dee Woolley, Bureau of Child Care, 1-800-342-3715, ext. 4-9614 or (518) 474-9614

ATTACHMENTS:
- Quarterly Report -- Child Day Care for Children with Special Needs (available on-line)

FILING REFERENCES

Previous ADMs/INFs

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90 ADM-27 415.6 PL 100-485
90 ADM-31 Title 9B

DSS-296EL (REV. 9/89)
Date August 23, 1991

Trans. No. 91 ADM-34
I. **Purpose:**
The purpose of this ADM is to advise social services districts of policies and procedures related to the provision of child day care services for children with special needs. These policies and procedures apply to the provision of JOBS, Transitional, Employment-Related, Low Income and Title XX Child Care, including Preventive and Protective Child Care.

II. **Background:**
Child day care is an important service for parents who are or were in receipt of public assistance or who are among the population of the working poor. The lack of available and affordable child care can restrict the parents' opportunities to pursue training and educational activities which increase their employability. The availability of reliable and affordable child care also impacts on the ability of many individuals to obtain and maintain steady employment and self-support.

The importance of the availability of quality child day care increases when a child has special needs. Children with special needs often require services beyond those offered by most child care providers. Locating appropriate placements which provide the specialized services needed by a child with special needs is often difficult. When such placements are identified their cost frequently exceeds the cost of other forms of child day care in the area.

The federal Family Support Act of 1988 recognized the need for making higher child care payments for children who have special needs and allowed states to establish separate statewide limits for the care of such children. However, higher payments for child care for children with special needs are not allowed to cover special educational, therapeutic or other services not directly related to the provision of appropriate child care.

To assist social services districts in accessing appropriate placements, child day care payments for children with special needs will be reimbursed based upon the actual cost of care up to the statewide maximum rate of $204 per week for weekly care, regardless of the child's age, the type of care or the local market rate. Part time care for such children will be based upon the actual cost of care up to a maximum rate of $136 per week. The existence of special needs must be documented on a case by case basis by the social services districts. The social services districts must also verify that the child care provider is providing child care related services or is accruing additional costs as the result of caring for a child with special needs.
III. **Program Implications:**

A. **Definitions of Special Needs**

To be eligible for reimbursement for the actual cost of care up to the statewide maximum rate for weekly or part time child care, social services districts must document that a child has special needs. Children who have one or more of the following conditions as derived from education regulations 8 NYCRR 200.1(cc)(1-11) and Head Start Performance Standards are considered to be children with special needs.

1. **Visual impairment** -- A visual handicap which, even with correction, adversely affects a child's ability to function normally. The term includes impairments that result in a child having partial sight or blindness. Diagnosis of the child's condition must be made by an ophthalmologist, optometrist, physician or pediatrician.

2. **Deafness** -- A hearing impairment which is so severe that the child is impaired in processing linguistic information through hearing, with or without amplification, and which adversely affects the child's ability to function normally. Diagnosis of the child's condition must be made by an audiologist, otolaryngologist, physician or pediatrician.

3. **Hard of hearing** -- A hearing impairment, whether permanent or fluctuating, which adversely affects the child's ability to function normally but which is not included under the definition of deaf. Diagnosis of the child's condition must be made by an audiologist, otolaryngologist, physician or pediatrician.

4. **Orthopedic impairment** -- A physical handicap resulting from a severe orthopedic impairment which adversely affects a child's ability to function normally. The term includes impairments caused by congenital anomaly (e.g., clubfoot, absence of some limb or digits, etc.), impairments caused by disease (e.g., poliomyelitis, bone tuberculosis, etc.), and impairments from other causes (e.g., cerebral palsy, amputation, and fractures or burns which cause contractures). Diagnosis of the child's condition must be made by a physician, pediatrician, orthopedist, or neurologist.

5. **Emotional disturbance** -- An inability to learn which cannot be explained by intellectual, sensory or health factors and which causes a child to exhibit, to a marked degree, one or more of the following characteristics over a long period of time:

   a. an inability to build or maintain satisfactory interpersonal relationships with peers and teachers;
   b. inappropriate types of behavior or feelings under normal circumstances;
   c. a general pervasive mood of unhappiness or depression; or
d. a tendency to develop physical symptoms or fears associated with personal or school problems.

Diagnosis of a child as emotionally disturbed must be made by a psychologist, psychiatrist or other clinically trained and State-qualified mental health professional.

6. Mental retardation -- General intellectual functioning that is determined to be 1.5 standard deviations or more below the mean of the general population on the basis of a comprehensive evaluation which includes an individual psychological evaluation and which results in a consistent demonstrable deficit in a child's ability to adapt to his or her learning environment. Diagnosis of the child's condition must be made by a psychologist, physician or pediatrician.

7. Learning disability -- A disorder in one or more of the basic psychological processes involved in understanding or in using language, spoken or written, which manifests itself in an imperfect ability to listen, think, speak, read, write, spell, or to do mathematical calculations. The term includes such conditions as perceptual handicaps, brain injury, neurological impairment, minimal brain dysfunction, dyslexia and developmental aphasia. The term does not include learning problems which are primarily the result of visual, hearing or motor handicaps, of mental retardation, of emotional disturbance, or of environmental, cultural or economic disadvantage. A child who exhibits a discrepancy of 50 percent or more between expected achievement and actual achievement determined on an individual basis shall be deemed to have a learning disability. Diagnosis of the child's condition must be made by a psychologist, special education professional, psychiatric social worker or other mental health professional.

8. Speech impairment -- A communication disorder, such as stuttering, impaired articulation, a language impairment, or a voice impairment which adversely affects the child's ability to function normally. A child should not be classified as having a communication disorder when speech and language differences may be attributed to cultural, ethnic, bilingual, or dialectical differences or being non-English speaking. Diagnosis of the child's condition must be made by a speech or language pathologist, audiologist, otolaryngologist, physician, or pediatrician.

9. Health impairment -- A physical handicap which limits a child's strength, vitality or alertness caused by chronic or acute health problems which adversely affect a child's ability to function normally. Examples of such health problems include, but are not limited to, a heart condition, tuberculosis, rheumatic fever, nephritis, asthma, sickle cell anemia, hemophilia, epilepsy, lead poisoning, leukemia,
diabetes, tourette syndrome or HIV or AIDS. Diagnosis of the child's condition must be made by a pediatrician, physician or other medical specialist.

10. **Autism** -- A behaviorally defined syndrome which occurs in children of all levels of intelligence. The essential features of autism are typically manifested prior to 30 months of age and include severe disturbances of developmental rates and/or sequences of responses to sensory stimuli, of speech, of language, of cognitive capacities, and of the ability to relate to people, events and objects. Diagnosis of the child's condition must be made by a psychologist, psychiatrist or other clinically trained and State-qualified mental health professional.

11. **Multiple handicaps** -- Two or more handicapping conditions identified in Section III. A (1-10) of this ADM that result in multi-sensory or motor deficiencies and developmental lags in the cognitive, affective, or psychomotor areas, the combination of which cause problems which interfere with the child's ability to function normally. Diagnosis of the child's condition must be made by a pediatrician, physician or other medical specialist.

In the provision of child care services for children of the homeless, children of drug-involved individuals and children requiring protective or preventive services, the social services district should carefully evaluate whether such children have special needs as defined by Section III. A (1-11) of this ADM.

Social services districts may submit written requests for Department approval of any category of special need not otherwise defined in this ADM.

### B. Child Care Related Services

Social services districts must verify that child care providers who request child care payments in excess of the applicable local market rates are providing child care services related to the care of children with special needs or are incurring additional costs as the result of caring for such children. **Reimbursement for child care payments in excess of the local market rates will not be allowed to cover special education or other therapeutic services not directly related to the provision of appropriate child care.**

Possible child care related services or additional costs include:

1. purchase or rental of equipment needed to provide appropriate care to a child with special needs;

2. maintenance of apparatus which assists in breathing, feeding or toileting;
3. supervision of physical activities such as infant stimulation and follow-up activities recommended by a therapist, physician or other specialist;

4. minor modifications to the environment to make it appropriate for a specific child, such as installation of a ramp or handrails in the bathroom;

5. materials and supplies for use with a child on a routine basis as recommended by a therapist, physician or other specialist;

6. increased utility costs due to use of therapeutic machines, such as respirators;

7. transportation of children to and from prescribed therapy sessions;

8. additional staffing when needed to allow a caregiver to work on an individualized basis with a child for scheduled time periods; or

9. increased time and attention needed to provide appropriate care is such that a child care provider is unable to accept additional children.

One-time child care related costs may be paid as administrative expenses under the Low Income Day Care or Title XX Child Care programs rather than as part of an increased rate if the social services district wishes. However, to cover one-time costs using JOBS, Employment-Related or Transitional Child Care funds, the child care related costs must be included as part of the child care rate. Therefore, the social services district may wish to prorate the one-time expense into the child care rate over a specified period of time rather than paying a higher rate indefinitely.

The availability of reimbursement for child care payments for children with special needs for the actual cost of care up to $204 per week is not intended to supplant either the existing pre-school programs for children with handicapping conditions or programs described by Article 89 (Section 4401-4410) of the Education Law. Social services districts should seek funding and services through these sources and through the medical assistance program for items such as special equipment, transportation and materials and supplies recommended by a physician, before either adjusting a child care provider's rate or paying for an item as an administrative expense.

The social services district may submit a written request for Department approval of other child care related services and related additional costs that are not covered by this ADM.
C. Eligibility

Reimbursement for the actual cost of care up to the statewide limit of $204 per week or $884 per month is available for care of children with special needs when such care is provided as JOBS, Employment-Related, Transitional, Low Income, or Title XX Child Care, including Preventive and Protective Child Care. All other eligibility criteria which apply to the specific program must be met.

When providing child care services for children with special needs under the JOBS, Employment-Related and Transitional Child Care programs such reimbursement is available for children up to age 18, or 19 if a full-time student in a secondary school, or in the equivalent level of vocational or technical training, and who are reasonably expected to complete the program before reaching age 19 who are in receipt or were formerly in receipt of ADC benefits. Such care is available for children less than 21 years of age who are in receipt or were formerly in receipt of HR or VA benefits. Children, otherwise identified above, who reside with ADC, HR, or VA families, and who are in receipt of Supplemental Security Income (SSI) benefits or IV-E foster care benefits are also eligible for child care at the special needs rate when any of the conditions identified in Section III. A. of this ADM exist.

Social services districts should note that when providing child care services for children with special needs reimbursement is available only when care is provided by licensed, certified or registered child day care providers, regardless of program funding.

Reimbursement will be available retroactive to April 1, 1990 for Transitional Child Care and October 1, 1990 for all other child care. However, retroactive payment will only apply to cases in which either the social services district or the parent has absorbed costs in excess of the local market rates in order to provide appropriate care for a child with special needs.

IV. Required Action:

A. Documentation of Special Needs

It is the social services district's responsibility to document the diagnosis of the child's condition and special service needs which have been identified by the appropriate physicians or other specialists as outlined in Section III. A. of this ADM. A written statement or report which has been obtained from the appropriate physician or specialist will constitute appropriate documentation.

An Individualized Education Plan (IEP) from the child's school may provide acceptable documentation of special needs when it is based on the opinions of appropriate professionals as identified in Section I. A. of this ADM. In order to be considered appropriate
documentation an IEP must identify a child's special care needs in addition to his/her special education needs.

**B. Referral**

Upon receipt of documentation that a child has special needs, the social services district must determine if the child is receiving program services as authorized either by Article 89 of the Education Law or the Medical Rehabilitation Program for Handicapped Children. If the child has not been evaluated for participation in the above programs, the social services district must assist the parent in applying for benefits under those programs.

**C. Verification of Additional Costs and/or Services**

Before authorizing payment in excess of the local market rate for child day care services for children with special needs, the social services district must verify that the caregiver is providing related services which are designed to meet the child's special needs and/or that the provision of care to the child with special needs results in additional costs to the child care provider. Verification of the provision of additional child care related services and/or the accrual of additional child care related costs may be in the form of an attestation from the child care provider and must be maintained in the case record. Social services districts may, but are not required to, visit a child care provider who is receiving a higher reimbursement for a child with special needs in order to verify that the child care provider is, in fact, providing additional child care related services or accruing additional costs.

**D. Redetermining Eligibility**

It is the social services district's responsibility to reevaluate a child's condition and special service needs at the time that a family's eligibility for publicly funded child care services is redetermined in accordance with the specific program requirements. A statement or report from the appropriate physician or other specialist must be obtained at the time of redetermination.

**E. Reporting**

The social services district is responsible for submitting a quarterly report to the State Department of Social Services which provides information on the number of children with special needs served at rates exceeding the local market rates, the ages of such children, the types of providers utilized for such children, the diagnosis categories and special services provided and the payment rates for such care. (See attachment) This information is not available on the system for all funding streams. Quarterly reports from social services districts will allow the Department to monitor the usage and costs associated with reimbursement of child care payments for children with special needs based upon the actual cost of care up to the statewide limit. The need to continue quarterly reporting will be assessed at the end of the first year.
V. Systems Implications:

A. Upstate

1. JOBS- and Employment-Related Child Care
   Specific instructions for ABEL calculations for payment of child day care for a child with special needs are discussed in ABEL Transmittal 90-6.

2. Transitional, Low Income and Title XX Child Care
   Payment for child day care for a child with special needs may be authorized through use of the usual WMS procedures.

B. New York City

1. Transitional, JOBS- and Employment-Related Child Care
   Specific instructions for authorization of child day care for children with special needs is discussed in the Public Assistance Budgeting Manual.

2. Low Income and Title XX Child Care
   Payment for child day care for a child with special needs may be authorized using the appropriate local procedures for Low Income and Title XX Child Care.

VI. Additional Information

A. Claiming Instructions
   Day Care for children with special needs should be claimed in the same manner all other day care within the Category of Assistance in the RF-2 and RF-2A claim packages.

   Employment-related special needs day care should be authorized and paid through the Non-Services authorization. These expenditures should be claimed on the Schedule A for ADC and PG-ADC related expenditures, and the Schedule F for EAF Day Care.

   All services authorized day care for special needs children should be claimed on line 2 of the Schedule G. The appropriate column to claim should be based on the category of assistance. Title XX expenditures are claimed in columns 2 through 8, depending on the Title XX breakout. EAF expenditures are claimed in column 10, while Low Income would be claimed in Column 11. Federally Participating Transitional Day Care expenditures are claimed in column 12, with PG-ADC Transitional Day Care expenditures being claimed under column 13, on line 2.

   When Low Income Day Care or Title XX Child Care program costs are paid as administrative expenses, as explained on Page No. 6 of this ADM in relation to one-time child care related costs, these should be claimed on the Schedule D-2.

   In addition, all special needs should be reported statistically on the Schedule G-2 along with all other Services and Non-Services Day Care.
VII. Effective Date:

The effective date of this ADM is September 1, 1991, retroactive to April 1, 1990 for Transitional Child Care and retroactive to October 1, 1990 for Low Income, Title XX, JOBS and Employment-Related Child Care.

______________________________
Joseph Semidel
Deputy Commissioner
Family and Children Services

ATTACHMENT
QUARTERLY REPORT
CHILD CARE FOR CHILDREN WITH SPECIAL NEEDS

COUNTY__________________________ REPORTING PERIOD___________________

This report should reflect the number of children with special needs served at rates exceeding the local market rates.

1. Number of children served by age group:
under 18 months ______ 5 - 10 years ______
18 mos. - 3 years ______ 10-13 years ______
3 - 5 years ______ TOTAL: ______

2. Number of children served by provider type:
_____ day care center _____ family/group family day care
_____ informal (provider's home) _____ informal (in child's home)

3. Number of children served by diagnosis:
_____ visual impairment _____ deafness
_____ hard of hearing _____ orthopedic impairment
_____ emotional disturbance _____ mental retardation
_____ learning disability _____ speech impairment
_____ health impairment _____ autism
_____ multiple handicaps _____ other

4. Describe the child care related services and additional costs accrued by providers which justified authorization of child care payments in excess of the local market.
rates.

5. When payments for child care for children with special needs exceeded the local market rates, what range of fees did you pay?

REPORTED BY:__________________________     _________________________________

.................................................................
signature                                              title and work unit

DATE:________________________
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The purpose of this Administrative Directive (ADM) is to remind local departments of social services (LDSSs) and voluntary authorized agencies (VAs) that no child who is a United States citizen or who is lawfully residing in the United States can be denied any social services for which the child is otherwise eligible because of the residency status of the child’s parent(s) or custodial relative(s). This ADM also is intended to remind LDSSs and VAs that, in 2010, an amendment to 18 NYCRR 403.7(b) removed the requirement to report undocumented immigrants receiving referral services and protective services to the United States Department of Homeland Security.
I. Purpose

The purpose of this Administrative Directive (ADM) is to remind local departments of social services (LDSSs) and voluntary authorized agencies (VAs) that no child who is a United States citizen or who is lawfully residing in the United States can be denied any social services for which the child is otherwise eligible because of the residency status of the child’s parent(s) or custodial relative(s).

This ADM also is intended to remind LDSSs and VAs that, in 2010, an

1 18 NYCRR 403.7 (d).
amendment to 18 NYCRR 403.7(b) removed the requirement to report undocumented immigrants receiving referral services and protective services to the United States Department of Homeland Security.

II. Background

The New York State Office of Children and Family Services (OCFS) serves New York’s public by promoting the safety, permanency and well-being of the state’s children, families, and communities. Like all families, immigrant families, regardless of their immigration documentation, may come into contact with the child welfare system for many reasons, including an allegation of abuse or maltreatment. Immigrant families involved with the child welfare system may encounter obstacles such as poverty, language barriers, lack of health care and health insurance, among others. Undocumented parents or custodial relatives may not seek the services that their children need for fear that accessing such services will bring them to the attention of immigration enforcement personnel.

III. Program Implications

A child who is a United States citizen, or who is lawfully residing in the United States, is entitled to receive any social services for which the child is otherwise eligible, regardless of the residency status of the child’s parent(s) or custodial relative(s).

A child who is not lawfully residing in the United States is entitled to receive information and referral services, child protective services, and foster care services.

There is no requirement for LDSSs and VAs to report undocumented immigrants to the United States Department of Homeland Security. This includes undocumented children and families receiving information and referral services, child protective services or foster care services, as well as the undocumented parent(s) or custodial relative(s) of a child receiving social services who is lawfully residing in the United States or a citizen of the United States.

IV. Required Actions

LDSSs and VAs must not deny appropriate service(s) to a child, for which the child is otherwise eligible, regardless of the residency status of the child’s parent(s) or custodial relative(s).

LDSSs and VAs must not report to immigration enforcement personnel in instances where:

- undocumented children and families receiving information and referral services, child protective services or foster care services, and
- the undocumented parent(s) or custodial relative(s) of a child receiving social services who is lawfully residing in the United States or a citizen of the United States.

2 Undocumented immigrants are foreign nationals who have entered the United States illegally or foreign nationals who entered the United States legally but whose visa is no longer valid.
3 Qualified immigrants and United States citizens are subject to federal eligibility requirements for federal benefits.
4 18 NYCRR 403.7 (d).
5 18 NYCRR 403.7 (b), SSL §§ 122 (2) and 398-e.
V. Contacts

Any questions concerning this release should be directed to the appropriate regional office, Division of Child Welfare and Community Services:

Buffalo Regional Office - Amanda Darling (716) 847-3145
Amanda.Darling@ocfs.ny.gov
Rochester Regional Office - Karen Buck (585) 238-8201
Karen.Buck@ocfs.ny.gov
Syracuse Regional Office - Sara Simon (315) 423-1200
Sara.Simon@ocfs.ny.gov
Albany Regional Office – John Lockwood (518) 486-7078
John.Lockwood@ocfs.ny.gov
Spring Valley Regional Office - Yolanda Désarmé (845) 708-2498
Yolanda.Desarme@ocfs.ny.gov
New York City Regional Office - Ronni Fuchs (212) 383-1676
Ronni.Fuchs@ocfs.ny.gov
Native American Services - Heather LaForme (716) 847-3123
Heather.LaForme@ocfs.ny.gov

VI. Effective Date

This release is effective immediately.

/s/ Thomas R. Brooks

Issued By:
Name: Thomas R. Brooks
Title: Deputy Commissioner
Division/Office: Strategic Planning and Policy Development
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Clarification on the Financial Eligibility Requirements for Transitional Child Care

The purpose of this Informational Letter (INF) is to provide local social services districts with clarification regarding the financial eligibility requirements for Transitional Child Care (TCC). Section 410-w of the Social Services Law (SSL) and Title 18 of the Codes, Rules and Regulations of the State of New York (NYCRR) Section 415.2(a)(1)(iv) provide that a family receiving public assistance or child care subsidy in lieu of public assistance may be eligible for TCC provided the family is no longer financially eligible for public assistance, and certain other conditions are met.
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I. Purpose

The purpose of this Informational Letter (INF) is to provide local social services districts with clarification regarding the financial eligibility requirements for Transitional Child Care (TCC).

II. Background

Section 410-w of the Social Services Law (SSL) and Title 18 of the Codes, Rules and Regulations of the State of New York (NYCRR) Section 415.2(a)(1)(iv) provide that a family receiving public assistance or child care subsidy in lieu of public assistance may be eligible for TCC provided the family is no longer financially eligible for public assistance, and certain other conditions are met. Specifically, 18 NYCRR § 415.2(a)(1)(iv) provides, in relevant part, that:

(iv) “A social services district must guarantee child care services for a period of up to 12 consecutive months after the month in which a
family's public assistance case closed or, for those who chose child care in lieu of public assistance, the month after the family is no longer financially eligible for public assistance, provided:

(a) the case closed or the family became financially ineligible for public assistance due to:

(1) increased income from either employment or child support; or
(2) the family voluntarily ending assistance and their income is no longer within public assistance standards...” (Emphasis added)

This provision is part of the transitional guarantee. Accordingly, a family that voluntarily ends its public assistance or child care in lieu of public assistance may only receive TCC if the family’s income exceeds public assistance standards.

Administrative Directive 04-OCFS-ADM-01, dated June 29, 2004 stated, under the subheading “Impact on Transitional Child Care Eligibility,” that families who “voluntarily close their ‘in lieu of TA’ child care case while still eligible for TA . . . will be covered under the transitional guarantee, assuming they meet all other eligibility criteria.” OCFS clarified this misleading language in a subsequent Administrative Directive, 05-OCFS-ADM-03, dated May 20, 2005. Section III C(1)(a)(4) of 05-OCFS-ADM-03 provides that, “for transitional child care, the eligibility period begins with the first month in which a family becomes ineligible for TA or ‘child care in lieu of TA’, and is limited to 12 months in duration.” (Emphasis added)

The interpretation in 05-OCFS-ADM-03 is consistent with 18 NYCRR § 415.2(a)(1)(iv) and Section 410-w of the SSL because it provides that a family must be financially ineligible for public assistance to be considered eligible for TCC. 05-OCFS-ADM-03 remains the current directive and superseded 04-OCFS-ADM-01 with regard to the financial eligibility requirements for TCC.

III. Program Implications
Local social services districts must comply with the requirements provided in SSL 410-w, 18 NYCRR Part 415.2(a)(1)(iv), and 05-OCFS-ADM-03, which specify that a family is eligible for TCC only if the family’s income exceeds the income eligibility standards for public assistance, and the family has met the other TCC eligibility requirements. The statutory, regulatory, and administrative requirements regarding transitional eligibility apply equally to: (1) a family whose public assistance case or child care in lieu of public assistance case is closed by the district; and (2) a family who voluntarily closes its public assistance case or child care in lieu of public assistance case.

/s Janice M. Molnar, Ph.D.

Issued By:
Janice M. Molnar, Ph.D.
Deputy Commissioner
Division of Child Care Services
Commissioner Letter

Changes to Law Regarding Child Care in Lieu of Temporary Assistance

The purpose of this Commissioners letter is to inform social service districts of changes in section 410-w of Social Services Law which impacts families who are eligible for child care in lieu of temporary assistance.
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October 3, 2007

Dear Commissioner:

Governor Eliot Spitzer signed into law Chapter 135 of the Laws of 2007 on July 3, 2007. This legislation amends section 410-w of the Social Services Law regarding families who are eligible for child care in lieu of temporary assistance (TA). The change in law and associated State policy eliminates the requirement that parents/caretakers work at least the minimum number of hours that would be required of them if they were in receipt of temporary assistance and allows OCFS to set a minimum that expands eligibility as described below. The change in law takes effect immediately. A copy of the amendment is enclosed.

The Office of Children and Family Services will be amending child care regulations to meet the new statutory requirements and will issue an Administrative Directive. All employed TA recipients with children under the age of 13, will receive a parent letter in a mailing from the Office of Temporary and Disability Assistance in the near future. The parent letter will be sent to all districts, via the GIS, in advance of the mailing to TA recipients. Additionally, the CNS recertification call in notice will be modified to include information about the in lieu of TA child care guarantee.

A telephone conference will be held on Friday, October 19, from 1:00 p.m. to 3:00 p.m. Audio bridge information is enclosed. In the meantime, social services districts are required to do the following:

- Apply the new child care in lieu of TA child care guarantee rules to applicants and provide them with a copy of the parent letter, once it is available; and
- Notify staff in both the TA and child care offices of the change in eligibility; and
- Begin determining eligibility for in lieu of TA child care guarantee based on the information provided in this letter.

In order to determine eligibility for the in lieu of TA child care guarantee, districts will need to determine if the applicant/recipient meets the following eligibility standards:
1. The parent(s) must be earning at least minimum wage unless he or she is employed in a job where minimum wage is made by the combination of wages and tips or the employment is exempt from minimum wage rules; and

2. The parent(s) gross earned income must be equal to or greater than the amounts listed below or, if employed in a job exempt from minimum wage rules and paying less than minimum wage, he or she must meet the minimum number of work hours indicated below; and

3. The household would otherwise be eligible for TA.

<table>
<thead>
<tr>
<th>Family</th>
<th>Minimum Gross Earnings</th>
<th>Minimum Number of Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Single parent family earning minimum wage or more per hour or self employed</td>
<td>$125/wk. $542/mo.</td>
<td>N/A</td>
</tr>
<tr>
<td>Two-parent family when both parents are employed earning minimum wage or more per hour or self employed.</td>
<td>$179/wk. $774/mo.</td>
<td>N/A</td>
</tr>
<tr>
<td>Single parent in a job exempt from minimum wage rules and paying less than minimum wage per hour</td>
<td>N/A</td>
<td>17.5 hours per week</td>
</tr>
<tr>
<td>Two-parent family where both parents are employed in a job exempt from minimum wage rules and paying less than minimum wage.</td>
<td>N/A</td>
<td>25 hours per week</td>
</tr>
</tbody>
</table>

*Note: The above Minimum Gross Earnings amounts are based on a minimum wage of $7.15 per hour times 17.5 hours per week for a single parent family and 25 hours per week for a two parent family.*

Parents may be employed for less than the above number of hours provided their earned income is equal to or greater than the above amounts. Self employed parents must meet the above gross earned income minimums. For parents in jobs that are exempt from minimum wage rules and that pay less than minimum wage, the parent(s) must meet the minimum work hours. The in lieu of TA child care guarantee applies only for hours while both parents are at work and reasonable time for the parent to get to and from work from the day care site.

If income falls below any of the above respective amounts or rises to or above the amount that would allow the parent(s) to remain eligible for TA, the parent(s) will not be eligible for child care in lieu of TA. Once the parent(s) income is at or above the amount that would allow them to remain eligible for TA but is at or below 200% of the State Income Standards, the parent(s) may be eligible for transitional child care.
Calculation of income and hours worked for parents who have fluctuating income will be based on 18 NYCRR 404.5(b)(3) which reads as follows.

"If income fluctuates significantly, the average monthly amount will be based on income received during a period of not less than three or more than six months."

If you have any questions regarding the above information, please contact Anne Ball at (518) 372-9217 or email Anne.Ball@ocfs.state.ny.us.

Sincerely,

David A. Hansell
Commissioner
Office of Temporary and Disability Assistance

Enclosure

cc: Child Care Supervisor Employment Coordinator Temporary Assistance Director

Gladys Carrión
Commissioner
Office of Children and Family Services
LAW OF NEW YORK, 2007

CHAPTER 135

AN ACT to amend the social services law, in relation to expanding resources available for working families to access child care in lieu of public assistance benefits

Became a law July 3, 2007, with the approval of the Governor.
Passed by a majority vote, three-fifths being present.

The People of the State of New York, represented in Senate and Assembly, do enact as follows:

Section 1. Paragraph (a) of subdivision 4 of section 419-b of the social services law, as separately amended by chapters 326 and 563 of the laws of 2001, is amended to read as follows:

(a) Local social services districts shall guarantee applicants who would otherwise be eligible for, or are recipients of, public assistance benefits and who are employed, the option to choose to receive continuing child care subsidies in lieu of public assistance benefits, for such period of time as the recipient continues to be eligible for public assistance. For the purposes of this subdivision, an eligible applicant, or recipient of, public assistance benefits and who is employed includes a person whose gross earnings, alone, or with a spouse, the required number of work hours times the state minimum wage. Recipients of child care subsidies under this subdivision who are no longer eligible for public assistance benefits, shall be eligible for transitional child care described in paragraph (b) of subdivision one of this section as if they had been recipients of public assistance.

§ 2. This act shall take effect immediately.

The Legislature of the STATE OF NEW YORK enacts:

Pursuant to the authority vested in us by section 75-b of the Public Officers Law, we hereby jointly certify that this slip copy of this session law was printed under our direction and, in accordance with such section, is entitled to be read into evidence.

JOSEPH L. BRUCC
Temporary President of the Senate

SHELDON SILVER
Speaker of the Assembly

EXPLANATION--Matter in italics is new; matter in brackets [—] is old law to be omitted.
Determining Child care in lieu of TA Income Eligibility

The gross earned income must be equal to or greater than the amounts listed in the chart below, or if the parent/caretaker relative(s) is employed in a job exempt from the minimum wage rules and paying less than minimum wage, he or she must meet the minimum number of work hours indicated on the chart; AND

The parent/caretaker relative(s) must be earning at least minimum wage (unless he or she is employed in a job where minimum wage is made by a combination of wages and tips) or the employment is exempt from minimum wage rules.

<table>
<thead>
<tr>
<th>Family</th>
<th>Minimum Gross Earnings</th>
<th>Minimum Number of Work Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Single parent family earning minimum wage or more per hour or self-employed</td>
<td>$127/week or $550/month</td>
<td>N/A</td>
</tr>
<tr>
<td>Two parent family when both parents are employed earning minimum wage or more per hour or are self-employed</td>
<td>$181/week combined or $784/month combined</td>
<td>N/A</td>
</tr>
<tr>
<td>Single parent in a job exempt from minimum wage rules and paying less than minimum wage per hour</td>
<td>N/A</td>
<td>17.5 hours per week</td>
</tr>
<tr>
<td>Two parent family where both parents are employed in a job exempt from minimum wage rules and paying less than minimum wage</td>
<td>N/A</td>
<td>25 hours per week combined</td>
</tr>
<tr>
<td>Two parent family: One parent is employed earning minimum wage or more per hour or self employed</td>
<td>$127/week or $550/month</td>
<td>N/A</td>
</tr>
<tr>
<td>-and-</td>
<td></td>
<td></td>
</tr>
<tr>
<td>The other parent is in a job exempt from minimum wage rules and paying less than minimum wage per hour</td>
<td>N/A</td>
<td>7.5 hours per week</td>
</tr>
</tbody>
</table>

The above minimum gross earning amounts are based on the current minimum wage of $7.25 per hour times 17.5 hours per week for a single parent/caretaker relative(s) and the minimum wage of $7.25 per hour times 25 hours per week for a two parent family. However, parent/caretaker relative(s) earning more than minimum wage may be employed for less than 17.5 or 25 hours provided that their income is equal to or greater
than the above amounts. Self-employed parent/caretaker relative(s) must meet the above gross earned income minimums (see 95 OTDA INF-33 for self-employment budgeting). For parent/caretaker relative(s) in jobs that are exempt from minimum wage rules, the parent/caretaker relative(s) must meet the minimum work hours.

As the minimum wage increases in the future the districts will need to recalculate the minimum gross earnings needed to be eligible for child care in lieu of TA. The State minimum wage must be at least equal to the federal minimum wage in accordance with Section 652 of the Labor Law.
The purpose of 04-OCFS-ADM-01, Guaranteed Child Care in Lieu of Temporary Assistance, Payment During Breaks in Activities, Eligibility for Family in Post-Secondary Education, No Application for Transitional Child Care, describes amendments to the Social Services Law (SSL) section 410-w regarding eligible families under the New York State Child Care Block Grant (NYSCCBG).
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### Administrative Directive

<table>
<thead>
<tr>
<th>Transmittal:</th>
<th>04-OCFS-ADM-01</th>
</tr>
</thead>
<tbody>
<tr>
<td>To:</td>
<td>Local District Commissioners</td>
</tr>
<tr>
<td>Issuing Division/Office:</td>
<td>Division of Development and Prevention Services</td>
</tr>
<tr>
<td>Date:</td>
<td>June 29, 2004</td>
</tr>
<tr>
<td>Subject:</td>
<td>Guaranteed Child Care in Lieu of Temporary Assistance Payment During Breaks in Activities Eligibility for Families in Post-Secondary Education No Application for Transitional Child Care</td>
</tr>
<tr>
<td>Suggested Distribution:</td>
<td>Directors of Services TANF Directors Child Care Unit Supervisors Transitional Benefits Unit Supervisors Medical Assistance Directors Food Stamp Directors Child Support Enforcement Unit Supervisors</td>
</tr>
<tr>
<td>Contact Person(s):</td>
<td>OCFS: Anne Ball (518) 474-3775, E-mail: <a href="mailto:Anne.Ball@dfa.state.ny.us">Anne.Ball@dfa.state.ny.us</a> OTDA: 1-800-343-8859 extension 4-9344 Medical Assistance Local District Liaison: Upstate: (518) 474-8216 NYC: (212) 268-6855</td>
</tr>
<tr>
<td>Attachments:</td>
<td>A: Client Letter-Child Care Guarantee B: Request for Child Care Assistance or Request to Close My TA Case C: Request for Amendment to CSP/ISP D: Applicant Certification of Information in TA Case Record E: LDSS-4782-Notice of Intent to Discontinue Child Care Benefits F: LDSS-4781 Notice of Intent to Change Child Care Benefits G: Client Letter- Potential Eligibility for Transitional Child Care</td>
</tr>
</tbody>
</table>

Attachment Available On – Line: yes

### Filing References

|--------------------|-------------------|-------------|-----------------------------------|-------------|-----------|
I. Purpose

The purpose of this release is to advise the local social services districts of amendments to the Social Services Law (SSL) section 410-w regarding eligible families under the New York State Child Care Block Grant (NYSCCBG).

Section 410-w of the SSL was changed to extend the child care guarantee to Temporary Assistance (TA) applicants. TA refers to both Family Assistance (FA) and Safety Net (SN) Assistance. TA applicants who would otherwise be eligible for, or are recipients of, recurring TA benefits and who are employed, can now choose child care “in lieu of TA” and be afforded a guarantee of child care benefits, regardless of whether federal or state funding is available to the district.

Other changes to SSL require districts to provide child care subsidies for TA recipients during breaks in certain activities; allow districts to pay for post-secondary education for low income families who are working a minimum of 17½ hours a week; and prohibit requiring a new application for families whose TA cases are closing and who have a continuing need for child care in order for parents to work. The amendment providing the new “in lieu of TA” child care guarantee became effective December 19, 2001. All the other amendments became effective June 17, 2002. Section IV of this release, entitled Required Actions, provides information regarding implementation of these changes.

II. Background

The changes in law revise the provision in Chapter 391 of the Laws of 1999 that required districts to provide child care subsidies to eligible working families that choose to receive such subsidies “in lieu of TA” only to the extent there is available federal funding. The impact of this change is that districts now must guarantee child care subsidies to these families regardless of the availability of federal or state funds. This will assist certain low income families to achieve self-sufficiency by guaranteeing them the child care subsidies they need to maintain their employment without requiring them to receive TA benefits they may not want.

Districts received information regarding the extension of the guarantee in two previous releases. The Assurances Section to 02 OCFS LCM-04: Guidelines and Instructions for Preparing Annual Plan Updates, dated February 14, 2002, describes families eligible for the child care guarantee under the NYSCCBG. All families eligible under NYSCCBG are also described in 02 OCFS LCM-09: NYSCCBG Subsidy Program Allocations, dated June 7, 2002; 03 OCFS LCM-08: NYSCCBG Subsidy Program Allocations, dated July 18, 2003; and 03 OCFS LCM-19: Strategic Planning and Policy Development, dated November 5, 2003.

The amendment requiring child care subsidies to be provided to TA recipients during breaks in activities provides a safeguard against the loss of child care arrangements that could impact the ability of parent(s) or caretaker relative(s) to continue to participate in these activities.

Districts also are now prohibited from requiring a new application for TA recipients whose cases are closing and who are working and eligible for the transitional child care guarantee. This recognizes the need to provide continued support to enable the parents to retain their employment. Prior to this change in law, districts were required to issue a client notice regarding the termination of child care benefits when a parent’s TA was terminated. A parent who had a continuing need for child care would then have to reapply for child care benefits. The amendment to the law now shifts the onus to the district to make
a determination regarding continuing child care eligibility and to authorize child care concurrently with closing the TA case.

02 OCFS INF-01, Former Family Assistance Families Eligible for Transitional Child Care, dated March 5, 2002, alerted districts to the statutory amendment prohibiting a new application for transitional child care and encouraged districts to begin the process to eliminate the need for a separate application for transitional child care.

Another change gives districts the option to pay for child care for parents or caretakers who are pursuing four-year college programs as long as the parents or caretakers work at least 17½ hours per week.

III. Program Implications

A. EXTENSION OF THE CHILD CARE GUARANTEE

Eligibility Requirements For “In Lieu of TA” Child Care

In order to be eligible for the new “in lieu of TA” child care guarantee, the family must have income at or below the amount that would allow them to become or remain eligible for TA and their resources must be within TA limits. They must also be engaged in work as required by the social services district.

The parent or caretaker relative must:

- apply for and be otherwise eligible for TA by completing the DSS 2921- Statewide Common Application, but choose to receive child care “in lieu of TA” or voluntarily close his or her TA case while still eligible for TA; and

- need child care for a child under 13 years of age in order to enable the parent or caretaker relative to engage in work; and

- be in receipt of, or actively pursuing court-ordered child support, or be determined to have good cause not to actively pursue child support. A parent or caretaker relative will be considered to meet the good cause exception if he or she has a Domestic Violence (DV) waiver dated within the previous 12 months. If the parent or caretaker relative makes a claim of domestic violence but does not have a recent DV waiver, he or she must document that he or she meets the good cause requirements as described in 99 ADM-05, Cooperation with Child Support Enforcement.

Recipients who voluntarily reduce their income or work hours in order to maintain eligibility for the guarantee will lose the guarantee. The following is the TA denial/closing language. “This is because (You/Name) quit a job or reduced earnings on (Date). (You/Name) did not give us information to show that this was done for a reason other than to maintain eligibility for public assistance. This decision is based on Regulation 12 NYCRR 1300.13(a).” These individuals may then apply for the regular low-income child care subsidies that are available to working families. However, their receipt of child care benefits will be dependent upon the availability of funds in the district.

A parent or caretaker relative will be considered “engaged in work” if he or she meets the following criteria:

- is working for at least the following number of hours: 20 hours for a single parent with a child under the age of six; 30 hours for a single parent whose children are all six or older; in two
parent families, the parents must be working a combined total of 55 hours with at least one parent working 30 or more hours; and, either:

- is earning wages at a level equal to or greater than the minimum amount required under federal and state labor law for the type of employment; or
- is self-employed and is able to demonstrate that such self-employment produces personal income equal to or greater than the minimum wage, or has the potential for growth in earnings to produce such an income within a reasonable period of time.

A parent or caretaker relative will be considered in receipt of or actively pursuing court-ordered child support if he or she:

- is receiving child support services through the IV-D agency, or completes and submits a DSS-2521 (Child Support Services Application) and receives necessary services to receive child support collections. This means the parent or caretaker relative is cooperating as required to establish paternity and obtain court-ordered support; or
- can demonstrate he or she is receiving child support collections, through court-ordered support, or is taking actions necessary to receive child support collection via private legal means. Private legal means includes representation by an attorney or pro se representation by a parent or caretaker relative who demonstrates knowledge of the paternity establishment and child support process; or
- has been excused from paternity establishment, child support requirements or support enforcement for good cause.

Construction of the Assistance Unit

Unlike other low income families, the child care services unit for child care “in lieu of TA” consists of those members of the household who would be included in the TA filing unit [18 NYCRR Section 352.30(a)], and those legally responsible non-filing unit members in the household if TA rules [18 NYCRR Section 352.30(e)] require such individuals’ income and/or resources to be considered when determining the eligibility of the TA applicants.

Alien Status and Social Security Numbers

Applicants and all other members of the assistance unit must provide their Social Security Numbers (SSNs) if required under TA rules. At least one parent or caretaker relative must meet the alien status and SSN requirements for TA.

Financial Eligibility

Financial eligibility is determined using TA eligibility rules (i.e., not services rules), including the methodology for calculating countable income, resources and need, taking into account shelter, utilities and any other TA related expenses that would normally be used in the determination of financial eligibility for TA.

Programmatic Eligibility

Programmatic eligibility for child care in lieu of TA is described under eligibility requirements for “In lieu of TA” child care. Eligibility differs from TA requirements in the area of property liens, and domestic violence (DV) and drug/alcohol screening. Families who choose child care “in lieu of TA” do not have to sign a property lien and are not required to submit to a drug/alcohol screening as a condition
of eligibility. In addition, the district is not required to conduct DV screening on an applicant who has chosen child care “in lieu of TA”.

Automated Finger Imaging System (AFIS)

Depending on the district’s procedures, AFIS may be conducted very early in the TA application process or later. If, according to the district’s process, finger imaging is required before the TA applicant’s interview and if the client refuses to be finger imaged, the applicant is not eligible for TA or for child care “in lieu of TA”.

Recertification for “In Lieu of TA” Child Care

A family’s eligibility must be redetermined at least every 12 months and more frequently when case circumstances have changed.

Time Limits

There are no time limits attached to this guarantee. Eligible families will continue to be eligible for the guarantee as long as they need child care in order to engage in work, their income is at or below the amount that would allow them to become or remain eligible for TA, their resources are within TA limits, and they otherwise meet TA eligibility requirements pertaining to child support and employment.

Family Share

Each family eligible for the “in lieu of TA” child care guarantee must pay a family share. Due to the fact that their income will fall below the poverty standards, the family share is set at the minimum of $1 per week.

Impact on Transitional Child Care Eligibility

Prior to this change in law, working families who voluntarily closed their TA cases while still financially eligible for TA would have been eligible for the transitional child care guarantee. With this change in law, these families now are eligible to receive child care subsidy as part of the “in lieu of” child care guarantee rather than the transitional guarantee. Once they become ineligible for TA because of increased hours of employment, excess earned income, increases in child support, or once they voluntarily close their “in lieu of TA” child care case while still eligible for TA, these families will be covered under the transitional guarantee, assuming they meet all other eligibility criteria. Please note that families, who become ineligible for TA due to an increase in resources, do not meet the eligibility criteria for the transitional child care guarantee.

Impact on Food Stamps and Medical Assistance

There are implications for both Food Stamp and Medical Assistance benefits because of the new guarantee. Initial applications for TA or recertification forms are also considered applications for Food Stamps. Therefore, if an applicant (at initial application or recertification) is found eligible for TA but chooses child care “in lieu of” TA, the district must do a separate determination of his/her Food Stamp eligibility. If the parent or caretaker relative has unreimbursed child care expenses, which could occur in situations where the provider charges more than the market rate, the unreimbursed expenses are
deductible expenses for the Food Stamp program. Family Assistance recipients and federally participating Safety Net recipients who request that their cases be closed in order to receive child care “in lieu of TA” must, if otherwise eligible, receive transitional Food Stamp benefits.

If an applicant for TA chooses child care subsidies "in lieu of TA” and the applicant also checks the Medicaid box on the application, the application and applicable documentation must be referred to the Medicaid unit for a separate Medicaid eligibility determination. If, at recertification, a recipient chooses either to receive only the child care subsidies “in lieu of TA”, or to voluntarily close his or her case while still eligible for TA, closing code (F98) must be used. Currently, F98 creates a separate Medicaid case for 30 days. The Medicaid worker must extend the Medicaid authorization for the remainder of the 12 months from the date of the last TA recertification. In the near future, a systems modification will be made so that the Medicaid will continue unchanged. Districts will be notified when the system is modified. In the event that the client does not want Medicaid, Upstate code M90 “Client Request-PA and MA written” should be used on the Welfare Management System (WMS) and M90 plus F98 on the Client Notices System (CNS); in NYC, case level code G89 “Client Request-PA and MA-written” should be used.

Recipients who are eligible for transitional child care benefits due to an increase in income and subsequent loss of TA eligibility will continue to be referred for a separate Medicaid determination, as is current procedure, unless the clients request their Medicaid cases be closed at the same time as the TA cases.

B. CHILD CARE DURING BREAKS IN ACTIVITIES

Social services districts must provide child care subsidies for TA recipients during breaks in work or an approved activity. Payment for child care during approved or allowed breaks in activities is mandated and is limited to a period of up to two weeks. However, child care may be authorized for up to one month if the child care arrangements would be lost if not continued, and the employment or approved activity is scheduled to begin within that one-month period. There are no limits on the number of approved or allowed breaks for which child care may be authorized so long as the recipient is participating as required in his or her work or approved activity.

C. POST-SECONDARY EDUCATION

Districts now have the option to include in their Consolidated Services Plan (CSP) or Integrated County Plan (ICP) the provision of child care subsidies to families with incomes at or below 200 percent of the state income standard who are satisfactorily participating in a post-secondary educational program as long as the parent(s) or caretaker(s) is also working at least 17½ hours per week, when funds are available. 04 OCFS INF-02 provides 2004-05 Income Eligibility Standards. It is obtainable via the following link: http://sdssnet5/ocfs/policies/external/OCFS_2004/. This option applies to TA recipients and low income families so long as the recipients also are participating, as required, in work activities and the district approves the educational activity for the particular recipient. Four-year post-secondary programs are not an approved work activity for TA recipients to meet the work participation rates. Therefore, the individual TA recipient must be in compliance with all applicable work requirements before he or she may be approved for this additional activity. If this option were selected for TA recipients, the subsidy would cover child care needed for the approved activities in addition to the hours needed for the client to participate in his or her required activities.

This option pertains to individuals who are attending a two-year undergraduate college program (other than one with a specific vocational sequence leading to an associate degree) or a four-year college or
university program leading to a bachelor degree that is reasonably expected to improve the earning capacity of the caretaker. The caretaker must be participating in non-subsidized employment whereby the caretaker earns wages at a level equal to or greater than the minimum amount required under federal and state labor laws. He or she must also demonstrate his or her ability to successfully complete the course of study and must maintain satisfactory progress.

This amendment has no impact on the option districts currently have to provide child care subsidies to a parent(s) or caretaker(s) who is enrolled in a two-year full-time degree granting program with a specific occupational goal at a community college or a two-year college; nor to those enrolled in an undergraduate or community college program with a specific vocational sequence leading to an associate degree or certificate of completion within a specified time frame not exceeding 30 consecutive calendar months. In both of these latter cases, the minimum work hours are not applicable unless a district chooses to add a minimum number of work hours as a condition of eligibility and include this additional eligibility requirement in the district’s CSP or ICP.

**D. NO APPLICATION REQUIRED FOR TRANSITIONAL CHILD CARE**

Districts must make sure that families who are transitioning from TA and meet the criteria set forth below suffer no break in child care services and do not have to apply for transitional child care. Districts must take a proactive role in determining a family’s eligibility for the transitional child care guarantee prior to the TA case closing. This requirement pertains only to cases where the parent or caretaker relative is receiving a child care subsidy at the time of case closing. However, districts may extend this option to all transitioning families.

The statutory prohibition against requiring a TA recipient whose case is closing from reapplying for child care goes beyond requiring a parent or caretaker relative to complete a new application. It means that the district must determine the parent’s or caretaker relative’s need for child care and eligibility for the transitional guarantee before closing the TA case. If the parent or caretaker relative has a continuing need for child care and is eligible for the transitional child care guarantee, the district must continue the family’s child care subsidies without interruption by authorizing transitional child care.

Transitional child care assistance must be guaranteed to the parent or caretaker relative for a period of 12 months after TA has been terminated or ended if the parent or caretaker relative:

1. needs child care for an eligible child under 13 years of age in order to enable a parent or caretaker relative to engage in work. “Engaged in work” for low income families means that the individual is earning wages at a level equal to or greater than the minimum amount required under federal and state labor laws for the type of employment; or the individual is self-employed and is able to demonstrate that the self-employment produces personal income equal to or greater than the minimum wage or has the potential for growth in earnings to produce such an income in a reasonable period of time; and
2. has income of no more than 200 percent of the state income standard; and
3. has been in receipt of TA [ or Child Assistance Program, (CAP)] in three of the six months prior to the TA case being closed; and
4. had his or her TA terminated as a result of:

   a. increased income from employment (former CAP recipients who are ineligible for Safety Net Assistance due to the income limits are deemed to meet this criteria at the time their five-year limit for TA expires regardless of whether their income increased); or
b. increased income from child support; or

c. the parent voluntarily ended assistance and is no longer financially eligible for TA. (Former FA recipients who do not apply for SN benefits prior to their FA case closing are deemed to have voluntarily ended their TA). Additionally, a parent or caretaker relative who fails to recertify, but otherwise meets the eligibility criteria for the transitional guarantee, shall be considered to have voluntarily ended assistance.

IV. Required Actions

A. EXTENSION OF THE CHILD CARE GUARANTEE

Effective immediately, districts must put safeguards in place to prevent any parent or caretaker relative from being denied “in lieu of TA” child care benefits. No parent or caretaker relative shall have child care benefits terminated without a review of the family’s eligibility for the new guarantee, while the district begins full implementation of the statutory amendments. In order to begin implementation and notify recipients about the new guarantee, districts are required to send the attached client letter, Attachment A: Client Letter-Child Care Guarantee, to all TA recipients at recertification or next case action. The letter informs the applicant/recipient (A/R) about the new guarantee, the eligibility requirements and the A/R’s responsibilities.

TA applicants must be given the client letter at the time of application. TA recipients must be given the client letter with each subsequent “Notice of Recertification for Public Assistance” (CNS Call-in Notice). CNS will include this in the CNS Call-In Notice. It must be included in any Call-In Notices mailed by local districts. The language will also be incorporated into LDSS-4148A: What You Should Know About Your Rights and Responsibilities.

If an A/R expresses an interest in the new child care guarantee, the district must determine the family’s eligibility for the guarantee and inform the parent or caretaker relative of that determination. Applicants must complete the LDSS-2921. Eligibility is determined by using TA rules for calculation of countable income and resources. The family unit is determined based on TA rules for the TA assistance unit and must include legally responsible non-filing unit members in the household if TA rules require such individuals’ income/resources to be considered when determining the eligibility of the TA applicant. Families are required to pay a family share/fee based on the income of the family unit. Only one family share is required for each family regardless of the number of children needing care. The family share is $1.00 per week regardless of the number of children receiving child care.

The A/R should sign Attachment B: Request for Child Care Assistance, or Request to Close My TA case. A copy of the signed request form must be given to the parent or caretaker relative. The original must be kept in the case file.

Redeterminations of eligibility must be made at least every 12 months and more frequently when individual case circumstances change, including but not limited to a change in income. Once the family’s income exceeds the TA income standards, the family is eligible for transitional child care as if it had been receiving TA, assuming all other eligibility criteria for transitional child care are met. Please refer to section III, D, No Application Required for Transitional Child Care, for further information. No application may be required for transitional child care.
If a recipient moves from one district to another while in receipt of “in lieu of TA” child care, the district from which the recipient moved is responsible for the child care benefits during the month in which the recipient moved and the first full month after the move.

Please note: 18 NYCRR Part 352.20(d) provides that an applicant’s eligibility for FA or SN Assistance must be determined without taking into consideration the percentage earned income disregard unless the applicant’s needs were met in whole or in part by FA or SN payments for any one of the four preceding months. In other words, the applicant must pass the net income test without the percentage disregard. If eligible, the percentage disregard is allowed. When the applicant is found financially eligible for TA but chooses child care “in lieu of TA”, the percentage earned income disregard must be allowed - when determining ongoing eligibility for “in lieu of TA” child care cases that pass the gross income test.

B. CHILD CARE DURING BREAKS IN ACTIVITIES

Effective immediately, if a recipient has a break in an approved/required activity, districts must determine whether the recipient will be returning to an approved/required activity within a two-week period or within a one-month period. They must also determine if the child’s placement with the child care provider would be lost if child care benefits were not continued during the break in activity; and whether the reason for the break in activity is approved or allowed by the district.

If the TA recipient is going to return to an approved/required activity within two weeks, child care benefits shall continue for the two-week period. If the TA recipient will not be returning to an approved/required activity within two weeks, but is scheduled to return within a month of the break in activities, the district must continue child care benefits if the child care placement would be lost if benefits were not continued. An example of an approved break would be a teen that is on a break from high school for the school’s holiday break. There is no maximum number of breaks per year.

C. POST-SECONDARY EDUCATION

Districts that choose to provide subsidies to families where the parent or caretaker is satisfactorily participating in a post-secondary educational program including a four-year college and is also working at least 17½ hours per week must indicate such in their CSP or ICP. A district choosing to offer this option may determine which post-secondary education programs are acceptable and may define “satisfactory progress.” Districts may also impose a minimum number of working hours that is greater than 17½ hours. Districts that wish to choose this option and have not currently selected this option in their CSP or ICP must amend their CSP or ICP. Districts may request an amendment to their CSP or ICP at any point after the effective date of this release using Attachment C, Request for Amendment to Consolidated Services Plan/Integrated County Plan. If a district chooses to amend its plan to add this new category of eligibility, public notice of the change must be provided in accordance with 18 NYCRR Section 401.7. If a district wishes to offer this option with limitations, it must describe the limitations in its amendment to the CSP or ICP.

D. NO APPLICATION REQUIRED FOR TRANSITIONAL CHILD CARE

In order to fully implement the change in law and to facilitate the transition from TA to the transitional child care guarantee without disruption, districts must put a process in place which makes information from the TA case record readily available to the person or unit that the district designates as responsible for determining eligibility for transitional child care.
District staff will need to take information from the TA record, and update only such information as may be needed to ascertain eligibility for the transitional child care guarantee. In order to continue child care as a transitional case, the worker will need to verify the following information from the case record or from the parent or caretaker relative: household composition, current income, work schedule and child care provider information. The worker will also need to know the length of time the parent or caretaker relative was in receipt of (or eligible for) TA, and the reason for the case closing. The parent or caretaker relative should be asked to verify that information contained in the TA record (such as household composition, address, etc.) is accurate and up to date. This may be accomplished by asking the parent or caretaker relative to initial and date any information being used from the TA record, or by asking the parent or caretaker relative to sign the model form, Applicant Certification of Information in Temporary Assistance Case Record, which has been provided as Attachment D of this release. If this certification will be done through the mail, the worker must send copies of the application/recertification, child care provider enrollment forms and any other documents for which the parent or caretaker relative is being asked to certify thereof. These copies should be attached to the Applicant Certification of Information in Temporary Assistance Case Record.

There may be cases in which the parent or caretaker relative does not respond to requests for information needed to determine eligibility for transitional child care. If a district is unable to determine transitional child care eligibility, the child care benefits the parent or caretaker relative had received as a TA client must be discontinued and the parent or caretaker relative must receive the appropriate child care notice LDSS-4782, Notice of Intent to Discontinue Child Care Benefits which is provided as Attachment E. Child care case closing language should read “(You/Name) did not provide us with the information we requested to determine your continued eligibility for child care. Without this information your eligibility for transitional child care cannot be determined”. If the parent or caretaker relative contacts the district requesting child care within 12 months after the TA benefits are terminated, the district will need to determine if the family meets the eligibility requirements for the transitional child care guarantee. If it does, the family’s eligibility for the transitional guarantee would begin back to the point in time that its TA case closed and continue for 12 months from that date. In these cases, a new application can be required.

Districts must send notice of intent to change benefits to all employed recipients of TA whose TA is ending, when the parent or caretaker relative meets the transitional child care eligibility criteria. The notice of intent to change benefits is necessary because the parent will now be required to pay a family share of the cost of child care. The family’s responsibility to pay a family share reduces the amount of the district’s payment for child care, necessitating this notice. The LDSS-4781, Notice of Intent to Change Child Care Benefits, is provided as Attachment F. It can also be accessed through the OCFS Intranet website. Go to the Resources link, click on External Policies, select the year 2001, and find 01 OCFS LCM 08, Revised Client Notification Forms for Child Care Subsidy. http://sdssnet5/ocfs/policies/external/OCFS_2001/default.htm. For all other TA case closures, districts must send Attachment G: Client Letter-Potential Eligibility for Transitional Child Care Benefits.

If a recipient moves from one district to another while in receipt of transitional child care, the district from which the recipient moved is responsible for the child care benefits during the month in which the recipient moved and the first full month after the move.

V. Systems Implications

Districts may authorize payment in WMS/Services for a new “in lieu of TA” child care guarantee case on the DSS-2970 WMS Services Authorization. Alternatively, child care may be authorized on a
Medical Assistance or Food Stamp case. For child care authorized on a Food Stamp or Medical Assistance case, a new special claim code “9” is now available to identify “in lieu of TA” child care.

A Client Notification System (CNS) notice to the TA client will be generated when the new F98 reason code is used. The definition of F98 is: Client Requests Child Care in Lieu of TA. As noted in Section III A, Impact on Food Stamps and Medical Assistance, use of code F98 will prompt a Medicaid extension for 30 days. The Medicaid worker will have to extend the Medicaid authorization for the remainder of the 12-month period from the date of the last TA recertification. In the near future, modifications will be made to F98 to systematically allow Medicaid to continue unchanged. Districts will be notified once this change is made. If the client does not want Medical Assistance eligibility to be separately determined or continued, the worker can use Upstate: M90 - Client Request - Written - PA and MA on WMS and a combination of M90 and F98 on CNS. In NYC case level denial code F98 should be used. NYC is currently not producing CNS notices for denials. The worker will indicate on the manual notice that the applicant declined MA.

Day Care-Sub goal code 1E-Self Support should be used for transitional child care. This should be changed to the appropriate code once the family is no longer eligible for transitional child care. A new day care sub goal 1F has been requested for the purposes of tracking in lieu of TA child care cases but this system change will not be available in the near future. Districts will need to manually track such cases until system support becomes available.

VI. Additional Information

Claiming

NYSCCBG expenditures for child care subsidies for families receiving child care “in lieu of TA” are claimed on the Schedule H: Non-Title XX Services for Recipients (LDSS-4283), line 2, column 10 (Day Care Block Grant 100%). Please refer to the Fiscal Reference Manual Volume 2, Chapter 3, for detailed instructions for completing the Schedule H. Additionally, NYSCCBG child counts and expenditures by modality of care must be reported on the Schedule G-2: Summary of Payments for Day Care (LDSS-2109EL). Please refer to the Fiscal Reference Manual Volume 2, Chapter 3, for detailed instructions for completing the Schedule G-2.

Reimbursement:

Claims for expenditures for child care services for families eligible under the “in lieu of TA” child care guarantee will be reimbursed at 100 percent with NYSCCBG funds up to the district’s NYSCCBG allocation.

Contact Person:

If you have any questions regarding information contained in this ADM, please contact Anne Ball at (518) 474-3775. Ms. Ball may also be reached via the Internet at Anne.Ball@dfa.state.ny.us.

If you have questions regarding TA implications, contact Central Team at 1-800-343-8859, extension 4-9344.
If you have any fiscal questions, please contact the OTDA Bureau of Financial Services:

Regions 1 – 4 - Virginia Scala at (518) 474-7549;
E-mail: Virginia.Scala@dfa.state.ny.us

Region 5 – Michael Borenstein at (631) 854-9704
E-mail Michael.Borenstein@dfa.state.ny.us

Region 6 - Marian Borenstein at (212) 383-1735
E-mail Marian.Borenstein@dfa.state.ny.us

If you have any WMS/Services questions, please contact the Bureau of Technical Services at 1-800-342-3727.

If you have any WMS/IM questions, please contact Tully Lenihan of the Office of Temporary and Disability Assistance at (518) 474-8749; Tully.Lenihan@dfa.state.ny.us.

If you have any Medical Assistance questions please contact the Medical Assistance Local District Liaison: Upstate (518) 474-8216 and NYC (212) 268-6855.

VII. Effective Date

The effective date of this administrative directive is the date of release. The statute that mandates the “in lieu of TA” child care guarantee became effective on 12/19/2001. The statute that provides for payment during breaks in activities, allows payment for secondary education when a parent is working a minimum of 17 ½ hours and prohibits a new child care application for certain individuals transitioning from TA, became effective 6/17/02. OCFS will provide technical assistance and review implementation timelines for districts that identify issues or need assistance in implementing the changes in law.

Larry G. Brown s/s

Issued By:
Larry G. Brown
Deputy Commissioner
Division of Development and Prevention Services
Dear Parent:

A new guarantee of child care assistance is now available for working families. You may decide that instead of receiving Temporary Assistance (TA) what you really need is help paying for child care. Families who are applying for or are receiving TA and need child care in order to work, may be eligible for a new child care guarantee for working families. A child care guarantee means that if you meet the eligibility requirements, the social services district must pay an eligible child care provider for your child care.

Who is eligible?

You are eligible for this guarantee if you are applying for and found eligible for TA and choose child care instead of TA or if you are receiving TA and ask that your TA case be closed, and:

- your income and resources are within TA limits;
- you are working the number of hours required by TA;
- you need child care for a child under age 13 so you can work;
- you are using an eligible child care provider; and
- you receive court-ordered child support, are actively pursuing support through the Child Support Enforcement Unit, are trying to get court-ordered support through other means, or have received a good cause exception from actively seeking support.

What if I am worried that if I go after child support my partner may harm me or my child?

You should discuss your situation with your worker. Your worker will determine whether you should receive a good cause exception from actively pursuing child support. You may be asked to provide hospital or police reports or statements from family, friends or neighbors who are aware of your situation.

If I had a Domestic Violence (DV) Waiver while I was receiving Temporary Assistance doesn’t that demonstrate good cause not to pursue support?

If you can show your worker a DV Waiver dated within the last 12 months, the DV waiver demonstrates good cause. If your DV waiver is older than 12 months, you should discuss your situation with your worker so he or she can determine if you have good cause not to pursue support.

Does my eligibility for this new child care guarantee have a time limit like the 60 month time limit for TA?

No, your child care benefits are not limited to 60 months. You can continue to receive child care benefits for as long as you are eligible.
Why don’t I have a child care guarantee while I am on TA?

Actually, you do. TA recipients who are participating as required in work activities also have a child care guarantee as long as you meet certain requirements. However, this new guarantee allows you to receive the same guarantee of child care without having to remain on TA. Your eligibility for the child care guarantee is not time-limited and the guarantee will continue as long as you remain eligible. If you decide you need TA in the future, you may still apply for it.

If I decide all I really need is child care how do I apply for the new child care guarantee?

If you are eligible for TA and decide that all you really need is child care, your worker can tell you how to apply for the new child care guarantee. If you are already receiving TA and are otherwise eligible for the program, you will need to close your TA case in order to get this new guarantee.

Will all of my child care be paid?

If you chose to receive child care assistance instead of receiving TA and child care, you will have to pay part of your child care costs. This is called your family share or fee. The amount that you pay will be $1 per week. Additionally, if your provider charges more than the market rate, you will need to pay the amount that your child care provider charges above the market rate. Ask your worker to tell you how much you will have to pay in a family share or fee.

Who can care for my child?

You can choose from many different eligible child care providers including licensed or registered day care centers, family or group family day care homes or school-age child care programs. You can also choose a relative, neighbor or friend. If you want a relative, neighbor or friend to care for your child, he or she will need to enroll with the Department of Social Services. Ask your worker for the enrollment forms.

What if I change my mind and decide that I need TA as well as child care?

You can still apply for TA at any time. If you are found eligible for TA, you may still be eligible for child care.

What about other benefits like Food Stamps and Medical Assistance?

Your Food Stamp eligibility will not be affected if you request to change your application for TA to a request for child care assistance only or if you request to close your TA case to get child care assistance only.

If you have applied for Medicaid at the same time you applied for TA and/or Food Stamps, and you choose to receive child care only, your application will be referred to the Medicaid program for a separate determination. If you are currently receiving TA and request your case closed, you can request that your Medicaid be continued. If your case is closed for increased earnings, your case will be referred to the Medicaid unit for a separate determination.
Attachment B: Request for Child Care Assistance or Request to Close My Temporary Assistance Case

I understand that the Department of Social Services (DSS) has determined that I am eligible for a child care subsidy guarantee “in lieu of TA” because:

- I work the number of hours required of me; and
- My family’s income and resources are within TA limits; and
- I do everything required of me to obtain child support for my child(ren) or have a good cause exception not to actively seek child support; and
- I need child care for a child or children under age 13; and
- I am using an eligible child care provider

I understand that I may use a licensed or registered child care provider. If I want to use a friend, relative or neighbor to provide child care instead of a licensed or registered child care provider, the DSS must determine if that person is eligible to receive child care payments from the DSS and the person must enroll with the DSS before he or she can be paid.

I understand that my child care provider determines how much he or she will charge.

I understand that I will be required to pay some of my child care costs. This amount will be $1 per week. If my provider charges more than the market rate, I understand that I will have to pay the amount above the market rate plus my family share. If I hire a child care provider to come to my home, I understand that as that person's employer, I must pay him or her minimum wage and benefits.

I understand that I must immediately report any changes that might affect my eligibility for child care to my caseworker. This includes any changes regarding where I am living, who is living in my household, my work schedule, my employer, my child care needs, my child care provider and my income and resources.

I understand that by withdrawing my request for TA, or asking that my TA case be closed, that I will not receive TA at this time. However, if I change my mind, I may apply for TA in the future.

I understand that the 60-month time limit for TA does not apply to this child care guarantee.

I understand that I may be eligible for 12 months of transitional child care services when my income is no longer within TA limits.

I understand that withdrawing my request for TA, or asking that my TA case be closed, will not affect my application for or eligibility for Food Stamps or Medicaid.

I understand that if I have any questions about my eligibility for this child care guarantee, I can call _________________________________.

(insert district name and phone number above)
Attachment B

☐ I want to apply for child care assistance instead of both TA and child care assistance. I understand that if I change my mind in the future, I can still apply for TA at that time. If I also applied for Medicaid, I want my eligibility for Medicaid to be determined. I understand that if I do not already receive Food Stamps, my Food Stamp eligibility will be determined.

☐ I request that my TA case be closed because I want child care instead of TA. If I am receiving Medicaid, I want my Medicaid to continue.

☐ I request that my TA and Medicaid cases be closed. I want child care assistance only.

☐ I request that my Food Stamp case be closed. I want child care assistance only.

☐ I do not want child care instead of TA

__________________________________________________  ____________________________
Applicant’s Signature  Date
Attachment C-Request for Amendment to Consolidated Services Plan (CSP)/Integrated County Plan (ICP)

County: _____________________________ Date: __________________

I am requesting the following amendment to the county’s CSP/ICP to allow payment to parents/caretakers who are:

☐ Satisfactorily participating in a two-year college program and working at least 17 ½ hours per week.

☐ Satisfactorily participating in a four-year college or university program (leading to a bachelor degree and that is reasonably expected to lead to an improvement in the parent/caretaker’s earning capacity), and working at least 17 ½ hours per week.

List any additional conditions that apply to eligibility including but not limited to specific types of colleges, specific course of study, and definitions of “satisfactorily participating”:

The above eligibility will be available from:

☐ NYS Child Care Block Grant

☐ Title XX

On what date do you want this change in eligibility to be effective? ________________

On what dates was a Public Notice published in your local newspaper? ________________
(You must attach a copy of the Public Notice, public comments and your responses to public comments)

Commissioner’s or Authorized Representative’s Signature

Date
Attachment D-Applicant Certification of Information in TA Case Record

I have read the attached information from my case record and by signing this form, I swear that the information is up-to-date and true.

I understand that my eligibility for the transitional child care guarantee is based on the information in my case record and any additional information I have given to my caseworker.

I agree to immediately report any changes that might affect my eligibility. This includes changes to where I am living, who is living in my household, my work schedule, my employer, my child care provider, my child care needs, and my family's income.

I understand that if I provide false information, withhold information or provide misleading information that affects my eligibility, I will be required to pay back any benefits for which I was not eligible and I may also be subject to criminal penalties.

I understand that if I have any questions about this form or any form attached to it that I should call _________________________________.

______________________________________________
Applicant’s Signature                                     Date
NOTICE OF INTENT TO DISCONTINUE CHILD CARE BENEFITS

NAME AND ADDRESS OF AGENCY/CENTER OR DISTRICT OFFICE

CASE NUMBER  CIN NUMBER

CASE NAME (And C/O Name if Present) AND ADDRESS

GENERAL TELEPHONE NO. FOR QUESTIONS OR HELP

OR Agency Conference
Fair Hearing information and assistance
Record Access
Legal Assistance information

OFFICE NO.  UNIT NO.  WORKER NO.  UNIT OR WORKER NAME  TELEPHONE NO.

This notice is to inform you that your case will be closed effective ______________ .

This agency intends to stop your payment of Child Care benefits effective ____________ .

The reason for this action is:
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________

The LAW(S) AND/OR REGULATION(S) that allows us to do this is:
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________

YOU HAVE THE RIGHT TO APPEAL THIS DECISION.
BE SURE TO READ THE BACK OF THIS NOTICE ON HOW TO APPEAL THIS DECISION

CLIENT/FAIR HEARINGS COPY
RIGHT TO A CONFERENCE: You may have a conference to review these actions. If you want a conference, you should ask for one as soon as possible. At the conference, if we discover that we made a wrong decision or if, because of information you provide, we determine to change our decision, we will take corrective action and give you a new notice. You may ask for a conference by calling us at the number on the front of this notice. This number is used only for asking for a conference. It is not the way you request a fair hearing. If you ask for a conference you are still entitled to a fair hearing. If you want to have your benefits continue unchanged (aid continuing) until you get a fair hearing decision, you must request a fair hearing in the way described below. A request for a conference alone will not result in continuation of benefits. Requesting an agency conference does not affect your right to also request a fair hearing. Read below for fair hearing information.

RIGHT TO A FAIR HEARING: If you believe that the above action is wrong, you may request a State fair hearing by:

Telephoning: (PLEASE HAVE THIS NOTICE WITH YOU WHEN YOU CALL) 1 800-342-3334

Writing: Complete the information, sign and mail to the New York State Office of Administrative Hearings, Office of Temporary and Disability Assistance, P.O. Box 1930, Albany, New York 12201. Please keep a copy for yourself.

Faxing: Complete the information, sign and fax to 518-473-6735.

Emailing: By signing on to the following website and following the instructions: http://www.otda.state.ny.us/oah/forms.asp

Walk In Locations: 14 Boerum Place, Brooklyn, NY OR 330 West 34th Street, Third Floor, Manhattan, NY

☐ I want a fair hearing. The Agency’s action is wrong because:

________________________________________________________________________________________

Signature of Client: _____________________________________________________________Date: ________________

YOU HAVE 60 DAYS FROM THE DATE OF THIS NOTICE TO REQUEST A FAIR HEARING

If you request a fair hearing, the State will send you a notice informing you of the time and place of the hearing. You have the right to be represented by legal counsel, a relative, a friend or other person, or to represent yourself. At the hearing you, your attorney or other representative will have the opportunity to present written and oral evidence to demonstrate why the action should not be taken, as well as an opportunity to question any persons who appear at the hearing. Also, you have a right to bring witnesses to speak in your favor. You should bring to the hearing any documents such as this notice, paystubs, receipts, child care bills, medical verification, letters, etc. that may be helpful in presenting your case.

☐ I understand I may be eligible for aid continuing. My benefits have been reduced and I wish to have my benefits restored (aid continuing): If you request a fair hearing within ten (10) days of the date of the postmark of the mailing of this notice, your child care will be reinstated and will be unchanged until the fair hearing decision is issued. However, if you lose the fair hearing, you will owe any child care that you should not have received. We are required to recover any child care overpayments. We must make a claim against you for any child care you receive that you were not entitled to, which may be collected by reduction of future child care allotments, lump sum installment payments, or through legal action. If you want to avoid this possibility you can check the box below. You can also indicate over the telephone or in a letter that you do not want reinstatement of your child care.

☐ I do not want my benefits continued unchanged until the hearing decision is issued.

LEGAL ASSISTANCE: If you need free legal assistance, you may be able to obtain such assistance by contacting your local Legal Aid Society or other legal advocate group. You may locate the nearest Legal Aid Society or advocate group by checking your Yellow Pages under “Lawyers” or by calling the number indicated on the first page of this notice.

ACCESS TO YOUR FILE AND COPIES OF DOCUMENTS: To help you get ready for the hearing, you have a right to look at your case file. If you call or write to us, we will provide you with free copies of the documents from your file which we will give to the hearing officer at the fair hearing. To ask for documents or to find out how to look at your file, call us at the Record Access telephone number listed at the top of page 1 of this notice or write us at the address printed at the top of page 1 of this notice. Also, if you call or write to us, we will provide you with free copies of other documents from your file which you may need to prepare for your fair hearing. If you want copies of documents from your case file, you should ask for them ahead of time. They will be provided to you within a reasonable time before the date of the hearing. Documents will be mailed to you only if you specifically ask that they be mailed.

INFORMATION: If you want more information about your case, how to ask for a fair hearing, how to see your file, or how to get additional copies of documents, call us at the telephone numbers listed at the top of page 1 of this notice or write to us at the address printed at the top of page 1 of this notice.
This notice is to inform you that this agency intends to change your Child Care benefits. The changes are explained below.

Payment will be provided on behalf of the following:

<table>
<thead>
<tr>
<th>Child(ren):</th>
<th>For this Provider:</th>
<th>Change from $ to $:*</th>
<th>Effective:</th>
<th>Full Time or Part Time</th>
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*Payment may vary based on fluctuations in your approved activity and/or absences.*

You are responsible for a family share which must be paid to _____________________________ in the amount of $____________ per week effective ________________.

The reason for this action is:

____________________________________________________________________________________________________________________________

____________________________________________________________________________________________________________________________

____________________________________________________________________________________________________________________________

____________________________________________________________________________________________________________________________

The LAW(S) AND/OR REGULATION(S) that allows us to do this is: ____________________________________________________________________________

YOU HAVE THE RIGHT TO APPEAL THIS DECISION.
BE SURE TO READ THE BACK OF THIS NOTICE ON HOW TO APPEAL THIS DECISION
CLIENT/FAIR HEARINGS COPY
RIGHT TO A CONFERENCE: You may have a conference to review these actions. If you want a conference, you should ask for one as soon as possible. At the conference, if we discover that we made a wrong decision or if, because of information you provide, we determine to change our decision, we will take corrective action and give you a new notice. You may ask for a conference by calling us at the number on the front of this notice. This number is used only for asking for a conference. It is not the way you request a fair hearing. If you ask for a conference you are still entitled to a fair hearing. If you want to have your benefits continue unchanged (aid continuing) until you get a fair hearing decision, you must request a fair hearing in the way described below. A request for a conference alone will not result in continuation of benefits. Requesting an agency conference does not affect your right to also request a fair hearing. Read below for fair hearing information.

RIGHT TO A FAIR HEARING: If you believe that the above action is wrong, you may request a State fair hearing by:

Telephoning: (PLEASE HAVE THIS NOTICE WITH YOU WHEN YOU CALL) 1 800-342-3334
Writing: Complete the information, sign and mail to the New York State Office of Administrative Hearings, Office of Temporary and Disability Assistance, P.O. Box 1930, Albany, New York 12201. Please keep a copy for yourself.
Faxing: Complete the information, sign and fax to 518-473-6735.
Emailing: By signing on to the following website and following the instructions: http://www.otda.state.ny.us/oah/forms.asp
Walk In Locations: 14 Boerum Place, Brooklyn, NY OR 330 West 34th Street, Third Floor, Manhattan, NY

☐ I want a fair hearing. The Agency’s action is wrong because:

__________________________________________________________________________________________________

__________________________________________________________________________________________________

Signature of Client: ____________________________________________ Date: __________________

YOU HAVE 60 DAYS FROM THE DATE OF THIS NOTICE TO REQUEST A FAIR HEARING

If you request a fair hearing, the State will send you a notice informing you of the time and place of the hearing. You have the right to be represented by legal counsel, a relative, a friend or other person, or to represent yourself. At the hearing you, your attorney or other representative will have the opportunity to present written and oral evidence to demonstrate why the action should not be taken, as well as an opportunity to question any persons who appear at the hearing. Also, you have a right to bring witnesses to speak in your favor. You should bring to the hearing any documents such as this notice, paystubs, receipts, child care bills, medical verification, letters, etc. that may be helpful in presenting your case.

☐ I understand I may be eligible for aid continuing. My benefits have been reduced and I wish to have my benefits restored (aid continuing): If you request a fair hearing within ten (10) days of the date of the postmark of the mailing of this notice, your child care will be reinstated and will be unchanged until the fair hearing decision is issued. However, if you lose the fair hearing, you will owe any child care that you should not have received. We are required to recover any child care overpayments. We must make a claim against you for any child care you receive that you were not entitled to, which may be collected by reduction of future child care allotments, lump sum installment payments, or through legal action. If you want to avoid this possibility you can check the box below. You can also indicate over the telephone or in a letter that you do not want reinstatement of your child care.

☐ I do not want my benefits continued unchanged until the hearing decision is issued.

LEGAL ASSISTANCE: If you need free legal assistance, you may be able to obtain such assistance by contacting your local Legal Aid Society or other legal advocate group. You may locate the nearest Legal Aid Society or advocate group by checking your Yellow Pages under “Lawyers” or by calling the number indicated on the first page of this notice.

ACCESS TO YOUR FILE AND COPIES OF DOCUMENTS: To help you get ready for the hearing, you have a right to look at your case file. If you call or write to us, we will provide you with free copies of the documents from your file which we will give to the hearing officer at the fair hearing. To ask for documents or to find out how to look at your file, call us at the Record Access telephone number listed at the top of page 1 of this notice or write us at the address printed at the top of page 1 of this notice. Also, if you call or write to us, we will provide you with free copies of other documents from your file which you may need to prepare for your fair hearing. If you want copies of documents from your case file, you should ask for them ahead of time. They will be provided to you within a reasonable time before the date of the hearing. Documents will be mailed to you only if you specifically ask that they be mailed.

INFORMATION: If you want more information about your case, how to ask for a fair hearing, how to see your file, or how to get additional copies of documents, call us at the telephone numbers listed at the top of page 1 of this notice or write to us at the address printed at the top of page 1 of this notice.
Dear Parent:

If you are working, you may be able to get help paying for your child care. Read the rest of this letter to learn how!

WHAT IS TRANSITIONAL CHILD CARE?

The Transitional Child Care guarantee provides money to help working families pay for their child care costs. This child care assistance helps families to afford child care for their children while they work. Families may be eligible to receive Transitional Child Care Assistance for up to 12 months after they become ineligible for Temporary Assistance (TA).

WHO CAN GET TRANSITIONAL CHILD CARE?

- Working families who were receiving Temporary Assistance (TA), but became ineligible when their income increased.

- Working families who were receiving guaranteed child care instead of TA can receive Transitional Child Care once their income makes them ineligible for TA.

Other requirements are:
- your family’s income cannot exceed certain limits;
- you must have been on TA for three out of the last six months, or have received child care assistance instead of TA for three out of the last six months;
- your child must be under the age of 13 and need day care so you can go to work; and
- you receive court-ordered child support, are actively pursuing support through the Child Support Enforcement Program, are trying to get court-ordered support through other means, or have been determined to have good cause not to actively seek child support.

HOW DO YOU GET TRANSITIONAL CHILD CARE?

Your caseworker should determine your eligibility for Transitional Child Care before your TA or guaranteed child care case is closed. The caseworker cannot ask or require you to complete a new application. However, they may need some additional information from you in order to find out if you are eligible. Ask your caseworker if you are eligible for Transitional Child Care.

HOW MUCH WILL IT COST?

Each family pays a portion of the child care cost each month. The amount you pay depends on the size of your family and your income. If your provider charges above market rate you will also have to pay the difference between what your provider charges and market rate.
WHO CAN CARE FOR YOUR CHILD?

You have the right to choose any child care that is legal. This includes:

- licensed or registered day care centers;
- licensed group family day care;
- registered family day care homes;
- registered school-age child care programs;
- friends, neighbors and relatives, who are enrolled with the local Department Of Social Services;
- caregivers of legally exempt group child care such as summer day camps that are enrolled with the local Department of Social Services.

Your local Department Of Social Services or your Child Care Resource and Referral agency can help you find child care.

WHAT ARE YOUR RESPONSIBILITIES UNDER TRANSITIONAL CHILD CARE?

In order to continue to receive benefits you must:

- pay your family share on time;
- notify your caseworker immediately of any changes that might affect your eligibility for child care. Some of these changes include: where you are living, who is living in your household, your work schedule, your employer, your child care needs, your child care provider and your family’s income;
- complete and return to your caseworker any information he or she needs to determine your continued eligibility;
- actively pursue child support, unless you have been determined to have good cause not to actively pursue support; and
- continue to use a legal child care provider.

WHEN WILL YOU STOP RECEIVING TRANSITIONAL CHILD CARE?

Your Transitional Child Care will be stopped:

- if you are not fulfilling your responsibilities listed above, or:
- at the end of the twelve-month eligibility period; or
- if you quit your job without good cause; or
- when child care is no longer needed to allow you to work; or
- if your income exceeds the maximum allowed for your family size; or
- when your child reaches the age of 13. However, if your child has special needs or is under court supervision, your worker can tell you if there may be other child care programs that can help you.
The purpose of 02-OCFS-INF-01, *Former Family Assistance Families Eligible for Transitional Child Care Guarantee*, is to advise social services districts of the potential eligibility of former Family Assistance (FA) recipients for the Transitional Child Care (TCC) guarantee. Some FA families have already or will soon reach their State 60-month time limit of cash assistance.
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# Informational Letter

<table>
<thead>
<tr>
<th>Transmittal:</th>
<th>02 OCFS INF-01</th>
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<tbody>
<tr>
<td>To:</td>
<td>Local District Commissioners</td>
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<tr>
<td>Issuing Division/Office:</td>
<td>Office of Children and Family Services-Division of Development and Prevention Services Office of Temporary and Disability Assistance</td>
</tr>
<tr>
<td>Date:</td>
<td>March 5, 2002</td>
</tr>
<tr>
<td>Subject:</td>
<td>Former Family Assistance Families Eligible for Transitional Child Care Guarantee</td>
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<tr>
<td>Suggested Distribution:</td>
<td>Services Directors Income Maintenance Directors Child Care Unit Supervisors Food Stamp Directors Medical Assistance Directors</td>
</tr>
<tr>
<td>Contact Person(s):</td>
<td>Transitional Child Care Issues: Anne Ball (518)474-3775 Temporary Assistance Issues: TA Central Team 1(800)343-8859 ext 4-9344</td>
</tr>
<tr>
<td>Attachments:</td>
<td>A: Client Letter Regarding Potential Eligibility for the Transitional Child Care Guarantee</td>
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## Filing References

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## I. Purpose

The purpose of this release is to advise social services districts of the potential eligibility of former Family Assistance (FA) recipients for the Transitional Child Care (TCC) guarantee. Some FA families have already or will soon reach their State 60-month time limit of cash assistance.

FA recipients who are working, whose cases are closing due to the State 60-month time limit, and who do not apply for Safety Net Assistance (SNA) prior to case closing, may be eligible for TCC. Families that have not applied for SNA prior to the closing of their FA case are deemed to have voluntarily ended their FA and are therefore potentially eligible for TCC.
Families that apply for SNA after their FA case was closed due to the State 60-month time limit have a 45-day application period before they are eligible to receive recurring SNA benefits. During this 45-day application period, these families may need child care services. The district must determine the eligibility of the family for TCC. If the family does not meet the criteria, the district must consider eligibility for other categories of eligible families under the New York State Child Care Block Grant (NYSCCBG).

II. Background

The purpose of the TCC guarantee is to provide eligible families with a 12-month guarantee of child care to allow them a smoother transition from Temporary Assistance (TA)\(^1\) to self-sufficiency. This guarantee has been in place since 1990. In recent years, the TCC guarantee was extended to families whose TA cases closed due to increases in child support income and to those who voluntarily closed their TA cases.

III. Program Implications

Former TA families, who meet the following criteria are deemed to be eligible for the TCC guarantee. The family:

1. needs child care for an eligible child under thirteen years of age in order to enable a parent or caretaker relative to engage in work; \textbf{and}

2. has income of no more than 200 percent of the State income standard; \textbf{and}

3. has been in receipt of TA (including the Child Assistance Program-CAP) in three of the six months prior to the TA case being closed, \textbf{and}

4. had their TA terminated as a result of:
   
   a. increased hours of, or income from, employment. (Former CAP recipients who are ineligible for Safety Net Assistance due to the income limits are deemed to meet this criteria at the time their State 60-month limit for TA expires regardless of whether or not their income increases at that time); or
   
   b. increased income from child support; or
   
   c. the family voluntarily ended temporary assistance. \textbf{Former FA recipients who do not apply for SNA benefits prior to the FA case closing due to the State 60-month time limit are deemed to have voluntarily ended their temporary assistance.}

Social services districts must review all TA cases prior to case closing to determine whether the family meets the above eligibility criteria for the TCC guarantee. TA case information may be used to determine eligibility. All low income child care \textbf{applications} received on or after December 1, 2001 must be reviewed to determine if the case would be eligible as a transitional child care case under the

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\(^1\) The term “public assistance” has been replaced by the term “temporary assistance”. Temporary Assistance encompasses both Family Assistance and Safety Net Assistance.
new criteria in 4 c, above. All low income child care open cases with an effective date of December 1, 2001 or later must be reviewed to determine if the family is eligible for TCC. If a child care application was denied (between December 1 and the date of issuance of this release) due to lack of funds in the district, it must also be reviewed to determine if it meets this new criteria. If it does, the case must be opened and a determination made regarding the applicant’s eligibility for retroactive payments.

Some families whose FA case has closed may apply for SNA after the FA case closing. The application for SNA should be used to determine eligibility for TCC as well. These families are eligible for TCC only during the time period beginning when their FA case closed and ending with the SNA case opening. Once the SNA case opens, the families are eligible for guaranteed child care assistance if such assistance is needed in order to participate in work activities as required by the social services district.

If the family does not apply for SNA, but has a continuing need for child care, every effort should be made to use information available from the FA case record to determine eligibility for TCC rather than requiring a new application. Effective June 17, 2002, an amendment to the Social Services Law will take effect which will prohibit districts from requiring a new application for TCC. Districts do not have to wait for this new law to take effect and are encouraged to begin the process now to establish procedures to eliminate the need for a separate application for TCC.

A services authorization is required to open the child care case under the TCC guarantee. Districts have the option to authorize child care on the DSS 3209 for Medical Assistance-only and Food Stamp-only cases. All other requirements under the NYSCCBG, such as enrollment of legally-exempt providers, must be met prior to making payment. If a family receiving TCC applies and begins receiving SNA benefits, their child care must either be opened and authorized on the SNA case using screen 9 or, for those districts authorizing TA cases on the services system, the case must be re-coded using an “S” suffix.

A model client letter informing FA recipients about the potential eligibility for child care, is attached. Use of this letter is optional. Districts may add information to give families district-specific information. Please note that the client letter does not replace the client notice required in 01 OCFS LCM-8, revised Client Notification Forms for Child Care Subsidies.

The effective date for this release is December 1, 2001.

/s/ Patricia A. Stevens

/s/ Larry G. Brown

Issued By:
Patricia A. Stevens
Deputy Commissioner
Office of Temporary & Disability Assistance
Division of Temporary Assistance

Issued By:
Larry G. Brown
Deputy Commissioner
Office of Children and Family Services
Division of Development & Prevention Services
Client Letter Regarding Potential Eligibility for Transitional Child Care

Dear:

Even though your Family Assistance (FA) case is closing because you have reached your State 60-month time limit, you may still be eligible for help in paying for child care. You may be eligible for child care benefits whether or not you decide to apply for Safety Net Assistance. Your child care benefits **will not** automatically continue. In order to find out if you are eligible for child care assistance, you will need to do the following.

Tell your FA worker that you need help in paying for child care. Your worker can tell you what information will be needed to determine if you will be eligible for child care.

Ask your worker what you need to do in order to receive help with your child care. In some counties, you may need to fill out a new application. Your worker can tell you where to apply. In other counties, you may not need to complete a new application but you will need to provide information in order for your child care to continue.

If you do **not** apply for child care, any child care benefits that you receive as an FA recipient **will end** when your FA case closes.

If you need help paying for child care after your FA case closes, make sure you contact your worker right away for information on how to continue your child care benefits.
14-ADM-04

Employment and Resource Exemption Changes Authorized by Chapter 58 of the Laws of 2014

The purpose of this Administrative Directive (ADM) is to inform districts of changes to the sections 131-n, 335-a, 336, and 336-a of SSL as authorized by Chapter 58 of the Laws of 2014 and to provide information to assist districts to identify adjustments in local procedures that may be necessary to implement these changes. Changes include amendments to expand temporary assistance work activities to include up to four years of post-secondary education (or its part time equivalent).
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Section 1

Transmittal: 14-ADM-04
To: Local District Commissioners
Issuing Division/Office: Center for Employment and Economic Supports
Date: August 25, 2014
Subject: Employment and Resource Exemption Changes authorized by Chapter 58 of the Laws of 2014
Suggested Distribution: Employment Coordinators, Temporary Assistance Directors, Supplemental Nutrition Assistance Program Directors, Staff Development Coordinators
Contact Person(s): OTDA Employment Services Advisor or Employment and Advancement Services Bureau at (518) 486-6106
Attachments: Attachment Available On – Line:

Filing References

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<td>352.23(b) (4) 385.6 385.7 385.9</td>
<td>131-n 335-a 336 336-a</td>
<td>Temporary Assistance Source Book and SNAP Employment Policy Manual-Section 385.6 Section 385.7 Section 385.9</td>
<td>Chapter 58 of Laws of 2014</td>
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</table>

Section 2

I. Summary

This ADM is to inform social services districts (districts) of the following changes resulting from amendments to Social Services Law (SSL) made by Chapter 58 of the Laws of 2014:
• Section 335-a was amended to require that when a district is developing an employment plan for a temporary assistance recipient residing in a household without dependent children to consider the individual’s preferences to the extent possible and to the extent also consistent with the individual’s assessment and the district’s need to meet federal and State work participation requirements. If the individual’s preferences cannot be accommodated, the district must specify the reason in the individual’s employment plan. This provision is consistent with current employment plan requirements for households with children.

• Section 336-a was amended to expand temporary assistance work activities to include up to four years of post-secondary education (or its part time equivalent). Any enrollment in post-secondary education beyond a twelve month (lifetime) period must be combined with no less than twenty hours of participation averaged weekly in paid employment, other core work activities or community service when paid employment is not available. Section 336 was also amended to include participation in up to four years of post-secondary education in the definitions of vocational education and job skills training to the extent such activities are consistent with federal and State requirements.

• Section 131-n was amended to expand the existing resource exemption of up to $1,400 for funds in a separate bank account established by a recipient of temporary assistance for the purpose of paying tuition, to include tuition at an accredited four year post-secondary educational institution.

II. Purpose

The purpose of this Administrative Directive (ADM) is to inform districts of changes to the sections 131-n, 335-a, 336, and 336-a of SSL as authorized by Chapter 58 of the Laws of 2014 and to provide information to assist districts to identify adjustments in local procedures that may be necessary to implement these changes.

III. Background

Districts are required to complete an employment assessment within designated timeframes and to develop an employment plan consistent with 18 NYCRR §385.6 for individuals in receipt of temporary assistance residing in households with dependent children; and, consistent with 18 NYCRR §385.7 for non-exempt temporary assistance recipients residing in households without dependent children. Districts have also been required when developing an employment plan for a temporary assistance recipient who is a member of a household with dependent children to consider an individual’s preferences, to the extent possible and also consistent with the individual’s assessment and the district’s need to meet federal and State work participation requirements and if the district is unable to accommodate such preferences to record the reason in the employment plan. The recent change to Section 335-a of the SSL establishes the same employment plan requirements for an individual in a household without dependent children.

Districts continue to be able to enroll non-exempt individuals in work activities prior to completing an assessment within the required timeframes. In all instances, the activities to which an individual is assigned must be those that the individual is capable of participating in, contribute to the individual’s efforts to obtain employment or enhance current employment efforts, and are limited to no more than 40 hours per week. Work activities may include paid employment or participation in work preparation activities such as work experience, job search,
job readiness, vocational education, jobs skills training and education activities directly related to employment. Educational activities had previously been limited to participating in no more than two-year post-secondary programs. Chapter 58 of the Laws of 2014 amends the definition of educational activities to include participation in up to four years of post-secondary education. Participation in up to four years of post-secondary education may be reported as vocational education for a maximum of 12 months in the individual's lifetime or as jobs skills training. Districts are reminded that to count toward federal work participation requirements as job skills training, the education program must directly relate to a specific occupation or job. Participation in job skills training will count toward the participation rate only if the individual also participates in a core work activity (including but not limited to: unsubsidized employment, work experience, or community service) for at least 20 hours averaged per week during the month. Post-secondary education/training activities must be provided by a community college, licensed trade school, registered business school or a two-year or four-year college.

Hours of participation must continue to meet the definition of the particular work activity as reported and must be reported separately for each work activity.

Districts also continue to retain the authority to approve an individual’s participation in homework/study time which is required by an educational activity as reportable toward the individual’s weekly work participation requirements. The total number of hours of supervised and unsupervised homework/study time may not exceed the documented number of hours of study time expected by the education program. Additionally, the hours of unsupervised homework/study time required by an educational program is limited to no more than one hour for each hour of class time. Districts should refer to 08-ADM-07 for households with dependent children and 07-ADM-08 for households without dependent children for additional information pertaining to documenting and reporting hours of engagement, including homework/study time.

Districts have been able to exclude, as an available resource for purposes of determining a household’s eligibility for ongoing temporary assistance, a separate account that an individual has established while receiving temporary assistance to pay tuition at a two-year accredited post-secondary institution, provided the funds are not used for any other purpose. This provision has been modified to include four year accredited post-secondary educational institutions.

IV. Program Implications

Employment Plan Requirements

The change to Section 335-a of the SSL requires districts to consider the preferences of the participant to the extent possible and consistent with the individual’s assessment and the need of the district to meet federal and State work participation requirements when developing an employment plan for an individual in a household without dependent children. If the individual’s preferences cannot be accommodated, the district must specify the reason(s) in the individual’s employment plan. Consideration of an individual’s preferences when making work activity assignments is expected to improve program attendance and employment outcomes.

Educational Activities for Temporary assistance and/or SNAP Applicants and Recipients

Social Services Law has been amended to permit up to four years of post-secondary education as a public assistance work activity. Districts are encouraged to accommodate individuals’ efforts to attain post-secondary education as an avenue to employment and higher wages. Districts that elect to approve enrollments in four-year college programs as a work activity will
need to submit an amendment to their 2014-15 biennial Temporary Assistance and Supplemental Nutrition Assistance Program (SNAP) Employment Plan (Plan). The Plan amendment must describe the district’s procedures for determining whether or not an individual is approved/assigned to participate in jobs skills training or vocational educational activities including up to four years of post-secondary education, consistent with the guidance outlined in this ADM. As part of the local plan modification, OTDA will also modify the definition of vocational education and jobs skills training to include participation in up to four years of post-secondary education.

District approval policies for enrollment in educational programs may consider factors such as, but not limited to, the individual’s ability to successfully complete the program (based on academic testing); the extent to which the individual is able to secure employment without the additional education or training; and the extent to which the education or training will prepare the individual for jobs in an occupation with favorable job opening projections. Consistent with social services law post-secondary education must be necessary to the attainment of the participant’s employment goal as set forth in the individual’s employment plan and such goal must relate directly to obtaining useful employment in a recognized occupation.

Social Services Law requires that districts’ continued approval of enrollments in an educational activity must ensure that the participant maintain satisfactory progress (having a cumulative “C” average, or its equivalent), as determined by the academic institution. Maintaining satisfactory progress for educational activities that do not use a grade system, such as adult basic education or English as a Second Language may be based on the training provider’s determination that the individual is making progress as demonstrated by testing level progression. The requirement to maintain satisfactory progress in an educational activity may be waived if it is determined by the institution and the district that the client’s inability to maintain satisfactory progress is due to hardship caused by the death of a relative, personal injury or illness, or other extenuating circumstances. Districts may, but are not required to, consider an educational institution’s current enrollment of a student as an indication that the institution has determined the individual to meet satisfactory progress standards. A district may also require a student to document his or her attendance and academic performance and may disapprove or discontinue approval of the work assignment if the student fails to provide documentation of attendance and/or performance without good cause.

When making an assignment to an educational activity as a work activity, districts should determine the appropriateness of such assignment based on the individual’s employment assessment, the district’s need to comply with federal and State work participation rate requirements and other factors taken into consideration when developing the individual’s employment plan. Districts should continue to determine when, and to what extent, homework/study time is approved as part of an educational activity based on district policy, federal limits on the reporting of homework/study time, the individual’s circumstances and the district’s need to meet federal and State participant rate requirements. Districts are encouraged to consider some hours of homework, consistent with federal and State requirements, as satisfying a work activity assignment in an effort to promote academic progress.

The district’s procedure for approving educational activities must also ensure that any enrollment in post-secondary education beyond a twelve month (lifetime) period is only approved when it is combined with a minimum of 20 hours averaged weekly of participation in paid employment or other core work activities, such as work experience or a community service assignment. The twelve month period is based on the twelve months in an individual’s lifetime that may be reported as vocational education. Beyond the 12 month lifetime limit, an individual
must be concurrently employed or participating in another core work activity for an average of 20 hours per week during the month for the enrollment in post-secondary education to be approved by the district. Districts are encouraged to help individuals obtain employment in their field of study to support both academic and employment outcomes.

Participation in educational activities that prepare individuals for employment consistent with the guidelines in this directive that require up to four years of post-secondary education may be assigned and approved by the district and reported as an allowable SNAP work activity. A student who is assigned by the social services district to participate in educational or training at an institution of higher education at least on a half-time basis would be exempt from assignment to other SNAP work activities. A student enrolled at least half-time in an institution of higher education must meet the student eligibility criteria in 18 NYCRR §387.1.

Temporary Assistance and SNAP applicants and recipients enrolled in work activities assigned by and approved by the district must be provided support services such as transportation and child care necessary to enable the individual to participate in the assigned activity. The requirement to provide necessary support services also applies to individuals approved by the district to attend a four-year post-secondary education program as a public assistance and/or SNAP work activity.

Post-Secondary Education Related Temporary Assistance (TA) Resource Exemption

SSL Section 131-n was amended to expand the existing resource exemption of up to $1,400 for funds in a separate bank account established by a recipient of TA for the purpose of paying tuition at a two year accredited post-secondary education institution, to include tuition at an accredited four year post-secondary educational institution.

The exemption only applies to TA recipients. It does not apply to applicants, including former recipients, with previously established accounts who subsequently reapply for TA.

Districts must monitor the balance of this account(s) at least at recertification, to ensure the funds are not used for any other reason than paying tuition. Once it has been determined the funds have been used for purposes other than paying tuition, the full amount of the funds in the account prior to the withdrawal become countable towards the TA resource limit.

If a two or four year college tuition account is established with lump sum income, and the funds are used for any reason other than paying tuition the full amount of the funds in the account prior to the withdrawal become countable towards the TA resource limit and the prior lump sum ineligibility period is reinstated. Any resulting overpayment is calculated back to the effective date of the initial lump sum.

If a two or four year college tuition account is established by any means other than lump sum income, and the funds are used for any reason other than paying tuition the full amount of the funds in the account prior to the withdrawal become countable towards the TA resource limit. Any resulting overpayment is calculated back to the first of the month in which the funds were inappropriately withdrawn.

Documentation of these accounts must be obtained by the district directly from the financial institution and maintained in the TA case record.
V. Required Action

Employment Plan Requirements

Districts must modify local procedures to ensure that all employment plans completed for temporary assistance recipients take the individual’s preferences into consideration to the extent possible and to the extent consistent with the individual’s assessment and the need of the district to meet federal and State work participation requirements. If such preferences cannot be accommodated, the district must specify the reason in the individual’s employment plan. Districts must ensure that employment assessments and employment plans continue to be completed consistent with 18 NYCRR §385.6 for temporary assistance recipients residing in households with dependent children and 18 NYCRR §385.7 for nonexempt temporary assistance recipients residing in households without dependent children.

Employment Plan Amendments to include Enrollments in Up to Four Years of Post-Secondary Education

Districts that elect to approve enrollments in four-year college programs must submit to OTDA an amendment to the district’s 2014-2015 Temporary Assistance and SNAP Employment Plan (Section 3.6) which describes the district’s procedure for implementing the change to the post-secondary education provision. 2014-15 plan amendments should be submitted to the district’s Employment Services Advisor with a copy via e-mail to BarbaraC.Guinn@otda.ny.gov or by mail to:

Barbara C. Guinn
Director
Employment and Advancement Services
40 North Pearl Street, 11th Floor
Albany, New York 12243

All districts must implement procedures no later than October 1, 2014 to require that any assignment to post-secondary education beyond a twelve-month period be combined with no less than twenty hours of participation averaged weekly in paid employment or other core work activities or community service when paid employment is not available and that local procedures ensure that individuals assigned to educational activities are making satisfactory progress consistent with the guidance provided in this ADM. Districts should refer to 08-ADM-07 for households with dependent children and 07-ADM-08 for households without dependent children for a list of core work activities. Districts must also continue to ensure that reported hours of participation are consistent with federal and State requirements, including, but not limited to confirming that the work activity meets the definition of the work activity to be reported and that the hours of participation are reported separately for each respective work activity.

Change in Resource Exclusion Related to Post-Secondary Education

Districts must modify local worker instructions pertaining to resource exclusions to include tuition accounts for four-year accredited post-secondary educational institutions. Districts must exclude an amount of up to $1,400 in a separate bank account established by an individual while receiving temporary assistance for the purpose of paying tuition to at a two-year or four-
year accredited post-secondary educational institution, provided the funds are not used for any other purpose. This resource exemption standard is effective March 31, 2014.

VI. Systems Implications

Language in the Client Notice System (CNS) will be modified consistent with the statutory change to SSL Section 131-n.

VII. Effective Date

The changes in policy outlined in this directive regarding employment plan requirements for individuals in households without dependent children, the authority for districts to approve up to four years of post-secondary education, and the changes to the resource exclusion for bank accounts established to cover the costs of post-secondary education to include four-year institutions are effective March 31, 2014. Districts that elect to approve enrollments in post-secondary education to include four-year institutions must submit to OTDA an amendment to the local Employment Plan to reflect this policy.

Issued By
Name: Phyllis Morris
Title: Deputy Commissioner
Division/Office: Center for Employment and Economic Supports
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Memorandum

Repeal of Child Support Requirement for Child Care Assistance

The purpose of the OCFS local district commissioner’s memorandum dated July 30, 2009 is to advise social services districts that Social Service Law has been amended to repeal the requirement that the child’s caretaker must demonstrate that he or she is actively pursuing child support.
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MEMORANDUM

TO: Local District Commissioners

FROM: Janice M. Molnar, Deputy Commissioner
Division of Child Care Services

DATE: July 30, 2009

SUBJECT: Repeal of Child Support Requirement for Child Care Assistance

The purpose of this memo is to inform districts of an amendment to Social Service Law, Section 410-w. The amendment repeals the requirement that a child’s caretaker, in a situation in which there is a non-custodial parent, must demonstrate that he or she is actively pursuing child support, or show good cause why he or she should be exempted from this requirement, in order for the family to be eligible for a child care subsidy.

The amendment to Section 410-w of the Social Service Law was signed into law on July 24, 2009 and became effective immediately.

Social services districts can no longer require applicants and recipients to pursue child support as a condition of eligibility for child care subsidies. Social services districts should continue to work with child care providers and families to promote the benefits of child support.

The Office of Children and Family Services will be issuing a Local Commissioners Memorandum, which will provide the districts with additional information.
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The purpose of this Informational Letter (INF) is to transmit to the local departments of social services (LDSSs) the 2018 income standards to be used in determining eligibility for services.
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Informational Letter

<table>
<thead>
<tr>
<th>Transmittal:</th>
<th>18-OCFS-INF-01</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>To:</strong></td>
<td>Commissioners of Social Services</td>
</tr>
<tr>
<td><strong>Issuing Division/Office:</strong></td>
<td>Strategic Planning and Policy Development</td>
</tr>
<tr>
<td><strong>Date:</strong></td>
<td>February 12, 2018</td>
</tr>
<tr>
<td><strong>Subject:</strong></td>
<td>2018 Income Standards for the Child and Family Services Plan</td>
</tr>
<tr>
<td><strong>Suggested Distribution:</strong></td>
<td>Directors of Social Services, Adoption Supervisors/Staff, Foster Care Supervisors/Staff, Day Care Subsidy Supervisors, Planning Coordinators, Accounting Supervisors, WMS Coordinators</td>
</tr>
<tr>
<td><strong>Contact Person(s):</strong></td>
<td>Any questions concerning this release should be directed to the appropriate Division of Child Welfare and Community Services regional office:</td>
</tr>
<tr>
<td><strong>Buffalo Regional Office</strong></td>
<td>Amanda Darling (716) 847-3145 <a href="mailto:Amanda.Darling@ocfs.ny.gov">Amanda.Darling@ocfs.ny.gov</a></td>
</tr>
<tr>
<td><strong>Rochester Regional Office</strong></td>
<td>Karen Lewter (585) 238-8201 <a href="mailto:Karen.Lewter@ocfs.ny.gov">Karen.Lewter@ocfs.ny.gov</a></td>
</tr>
<tr>
<td><strong>Syracuse Regional Office</strong></td>
<td>Sara Simon (315) 423-1200 <a href="mailto:Sara.Simon@ocfs.ny.gov">Sara.Simon@ocfs.ny.gov</a></td>
</tr>
<tr>
<td><strong>Albany Regional Office</strong></td>
<td>John Lockwood (518) 486-7078 <a href="mailto:John.Lockwood@ocfs.ny.gov">John.Lockwood@ocfs.ny.gov</a></td>
</tr>
<tr>
<td><strong>Spring Valley Regional Office</strong></td>
<td>Yolanda Désarmé (845) 708-2498 <a href="mailto:Yolanda.Desarme@ocfs.ny.gov">Yolanda.Desarme@ocfs.ny.gov</a></td>
</tr>
<tr>
<td><strong>New York City Regional Office</strong></td>
<td>Ronni Fuchs (212) 383-1788 <a href="mailto:Ronni.Fuchs@ocfs.ny.gov">Ronni.Fuchs@ocfs.ny.gov</a></td>
</tr>
<tr>
<td><strong>Native American Services</strong></td>
<td>Heather LaForme (716) 847-3123 <a href="mailto:Heather.LaForme@ocfs.ny.gov">Heather.LaForme@ocfs.ny.gov</a></td>
</tr>
<tr>
<td><strong>Attachments:</strong></td>
<td>None</td>
</tr>
<tr>
<td><strong>Previous ADMs/INFs</strong></td>
<td>17-OCFS-INF-02</td>
</tr>
<tr>
<td><strong>Releases Cancelled</strong></td>
<td>18 NYCRR 404.5(b)</td>
</tr>
<tr>
<td><strong>NYS Regs.</strong></td>
<td>42 U.S.C. § 9902(2); 83 Fed. Reg. 2642 (Jan. 18, 2018)</td>
</tr>
</tbody>
</table>
I. Purpose

The purpose of this Informational Letter (INF) is to transmit to the local departments of social services (LDSSs) the 2018 income standards to be used in determining eligibility for services.

II. Background

State income standards are established using poverty guidelines that are updated periodically in the Federal Register [83 Fed. Reg. 2642] by the U.S. Department of Health and Human Services under authority of 42 U.S.C. § 9902(2). LDSS eligibility levels are recorded in Appendix F of the LDSS Child and Family Services Plan. This information is used to update each LDSS’s Welfare Management System services matrix.

III. Program Implications

The following are the income standards to be used, effective June 1, 2018, to determine eligibility for services between June 1, 2018, and May 31, 2019.

<table>
<thead>
<tr>
<th>Family Size</th>
<th>Income Standards</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$12,140</td>
</tr>
<tr>
<td>2</td>
<td>16,460</td>
</tr>
<tr>
<td>3</td>
<td>20,780</td>
</tr>
<tr>
<td>4</td>
<td>25,100</td>
</tr>
<tr>
<td>5</td>
<td>29,420</td>
</tr>
<tr>
<td>6</td>
<td>33,740</td>
</tr>
<tr>
<td>7</td>
<td>38,060</td>
</tr>
<tr>
<td>8</td>
<td>42,380</td>
</tr>
</tbody>
</table>

For families/households with more than eight persons, add $4,320 for each additional person.

When determining eligibility for a service, apply the appropriate percentage for that service to the above income standards. For example, if a family of three is applying for a service that an LDSS provides at 200 percent income level, multiply the income standard for a family of three by 200 percent ($20,780 x 2.00 = $41,560), to determine the income eligibility for that size family for that service.

/s/ Thomas R. Brooks

Issued By:
Name: Thomas R. Brooks
Title: Deputy Commissioner
Division/Office: Strategic Planning and Policy Development
18-OCFS-LCM-02

State Minimum Wage Increase and Its Effect Upon Child Care Assistance

The purpose of this Local Commissioners Memorandum (LCM) is to inform local social services districts (districts) that the increase in the state minimum wage, effective December 31, 2017, may affect a family’s eligibility for child care assistance.
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Local Commissioner Memorandum

I. Purpose

The purpose of this Local Commissioners Memorandum (LCM) is to inform local social services districts (districts) that the increase in the state minimum wage, effective December 31, 2017, may affect a family’s eligibility for child care assistance.

II. Background

Districts were informed of increases to the minimum wage on December 21, 2017, in an INF issued by the New York State Office of Temporary and Disability Assistance (OTDA), 17-INF-15: State Minimum Wage Increase and Its Effect on Temporary Assistance and Supplemental Nutrition Assistance Programs.

New York Labor Law § 652 authorizes increases to the New York State minimum wage. The latest increase, which went into effect on December 31, 2017, varies by region, and by size of employer for individuals who work in New York City. The law requires that employers in New York State pay all employees in the state, outside New York City and Nassau, Suffolk, and Westchester counties, at least $10.40 per hour as of December 31, 2017. Minimum wage requirements are also specifically applicable to those employed in the following areas, pursuant to the New York Labor regulations cited below:
• Building Service Industry (except janitors in residential buildings) – 12 NYCRR Sub-Part 141-1
• Miscellaneous Industries and Occupations - 12 NYCRR Sub-Part 142-1
• Hospitality Industry – 12 NYCRR Sub-Part 146-1
• Farm Workers (If cash paid to all employees on farm during preceding calendar year aggregated $3,000 or more) – 12 NYCRR Sub-Part 190-1

The state minimum wage rates are scheduled to increase annually on December 31st until they reach $15.00 per hour. The scheduled increases vary by region and size of employer as shown in the chart below, which is also available on the Department of Labor’s website. There are also different minimum hourly rates for workers in the fast food industry and food service workers who receive tips. Further information can be found at: https://www.labor.ny.gov/workerprotection/laborstandards/workprot/minwage.shtm

<table>
<thead>
<tr>
<th>General Minimum Wage Rate Schedule for New York State 2017-2018</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Location</strong></td>
</tr>
<tr>
<td>New York City - Large Employers (11 employees or more)</td>
</tr>
<tr>
<td>New York City - Small Employers (10 employees or less)</td>
</tr>
<tr>
<td>Nassau, Suffolk and Westchester Counties</td>
</tr>
<tr>
<td>Remainder of New York State</td>
</tr>
</tbody>
</table>

Additional information on the minimum wage rate schedule can be obtained by calling 1-888-4-NYSDOL (1-888-469-7365) or logging onto https://www.labor.ny.gov.

**III. Program Implications**

For some families receiving child care assistance, the increase in the state minimum wage will result in additional income and affect the number of hours an individual is required to work. 17-INF-15, issued by OTDA, covers the effects of the state minimum wage increase on families receiving temporary assistance. Therefore, this LCM does not address how the state minimum wage increase affects child care assistance for families receiving temporary assistance. This LCM addresses how the minimum wage increase affects child care assistance for low income families and families receiving child care in lieu of temporary assistance.

Title 18, section 415.3(b) of the Codes, Rules and Regulations of New York State requires that applicants for child care assistance notify the district immediately of any changes in family income and composition, child care arrangements, and any other circumstances related to the family’s eligibility for child care services. When informed of a family’s increase in income, the district must re-determine the family’s eligibility and adjust benefits as necessary.

The increase in the state’s minimum wage also affects the required minimum gross earnings of families that are in receipt of child care in lieu of temporary assistance. The chart below provides the minimum gross earnings and minimum number of work hours for single and two-parent households.
Examples follow of minimum gross earnings based on four different New York State minimum wages for different types of families applying for child care subsidy. The single-parent family example is calculated based on 17.5 hours per week. The two-parent family example is calculated based on 25 hours per week.

<table>
<thead>
<tr>
<th>Location/ Minimum Wage</th>
<th>New York City 11 Employees or more</th>
<th>New York City 10 Employees or less</th>
<th>Nassau, Suffolk and Westchester Counties</th>
<th>Remainder of New York State</th>
<th>Minimum Work Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Minimum Wage $13.00/hour</td>
<td>Minimum Wage $12.00/hour</td>
<td>Minimum Wage $11.00/hour</td>
<td>Minimum Wage $10.40/hour</td>
<td></td>
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<tr>
<td>Single-parent family</td>
<td></td>
<td></td>
<td>N/A</td>
<td>N/A</td>
<td>17.5 hours per week</td>
</tr>
<tr>
<td>earning minimum wage or more per hour or self-employed</td>
<td>$227.50/week or $986.00 per month</td>
<td>$210.00/week or $910.00 per month</td>
<td>$192.50/week or $834.00 per month</td>
<td>$182.00/week or $788.50 per month</td>
<td></td>
</tr>
<tr>
<td>Two-parent family</td>
<td></td>
<td></td>
<td>N/A</td>
<td>N/A</td>
<td>25 hours per week combined</td>
</tr>
<tr>
<td>when both parents are employed earning minimum wage or more per hour, or are self-employed</td>
<td>$325.00/week or $1408.00 per month combined</td>
<td>$300.00/week or $1300.00 per month combined</td>
<td>$275.00/week or $1191.50 per month combined</td>
<td>$260.00/week or $1126.50 per month combined</td>
<td></td>
</tr>
<tr>
<td>Single-parent</td>
<td></td>
<td></td>
<td>N/A</td>
<td>N/A</td>
<td></td>
</tr>
<tr>
<td>in a job exempt from minimum wage rules and paying less than minimum wage per hour</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td></td>
</tr>
<tr>
<td>Two-parent family</td>
<td></td>
<td></td>
<td>N/A</td>
<td>N/A</td>
<td></td>
</tr>
<tr>
<td>where both parents are employed in a job exempt from minimum wage rules and paying less than minimum wage</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td></td>
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<tr>
<td>Two-parent family</td>
<td></td>
<td></td>
<td>N/A</td>
<td>N/A</td>
<td></td>
</tr>
<tr>
<td>where one parent is employed earning minimum wage or more per hour, or is self-employed and earns at least the equivalent of the minimum wage per hour; and the other parent is in a job exempt from minimum wage rules that pays less than minimum wage per hour</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td></td>
</tr>
</tbody>
</table>

Use the following procedure to manually calculate minimum gross earnings: Per week: wage x hours worked. Per month: wage x hours worked x 4.333. Rounding: .01 to .24 round down to 0, .25 to .50 round up to .50, .51 to .74 round down to .50, .75-.99 round up to the next .00.
The examples provided are not intended to be exhaustive, but to represent the point at which the threshold is met. In cases where the number of hours is met or exceeded but the wages are exempt from the minimum wage, or in which the earnings are equal to that of the required number of hours at minimum wage, the household would remain eligible. In addition, parent/caretaker relative(s) earning more than minimum wage may be employed for less than 17.5 or 25 hours, provided that their income is equal to or greater than the above amounts. Self-employed parent/caretaker relative(s) must meet the above gross earned income minimums (see 95 OTDA INF-33 for self-employment budgeting). For parent/caretaker relative(s) in jobs that are exempt from minimum wage rules, the parent/caretaker relative(s) must meet the minimum work hours.

For more information regarding the eligibility requirements please refer to 04-OCFS-ADM-01, *Child Care in Lieu of Temporary Assistance*, 05-OCFS-ADM-03, *Child Care Subsidy Program*, and 17-OCFS-INF-07, *Clarification on the Financial Eligibility Requirements for Transitional Child Care*.

**IV. Required Actions**

As a result of the increase in the state minimum wage, districts must review and adjust benefits as necessary for all low income and child care in lieu of temporary assistance child care assistance cases. Districts must also review and adjust families receiving child care in lieu of temporary assistance to make sure that the families are meeting the new minimum gross earnings requirement and minimum number of work hours. Local districts must send the appropriate notices to those individuals who do not meet these requirements. For more information about the appropriate notices please refer to 16-OCFS-LCM-03, *30-Day Client Notification for Child Care Subsidy and Revised Client Notices*.

/s/ Janice M. Molnar

Issued By:
Name: Janice M. Molnar, Ph.D.
Deputy Commissioner
Division of Child Care Services
14-OCFS-LCM-12

Excludable Income for Financial Eligibility for Child Care Subsidy

The purpose of this Local Commissioners Memorandum is to advise social services districts (districts) about an amendment to Social Services Law (SSL) 410-w regarding the treatment of earned income of a child under the age of 18 when determining the eligibility of a household for a child care subsidy.
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I. Purpose

The purpose of this Local Commissioners Memorandum is to advise social services districts (districts) about an amendment to Social Services Law (SSL) 410-w regarding the treatment of earned income of a child under the age of 18 when determining the eligibility of a household for a child care subsidy.

II. Background

18 New York Codes Rules and Regulations (NYCRR) § 404.5 (b)(6)(xiii) requires that social services districts exclude earnings of a child under 14 years of age, in determining financial eligibility for child care services. This regulation was not consistent with budgeting for public assistance programs, which disregards all of the
earned income of a child under the age of 18. Therefore, SSL 410-w was amended to add a new paragraph to SSL 410-w, disregarding earned income of a dependent child under the age 18. With this change in statute 18 NYCRR § 404.5(b)(6)(xiii) will be revised in accordance with this statute.

III. Program Implications – Effective July 1, 2014

The amendment to SSL 410-w has added a new paragraph requiring the earned income of a dependent child under the age of 18, who is not legally responsible for the child or children for whom child care assistance is sought, to be disregarded when determining eligibility of a household for a child care subsidy.

Effective July 1, 2014, when determining financial eligibility of a new application for a child care subsidy, the earned income of a dependent child under the age of 18 who is not legally responsible for the child or children for whom child care assistance is sought must be disregarded.

Effective July 1, 2014, when re-determining financial eligibility for existing cases, the earned income of a dependent child under the age of 18 who is not legally responsible for the child or children for whom child care assistance is sought, must be disregarded at case recertification or when the next case action occurs.

IV. System Implications

No change required.

V. Notice Requirements

If a district determines that there is a change in benefits when excluding income of dependent children under the age of eighteen, the district must provide written notification of the change to the family by using OCFS-LDSS-4781 Notice of Intent to Change Child Care Benefits and Family Share Payments or an approved local equivalent.

s/s Janice M. Molnar, Ph.D.

Issued By:
Janice M. Molnar, Ph.D.
Deputy Commissioner
Division of Child Care Services
01-OCFS-INF-08
Former Child Assistance Program (CAP) Families Eligible for Transitional Child Care Guarantee or/and Transitional Medicaid/CAP MA Guarantee

The purpose of 01-OCFS-INF-8, Former Child Assistance Program (CAP) Families Eligible for Transitional Child Care Guarantee or/and Transitional Medicaid/CAP MA Guarantee is to provide guidelines for the provision of guaranteed child care services for the former CAP families who have reached five-year cash time limits and are found to be income ineligible for Safety Net Assistance non-cash benefits.
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I. Purpose

The purpose of this release is to advise social services districts of the potential eligibility of former CAP families for the Transitional Child Care (TCC) guarantee and to remind districts of CAP Transitional Medicaid (TMA)/Guarantee provisions. Some CAP families will reach their five-year limit of cash assistance effective December 1, 2001. Many of these families have
income that exceeds the eligibility limits for the Safety Net Assistance program. Districts should review CAP cases at case closing to determine their potential eligibility for the TCC guarantee. Those families which otherwise meet the eligibility for the transitional guarantee, as described in the Program Implications section of this release, should be authorized for child care services as a TCC case.

II. Background

The purpose of the TCC guarantee is to provide eligible families with a 12-month guarantee of child care to allow them a smoother transition from temporary assistance to self-sufficiency. This guarantee has been in place since 1990. In more recent years, the transitional guarantee was extended to families whose temporary assistance cases closed due to increases in child support income and to those who voluntarily closed their temporary assistance cases.

The TCC guarantee has been important in assisting families in the first year after their temporary assistance has ended. A child care guarantee for this first year after the temporary assistance case is closed is particularly critical in districts that are exceeding their child care allocation. In those districts, families whose temporary assistance cases have closed but who do not fall under the transitional guarantee could find themselves on a waiting list for child care subsidies. Since these families tend to be at the lower end of the income scale, their ability to pay the full cost of child care on their own is jeopardized. When a family is unable to pay for child care, child care arrangements often become destabilized. This in turn can lead to absences from the work place which can put the parents at risk of losing their jobs.

Family Assistance (including CAP) recipients whose cases are closed due to the five-year cash time limit, may be eligible for the Safety Net Assistance program. If eligible for the Safety Net Assistance program, families who need child care in order to work or participate in a work activity continue to have a child care guarantee. However, CAP families whose CAP case is closing due to the five-year cash time limit, may have earned income that makes them financially ineligible for the Safety Net Assistance program. The increased income disregards afforded to CAP families were intended to support the families’ efforts to obtain child support and increase their earning capacity as they moved toward self-sufficiency. In order to provide the same guarantee afforded to other families as they leave Temporary Assistance, we are including former CAP families (who otherwise meet the eligibility requirements) as eligible for the TCC guarantee.

III. Program Implications

CAP families, who meet the following eligibility criteria, are deemed to be eligible for the TCC guarantee. The family:

1. needs child care for an eligible child under thirteen years of age in order to enable a parent or caretaker relative to engage in work; and

2. has income of no more than 200 percent of the State income standard; and
3. has been in receipt of temporary assistance (including CAP) in three of the six months prior to the CAP case being closed, **and**

4. had their temporary assistance terminated as a result of:

   a. increased hours of, or income from, employment. (Former CAP recipients who are ineligible for Safety Net Assistance due to the income limits are deemed to meet this criteria at the time their five-year limit for Temporary Assistance expires regardless of whether or not their income increases at that time); or

   b. increased income from child support; or

   c. the family voluntarily ended assistance.

Social services districts must review all CAP cases prior to case closing to determine whether the family meets the above eligibility criteria for the TCC guarantee. CAP case information may be used to determine eligibility. A services authorization is required to open the child care case under the transitional guarantee. Districts have the option to authorize child care on the DSS 3209 for Medical Assistance only and Food Stamp Only cases. All other requirements under the New York State Child Care Block Grant, such as enrollment of legally-exempt providers, must be met prior to making payment.

A model client letter informing CAP recipients about potential eligibility for child care, is attached. Use of this letter is optional. Districts may add information to the letter to give families district-specific information on how and where to apply. **Please note that the client letter does not replace the client notice required in 01 OCFS LCM-8, Revised Client Notification Forms for Child Care Subsidies.**

**Medicaid Implications**

Health care coverage is important to families transferring from Temporary Assistance to self-sufficiency. Families who are ineligible for Medicaid as Low Income Families due to earned income receive Transitional Medicaid (TMA), if otherwise eligible. (See 90 ADM-30 for additional information on TMA.) Current and former CAP participants who complete the TMA extension and who are ineligible for Medicaid solely due to earned income are guaranteed Medicaid for up to 12 additional months. Medicaid may not be provided under this provision for any period that is more than 12 months after CAP participation ends. Any CAP or former CAP parents who are not eligible for Medicaid under TMA or the CAP/Medicaid guarantee may be eligible for health care coverage under Family Health Plus. Any individual not eligible under the guarantee provisions must be referred to Medicaid for an eligibility determination.

See GIS 99 MA/17 for further guidelines concerning the CAP Medicaid Guarantee Continuation.
Issued By:
Patricia A. Stevens
Deputy Commissioner
Office of Temporary & Disability Assistance
Division of Temporary Assistance

Issued By:
Larry G. Brown
Deputy Commissioner
Office of Children and Family Services
Division of Development & Prevention Services
Attachment A

Client Letter Regarding Potential Eligibility for Transitional Child Care

Dear :

Even though your CAP case is closing you may still be eligible for help in paying for child care. Your child care benefits will not automatically continue. In order to find out if you are eligible for child care assistance, you will need to do the following.

Tell your CAP worker that you need help in paying for child care. Your worker can tell you what information will be needed to determine if you will be eligible for child care.

Ask your worker what you need to do in order to receive help with your child care. In some counties, you may need to fill out a new application. Your worker can tell you where to apply. In other counties, you may not need to complete a new application but you will need to provide information in order for your child care to continue.

If you do not apply for child care, any child care benefits that you receive as a CAP recipient will end when your CAP case closes.

If you need help paying for child care after your CAP case closes, make sure you contact your worker right away for information on how to apply.
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Commissioner Letter

Sixty Day Notice Regarding Child Care Assistance

The purpose of this Commissioner Letter is to inform Social Services Districts of the new provisions outlined in SSL §34-a, which took effect January 1, 2015, regarding the amount of notice a district must provide to the Office of Children and Family Services (OCFS) when the district plans to lower eligibility levels or increase its co-payment multiplier, with regard to child care assistance.
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January 28, 2015

Dear Commissioner:

On December 17, 2014, Governor Andrew M. Cuomo signed into law a new subdivision to Section 34-a of the Social Services Law, which took effect January 1, 2015, regarding the amount of notice a district must provide to the Office of Children and Family Services (OCFS) when the district plans to lower eligibility levels or increase its co-payment multiplier, with regard to child care assistance.

Social Services Law §34-a(9) requires that districts provide at least 60-day notice to OCFS if (1) a district proposes to amend its consolidated services plan, submits an annual plan update or takes any other action that would lower the financial eligibility level for child care assistance, so that families receiving subsidies would lose eligibility (this includes if a district implements its process for closing child cases set forth in its approved Child and Family Services Plan), or (2) a district proposes to amend its consolidated services plan or submit an annual plan update that increases the parental co-payment multiplier for child care assistance such that families receiving subsidies would pay an increased percentage of their income as a co-payment.

While OCFS encourages districts to notify families as soon as possible of a decision that will impact eligibility, the district must notify all affected families at least 10-days before the date upon which the proposed action is to become effective, as well as meet the notice requirements contained in 14-OCFS-LCM-01.

If you have any questions regarding the above information, please contact Rhonda Duffney at (518) 474-9454 or Rhonda.Duffney@ocfs.ny.gov. Thank you.

Sincerely,

Janice M. Molnar, Ph.D.
Deputy Commissioner
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The purpose of this Local Commissioners Memorandum (LCM) is to establish a formal policy regarding the calculation of countable income for families in receipt of Kinship Guardianship Assistance Program (KinGAP) payments and to notify social services districts of this policy.

In an effort to support relative guardians, as well as to support the broader efforts of permanency for children, social services districts are directed to exclude KinGAP payments when calculating family gross income and eligibility for the child care subsidy program.
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Local Commissioners Memorandum

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<td>Division of Child Care Services</td>
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<tr>
<td>Date:</td>
<td>March 2, 2012</td>
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<tr>
<td>Subject:</td>
<td>Kinship Guardianship Assistance Program Payments - Excludable Income for Child Care Subsidy Program Eligibility</td>
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<tr>
<td>Contact Person(s):</td>
<td>Homero Martinez (518) 408-3269 <a href="mailto:Homero.Martinez@ocfs.state.ny.us">Homero.Martinez@ocfs.state.ny.us</a></td>
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I. Purpose

The purpose of this Local Commissioners Memorandum (LCM) is to establish a formal policy regarding the calculation of countable income for families in receipt of Kinship Guardianship Assistance Program (KinGAP) payments and to notify social services districts of this policy.

In an effort to support relative guardians, as well as to support the broader efforts of permanency for children, social services districts are directed to exclude KinGAP payments when calculating family gross income and eligibility for the child care subsidy program.
II. Background

KinGAP is a program in New York State designed to provide monthly payments and other benefits to qualified relative guardians of children who have been discharged from foster care. KinGAP was signed into Law with Part F of Chapter 58 of the Laws of 2010 and went into effect April 1, 2011. Further information on KinGAP can be found in 18 NYCRR Part 436 and 11-OCFS-ADM-03, Kinship Guardianship Assistance Program (KinGAP).

Department regulations 18 NYCRR section 404.5(b)(5) and (6) list countable and excludable family gross income sources. Because the regulations do not address KinGAP payments in calculating family monthly gross income, the Office of Children and Family Services (OCFS) has decided to put forth this policy.

Similarly, in 2007, OCFS issued LCM 07-OCFS-LCM-05 that established the policy that both adoption subsidies and foster care payments are excludable income for child care subsidy program eligibility. This LCM adds KinGAP payments to the list of excludable income for the purposes of child care subsidy determinations.

III. Program Implications

Effective no later than April 2, 2012, for all new child care subsidy applications, districts must exclude KinGAP payments from the determination of financial eligibility for the child care subsidy program and the calculation of the family share. For existing child care cases, this change will be effective no later than at the next case action or case recertification after April 2, 2012.

Given the previous absence of a formal policy, to the extent that this represents a change in local policy, social services districts’ determinations will be considered appropriate up to the effective date of this LCM. Districts are not expected to review previous case denials that were based on the inclusion of KinGAP payments as part of family gross income.

Any questions regarding the information included in this LCM should be directed to Children and Family Services Specialist Homero Martinez, Division of Child Care Services, at (518) 408-3269 or e-mail at: Homero.Martinez@ocfs.state.ny.us.

/s/ Janice M. Molnar, PhD

Issued By:
Janice M. Molnar, PhD
Deputy Commissioner
Division of Child Care Services
07-OCFS-LCM-05
Adoption and Foster Care Subsidies: Excludable Income for Child Care Subsidy Program Eligibility

The purpose of 07-OCFS-LCM-05, Adoption and Foster Care Subsidies: Excludable Income for Child Care Subsidy Program Eligibility, is to establish a formal policy regarding the calculation of countable income for families in receipt of adoption and foster care subsidies and to notify social services districts of this policy.
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Local Commissioners Memorandum

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<td>Development and Prevention Services</td>
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<tr>
<td>Date:</td>
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<tr>
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<tr>
<td>Contact Person(s):</td>
<td><a href="mailto:Anne.Ball@ocfs.state.ny.us">Anne.Ball@ocfs.state.ny.us</a></td>
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I. Purpose

The purpose of this Local Commissioners Memorandum (LCM) is to establish a formal policy regarding the calculation of countable income for families in receipt of adoption and foster care subsidies and to notify social services districts of this policy.

In an effort to both support adoption and promote the broader efforts of permanency for children, social services districts are directed to exclude adoption subsidies when calculating family gross income and eligibility for the child care subsidy program. Similarly, in order to promote the recruitment and retention of foster care parents, foster care subsidies are also considered excludable family gross income when calculating income for the child care subsidy program.
II. Background

Department regulations at 18 NYCRR section 404.5(b)(5) and (6) list countable and excludable family gross income sources. Because the regulations do not address adoption and foster care subsidies in calculating family monthly gross income, the Office of Children and Family Services has decided to put forth this policy.

III. Program Implications

Effective no later than April 30, 2007, for all new cases, districts must exclude the amount of adoption and foster care subsidies from the determination of financial eligibility for the child care subsidy program and the calculation of the family share. For existing child care cases, this change will be effective no later than at the next case action or case recertification after April 30, 2007.

Given the previous absence of a formal policy, to the extent that this represents a change in local policy, districts’ determinations will be considered appropriate up to the effective date of this LCM. Districts are not expected to review previous case denials that were based on the inclusion of either or both adoption and foster care subsidies as part of family gross income.

Any questions regarding the information included in this LCM should be directed to Children and Family Services Specialist Anne Ball, Bureau of Early Childhood Services at (518) 474-3775 or Anne.Ball@ocfs.state.ny.us.

/s/ Jane G. Lynch

________________________________________
Jane G. Lynch
Deputy Commissioner
Division of Development and Prevention Services
The purpose of this Local Commissioners Memorandum (LCM) is to inform social services districts (SSDs) of recent revisions to the “Common Application” and relevant documents.
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# Local Commissioners Memorandum

## Section 1

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<td>To:</td>
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<td>Issuing Division/Office:</td>
<td>Strategic Operations, OTDA Executive Office</td>
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<td>Date:</td>
<td>June 27, 2016</td>
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<tr>
<td>Subject:</td>
<td>Revisions to the LDSS-2921, PUB-1301, LDSS-3174, PUB-1313, LDSS-4148A-C, LDSS-4826, LDSS-4826A, LDSS-4942, and LDSS-2291</td>
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<tr>
<td>Contact Person(s):</td>
<td>OTDA Strategic Operations: (518) 408-5962</td>
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### Attachments:

- **Attachment 1 - LDSS-2921**: “New York State Application for Certain Benefits and Services”
- **Attachment 2 - PUB-1301**: “Instructions for Completing the New York State Application for Certain Benefits and Services”
- **Attachment 3 - LDSS-3174**: “New York State Recertification Form for Certain Benefits and Services”
- **Attachment 4 - PUB-1313**: “Instructions for Completing the New York State Recertification Form for Certain Benefits and Services”
- **Attachment 5 - LDSS-4148A**: ”Book 1: What You Should Know About Your Rights and Responsibilities”
- **Attachment 6 - LDSS-4148B**: “Book 2: What You Should Know About Social Services Programs”
- **Attachment 7 - LDSS-4148C**: “Book 3: What You Should Know If You Have an Emergency”
- **Attachment 8 - LDSS-4826**: “Supplemental Nutrition Assistance Program (SNAP) Application/Recertification”
- **Attachment 9 - LDSS-4826A**: “How to Complete the Supplemental Nutrition Assistance Program (SNAP) Application/Recertification and Applicant/Recipient Rights and Responsibilities for SNAP”
- **Attachment 10 - LDSS-4942**: “SNAP Authorized Representative Request Form”
- **Attachment 11 - LDSS-2291**: “Request for Replacement of Food Purchased with Supplemental Nutrition Assistance Program (SNAP) Benefits”

### Attachment Available Online: [ ]
Section 2

I. Purpose

The purpose of this Local Commissioners Memorandum (LCM) is to inform social services districts (SSDs) of recent revisions to the following documents:

- LDSS-2921: “New York State Application for Certain Benefits and Services” (formerly, “New York State Application for:”)
- PUB-1301: “Instructions for Completing the New York State Application for Certain Benefits and Services” (formerly, “New York State How to Complete the...Application”)
- LDSS-3174: “New York State Recertification Form for Certain Benefits and Services” (formerly, “New York State Recertification Form for:”)
- PUB-1313: “Instructions for Completing the New York State Recertification Form for Certain Benefits and Services” (formerly, “New York State How to Complete the...Recertification Form”)
- LDSS-4148A: "Book 1: What You Should Know About Your Rights and Responsibilities"
- LDSS-4148B: "Book 2: What You Should Know About Social Services Programs"
- LDSS-4148C: "Book 3: What You Should Know if You Have an Emergency"
- LDSS-4826: “Supplemental Nutrition Assistance Program (SNAP) Application/Recertification”
- LDSS-4826A: “How to Complete the Supplemental Nutrition Assistance Program (SNAP) Application/Recertification and Applicant/Recipient Rights and Responsibilities for SNAP”
- LDSS-4942: “SNAP Authorized Representative Request Form”
- LDSS-2291: “Request for Replacement of Food Purchased with Supplemental Nutrition Assistance Program (SNAP) Benefits”

This LCM is intended to convey significant changes made to the documents listed above, and to provide information to SSDs regarding the distribution and use of these revised documents.

II. Background

As a result of a court-ordered Stipulation of Settlement in Rafferty v. OTDA, DOH, HRA, et al. (Rafferty), the New York State Office of Temporary and Disability Assistance (OTDA), the NYS Department of Health (DOH), and the New York City Human Resources Administration (HRA) will provide certain written materials in alternative formats, upon request, to blind or seriously visually impaired applicants and recipients. Alternative formats include large print, audio format (an audio transcription of the document), data format (a screen reader-accessible electronic file), and Braille, if an applicant or recipient asserts that none of the previously mentioned alternative formats will be equally effective for them. Language informing applicants and recipients of the availability of alternative formats and the procedure for requesting the same has been added to the applications, instructions, and publications listed above. A directive containing additional information concerning the Rafferty Stipulation of Settlement,
alternative formats, and how to process an applicant or recipient’s request for the same is forthcoming.

In addition to the revisions discussed above, other modifications were made in response to changes in federal requirements, such as those associated with federal health care reform, as well as in response to recommendations made by SSDs. A group of 13 SSDs representing small, medium, and large districts, was consulted regarding revisions to these documents, and their feedback was incorporated into the final versions of the documents.

III. Program Implications

Major revisions to the documents are as follows:

LDSS-2921: “New York State Application for Certain Benefits and Services” and LDSS-3174: “New York State Recertification Form for Certain Benefits and Services”

- Language informing applicants and recipients of the availability of alternative formats has been added to the first page of both the LDSS-2921 and LDSS-3174. Questions have also been added to the first page of both forms that allow applicants and recipients to indicate whether they would like to receive written notices in an alternative format.
- Both forms now have perforated edges, to allow for easier separation and scanning of pages.
- The new version of the LDSS-2921 will no longer be printed with green ink. The form will be printed in grayscale.
- References to “Medical Assistance” have been replaced with “Medicaid.” References to Family Health Plus, Child Health Plus, and the Medicare Savings Plan have been removed.
- Language has been added to direct applicants for Medicaid only to use a separate form, DOH-4220: “Health Insurance Application for Children, Adults, and Families,” to apply.
- References to “Lifeline” have been removed.
- References to “Temporary Assistance” or “TA” have been replaced with the statutorily defined term of “Public Assistance” or “PA.”
- The content of the section formerly titled “Non-Custodial Parent/Child Support/Medical Support Information” has been modified. This section is now called “Information Regarding Referral to the Child Support Enforcement Unit” and can be found on page 6 of both forms.
- A “Tax Filing/Dependent Status” section has been added to these forms for Medicaid purposes. This section appears on page 7 of both forms.
- The “Income Information” section has been expanded for Medicaid purposes to include questions regarding federal tax deductions. These questions can be found on page 9 of both forms.
- The “Education/Training” section of these forms has been expanded to allow the applicant or recipient to provide more information regarding the highest level of education obtained.
• The “Notices” and the “Assignments, Authorizations, and Consents” sections have been updated, reorganized, reformatted and consolidated into one section on pages 19 through 25, titled “Notices, Assignments, Authorizations, and Consents.”

• The sections for consenting to withdraw the application and consenting to case closure have been moved to the end of each form.

PUB-1301: “Instructions for Completing the New York State Application for Certain Benefits and Services” and PUB-1313: “Instructions for Completing the New York State Recertification Form for Certain Benefits and Services”

• The PUB-1301 and PUB-1313 now contain language regarding the availability of alternative formats to blind and seriously visually impaired applicants and recipients. These publications now also contain instructions on how to request written notices in an alternative format, as well as how to request another accommodation.

• The instructions contained in these publications were modified to be more comprehensive, and to be consistent with any corresponding changes made to the LDSS-2921 and LDSS-3174.

• The new version of the PUB-1301 will no longer be printed with green ink. The publication will be printed in grayscale.

• The formats of these publications have been modified to facilitate easier reading.


• Language regarding the availability of alternative formats to blind and seriously visually impaired applicants or recipients was added to the LDSS-4148A, LDSS-4148B, and LDSS-4148C.

LDSS-4826: “Supplemental Nutrition Assistance Program (SNAP) Application/Recertification

• The LDSS-4826 now contains language regarding the availability of alternative formats to blind and seriously visually impaired applicants and recipients. This form now also contains questions that allow applicants and recipients to request written notices in an alternative format, as well as instructions on how to request another accommodation.

• Corrections were made to cross-references of page numbers.

• Updates were made to the “SNAP Penalty Warning,” “Consent,” and “Changes” sections, and to the language pertaining to the release of applicant and recipient information.
LDSS-4826A: “How to Complete the Supplemental Nutrition Assistance Program (SNAP) Application/Recertification and Applicant/Recipient Rights and Responsibilities for SNAP”

- The LDSS-4826A now contains language regarding the availability of alternative formats to blind and seriously visually impaired applicants and recipients. This document now also contains instructions on how to request an alternative format or another accommodation.
- Corrections were made to cross-references of page numbers.
- Updates were made to the “SNAP Penalty Warning” and “Consent” sections, and to the language pertaining to able-bodied adults without dependents and release of applicant and recipient information.

LDSS-4942: “SNAP Authorized Representative Request Form”

- The LDSS-4942 now contains language regarding the availability of alternative formats to blind and seriously visually impaired applicants and recipients. This form now also contains questions that allow applicants and recipients to request written notices in an alternative format, as well as instructions on how to request another accommodation.
- Updates were made to the “SNAP Penalty Warning” section.

LDSS-2291: “Request for Replacement of Food Purchased with Supplemental Nutrition Assistance Program (SNAP) Benefits”

- The LDSS-2291 now contains language regarding the availability of alternative formats to blind and seriously visually impaired recipients. This form now also contains questions that allow recipients to request written notices in an alternative format, as well as instructions on how to request another accommodation.

Please note that the alternative format documents have modified publication numbers. For example, the publication number of the Braille version of the LDSS-2921 is “LDSS-2921 BR.”

Effective July 1, 2016, all previous versions of the documents listed above must be recycled and replaced with the most current versions. SSDs may only distribute the July 2016 versions of these documents after July 1, but must accept and process any applications or recertification forms submitted by applicants or recipients using the previous versions of these forms.

Prior to July 1, 2016, SSDs will receive “drop” shipments of the most recent versions of the documents listed above in non-alternative format only. These documents have a revision date of July 2016. Both non-alternative and alternative format versions of the documents will be available for download and/or ordering at http://otda.state.nyenet/ldss_eforms/. These documents can be ordered from OTDA by submitting a completed OTDA 876EL (DOC) or OTDA 876 EL (PDF) form, available at the link above, via mail, e-mail, or fax to:
These documents can also be ordered through the OTDA Bureau of Management Services' (BMS') Electronic Forms and Publications Online System: http://formorders/. For more information on how to download or order these documents in alternative formats, please consult the forthcoming policy directive concerning the Rafferty Stipulation of Settlement.

Translations of the above listed documents into languages other than English will be available following July 1, 2016. To provide meaningful access in the interim, SSDs must not use previous versions of these documents that have been translated into languages other than English. SSDs must utilize interpreter services for applicants and recipients with limited English proficiency (LEP) who require assistance with the completion of the newest versions of these forms. For further information regarding the provision of services to LEP individuals, SSDs should refer to 06-ADM-05, “Providing Access to Temporary Assistance Programs for Persons with Disabilities and/or Limited English Proficiency (LEP).”

Any questions concerning revisions to the LDSS-2921, PUB-1301, LDSS-3174, PUB-1313, and LDSS-4148A, LDSS-4148B, or LDSS-4148C should be directed to OTDA’s Strategic Operations unit at (518) 408-5962. Questions concerning revisions to the LDSS-4826, LDSS-4826A, LDSS-4942, or LDSS-2291 should be directed to OTDA’s SNAP Bureau at (800) 343-8859. Contact OTDA’s BMS unit at (800) 343-8859, ext. 4-9522, with any questions regarding the ordering of documents described herein.

Issued By
Name: Logan N. E. Joseph
Title: Director of Strategic Operations
Division/Office: Executive Office, NYS Office of Temporary and Disability Assistance

Name: Jason A. Helgerson
Title: NYS Medicaid Director
Division/Office: Office of Health Insurance Programs, NYS Department of Health

Name: Susan A. Costello
Title: Director of Financial Management
Division/Office: Bureau of Financial Administration, NYS Office of Children and Family Services
18-OCFS-LCM-01
Application for Child Care Assistance and How to Complete the Application for Child Care Assistance Revisions

The purpose of this Local Commissioners Memorandum (LCM) is to inform local departments of social services (LDSSs) of revisions (12/2017) to the following forms:

- Application for Child Care Assistance (OCFS-6025)
- How to Complete the Application for Child Care Assistance (OCFS-6026)

This LCM is intended to convey substantive changes made to the forms listed above, and to provide information to LDSSs regarding the distribution and use of these revised forms.
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Local Commissioners Memorandum

| Transmittal: | 18-OCFS-LCM-01 |
| To:          | Local District Commissioners |
| Issuing Division/Office: | Division of Child Care Services |
| Date: | January 2, 2018 |
| Subject: | Application for Child Care Assistance and How to Complete the Application for Child Care Assistance Revisions |
| Contact Person(s): | Joe Ziegler, OCFS Division of Child Care Services (518) 402-6520 Joe.Ziegler@ocfs.ny.gov |
| Attachments: | OCFS-6025: Application for Child Care Assistance (Rev. 12/2017) OCFS-6026: How to Complete the Application for Child Care Assistance (Rev. 12/2017) |

I. Purpose

The purpose of this Local Commissioners Memorandum (LCM) is to inform local departments of social services (LDSSs) of revisions (12/2017) to the following forms:

- Application for Child Care Assistance (OCFS-6025)
- How to Complete the Application for Child Care Assistance (OCFS-6026)

This LCM is intended to convey substantive changes made to the forms listed above, and to provide information to LDSSs regarding the distribution and use of these revised forms.

II. Background

In 16-OCFS-LCM-17, the New York State Office of Children and Family Services (OCFS) informed LDSSs of the issuance of the Application for Child Care Assistance (OCFS-6025) for families applying only for child care assistance and the accompanying instructions, How to Complete the Application for Child Care Assistance (OCFS-6026), the new federal reporting requirements, and the requirement to distribute voter registration forms to families applying for or receiving child care assistance. The current LCM updates the forms Application for Child Care Assistance (OCFS-

1The term ‘applying only for child care assistance’ means that the family is applying solely for child care assistance either when funds are available, or when funds are available and the LDSS has included the category of family in its Child and Family Services Plan. Families ‘applying only for child care assistance’ are not applying for guaranteed child care, nor are they applying for any other benefits, such as Public Assistance, Supplemental Nutrition Assistance Program (Food Stamps), Home Energy Assistance, Medicaid, or other services.
6025) and How to Complete the Application for Child Care Assistance (OCFS-6026), but does not replace the LDSS requirements set forth in 16-OCFS-LCM-17. LDSSs continue to have the option of accepting one of the three documents listed below, for parents applying for child care assistance only:

- the New York State Application for Certain Benefits and Services (LDSS-2921), or
- the Application for Child Care Assistance (OCFS-6025), or
- a local equivalent to the OCFS-6025 that has been approved by OCFS.

LDSSs are reminded that they must continue to inform all applicants of their rights and responsibilities by providing:

- LDSS-4148A: What You Should Know About Your Rights and Responsibilities
- LDSS-4148B: What You Should Know About Social Services Programs
- LDSS-4148C: What You Should Know If You Have an Emergency

### III. Forms Revisions

The following substantive changes have been made to the Application for Child Care Assistance (OCFS-6025):

**General** – The revision date was changed on every page to 12/2017.

**Page 1**

- Updated the title of the form LDSS-2921 to New York State Application for Certain Benefits and Services.
- Reordered the four questions in Section 2 pertaining to children in the household, such that the first question asks if each child needs child care. The remaining questions are only answered for children in need of child care, not all children in the case.
- Revised the child citizenship question to include United States nationals and persons with satisfactory immigration status, in addition to United States citizens.

**Page 2**

- Added the words “active duty” to the question about U.S. military status in Section 3.

**Page 3**

- Added Workers’ Compensation and Safety Net benefits to Section 7.
- Changed the income source “Self-Employment” to “Net Self-Employment Income.”
- Deleted “and my family’s income does not exceed 85 percent of the state median income for a family of the same size” from Section 9 Resources.
- Added examples of resources to Section 9 Resources.

The instructions, How to Complete the Application for Child Care Assistance (OCFS-6026), have also been revised to reflect the 12/2017 revision date on every page as well as the instructions that were affected by the substantive changes in each section of the application. In addition, the following changes have been made to How to Complete the Application for Child Care Assistance (OCFS-6026):

**Page 2**

- Added a clarification that the provision of race and ethnicity information is voluntary and does not affect eligibility or benefit levels.
• Added a clarification that the citizenship or immigration status of the child’s parent or other household members will not affect eligibility or benefit levels.

Page 4
• Revised Section 9 to remove the family resources certification and examples because they are now on the application. Added the statement: “This section contains important information about your rights and responsibilities relative to receiving assistance. By signing and submitting an application, you indicate that you understand and agree to the statements in this section.”

IV. Access to the Revised Application for Child Care Assistance and Instructions

The revised English versions of the Application for Child Care Assistance (OCFS-6025) and How to Complete the Application for Child Care Assistance (OCFS-6026) are available on the OCFS intranet and internet websites at http://ocfs.state.nyenet/admin/Forms/ and http://ocfs.ny.gov/main/documents/docsChildCare.asp. These forms will be made available in Spanish, Chinese, Russian, Haitian Creole, Korean, and Italian on the OCFS intranet and internet websites.

Hard copies of the Application for Child Care Assistance (OCFS-6025) and How to Complete the Application for Child Care Assistance (OCFS-6026) in English will be available within 30 days from the release of this LCM, and the Spanish version will be available soon after.

To order hard copies of the Application for Child Care Assistance (OCFS-6025) and How to Complete the Application for Child Care Assistance (OCFS-6026), in English and Spanish, complete the Request for Forms and Publications (OCFS-4627) and mail to:

OCFS Forms and Publications Unit
52 Washington Street, Room 134 North Bldg.
Rensselaer, NY 12144-2834

OR

Call the Forms Hotline: 518-473-0971

V. Effective Date

Effective March 1, 2018, LDSSs may no longer distribute, electronically, by mail, or in person, all previous versions of the Application for Child Care Assistance (OCFS-6025) and How to Complete the Application for Child Care Assistance (OCFS-6026). Previous versions must be replaced with the 12/2017 versions by March 1, 2018. LDSSs may begin to distribute the 12/2017 versions of the forms upon the date of publication of this LCM. LDSSs must accept and process any applications or recertification forms submitted by applicants or recipients using the previous versions of these forms during the period March 1, 2018, through May 1, 2018. After May 1, 2018, previous versions of these forms cannot be accepted.

Also, effective March 1, 2018, LDSSs may no longer distribute, electronically, by mail, or in person, any previously approved local equivalents of the Application for Child Care Assistance (OCFS-6025) and How to Complete the Application for Child Care Assistance (OCFS-6026). Revised local equivalent forms must be submitted to the OCFS Division of Child Care Services...
for approval. However, LDSSs must accept a previously approved local equivalent form if submitted by an applicant through May 1, 2018. After May 1, 2018, previously approved local equivalents cannot be accepted.

/s/ Janice M. Molnar

Issued by:
Janice M. Molnar Ph.D.
Deputy Commissioner
Division of Child Care Services
NEW YORK STATE
OFFICE OF CHILDREN AND FAMILY SERVICES
APPLICATION FOR CHILD CARE ASSISTANCE

ATTENTION: This application is used to apply ONLY for Category 2 or 3 Child Care Assistance. To apply for Public Assistance or other benefits, including Category 1 Child Care Assistance, you must use the New York State Application for Certain Benefits and Services (LDSS-2921).

<table>
<thead>
<tr>
<th>CASE NAME</th>
<th>CASE #</th>
<th>REGISTRY #</th>
<th>OFFICE</th>
<th>UNIT</th>
<th>WORKER</th>
<th>APP DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>DISTRICT</td>
<td>CASE</td>
<td>TYPE: 40</td>
<td>Services Transaction Type:</td>
<td>New Open</td>
<td>Reopen</td>
<td>Recert</td>
</tr>
</tbody>
</table>

SECTION 1. APPLICANT'S INFORMATION

<table>
<thead>
<tr>
<th>FIRST NAME</th>
<th>M.I.</th>
<th>LAST NAME (Please include any ALIASES or MAIDEN names in parentheses)</th>
<th>PHONE NUMBER ( ) -</th>
</tr>
</thead>
<tbody>
<tr>
<td>STREET ADDRESS</td>
<td></td>
<td>APT NO.</td>
<td>CITY</td>
</tr>
<tr>
<td>MAILING ADDRESS (IF DIFFERENT FROM ABOVE)</td>
<td></td>
<td>APT NO.</td>
<td>CITY</td>
</tr>
<tr>
<td>FORMER ADDRESS</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

What is your marital status?  [ ] Single  [ ] Married  [ ] Divorced  [ ] Separated  [ ] Widowed

What is the primary language spoken in your home?  [ ] English  [ ] Spanish  [ ] Other (specify)

SECTION 2. LIST EVERYBODY WHO LIVES WITH YOU, EVEN IF THEY ARE NOT APPLYING WITH YOU. LIST YOURSELF ON THE FIRST LINE.

<table>
<thead>
<tr>
<th>L N</th>
<th>FIRST Name</th>
<th>M.</th>
<th>LAST Name (Please include any ALIASES or MAIDEN names in parentheses)</th>
<th>DATE OF BIRTH (MM/ DD/YY)</th>
<th>SEX/ M/F</th>
<th>RELATIONSHIP TO YOU</th>
<th>SOCIAL SECURITY NUMBER (SSN) Optional</th>
<th>Enter Y (Yes) or N (No) if Hispanic or Latino Child is U.S. Citizen/National or Has Satisfactory Immigration Status</th>
<th>Enter Y (Yes) or N (No) for each Race*</th>
<th>Does this child need child care? Y/N</th>
<th>Does child have a disability?</th>
<th>Do both parents reside in the home?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
<td>SELF</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>3</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>5</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>7</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>8</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
</tbody>
</table>

* Racial Affiliation Codes: I – Native American or Alaskan Native, A – Asian, B – Black or African American, P – Native Hawaiian or Pacific Islander, W – White

You may use the back or additional pages if you need more room or there is other information that you think we might need.
**SECTION 3. OTHER HOUSEHOLD INFORMATION**

**DO ANY OF THESE APPLY TO YOU?**

For each of the following, answer YES or NO:

<table>
<thead>
<tr>
<th>Question</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Need child care to work.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Need child care for another reason. Give reason:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Homeless (no fixed, regular, and adequate place to stay at night).</td>
<td></td>
<td></td>
</tr>
<tr>
<td>A parent is on active duty (serving full-time) in the U.S. Military.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>A parent is a member of a National Guard or Military Reserve unit.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Receiving or applying for Public Assistance through a different application.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Receiving or applying for other child care funding. Agency Name:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pregnant. Due date?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**SECTION 4. LIST EVERYONE UNDER 21 WHOSE PARENT IS NOT IN THE HOUSEHOLD.**

<table>
<thead>
<tr>
<th>NAME OF PERSON UNDER 21</th>
<th>ABSENT PARENT'S NAME AND ADDRESS</th>
<th>Absent Parent's Date of Birth (optional)</th>
<th>Absent Parent's Social Security Number (optional)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**SECTION 5. APPLICANT’S EMPLOYMENT INFORMATION**

<table>
<thead>
<tr>
<th>APPLICANT’S EMPLOYER’S NAME</th>
<th>WORK PHONE ( ) -</th>
<th>START DATE OF JOB / /</th>
</tr>
</thead>
<tbody>
<tr>
<td>EMPLOYER’S ADDRESS</td>
<td>CITY</td>
<td>STATE ZIP CODE</td>
</tr>
<tr>
<td># of HOURS PER WEEK</td>
<td>GROSS INCOME: $</td>
<td>Paid how often? Weekly Bi-Weekly Monthly Other, specify</td>
</tr>
</tbody>
</table>

Does the job have rotating or variable shifts?    YES    NO
Does the job require overtime (O/T)?    YES    NO

Scheduled Days and Hours Worked (for example, Mon-Fri 8 a.m. – 4 p.m.):

**SECTION 6. OTHER EMPLOYMENT INFORMATION. Use this section for an applicant’s second job or a spouse’s/other parent’s job.**

<table>
<thead>
<tr>
<th>Whose job information?</th>
<th>Applicant’s job</th>
<th>OR</th>
<th>Spouse’s / other parent’s job</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>WORK PHONE ( ) -</th>
<th>START DATE OF JOB / /</th>
</tr>
</thead>
<tbody>
<tr>
<td>EMPLOYER’S ADDRESS</td>
<td>CITY STATE ZIP CODE</td>
</tr>
<tr>
<td># of HOURS PER WEEK</td>
<td>GROSS INCOME: $</td>
</tr>
</tbody>
</table>

Does the job have rotating or variable shifts? YES NO
Does the job require overtime (O/T)? YES NO

Scheduled Days and Hours Worked (for example, Mon-Fri 8 a.m. – 4 p.m.):

*You may use the back or additional pages if you need more room or there is other information that you think we might need.*
### SECTION 7. INCOME INFORMATION

<table>
<thead>
<tr>
<th>Indicate if you or anyone who is applying with you receives money from:</th>
<th>YES</th>
<th>NO</th>
<th>WHO?</th>
<th>GROSS AMOUNT</th>
<th>PERIOD (week, month, etc.)</th>
<th>WHO?</th>
<th>GROSS AMOUNT</th>
<th>PERIOD (week, month, etc.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wages/Salary, including overtime, commissions, training programs, tips</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Net Self-Employment Income</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Child Support Payments (received)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Alimony/Spousal Support (received)</td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
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<tr>
<td>Unemployment Insurance Benefits, Workers' Comp</td>
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<td></td>
<td></td>
<td></td>
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<tr>
<td>Social Security Benefits (including SSI)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Disability Benefits (NYS, VA, Private)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rental/Boarder/Lodger Income (received)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dividends/Interest - Stocks, Bonds, Savings</td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pensions/Annuities</td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Public Assistance (PA) Grant, Safety Net Benefits</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
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<tr>
<td>Other (please specify)</td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

### SECTION 8. TRAVEL TIME BETWEEN CHILD CARE PROVIDER AND WORK/EDUCATIONAL/OTHER APPROVED ACTIVITY

<table>
<thead>
<tr>
<th>DROP-OFF</th>
<th>Travel time from the child care provider to work/activity?</th>
<th>Public Transportation?</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>PICK-UP</td>
<td>Travel time from work/activity to the child care provider?</td>
<td>Public Transportation?</td>
<td>YES</td>
<td>NO</td>
</tr>
</tbody>
</table>

### SECTION 9. NOTICES. READ THE IMPORTANT CERTIFICATIONS AND CONSENTS BELOW.

**PENALTIES** – Federal and state laws provide for penalties, including fines, imprisonment, or both if you do not tell the truth when you apply for Child Care Assistance or when you are questioned about your eligibility, or if you cause someone else not to tell the truth regarding your application or continuing eligibility. Penalties also apply if you conceal or fail to disclose facts regarding your initial or continuing eligibility for Child Care Assistance; or if you conceal or fail to disclose facts that would affect the right of someone, for whom you have applied, to obtain or continue to receive Child Care Assistance. If you are the authorized representative applying on behalf of someone else, Child Care Assistance must be used for that person and not yourself. It is unlawful to obtain Child Care Assistance by concealing information or providing false information.

**CITIZENSHIP** – I understand that by signing this application form I certify, under penalty of perjury, that all the children in need of Child Care Assistance are United States citizens or nationals or persons with satisfactory immigration status. I understand that this information about these children may be submitted to the Immigration and Naturalization Service for verification of immigration status, if applicable. I further understand that the use or disclosure of this information about these children is restricted to persons and organizations directly connected with the verification of immigration status and the administration or enforcement of provisions of the Child Care Assistance program.

**CHANGE REPORTING** – I understand that by signing this application form I agree to inform the agency immediately of any change in my needs, income, living arrangement, or address to the best of my knowledge or belief. I agree to inform the agency immediately of any change in child care arrangements, including where child care is provided, who is providing care, provider's fees, and hours for which child care is needed.

**CONSENT FOR INVESTIGATION** – I understand that by signing this application form I agree to cooperate fully with any investigation to verify or confirm the information I have given or any other investigation in connection with my request for Child Care Assistance. I will provide additional information if it is requested.

**NON-DISCRIMINATION** – This application will be considered without regard to race, color, sex, disability, religious creed, national origin or political belief.

**RESOURCES** – I certify that my family resources do not exceed $1,000,000. Resources include, but are not limited to, cash, bank accounts, real estate, stocks, bonds, mutual funds, IRAs, 401(k) accounts, life insurance, trust accounts, annuities, burial funds/spaces.
**SECTION 10. CERTIFICATION AND SIGNATURE**

**CERTIFICATION:** I swear and/or affirm under the penalties of perjury that all of the information I have given or will give to the local Department of Social Services relating to Child Care Assistance is correct. I have read and understand the notices above. I understand and agree to the consents.

<table>
<thead>
<tr>
<th>APPLICANT’S/REPRESENTATIVES SIGNATURE</th>
<th>DATE SIGNED</th>
<th>SECOND APPLICANT’S SIGNATURE</th>
<th>DATE SIGNED</th>
</tr>
</thead>
<tbody>
<tr>
<td>X</td>
<td>/ /</td>
<td>X</td>
<td>/ /</td>
</tr>
</tbody>
</table>

**PRINT NAME:**

RETURN YOUR APPLICATION TO: THE LOCAL DEPARTMENT OF SOCIAL SERVICES (DSS) OF THE COUNTY THAT YOU LIVE IN.

**SECTION 11. IF YOU WANT TO WITHDRAW YOUR APPLICATION**

I CONSENT TO WITHDRAW MY APPLICATION FOR CHILD CARE ASSISTANCE. I understand I may reapply at any time.

**SIGNATURE X**

**DATE SIGNED**

<table>
<thead>
<tr>
<th>FOR AGENCY USE ONLY:</th>
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</thead>
<tbody>
<tr>
<td>CASE NAME</td>
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<td>CASE TYPE: 40</td>
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<td>DATE / /</td>
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<td>DATE / /</td>
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<td>ELIGIBILITY DETERMINED BY DATE / /</td>
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<td>ELIGIBILITY APPROVED BY DATE / /</td>
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<tr>
<th>CHILD CARE AUTHORIZATION FROM DATE</th>
<th>CHILD CARE AUTHORIZATION TO DATE</th>
<th>COMMENTS:</th>
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<tbody>
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<td>L3 CIN:</td>
<td>L6 CIN:</td>
<td>L9 CIN:</td>
</tr>
</tbody>
</table>
NYS Agency-Based Voter Registration Form

"If you are not registered to vote where you live now, would you like to apply to register here today?"

- [ ] YES If you checked YES, please complete the VOTER REGISTRATION APPLICATION below.
- [ ] NO because I choose not to register OR
- [ ] I am already registered at my current address OR
- [ ] I asked for and received a mail registration form.

If you do not check any box, you will be considered to have decided not to register to vote at this time.

Signature __________________________ Date __ / __

Please Print Name __________________________

---

VOTER REGISTRATION APPLICATION (instructions on back)

- [ ] Yes, I need an application for an Absentee Ballot
- [ ] No

**Please print or type in blue or black ink**

1. **Are you a U.S. citizen?**
   - [ ] YES
   - [ ] NO
   If you answered NO, do not complete this form.

2. **Will you be 18 years old on or before election day?**
   - [ ] YES
   - [ ] NO
   If you answered NO, do not complete this form unless you will be 18 by the end of the year.

3. **Last Name** __________________________ **First Name** __________________________ **Middle Initial** __________________________ **Suffix** __________________________

4. **Address where you live (do not give P.O. box)** __________________________ **Apt. No.** __________________________ **City/Town/Village** __________________________ **Zip Code** __________________________ **County** __________________________

5. **Address where you get your mail (if different than above)** __________________________ **P.O. Box, Star Route, etc.** __________________________ **Post Office** __________________________ **Zip Code** __________________________

6. **Date of Birth** __ / __ / __

7. **Sex** __________________________  **M** **F**

8. **Telephone (optional)** __________________________ **Email (optional)** __________________________

9. **ID Number** (Check the applicable box and provide your number)
   - [ ] New York State DMV number __________________________
   - [ ] Last four digits of your Social Security number __________________________
   - [ ] I do not have a New York State DMV or Social Security number

10. **Political Party**
    - [ ] Democratic party
    - [ ] Republican party
    - [ ] Conservative party
    - [ ] Women’s Equality Party
    - [ ] Green party
    - [ ] Reform party
    - [ ] Other __________________________
    - [ ] Working Families party
    - [ ] I do not wish to enroll in a political party
    - [ ] No party

11. **Affidavit: I swear or affirm that**
    - [ ] I am a citizen of the United States.
    - [ ] I will have lived in the county, city or village for at least 30 days before the election.
    - [ ] I will meet all requirements to register to vote in New York State.
    - [ ] This is my signature or mark on the line below.
    - [ ] The above information is true. I understand that if it is not true, I can be convicted and fined up to $5,000 and/or jailed for up to four years.

Signature or Mark in ink __________________________ Date __ / __

---

(Optional) Register to donate your organs and tissues

By signing below, you certify that you are:

- 18 years of age or older
- Consent to donate all of your organs and tissues for transplantation, research, or both;
- Authorizing the Board of Elections to provide your name and identifying information to DOH for enrollment in the Registry;
- And authorizing DOH to allow access to this information to federally regulated organ procurement organizations and NYS-licensed tissue and eye banks and hospitals upon your death.

Last Name __________________________ First Name __________________________

Address __________________________

Apt Number __________________________ **City/Town/Village** __________________________

Birth Date __ / __ / __

Eye Color __________________________

Signature __________________________ Date __ / __
Qualifications for Registration

You Can Use This Form To:

• register to vote in New York State;
• change your name and/or address, if there is a change since you last voted;
• enroll in a political party or change your enrollment.

To Register You Must:

• be a U.S. citizen;
• be 18 years old by December 31 of the year in which you file this form (note: You must be 18 years old by the date of the general, primary, or other election in which you want to vote.);
• be a resident of the County, or of the City of New York at least 30 days before an election;
• not be in jail or on parole for a felony conviction; and
• not claim the right to vote elsewhere.

Important!

If you believe that someone has interfered with your right to register or to decline to register to vote, your right to privacy in deciding whether to register or in applying to register to vote, or your right to choose your own political party or other political preference, you may file a complaint with:

NYS Board of Elections
40 North Pearl St, Suite 5
Albany, NY 12207-2729
Telephone: 1-800-469-6872;
TDD/TTY users contact the New York State Relay at 711; or visit our web site - www.elections.ny.gov

Your decision to register will remain confidential and will be used only for voter registration purposes. Anyone not choosing to register to vote and/or information regarding the office to which the application was submitted will remain confidential, to be used only for voter registration purposes.

Verifying your identity

We will try to check your identity before Election Day, through the DMV number (driver’s license number or non-driver ID number), or the last four digits of your social security number, which you will fill in Box 9.

If you do not have a DMV or Social Security number, you may use a valid photo ID, a current utility bill, bank statement, paycheck, government check or some other government document that shows your name and address. You may include a copy of one of those types of ID with this form.

If we are unable to verify your identity before Election Day, you will be asked for ID when you vote for the first time.

To complete this form:

It is a crime to procure a false registration or to furnish false information to the Board of Elections.

Box 9: You must make one selection. For questions refer to Verifying your identity above.

Box 10: If you have never voted before, write “None”. If you can’t remember when you last voted, put a question mark (?). If you voted before under a different name, put down that name. If not, write “Same”.

Box 11: Check one box only. Political party enrollment is optional but that, in order to vote in a primary election of a political party, a voter must enroll in that political party, unless state party rules allow otherwise.
NEW YORK STATE
OFFICE OF CHILDREN AND FAMILY SERVICES

HOW TO COMPLETE THE APPLICATION FOR CHILD CARE ASSISTANCE

CATEGORIES OF CHILD CARE ASSISTANCE IN THE NEW YORK STATE CHILD CARE BLOCK GRANT PROGRAM

1) Families eligible for a child care guarantee – applying for or receiving Public Assistance (PA), or receiving Child Care Assistance in lieu of PA or receiving transitional child care
2) Families eligible when funds are available
3) Families eligible when funds are available and the Department of Social Services has included them in its Child and Family Services Plan

THIS APPLICATION IS USED TO APPLY ONLY FOR CHILD CARE ASSISTANCE AS A CATEGORY 2 OR 3 FAMILY

If you are applying only for category 2 or 3 Child Care Assistance, you can use this shorter application. If you want to apply for other benefits such as Public Assistance, Supplemental Nutrition Assistance Program (Food Stamps), Home Energy Assistance, Medicaid or other services, including category 1 Child Care Assistance, please ask for the New York State Application for Certain Benefits and Services (LDSS-2921).

By submitting the Application for Child Care Assistance instead of the New York State Application for Certain Benefits and Services (LDSS-2921), you are applying for Child Care Assistance only in categories 2 and 3, i.e., when funds are available. You are not applying in category 1, guaranteed child care.

APPLYING FOR CHILD CARE ASSISTANCE

- You can file an application the same day you receive it. If you are eligible, benefits may be provided back to the date you filed your application.
- You can file your application in person or by mail.
- We will accept your application if it contains, at a minimum, your name, address, and a signature. However, the application must be completed for us to determine your eligibility.

HOW TO COMPLETE THE APPLICATION

- The directions and application are numbered by section to help you.
- Please PRINT clearly.
- DO NOT PRINT IN THE SHADED AREAS.
- COMPLETE each section.
- If you are applying as someone’s representative, please print information about that person.

WHERE TO TURN IN THE APPLICATION

- The Department of Social Services (DSS) of the county that you live in.

Make sure you have been given copies of:

- LDSS-4148A: What You Should Know About Your Rights and Responsibilities
- LDSS-4148B: What You Should Know About Social Services Programs
- LDSS-4148C: What You Should Know If You Have an Emergency

These booklets contain important information about your rights and responsibilities.
PAGE 1 OF THE APPLICATION

SECTION 1. APPLICANT'S INFORMATION

- **NAME:** PRINT your legal name including your first name, middle initial, and last name. Include any aliases or maiden names.
- **PHONE NUMBER:** PRINT your phone number, including area code.
- **RESIDENCE ADDRESS:** PRINT the full street address, including apartment, city, state, and zip code, where you **now** live.
- **MAILING ADDRESS:** If you get your mail somewhere other than where you live, PRINT that address here.
- **FORMER ADDRESS:** If you have moved in the last year, PRINT your previous address(es). If you need more space, use section 10 on page 4 or attach additional sheets of paper as needed.
- **OTHER PHONE NUMBERS:** If you can be reached at another phone number, PRINT that phone number here.
- **MARITAL STATUS:** Check the box that describes your marital status **now**.
- **PRIMARY LANGUAGE:** What language is spoken most often in your household? Check the box that applies. If “other”, PRINT the name of the language.

SECTION 2. HOUSEHOLD MEMBER INFORMATION

LIST THE NAMES OF EVERYONE WHO LIVES WITH YOU, EVEN IF THEY ARE NOT APPLYING WITH YOU.

FOR EVERY PERSON IN THE HOUSEHOLD, COMPLETE THE FOLLOWING:

- **NAME:** PRINT your name first, then the names of the other people who live with you. Include aliases and maiden names.
- **DATE OF BIRTH AND SEX:** PRINT the date of birth and sex for each person who is applying. Those considered applying are the children in need of care, and their parents (including stepparents), and siblings under the age of 18 in the household.
- **RELATIONSHIP:** For each person who is applying, PRINT their relationship to you (for example: husband, wife, son, foster child, friend, boyfriend, girlfriend, roomer, boarder, etc.).
- **SOCIAL SECURITY NUMBER:** You may, but do not have to, list Social Security numbers. Social Security numbers may be used by federal, state, and local agencies to prevent duplication of services, prevent and detect fraud, and for federal reporting.
- **HISPANIC/LATINO:** Enter Y (Yes) or N (No) to indicate if each person applying is Hispanic or Latino or not. Providing ethnicity information is voluntary and will not affect your eligibility for Child Care Assistance or the amount of assistance that you will be given by this agency.
- **RACE:** Enter Y (Yes) or N (No) for each of the race codes. 
  I - Native American or Alaskan Native, A - Asian, B - Black or African American, P - Native Hawaiian or Pacific Islander, W – White. Providing race information is voluntary and will not affect your eligibility for Child Care Assistance or the amount of assistance that you will be given by this agency.
- **CHILD CARE NEED:** Enter Y (Yes) or N (No) to tell us whether each child needs child care.

FOR EVERY CHILD IN THE HOUSEHOLD WHO NEEDS CHILD CARE, ALSO ANSWER YES OR NO FOR THE FOLLOWING:

- **CHILD IS U.S. CITIZEN/ NATIONAL/HAS SATISFACTORY IMMIGRATION STATUS:** Enter Y (Yes) or N (No) to tell us whether each child who needs Child Care Assistance is a **United States citizen, United States national, or person with satisfactory immigration status**. The citizenship or immigration status of the child’s parent or other household members will not affect your eligibility for Child Care Assistance or the amount of assistance that you will be given by this agency.
**CHILD WITH DISABILITY:** Enter Y (Yes) or N (No) to tell us whether each child has a disability or not. Generally speaking, a child with a disability means one of the following:

- a child who is aged 3 through 9 years and experiencing developmental delays in one or more of the following areas: physical development, cognitive development, communication development, social or emotional development, or adaptive development; OR
- a child who needs special education and related services due to one of the following: intellectual disabilities, hearing impairments (including deafness), speech or language impairments, visual impairments (including blindness), serious emotional disturbance, orthopedic impairments, autism, traumatic brain injury, other health impairments, or specific learning disabilities; OR
- a child who is under the age of 3 years and is eligible for Early Intervention Services; OR
- a child who is under the age of 13 years and who has a physical or mental impairment that substantially limits one or more major life activities.

**BOTH PARENTS IN HOME:** Enter Y (Yes) or N (No) to tell us whether both parents of each child live in the household (for each child).

---

**SECTION 3. OTHER HOUSEHOLD INFORMATION**

The questions in the section apply to the applicant AND any other adult household members who are applying for Child Care Assistance with you—that means a spouse who lives with you, or an adult who lives with you and with whom you have at least one child in common.

**CHECK YES OR NO FOR EACH OF THE FOLLOWING:**

<table>
<thead>
<tr>
<th><strong>CHILD CARE FOR WORK:</strong></th>
<th>Check (✓) Yes or No to tell us whether you and/or the second applicant need child care so that you can work.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>CHILD CARE FOR OTHER REASON:</strong></td>
<td>Check (✓) Yes or No to tell us whether you and/or the second applicant need child care for a reason other than work. If yes, what is the reason?</td>
</tr>
<tr>
<td><strong>HOMELESS:</strong></td>
<td>Check (✓) Yes or No to tell us whether your family has a fixed, regular, adequate place to stay at night.</td>
</tr>
<tr>
<td><strong>MILITARY:</strong></td>
<td>Check (✓) Yes or No to tell us whether a parent in the household is on active duty, serving full-time in the U.S. Military.</td>
</tr>
<tr>
<td><strong>MILITARY RESERVE:</strong></td>
<td>Check (✓) Yes or No to tell us whether a parent in the household is a member of a National Guard or Military Reserve unit.</td>
</tr>
<tr>
<td><strong>PUBLIC ASSISTANCE:</strong></td>
<td>Check (✓) Yes or No to tell us whether you and/or the second applicant are receiving or applying for Public Assistance (PA).</td>
</tr>
<tr>
<td><strong>OTHER CHILD CARE FUNDS:</strong></td>
<td>Check (✓) Yes or No to tell us whether you and/or the second applicant are receiving or applying for other help paying for child care.</td>
</tr>
<tr>
<td><strong>PREGNANT:</strong></td>
<td>Check (✓) Yes or No to tell us whether you and/or the second applicant are pregnant. If yes, what is the due date?</td>
</tr>
</tbody>
</table>

**SECTION 4. HOUSEHOLD MEMBERS UNDER THE AGE OF 21 WHOSE PARENT IS NOT IN THE HOUSEHOLD**

PRINT the names of household members under the age of 21, and the name and address of their absent parents.
SECTION 5. APPLICANT’S EMPLOYMENT INFORMATION

- EMPLOYER INFORMATION: PRINT the name, address, and phone number of where you work.
- JOB INFORMATION: Complete this section about your job: When did you start? How many hours do you work? How much are you paid and how often? Does your schedule vary? Do you work overtime? What is your schedule?

SECTION 6. OTHER EMPLOYMENT INFORMATION

- WHOSE JOB INFORMATION? Indicate whether the employment information here is for the applicant or the spouse/other parent.
- EMPLOYER INFORMATION: PRINT the name, address, and phone number of where your spouse or the other parent works.
- JOB INFORMATION: Complete this section about your spouse’s or the other parent’s job: When did he/she start? How many hours does he/she work? How much is he/she paid and how often? Does his/her schedule vary? Does he/she work overtime? What is his/her schedule?

SECTION 7. INCOME INFORMATION

- Check (✓) Yes or No for yourself and anyone who lives with you for each kind of income.
- For each “Yes” answer, PRINT the dollar ($) amount or value, how often it is received, and the name of the person who gets the income.
- All income must be reported on the application.
- Some examples of “other” kinds of income are: retirement benefits and workers’ compensation.

SECTION 8. TRAVEL TIME BETWEEN CHILD CARE LOCATION AND WORK/EDUCATIONAL/OTHER APPROVED ACTIVITY

- DROP-OFF TRAVEL TIME Indicate how long (hours and minutes) it takes to travel from the child care provider to work, educational, or other approved activity after drop-off. Check yes or no to indicate whether public transportation is used.
- PICK-UP TRAVEL TIME Indicate how long (hours and minutes) it takes to travel from work, educational, or other approved activity to the child care provider for pick-up. Check yes or no to indicate whether public transportation is used.

SECTION 9. NOTICES. READ THE IMPORTANT CERTIFICATIONS AND CONSENTS BELOW

READ THIS SECTION CAREFULLY or have someone read it to you. This section contains important information about your rights and responsibilities relative to receiving assistance. By signing and submitting an application, you indicate that you understand and agree to the statements in this section.

SECTION 10. CERTIFICATION AND SIGNATURE

- SIGNATURE: SIGN your name and date. If you have filled out the application for someone else, sign your own name.
- SECOND APPLICANT’S SIGNATURE: If your husband or wife lives with you, both of you must sign the application. If an adult with whom you have at least one child in common lives with you, both of you must sign the application.

SECTION 11. IF YOU WANT TO WITHDRAW YOUR APPLICATION

If you decide you no longer want to apply for Child Care Assistance, sign your name and enter the date. You may reapply at any time.

NOTE: The last page of the Application for Child Care Assistance is an application to register to vote. If you would like help filling out the voter registration application form, ask your eligibility examiner. Applying to register or declining to register to vote will not affect your eligibility for child care assistance or the amount of assistance that you will be given by this agency.
10-OCFS-INF-10

Law 191 Invalidating Puerto Rican Birth Certificates

The purpose of this INF is to provide social service districts and voluntary authorized agencies with information related to action by the government of Puerto Rico, enacting Law 191 of 2009 invalidating Puerto Rican birth certificates effective October 1, 2010.
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Informational Letter

<table>
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<tr>
<th>Transmittal:</th>
<th>10-OCFS-INF-10</th>
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<tbody>
<tr>
<td>To:</td>
<td>Commissioners of Social Services</td>
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<tr>
<td></td>
<td>Executive Directors of Voluntary Authorized Agencies</td>
</tr>
<tr>
<td>Issuing Division/Office:</td>
<td>Strategic Planning and Policy Development</td>
</tr>
<tr>
<td>Date:</td>
<td>September 8, 2010</td>
</tr>
<tr>
<td>Subject:</td>
<td>Law 191 Invalidating Puerto Rican Birth Certificates</td>
</tr>
<tr>
<td>Suggested Distribution:</td>
<td>Directors of Services</td>
</tr>
<tr>
<td></td>
<td>Foster Care Supervisors</td>
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<td>Child Care Supervisors</td>
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<td>Adoption Supervisors</td>
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<td></td>
<td>Preventive Supervisors</td>
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<tr>
<td></td>
<td>Protective Supervisors</td>
</tr>
<tr>
<td>Contact Person(s):</td>
<td>Programmatic questions should be directed to the appropriate Regional Office, Division of Child Welfare and Community Services:</td>
</tr>
<tr>
<td></td>
<td>BRO – Mary Miller (716) 847-3145 <a href="mailto:Mary.Miller@ocfs.state.ny.us">Mary.Miller@ocfs.state.ny.us</a></td>
</tr>
<tr>
<td></td>
<td>RRO – Karen Buck (585) 238-8549 <a href="mailto:Karen.Buck@ocfs.state.ny.us">Karen.Buck@ocfs.state.ny.us</a></td>
</tr>
<tr>
<td></td>
<td>SRO – Jack Klump (315) 423-1200 <a href="mailto:Jack.Klump@ocfs.state.ny.us">Jack.Klump@ocfs.state.ny.us</a></td>
</tr>
<tr>
<td></td>
<td>ARO – Kerri Barber (518) 486-7078 <a href="mailto:Kerri.Barber@ocfs.state.ny.us">Kerri.Barber@ocfs.state.ny.us</a></td>
</tr>
<tr>
<td></td>
<td>SVRO – Pat Sheehy (845) 708-2498 <a href="mailto:Patricia.Sheehy@ocfs.state.ny.us">Patricia.Sheehy@ocfs.state.ny.us</a></td>
</tr>
<tr>
<td></td>
<td>NYCRO – Patricia Beresford (212) 383-1788 <a href="mailto:Patricia.Beresford@ocfs.state.ny.us">Patricia.Beresford@ocfs.state.ny.us</a></td>
</tr>
<tr>
<td>Attachments:</td>
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</tr>
<tr>
<td>Attachment Available Online:</td>
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- Previous ADMs/INFs: Cancelled
- Releases
- Dept. Regs.
- Soc. Serv. Law & Other Legal Ref.
- Manual Ref.
- Misc. Ref.

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<td></td>
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<td>18 NYCRR 351.5(a)</td>
<td>NYS OCFS Eligibility Manual for Child Welfare Programs</td>
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I. Purpose

The purpose of this Informational Letter (INF) is to provide social services districts and voluntary authorized agencies with information related to action by the government of Puerto Rico, enacting Law 191 of 2009 (As Amended) invalidating Puerto Rican birth certificates effective October 1, 2010.

II. Background

In December 2009, the government of Puerto Rico enacted Law 191 of 2009 (Amended June 2010), designed to strengthen the issuance and usage of birth certificates and to combat identity fraud of all people born in Puerto Rico. This new law was based on collaboration with the U.S. Department of State (DOS) and the U.S. Department of Homeland Security (DHS) to address the fraudulent use of Puerto Rico issued birth certificates to unlawfully obtain U.S. passports, Social Security benefits and other federal and state services.

Many common official and unofficial transactions have unnecessarily required the submission, retention, and storage of birth certificates. Hundreds of thousands of these birth certificates were stored by the Puerto Rican government without adequate protection, making them easy targets for theft. As a result, many birth certificates issued by the Puerto Rican government have been stolen from schools and other institutions and sold on the black market. Since Puerto Rican birth certificates are proof of U.S. citizenship, they are very valuable on the black market and have been used by foreign nationals as a means to illegally enter the U.S. These stolen birth certificates have also been used to illegally obtain licenses and other government and private sector documentation and benefits.

Understanding the enormous risks to all individuals as well as the very significant homeland and national security concerns, the government of Puerto Rico took action to improve the security of all Puerto Rican birth certificates and to protect Puerto Ricans and the public at large from fraud and identity theft.

Puerto Rican Law 191, which went into effect on January 1, 2010, and which was amended in June 2010, implements the following changes:

- Starting July 1, 2010, the Puerto Rico Department of Health began issuing new, more secure birth certificates through the Vital Statistics Record Office, incorporating state-of-the-art technology to limit the possibility of document forgery.

- On October 1, 2010, the law will invalidate all birth certificates issued prior to July 1, 2010. The purpose of this three-month overlap in the validity of the old and the new birth certificates is to provide those Puerto Rican-born, who may need a birth certificate for documentation, a three-month window to apply for and receive their new birth certificate.
Citizens born in Puerto Rico but residing in New York State may obtain a copy of a new birth certificate by filling out a Birth Certificate Application form from the Puerto Rico Vital Statistics Office on or after July 1, 2010. There is a $5 fee for a new birth certificate. The fee is waived for people over 60 and veterans of the U.S Armed Forces.

Applications for a new Puerto Rican birth certificate can be obtained as follows:

**Online**

Go to [www.pr.gov](http://www.pr.gov) and then click the Certificado de Nacimiento button. Follow the instructions on the screen.

Please note that the Puerto Rican government websites are in Spanish, but there is an English version of the instructions for applying online for a new birth certificate.

**Mail-in Applications**

Puerto Rican birth certificate application forms are available in Spanish at:


Birth certificate applications forms are available in English at:


After applicants complete and sign the application form, they need to follow these steps:

1. Mail the completed and signed application to:

   Puerto Rico Vital Statistics Office  
   (Registro Demográfico)  
   P.O. Box 11854  
   San Juan, PR 00910

2. Include a photocopy of a valid government-issued photo identification document. A passport or driver’s license may be used; all other forms of government-issued ID will be subject to approval.

3. Include a $5 money order payable to the Secretary of the Treasury of Puerto Rico.

4. Include a self-addressed, postage-paid envelope.
III. Program Implications

Title IV-E and TANF-EAF foster care cases opened after September 30, 2010

Birth certificates may be used to verify the eligibility factors, including:
- Identity
- Age of the child
- Citizenship of the child
- Minor child

If districts, voluntary authorized agencies or workers are unable to verify the eligibility factors from an alternate source, as indicated in the NYS OCFS Eligibility Manual for Child Welfare Programs*, a new Puerto Rican birth certificate or similar document is required.

TANF-EAF family cases (in-home) opened after September 30, 2010

Birth certificates may be used to verify the eligibility factors including:
- Identity
- Age of the child
- Citizenship of the child
- Minor child

If districts or voluntary authorized agency caseworkers are unable to verify the eligibility factors from an alternate source, as indicated in the NYS OCFS Eligibility Manual for Child Welfare Programs*, a new Puerto Rican birth certificate or similar document is required.

Title XX-200% cases opened after September 30, 2010

Attestation of U.S. citizenship is usually sufficient. However, if proof is required, a new Puerto Rican birth certificate or similar document is required.

Child Care Assistance Eligibility Factors

Birth certificates may be used to verify the eligibility factors, including:
- Identity
- Age of the child
- Citizenship of the child

If district caseworkers are unable to verify the eligibility factors from alternate documents or sources of information, including previous case notes, a new birth certificate issued by the Puerto Rican government or an appropriate alternate source of verification must be pursued.

Individuals born in Puerto Rico who maintain active or open cases do not have to obtain a new birth certificate or provide alternate proof of U.S. citizenship for continued eligibility or re-certification. For all new cases and previously closed cases that are being re-opened, a new birth certificate issued by the Puerto Rican government or alternate source of verification must be acquired if being used to determine eligibility.

Puerto Ricans are U.S. citizens and, as required by 18 NYCRR 351.5(a), districts must, when necessary, assist Puerto Rican applicants applying on or after July 1, 2010, in obtaining a new birth certificate, including paying the $5 fee if the applicant is unable to pay. It is strongly recommended that for each Puerto Rican born child currently in foster care that a new birth certificate be obtained. The cost can be authorized in WMS using POS code 71 (Gifts).

/is/ Nancy W. Martinez

Issued By:
Name: Nancy W. Martinez
Title: Director
Division/Office: Strategic Planning & Policy Development
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The purpose of this Local Commissioners Memorandum (LCM) is to advise local departments of social services (LDSSs) that on August 13, 2015, the Governor signed into law Chapter 144 of the Laws of 2015, which included language to repeal and revise certain provisions of the Social Services Law (SSL) regarding notification to families receiving child care assistance.

This LCM also informs LDSSs of several revised client notices that must be used by LDSSs to provide notifications to families about actions related to their child care subsidy benefit as required by Sections 34-a(9) and 410-w(8) of the SSL and Title 18 of the Official Compilation of Codes, Rules and Regulations of the State of New York (NYCRR) Parts 358, 404, and 415.
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# Local Commissioners Memorandum

<table>
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<th>Transmittal:</th>
<th>16-OCFS-LCM-03</th>
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| To:                | Local District Commissioners  
|                    | Director of Services  
|                    | Child Care Unit Supervisors  
|                    | Temporary Assistance Unit Supervisors |
| Issuing Division/Office: | Division of Child Care Services |
| Date:             | February 26, 2016 |
| Subject:          | 30-Day Client Notification for Child Care Subsidy and Revised Client Notices |
| Contact Person(s): | Michael Miller, Division of Child Care Services, (518) 408-3395 or Michael.Miller@ocfs.ny.gov |
| Attachments:      | A: OCFS-LDSS-4779 Approval of Your Application for Child Care Benefits 
|                    | B: OCFS-LDSS-4780 Denial of Your Application for Child Care Benefits 
|                    | C: OCFS-LDSS-4781 Notice of Intent to Change Child Care Benefits and Family Share Payments 
|                    | D: OCFS-LDSS-4782 Notice of Intent to Discontinue Child Care Benefits 
|                    | E: OCFS-LDSS-4783 Delinquent Family Share 
|                    | F: OCFS-LDSS-4784 Approval of Your Redetermination for Child Care Benefits 
|                    | G: OCFS-LDSS-4785 Approval of Your Transitional Child Care Benefits 
|                    | H: OCFS-4773- Child Care Eligibility Re-Determination Coming Due 
|                    | I: OCFS-LDSS-7009 Notice of Child Care Overpayment |
| Attachment Available Online: | Original forms are available on the OCFS intranet only, at: http://ocfs.state.nyenet/admin/Forms/ 
|                    | Sample forms are available on the OCFS internet at: http://ocfs.ny.gov/main/documents/docsChildCare.asp |

## I. Purpose

The purpose of this Local Commissioners Memorandum (LCM) is to advise local departments of social services (LDSSs) that on August 13, 2015, the Governor signed into law Chapter 144 of the Laws of 2015, which included language to repeal and revise certain provisions of the Social Services Law (SSL) regarding notification to families receiving child care assistance.
This LCM also informs LDSSs of several revised client notices that must be used by LDSSs to provide notifications to families about actions related to their child care subsidy benefit as required by Sections 34-a(9) and 410-w(8) of the SSL and Title 18 of the Official Compilation of Codes, Rules and Regulations of the State of New York (NYCRR) Parts 358, 404, and 415.

II. Background

A January 28, 2015, letter to LDSS commissioners notified the LDSSs of a new subdivision (9) that was added to Section 34-a of SSL, which took effect on January 1, 2015. This provision specified the amount of notice an LDSS must provide to the New York State Office of Children and Family Services (OCFS) when the LDSS plans to lower eligibility levels or increase its co-payment multiplier with regard to child care assistance.

An August 18, 2015, letter to LDSS Commissioners notified the LDSSs that on August 13, 2015, Chapter 144 of the Laws of 2015 repealed and replaced subdivision (9) of Section 34-a of the SSL with a new subdivision (9), and also added a new subdivision (8) to Section 410-w of the SSL regarding notification to families receiving child care assistance.

III. Program Implications

The first relevant change pursuant to Chapter 144 of the Laws of 2015 repeals subdivision (9) of Section 34-a of the SSL and replaces it with a new subdivision (9), retroactive to January 1, 2015. The requirements created by this change were imposed on LDSSs pursuant to 14-OCFS-LCM-01. The new subdivision (9) in conjunction with 14-OCFS-LCM-01 requires that an LDSS proposing an amendment to the child care portion of its Child and Family Services Plan (CFSP) that reduces eligibility or increases the family share percentage for child care services must:

(i) no later than the first day the public notice appears in a newspaper pursuant to Section 34-a(3) of the SSL or the OCFS regulations, as applicable, prominently post on the LDSS’s website a notice of the proposed amendment to the CFSP describing the categories of families whose cases will be impacted; and

(ii) at the time the public notice is submitted to the newspaper for publication, provide a copy of the notice to OCFS.

The newly enacted Section 34-a(9) also requires that if an LDSS implements its process for closing child care cases, as set forth in its approved CFSP, due to the LDSS determining that it cannot maintain its current caseload because all of the available funds are projected to be needed for open cases, the LDSS must:

(i) no later than the first day the LDSS begins to send individual client notices to impacted families in accordance with SSL 410-w(8), prominently post a notice on its website stating that the LDSS is implementing the child care case closing process set forth in its approved CFSP and describing the categories of families whose cases will be closed; and
(ii) immediately provide a copy of such notice to OCFS.

OCFS will prominently post the notices received pursuant to SSL Section 34-a(9) on its website.

The other relevant change made pursuant to Chapter 144 of the Laws of 2015 added a new subdivision (8) to Section 410-w of the SSL, effective July 1, 2015. This new provision requires an LDSS to provide at least a 30-day written notice to all families whose eligibility for child care assistance or family share percentage will be impacted by:

- the LDSS implementing a plan amendment to the child care portion of its CFSP either as part of an annual plan update or through a separate plan amendment process, where such amendment reduces eligibility for, or increases the family share percentage of, families receiving child care services, or
- the LDSS implementing the process for closing child care cases as set forth in the LDSS’s approved CFSP, due to the LDSS determining that it cannot maintain its current caseload because all of the available funds are projected to be needed for open cases.

While LDSSs are encouraged to provide families with as much notice as possible of an action that will impact their child care subsidy benefit, this statutory change does not require a 30-day notice prior to denying benefits or issuing a discontinuance notice because the client is over income or is no longer engaged in their approved activity. For these actions, an LDSS is only required to provide a minimum 10-day notice to the affected families.

IV. Revised Client Notices

LDSSs were previously notified in 13-OCFS-LCM-04, dated April 18, 2013, of the requirement to provide client notification to applicants of child care subsidy benefits funded under the New York State Child Care Block Grant (NYSCCBG) and Title XX. This LCM replaces 13-OCFS-LCM-04, and revises the client notices issued with that release and the two client notices issued after 13-OCFS-LCM-04 (OCFS-LDSS-4784 Approval of Your Redetermination and OCFS-LDSS 4785 Approval of Your Transitional Child Care Benefits).

Minor changes have been made to the first page of the client notices, and the fair hearing information has been reorganized and written in easy-to-understand language.

If an LDSS wishes to use local equivalents of the required forms listed in this LCM, such forms must be approved by the OCFS’s Division of Child Care Services (DCCS) prior to their use by the LDSS. Any previously approved local equivalents of the client notices must be revised and resubmitted for approval to DCCS prior to their continued use by the LDSS.

The revised forms described below meet the standards for timely and adequate notice in accordance with 18 NYCRR §§358.-2.2 and 358-2.23. Two copies of the notice
should be sent so that applicants/recipients can use one copy to request a fair hearing and retain one for their records.

Attachment A: OCFS-LDSS-4779 (Rev.9/15) Approval of Your Application for Child Care Benefits must be used by the LDSS when an application for child care benefits has been approved. The LDSS must show how the family share was calculated in the family share portion of the form and indicate in the child care benefits portion of the form if the child care benefits will be paid to the parent or provider. The effective dates of the child care benefits must also be included on the notice.

Attachment B: OCFS-LDSS-4780 (Rev.9/15) Denial of Your Application for Child Care Benefits must be used by the LDSS when an application for child care benefits has been denied at initial application. The LDSS must select one or more of the denial reasons listed on the form. Below is the list of denial reasons and the information that must be provided.

- **The family’s income for their family size exceeds 200 percent of the State Income Standard (SIS).** The LDSS must indicate the family’s monthly gross income, the family’s size, and the maximum SIS for the family’s size. On the addendum, the LDSS must show what sources were used to determine the family’s monthly gross income, and what the maximum SIS monthly income is for the family’s size.

- **The family did not provide all of the required documentation.** The LDSS selects this denial reason if the family failed to provide the required documentation. The LDSS must specify what documentation the family failed to provide that led to the denial of benefits.

- **The family is not programmatically eligible.** The LDSS selects this denial reason if the reason for care is not allowed under New York State SSL or regulations, or if the LDSS has not included this category of family in its CFSP. The LDSS must cite the applicable statutory or regulatory reference and inform the applicant as to why the family’s reason for care cannot be approved.

- **Due to insufficient funding, the LDSS is not opening cases.** The LDSS selects this denial reason if it has been determined that it only has sufficient funding to maintain its current caseload. At a fair hearing, the LDSS must be prepared to present supporting documentation confirming that the LDSS does not have sufficient funding to open cases for all eligible families. Supporting documentation includes, but is not limited to, the relevant allocation LCM, ceiling reports, spreadsheets showing monthly claims and available funds, and the approved child care section of its CFSP along with the plan approval letter.

- **Due to insufficient funding, the LDSS can only open cases up to a percentage (determined by the LDSS) of the State Income Standard.** The LDSS selects this denial reason if it has determined that there are insufficient funds to open cases for all eligible families. The LDSS must specify what its local priority level is for the monthly gross income standard, compared to the family’s monthly gross income for the family’s size. On the addendum, the LDSS must show what sources were used to determine the family’s monthly gross income and what its priority level is for the monthly gross income standard for its family size. At a fair hearing, the LDSS must be prepared to present
documentation supporting its determination that it does not have sufficient funding to provide child care benefits to all eligible families. Supporting documentation includes, but is not limited to, the relevant allocation LCM, ceiling report, spreadsheets showing monthly claims and available funds, and the approved child care section of its CFSP along with the plan approval letter.

- **Other.** The LDSS selects this option when none of the options listed above apply. The LDSS must inform the applicant of the reason for the denial of his/her application. The LDSS may select this option when it denies child care services to a family that has a child with special needs who needs child care. The LDSS must describe why, in sufficient detail, a family with a special needs child needing child care was not eligible for child care benefits.

**Attachment C:** OCFS-LDSS-4781 (Rev. 9/15) **Notice of Intent to Change Child Care Benefits and Family Share Payments** must be used by the LDSS when there is a change in family share due to an increase or decrease in the family’s income, child care provider, and/or authorization of benefits. The LDSS must give the family a minimum of a 30-day notice when they intend to increase the family share percentage; all other changes require that an LDSS provide a minimum of a 10-day notice prior to taking the action.

**Attachment D:** OCFS-LDSS-4782 (Rev. 9/15) **Notice of Intent to Discontinue Child Care Benefits** must be used by the LDSS when it intends to end the child care benefit. The LDSS must give the family a minimum of a 30-day notice when it intends to reduce eligibility by amending its CFSP or implements the process for closing child care cases as described in either its approved CFSP or the annual plan update. LDSSs are encouraged to provide families with as much notice as possible; however, the LDSS must still provide a minimum 10-day notice when denying a child care benefit because the client is over income or no longer engaged in their approved activity.

The LDSS must select one or more of the closing reasons listed on the form. Below is the list of closing reasons and the information that must be provided.

- **The family’s income for their family size exceeds 200 percent of the SIS.** The LDSS must indicate the family’s monthly gross income and the maximum SIS for its family size. On the addendum, the LDSS must show what sources were used to determine the family’s monthly gross income and specify what the maximum SIS monthly income is for its family size.

- **The family did not provide all of the required documentation.** The LDSS selects this denial reason if the family failed to provide the required documentation. The LDSS must specify the documentation the family failed to provide that led to the denial of benefits.

- **The family is not programatically eligible.** The LDSS selects this denial reason if the reason for care is not allowed under SSL or New York State regulations, or if this category of family was not included in the LDSS’s CFSP. The LDSS must inform the applicant as to why the family’s reason for care cannot be approved. If the denial is based on SSL or New York State
regulations, the LDSS must cite the statutory or regulatory requirement in the reason for denial.

- **Due to insufficient funding, the LDSS is not able to serve all eligible families.** The LDSS selects this closing reason if it has projected that it does not have sufficient funding to maintain its current caseload. The LDSS must specify its income priority level for the monthly gross income standard for the family’s size compared to the family’s monthly gross income. On the addendum, the LDSS must show what sources were used to determine the family’s monthly gross income, and indicate the LDSS’s priority level for the monthly gross income standard for the family’s size. At a fair hearing, the LDSS must be prepared to present documentation showing that the LDSS does not have sufficient funding to provide child care benefits to all eligible families. Supporting documentation includes, but is not limited to, the relevant allocation LCM, ceiling reports, spreadsheets showing monthly claims and available funds, and the approved child care section of its CFSP along with the plan approval letter.

- **Other.** The LDSS selects this option when none of the options listed above apply. The LDSS must inform the recipient why their child care case is closing. The LDSS may select this option when it discontinues child care services to a family needing child care for a child with special needs. The LDSS must describe, in sufficient detail, the reason a family with a child with special needs needing child care will no longer be eligible for child care benefits.

**Attachment E: OCFS-LDSS-4783 (Rev. 9/15) Delinquent Family Share** must be used by the LDSS when a family has been delinquent in paying its family share.

**Attachment F: OCFS-LDSS-4784 (Rev. 9/15) Approval of Your Redetermination for Child Care Benefits** must be used by the LDSS when an application for child care benefits has been approved at redetermination. This new client notice provides recipients of child care benefits with the option of choosing to have aid continuing.

**Attachment G: OCFS-LDSS-4785 (Rev 9/15) Approval of Your Transitional Child Care Benefits** must be used by the LDSS when a family has been approved for transitional child care benefits. The LDSS must show how the family share was calculated in the family share portion of the form and indicate if the child care benefits will be paid to the parent or provider in the benefits portion of the form. The effective dates of the child care benefits must also be included on the notice. This new client notice provides recipients the option to choose to have aid continuing; this notice also eliminates the need to send the OCFS-LDSS-4781 Notice of Intent to Change Child Care Benefits and Family Share Payments to inform the client that they must now pay a family share.

**Attachment H: OCFS-4773 (Rev. 3/13) Child Care Eligibility Re-Determination Coming Due** may be used by the LDSS to notify the family that the re-determination of their programmatic and financial eligibility is coming due. The form advises the family what documentation is needed to re-determine the family’s eligibility.
Attachment I: OCFS-LDSS-7009 (Rev. 9/15) Notice of Child Care Overpayment
must be used when it has been determined that a child care overpayment to a
recipient or former recipient has occurred. The LDSS must include: the amount of the
overpayment, the reason the overpayment occurred, and a repayment plan
agreement.

VI. Access to Client Notices Forms

The client notices are available in English and Spanish on the OCFS intranet site at
http://ocfs.state.nyenet/admin/Forms/ and will soon be available in Chinese, Russian,
Creole, Korean, and Italian.

The client notices are available in English and Spanish through the Child Care Time
and Attendance System (CCTA). LDSSs are encouraged to use the client notices
through CCTA as most of the information will auto-fill, decreasing the staff time needed
to complete the forms.

Hard copies of the client notices will be available 30 days from the release of this LCM.

VII. Effective Date

The change repealing Section 34-a(9) of the SSL and adding a new Section 34-a(9)
became effective January 1, 2015.

The change adding subdivision (8) to Section 410-w of the SSL became effective on
July 1, 2015.

LDSSs must begin using the revised client notices immediately.

/s/ Janice M. Molnar Ph.D.

Issued By:
Janice M. Molnar Ph.D.
Deputy Commissioner
Division of Child Care Services
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Memorandum
Mandatory Child Care Notices
Effective 5/15/04

The purpose of LCM, Mandatory Child Care Notices, Effective 5/15/04, is to inform the social services districts of the issuance of revised forms that must be used by social services districts to provide notification to clients on actions related to his or her application for child care subsidy benefits as required by Title 18 of the NYCRR Part 358, 404, and 415. It also provides the definition of adequate and timely notice, and when it applies.
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MEMORANDUM

To:       Local District Commissioners
From:     Suzanne Zafonte Sennett
Subject:  Mandatory Child Care Notices Effective 5/15/04
Date:     May 13, 2004

As you know, various changes to the child care subsidy program and certain changes to the fair hearing regulations, found in Title 18 of the New York State Code of Rules and Regulations (NYCRR) Parts 358 and 415 respectively, are effective on May 15, 2004. OCFS has begun to train local district staff with regard to these changes. In addition to the training, a comprehensive ADM will be released in late June or in early July on all the changes related to child care subsidies. However, due to the crucial nature of the changes relative to fair hearings, OCFS felt that it was necessary to send this letter to remind all local districts of these changes relative to fair hearing rights and client notices. Enclosed with this letter are copies of the updated client notices. The changes are as follows.

- Districts must provide aid continuing, as appropriate, for all child care recipients.
- Districts must always provide adequate notice when there is a change in the method of payment for all recipients of child care services. If the change in method of payment results in the discontinuation, suspension, reduction, termination of benefits, or forces the recipient to make changes in their child care arrangement, the recipient now must receive both adequate and timely notice.
- Applicants and recipients may now access fair hearing request forms from the New York State Office of Temporary and Disability Assistance (OTDA) website (www.otda.state.ny.us.us/oah/forms.asp) and may request a fair hearing via electronic mail. Additionally, a statewide toll free number has replaced the regional numbers previously provided for requesting a fair hearing. The State client notice forms are being modified to reflect the changes. When the modification process is complete, the State forms may be ordered by sending a request to OCFS, Forms Management Unit, Room 101, South Building, 52 Washington Street, Rensselaer, N.Y. 12144. In the interim, please make copies of the enclosed forms for your use. They include the following: LDSS 4779-Approval of
Your Application for Child Care Benefits, LDSS 4780- Denial of Your Application for Child Care Benefits, LDSS 4781- Notice of Intent to Change Child Care Benefits and LDSS 4782- Notice of Intent to Discontinue Child Care Benefits.

If an applicant is denied child care benefits or a recipient has their child care benefits terminated because the applicant/recipient failed to actively pursue child support without a good cause exception, the district must identify the reason for the action in the appropriate notice. In the denial notice, please include this language under the “You are not programmatically eligible for child care services because” section. All local districts must use the following language when denying or terminating child care benefits for not pursuing child support without a good cause exception, on the LDSS 4780- Denial of Your Application For Child Care Benefits, or the LDSS 4782-Notice of Intent to Discontinue Child Care Benefits, as appropriate: “You did not actively pursue court-ordered child support for [name of child(ren)] and did not show that you have good cause for not actively pursuing child support.” The regulation that must be cited when referencing this provision is 18 NYCRR 415.3(c).

In addition, when citing a regulation in any notice after May 15, 2004, please check to see that the correct cite is used. During the various changes made to the regulations, many sections were re-named and re-numbered. Thus, many existing provisions have new cites.

If you have any questions regarding the above, or on any other changes in the regulations, please contact the Bureau of Early Childhood Services Subsidy Unit at (518) 474-9324.
Client Notification Forms

Samples of the following Client Notification Forms are included:

- OCFS-LDSS-4779, Approval of Your Application for Child Care Benefits (2015)
- OCFS-LDSS-4780, Denial of Your Application for Child Care Benefits (2015)
- OCFS-LDSS-4782, Notice of Intent to Discontinue Child Care Benefits (2015)
- OCFS-LDSS-4784, Approval of Your Redetermination for Child Care Benefits (2015)
- OCFS-LDSS-4785, Approval of Your Transitional Child Care Benefits (2015)
- OCFS-LDSS-4773, Child Care Eligibility Re-Determination Coming Due (2013)
- OCFS-LDSS-7009, Notice of Child Care Assistance Overpayment and Repayment Requirements (2015)
- OCFS-LDSS-7010, Notice of Fraud Determination, Disqualification for Child Care Benefits and Repayment Plan (2005)
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NEW YORK STATE
OFFICE OF CHILDREN AND FAMILY SERVICES
APPROVAL OF YOUR APPLICATION FOR CHILD CARE BENEFITS

Your application dated __________________ for child care benefits has been approved. You are eligible to receive child care benefits for child care provided on __________________ through ______________ while you are ___________________.

Comments:

YOU HAVE THE RIGHT TO A CONFERENCE AND/OR A HEARING TO APPEAL THIS DECISION
READ THE BACK OF THIS NOTICE ON HOW TO REQUEST A CONFERENCE AND/OR HEARING TO APPEAL THIS DECISION

**Payment may vary based on fluctuations in your approved activity and/or absences.

Benefits will be paid:  ☐ Directly to you. ☐ Directly to your provider.

Your child care provider must submit a bill and attendance sheet to your local department of social services.

FAMILY SHARE. You are responsible for paying the following fees:

☐ Effective _________________, a Weekly Family Share must be paid to ___________________
  in the amount of $________________ per week.

☐ Effective _________________, an Additional Family Share must be paid to ___________________
  in the amount of $________________ per week.

☐ Effective _________________, a Court Ordered Family Share must be paid to ___________________
  in the amount of $________________ per week, for the child(ren) ___________________.

The following information is an explanation of how your weekly family share was determined.

Family’s annual gross income $ _________________

Minus 100% annual state income standard for a family size of _______ $ _________________

Remaining income $ _________________

Remaining income $ _________________ X family share % ________% = $ _________________

$ __________________ / 52 weeks = $ __________________ weekly family share

All family share amounts are rounded to the nearest $0.50. There is a minimum fee of $1 per week for all families not receiving TA.

In order to continue to receive benefits these are your responsibilities:

☐ Notify your caseworker immediately of any change in family income, who lives in your house, employment, child care arrangements or other changes which may affect your continued eligibility or the amount of your benefit.

☐ Promptly pay any family share required.

The LAW(S) AND/OR REGULATION(S) that allows us to do this is:

CLIENT/FAIR HEARINGS COPY
RIGHT TO ACCEPT OR DECLINE SERVICES: Approval of your benefits does not obligate you to accept the services. You may choose to decline the services by contacting your local department of social services.

If you disagree with your local department of social services decision you may request a conference and/or a fair hearing.

1. CONFERENCE: You have a right to a conference with your local department of social services to review the determination. If you want a conference, you should request one AS SOON AS POSSIBLE, because the outcome of the conference may impact your decision to request a fair hearing. At the conference, you may present information to demonstrate why you believe the agency action is not correct.

You may request a conference by:
(1) Calling: ____________________________ (PLEASE HAVE THIS NOTICE WITH YOU WHEN YOU CALL).
(2) Writing: Check the box below and mail to __________________________________________________________________________
   Please keep a copy for yourself.
   □ I want a conference. I do not agree with the agency’s action. You may explain on a separate paper why you disagree, but you do not have to include a written explanation.

2. FAIR HEARING: You have a right to a fair hearing to appeal the determination of the local department of social services. If you want a fair hearing, you have 60 DAYS from the NOTICE DATE, located on the front page, to make the request. You can request a fair hearing without requesting a conference.

You may request a fair hearing by:
(1) Calling: 1-800-342-3334 (PLEASE HAVE THIS NOTICE WITH YOU WHEN YOU CALL).
(2) Online: To send your fair hearing request online, go to http://www.otda.ny.gov/oah, click on the links to request a fair hearing using the online form, and follow the instructions to complete and submit the form online.
(3) Writing: Check the box, complete the information below and mail to the New York State Office of Administrative Hearings, Office of Temporary and Disability Assistance, P.O. Box 1930, Albany, New York, 12201-1930. Please keep a copy for yourself.
(4) Faxing: Check the box, complete the information below and fax both sides of this form to (518) 473-6735.
   □ I want a fair hearing. I do not agree with the agency’s action. You may explain on a separate paper why you disagree, but you do not have to include a written explanation.

Name: ___________________________________________ District: __________________________
Address: ___________________________________________ Case Number: __________________________
_________________________________________ Phone Number: __________________________

If you request a fair hearing, the State will send you a notice informing you of the time and place of the hearing. You have the right to be represented by legal counsel, a relative, a friend or other person, or to represent yourself. At the hearing you, your attorney or other representative will have the opportunity to present written and oral evidence to demonstrate why the action should not be taken, as well as an opportunity to question any persons who appear at the hearing. Also, you have a right to bring witnesses to speak in your favor. You should bring to the hearing any documents such as this notice, pay-stubs, receipts, child care bills, medical verification, letters, etc. that may be helpful in presenting your case.

LEGAL ASSISTANCE: If you need free legal assistance, you may be able to obtain such assistance by contacting your local Legal Aid Society or other legal advocate group. You may locate the nearest Legal Aid Society or advocate group by checking your Yellow Pages under “Lawyers” or by calling the number indicated on the first page of this notice.

ACCESS TO YOUR FILE AND COPIES OF DOCUMENTS: To help you get ready for the hearing, you have a right to look at your case file. If you call or write to us, we will provide you with free copies of the documents from your file, which we will give to the hearing officer at the fair hearing. To ask for documents or to find out how to look at your file, call us at the Record Access telephone number listed at the top of page one of this notice or write to us at the address printed at the top of page one of this notice. Also, if you call or write to us, we will provide you with free copies of other documents from your file which you may need to prepare for your fair hearing. If you want copies of documents from your case file, you should ask for them ahead of time. They will be provided to you within a reasonable time before the date of the hearing. Documents will be mailed to you only if you specifically ask that they be mailed.

INFORMATION: If you want more information about your case, how to ask for a conference or fair hearing, how to see your file, or how to get additional copies of documents, call us at the telephone numbers listed at the top of page one of this notice or write to us at the address printed at the top of page one of this notice.
NEW YORK STATE OFFICE OF CHILDREN AND FAMILY SERVICES

DENIAL OF YOUR APPLICATION FOR CHILD CARE BENEFITS

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<tr>
<th>NOTICE DATE:</th>
<th>NAME AND ADDRESS OF AGENCY/CENTER OR DISTRICT OFFICE</th>
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<tr>
<td>CASE NUMBER</td>
<td>CIN NUMBER</td>
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<td>CASE NAME (And C/O Name if Present) AND ADDRESS</td>
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<td>GENERAL TELEPHONE NO. FOR QUESTIONS OR HELP</td>
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<td>OR Agency Conference</td>
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<td>Fair Hearing information</td>
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<tr>
<th>OFFICE NO.</th>
<th>UNIT NO.</th>
<th>WORKER NO.</th>
<th>UNIT OR WORKER NAME</th>
<th>WORKER TELEPHONE NO.</th>
</tr>
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</table>

Your application dated ____________ for child care benefits has been denied and the reason(s) your application has denied are explained below.

Comments:

YOU HAVE THE RIGHT TO A CONFERENCE AND/OR A HEARING TO APPEAL THIS DECISION
READ THE BACK OF THIS NOTICE ON HOW TO REQUEST A CONFERENCE AND/OR HEARING TO APPEAL THIS DECISION

You are ineligible to receive benefits because:

☐ Your family’s gross income exceeds 200% of the State Income Standard, which is the maximum income allowed by New York State regulation to be eligible for child care subsidy. Your family’s monthly gross income of $___________ exceeds the maximum monthly income of $___________ for a family size of _________.

(Please see the attached addendum for additional information)

☐ You have not provided us with the following documents: __________________________________________________________
____________________________________________________________________________________________________________________

☐ You are not programmatically eligible for child care services because: ______________________________________________________
____________________________________________________________________________________________________________________

☐ Due to insufficient funding the district is not opening cases at this time.

☐ Due to insufficient funding, the district is only opening cases up to ______________% of the State Income Standard. Your family’s monthly gross income of $___________ exceeds the maximum monthly gross income of $___________ for your family size. Also, your family does not meet the eligibility criteria for a child care guarantee designation. (Please see attached addendum for additional information)

☐ Other: __________________________
____________________________________________________________________________________________________________________

The LAW(S) AND/OR REGULATION(S) that allows us to do this is: ____________________________________________________________
____________________________________________________________________________________________________________________

CLIENT/FAIR HEARINGS COPY
If you disagree with your local department of social services decision you may request a conference and/or a fair hearing.

1. **CONFERENCE:** You have a right to a conference with your local department of social services to review the determination. If you want a conference, you should request one AS SOON AS POSSIBLE, because the outcome of the conference may impact your decision to request a fair hearing. At the conference, you may present information to demonstrate why you believe the agency action is not correct.

   **You may request a conference by:**
   
   (1) **Calling:** ___________________________________________ (PLEASE HAVE THIS NOTICE WITH YOU WHEN YOU CALL).
   
   (2) **Writing:** Check the box below and mail to
   
   Please keep a copy for yourself.
   
   [ ] I want a conference. I do not agree with the agency’s action. You may explain on a separate paper why you disagree, but you do not have to include a written explanation.

2. **FAIR HEARING:** You have a right to a fair hearing to appeal the determination of the local department of social services. If you want a fair hearing, you have 60 DAYS from the NOTICE DATE, located on the front page, to make the request. You can request a fair hearing without requesting a conference.

   **You may request a fair hearing by:**
   
   (1) **Calling:** 1-800-342-3334 (PLEASE HAVE THIS NOTICE WITH YOU WHEN YOU CALL).
   
   (2) **Online:** To send your fair hearing request online, go to http://www.otda.ny.gov/oah, click on the links to request a fair hearing using the online form, and follow the instructions to complete and submit the form online.
   
   (3) **Writing:** Check the box, complete the information below and mail to the New York State Office of Administrative Hearings, Office of Temporary and Disability Assistance, P.O. Box 1930, Albany, New York, 12201-1930. Please keep a copy for yourself.
   
   (4) **Faxing:** Check the box, complete the information below and fax both sides of this form to (518) 473-6735.
   
   [ ] I want a fair hearing. I do not agree with the agency’s action. You may explain on a separate paper why you disagree, but you do not have to include a written explanation.

Name: __________________________   District: __________________________
Address: __________________________   Case Number: __________________________
Phone Number: __________________________

If you request a fair hearing, the State will send you a notice informing you of the time and place of the hearing. You have the right to be represented by legal counsel, a relative, a friend or other person, or to represent yourself. At the hearing you, your attorney or other representative will have the opportunity to present written and oral evidence to demonstrate why the action should not be taken, as well as an opportunity to question any persons who appear at the hearing. Also, you have a right to bring witnesses to speak in your favor. You should bring to the hearing any documents such as this notice, pay-stubs, receipts, child care bills, medical verification, letters, etc. that may be helpful in presenting your case.

**LEGAL ASSISTANCE:** If you need free legal assistance, you may be able to obtain such assistance by contacting your local Legal Aid Society or other legal advocate group. You may locate the nearest Legal Aid Society or advocate group by checking your Yellow Pages under “Lawyers” or by calling the number indicated on the first page of this notice.

**ACCESS TO YOUR FILE AND COPIES OF DOCUMENTS:** To help you get ready for the hearing, you have a right to look at your case file. If you call or write to us, we will provide you with free copies of the documents from your file, which we will give to the hearing officer at the fair hearing. To ask for documents or to find out how to look at your file, call us at the Record Access telephone number listed at the top of page one of this notice or write to us at the address printed at the top of page one of this notice. Also, if you call or write to us, we will provide you with free copies of other documents from your file which you may need to prepare for your fair hearing. If you want copies of documents from your case file, you should ask for them ahead of time. They will be provided to you within a reasonable time before the date of the hearing. Documents will be mailed to you only if you specifically ask that they be mailed.

**INFORMATION:** If you want more information about your case, how to ask for a conference or fair hearing, how to see your file, or how to get additional copies of documents, call us at the telephone numbers listed at the top of page one of this notice or write to us at the address printed at the top of page one of this notice.
ADDENDUM TO DENIAL OF YOUR APPLICATION
FOR CHILD CARE BENEFITS-FINANCIAL ELIGIBILITY CALCULATION

Effective Date: 
Case Name: 
Case Number: 

We have determined that you are not eligible for child care benefits. Your family’s monthly gross income is $ ________.

This exceeds the maximum monthly gross income standard of $ ________ for a family size of ________.

Please check the information below. If there is a mistake contact your caseworker listed on page one of this notice. If there is a mistake, it could mean that the decision made about your benefits is not correct.

There is a child with special needs residing in your household. [ ] Yes [ ] No If you have a child with special needs, that needs child care, you may have received this notice in error. Contact your caseworker on page one of this notice to determine if you were denied child care benefits in error.

Your family’s monthly gross income was determined from the following sources:

☐ Wages or salary (18 NYCRR § 404.5(b)(5)(i)) before taxes in the amount of: $ ________ per month.

☐ Social Security (18 NYCRR §404.5(b)(5)(iv)) in the amount of: $ ________ per month.

☐ Child Support (18 NYCRR §404.5(b)(5)(xi)) in the amount of: $ ________ per month.

☐ 18 NYCRR §404.5(b)(5) in the amount of: $ ________ per month.

*Other income not listed above as defined in New York State regulation

Your family’s total monthly gross income: $ ________

The following information is an explanation of how your eligibility for child care benefits was determined. To determine eligibility for child care benefits, your family’s monthly gross income for your family size was compared to the Social Service District’s (SSD) priority level for the monthly income standard. For a family to be eligible for child care benefits, a family must make less than the Monthly Income Standard amount listed below for their family size. Below are the Monthly Income Standards used by the district to determine your eligibility for child care benefits.

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<thead>
<tr>
<th>Family Size</th>
<th>SSD’s Priority Level = % Monthly Income Standard</th>
</tr>
</thead>
<tbody>
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<td>8</td>
<td></td>
</tr>
</tbody>
</table>

For families with more than 8 persons, add $ ________ for each additional person.

Your family’s monthly gross income is $ ________ for a family size of ________. This exceeds the maximum of $ ________.

*Other income not listed above and defined in New York State regulation 18 NYCRR 404.5(b)(5) are defined as but not limited to the following: net income for non-farm self-employment, i.e. gross receipts minus expenses from one’s own business, professional enterprise or partnership; or net income from farm self-employment, i.e. gross receipts minus operation expenses from the operation of a firm by a person on his own account, as owner, renter or sharecropper; or dividends, interest (on savings or bonds) income from estates or trusts, net rental income or royalties; public assistance (PA) or welfare payments include PA payments such as SSI and home relief; or pensions and annuities include pensions or retirement benefits paid to a retired person or his survivors; or unemployment compensation, workers’ compensation; or alimony; or veterans’ pensions.

In addition to the citations listed on the attached notice refer to the district’s Child and Family Services Plan, at http://ocfs.ny.gov/main/childcare/plans/plans.asp for additional information on how the district closes cases in the event that there are insufficient funds to provide child care benefits to all eligible families and the order in which they will open new cases should funding become available.
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NEW YORK STATE
OFFICE OF CHILDREN AND FAMILY SERVICES

NOTICE OF INTENT TO CHANGE CHILD CARE BENEFITS AND FAMILY SHARE PAYMENTS

---

**NOTICE DATE:**

**EFFECTIVE BENEFIT CHANGE DATE:**

**NAME AND ADDRESS OF AGENCY/CENTER OR DISTRICT OFFICE:**

---

**CASE NUMBER**

**CIN NUMBER**

**CASE NAME (And C/O Name if Present) AND ADDRESS**

---

**GENERAL TELEPHONE NO. FOR QUESTIONS OR HELP**

**OR**

Agency Conference

Fair Hearing information and assistance

Record Access

Legal Assistance Information

1-800-342-3334

---

**OFFICE NO.**

**UNIT NO.**

**WORKER NO.**

**UNIT OR WORKER NAME**

**WORKER TELEPHONE NO.**

---

This agency intends to change your child care benefit. Your current benefit will end and a new benefit will begin. Your current benefit will include services provided through [insert provider or facility].

The new benefit will begin with child care services provided on [start date] through [end date].

The changes are:

**Comments:**

YOU HAVE THE RIGHT TO A CONFERENCE AND/OR A HEARING TO APPEAL THIS DECISION

READ THE BACK OF THIS NOTICE ON HOW TO REQUEST A CONFERENCE AND/OR HEARING TO APPEAL THIS DECISION

**BENEFITS:**

<table>
<thead>
<tr>
<th>Child(ren):</th>
<th>For this provider:</th>
<th>For the amount of:*</th>
<th>Full Time or Part Time:</th>
</tr>
</thead>
<tbody>
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</tr>
</tbody>
</table>

*Payment may vary based on fluctuations in your approved activity and/or absences.

**FAMILY SHARE.** You are responsible for paying the following fees:

- **Effective** [start date], a **Weekly Family Share** must be paid to [provider] in the amount of $[amount] per week.

- **Effective** [start date], an **Additional Family Share** must be paid to [provider] in the amount of $[amount] per week.

- **Effective** [start date], a **Court Ordered Family Share** must be paid to [provider] in the amount of $[amount] per week, for the child(ren) [list names].

The following information is an explanation of how your weekly family share was determined:

- Family’s annual gross income $[income]

- Minus 100% annual state income standard for a family size of $[standard]

- Remaining income $[remaining]

- Remaining income $[remaining] \( \times \) family share % = $[family_share]

- $[family_share] / 52 weeks = $[weekly_share]

All family share amounts are rounded to the nearest $0.50. There is a minimum fee of $1 per week for all families not receiving TA.

The reason for this action is:

The LAW(S) AND/OR REGULATION(S) that allows us to do this is:

---

CLIENT/FAIR HEARINGS COPY
If you disagree with your local department of social services decision you may request a conference and/or a fair hearing.

1. **CONFERENCE:** You have a right to a conference with your local department of social services to review the determination. If you want a conference, you should request one **AS SOON AS POSSIBLE,** because the outcome of the conference may impact your decision to request a fair hearing. If you request a fair hearing and your child care benefit to remain unchanged (aid continuing) until the fair hearing decision is issued you must request a fair hearing before the EFFECTIVE BENEFIT CHANGE DATE on the front page of this notice. A request for a conference alone will not result in your benefits being continued. At the conference, you may present information to demonstrate why you believe the agency action is not correct.

You may request a conference by:

1. **Calling:** 1-800-342-3334 (PLEASE HAVE THIS NOTICE WITH YOU WHEN YOU CALL).

2. **Writing:** Check the box below and mail to ________________________ (PLEASE HAVE THIS NOTICE WITH YOU WHEN YOU CALL).

☐ I want a conference. I do not agree with the agency’s action. You may explain on a separate paper why you disagree, but you do not have to include a written explanation.

2. **FAIR HEARING:** You have a right to a fair hearing to appeal the determination of the local department of social services. If you want a fair hearing, you have 60 DAYS from the NOTICE DATE, located on the front page, to make the request. If you do not want your child care benefit to change until the fair hearing decision is issued, you must request a fair hearing before the EFFECTIVE BENEFIT CHANGE DATE listed on the front page of this notice. You do not have to request a conference before requesting a fair hearing.

You may request to keep your child care benefit unchanged until a fair hearing decision has been issued. If you request your benefit not to be changed until a fair hearing decision has been issued, and you lose the fair hearing, you will have been overpaid. The local department of social services will seek to recover the overpayment from you by reducing future child care benefits, by collecting a lump sum payment or installment payments, or through legal action.

You may request a fair hearing by:

1. **Calling:** 1-800-342-3334 (PLEASE HAVE THIS NOTICE WITH YOU WHEN YOU CALL).

2. **Online:** To send your fair hearing request online, go to [http://www.otda.ny.gov/oah](http://www.otda.ny.gov/oah), click on the links to request a fair hearing using the online form, and follow the instructions to complete and submit the form online.

3. **Writing:** Check the box and complete the information below. Mail to the New York State Office of Administrative Hearings, Office of Temporary and Disability Assistance, P.O. Box 1930, Albany, New York, 12201-1930. Please keep a copy for yourself.

4. **Faxing:** Check the box and complete the information below. Fax both sides of this form to (518) 473-6735.

☐ I want a fair hearing. I do not agree with the agency’s action. You may explain on a separate paper why you disagree, but you do not have to include a written explanation.

Select one.

☐ Do **NOT** change my child care benefit until a fair hearing decision has been issued.

☐ Change my child care benefit on the effective date listed on this notice, pending the fair hearing decision.

Name: ___________________________ District: ___________________________

Address: ___________________________ Case Number: ___________________________

Phone Number: ___________________________

If you request a fair hearing, the State will send you a notice informing you of the time and place of the hearing. You have the right to be represented by legal counsel, a relative, a friend or other person, or to represent yourself. At the hearing, your attorney or other representative will have the opportunity to present written and oral evidence to demonstrate why the action should not be taken, as well as an opportunity to question any persons who appear at the hearing. Also, you have a right to bring witnesses to speak in your favor. You should bring to the hearing any documents such as this notice, pay-stubs, receipts, child care bills, medical verification, letters, etc. that may be helpful in presenting your case.

**LEGAL ASSISTANCE:** If you need free legal assistance, you may be able to obtain such assistance by contacting your local Legal Aid Society or other legal advocate group. You may locate the nearest Legal Aid Society or advocate group by checking your Yellow Pages under “Lawyers” or by calling the number indicated on the first page of this notice.

**ACCESS TO YOUR FILE AND COPIES OF DOCUMENTS:** To help you get ready for the hearing, you have a right to look at your case file. If you call or write to us, we will provide you with free copies of the documents from your file, which we will give to the hearing officer at the fair hearing. To ask for documents or to find out how to look at your file, call us at the Record Access telephone number listed at the top of page one of this notice or write to us at the address printed at the top of page one of this notice. Also, if you call or write to us, we will provide you with free copies of other documents from your file which you may need to prepare for your fair hearing. If you want copies of documents from your case file, you should ask for them ahead of time. They will be provided to you within a reasonable time before the date of the hearing. Documents will be mailed to you **only** if you specifically ask that they be mailed.

**INFORMATION:** If you want more information about your case, how to ask for a conference or fair hearing, how to see your file, or how to get additional copies of documents, call us at the telephone numbers listed at the top of page one of this notice or write to us at the address printed at the top of page one of this notice.
ADDENDUM TO NOTICE OF INTENT TO CHANGE CHILD CARE BENEFITS AND FAMILY SHARE PAYMENTS-FINANCIAL ELIGIBILITY CALCULATION

Effective Date: 
Case Name: 
Case Number: 

The amount that you pay for your family share has changed from _______________ to _______________.

Below are the sources of income used to calculate your family’s income and the calculation used to determine your family share. Please check the information below. If there is a mistake contact your caseworker listed on page one of this notice.

Your family’s monthly gross income was determined from the following sources:

- Wages or salary (18 NYCRR § 404.5(b)(5)(i)) before taxes in the amount of: $________ per month.
- Social Security (18 NYCRR §404.5(b)(5)(iv)) in the amount of: $________ per month.
- Child Support (18 NYCRR §404.5(b)(5)(xi)) in the amount of: $________ per month.
- *Other income not listed above as defined in New York State regulation 18 NYCRR §404.5(b)(5) in the amount of: $________ per month.

Your family’s total monthly gross income: $________ per month.

The following information is an explanation of how your weekly family share was determined.

<table>
<thead>
<tr>
<th>Family’s total monthly gross income</th>
<th>$________</th>
<th>X 12 months = $________</th>
<th>Annual Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family’s annual gross income</td>
<td>$________</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Minus 100% state income standard for a family size of</td>
<td>$________</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Remaining income</td>
<td>$________</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Remaining income</td>
<td>$________</td>
<td>X family share % ______</td>
<td>$________</td>
</tr>
<tr>
<td>$________ / 52 weeks = $________</td>
<td></td>
<td></td>
<td>weekly family share.</td>
</tr>
</tbody>
</table>

Family Size          | 100% Annual State Income Standard |
---------------------|----------------------------------|
1                    |                                  |
2                    |                                  |
3                    |                                  |
4                    |                                  |
5                    |                                  |
6                    |                                  |
7                    |                                  |
8                    |                                  |

For families with more than 8 persons, add $________ for each additional person.

*Other income not listed above and defined in New York State regulation 18 NYCRR 404.5(b)(5) are defined as but not limited to the following: net income for non-farm self-employment, i.e. gross receipts minus expenses from one’s own business, professional enterprise or partnership; or net income from farm self-employment, i.e. gross receipts minus operation expenses from the operation of a firm by a person on his own account, as owner, renter or sharecropper; or dividends, interest (on savings or bonds) income from estates or trusts, net rental income or royalties; public assistance (PA) or welfare payments include PA payments such as PA, SSI and home relief; or pensions and annuities include pensions or retirement benefits paid to a retired person or his survivors; or unemployment compensation, workers’ compensation; or alimony; or veterans’ pensions.
NOTICE OF INTENT TO DISCONTINUE CHILD CARE BENEFITS

This notice is to inform you that your child care benefit case will be closed on (date) / / . You are not eligible for child care benefits for services provided after

Comments:

YOU HAVE THE RIGHT TO A CONFERENCE AND/OR A HEARING TO APPEAL THIS DECISION
READ THE BACK OF THIS NOTICE ON HOW TO REQUEST A CONFERENCE AND/OR HEARING TO APPEAL THIS DECISION

The reason for this action is:

☐ Your family’s gross income exceeds 200% of the State Income Standard, which is the maximum income allowed by New York State regulation to be eligible for child care subsidy. Your family’s monthly gross income of $ exceeds the maximum monthly income of $ for a family size of .

(Please see the attached addendum for additional information)

☐ Due to insufficient funding, the district is closing cases at or above % of the State Income Standard.

Your family’s monthly gross income of $ exceeds the maximum monthly gross income of $ for your family size. Also, your family does not meet the eligibility criteria for a child care guarantee designation. (Please see the attached addendum for additional information)

☐ You are not programmatically eligible for child care services because:

☐ You did not provide the following documentation or the following documentation was not adequate:

☐ Other

The LAW(S) AND/OR REGULATION(S) that allows us to do this is:

CLIENT/FAIR HEARINGS COPY
If you disagree with your local department of social services decision you may request a conference and/or a fair hearing.

1. **CONFERENCE:** You have a right to a conference with your local department of social services to review the determination. If you want a conference, you should request one AS SOON AS POSSIBLE, because the outcome of the conference may impact your decision to request a fair hearing. If you want a fair hearing and your child care benefit to remain unchanged (aid continuing) until the fair hearing decision is issued you must request a fair hearing before the EFFECTIVE CLOSING DATE on the front page of this notice. A request for a conference alone will not result in your benefits being continued. At the conference, you may present information to demonstrate why you believe the agency action is not correct.

You may request a conference by:

1. **Calling:** 1-800-342-3334. (PLEASE HAVE THIS NOTICE WITH YOU WHEN YOU CALL).
2. **Writing:** Check the box below and mail to ______________________________ (PLEASE HAVE THIS NOTICE WITH YOU WHEN YOU CALL).
   - I want a conference. I do not agree with the agency's action. You may explain on a separate paper why you disagree, but you do not have to include a written explanation.

2. **FAIR HEARING:** You have a right to a fair hearing to appeal the determination of the local department of social services. If you want a fair hearing, you have 60 DAYS from the NOTICE DATE, located on the front page, to make the request. If you do not want your child care benefit to change until the fair hearing decision is issued, you must request a fair hearing before the EFFECTIVE CLOSING DATE listed on the front page of this notice. You do not have to request a conference before requesting a fair hearing.

You may request to keep your child care benefit until a fair hearing decision has been issued. If you request your benefit to be continued until a fair hearing decision has been issued, and you lose the fair hearing, you will have been overpaid. The local department of social services will seek to recover the overpayment from you by reducing future child care benefits, by collecting a lump sum payment or installment payments, or through legal action.

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4. **Faxing:** Check the box and complete the information below. Fax both sides of this form to (518) 473-6735.
   - I want a fair hearing. I do not agree with the agency's action. You may explain on a separate paper why you disagree, but you do not have to include a written explanation.
   - Select one.
   - Do NOT stop my child care benefit until a fair hearing decision has been issued.
   - Stop my child care benefit on the effective date listed on this notice, pending the fair hearing decision.

Name: ___________________________________________ District: ________________
Address: ________________________________________ Case Number: __________
Phone Number: ____________________________

If you request a fair hearing, the State will send you a notice informing you of the time and place of the hearing. You have the right to be represented by legal counsel, a relative, a friend or other person, or to represent yourself. At the hearing you, your attorney or other representative will have the opportunity to present written and oral evidence to demonstrate why the action should not be taken, as well as an opportunity to question any persons who appear at the hearing. Also, you have a right to bring witnesses to speak in your favor. You should bring to the hearing any documents such as this notice, pay-stubs, receipts, child care bills, medical verification, letters, etc. that may be helpful in presenting your case.

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ADDENDUM TO NOTICE OF INTENT TO DISCONTINUE CHILD CARE BENEFITS-FINANCIAL ELIGIBILITY CALCULATION

Effective Date: ____________________________ Case Number: ____________________________

We have determined that you are no longer eligible for child care benefits. Your family’s monthly gross income is $___________.

This exceeds the maximum monthly gross income standard of $__________ per month, for a family size of ________.

Please check the information below. If there is a mistake contact your caseworker listed on page one of this notice. If there is a mistake, it could mean that the decision made about your benefits is not correct.

There is a child with special needs residing in your household. ☐ Yes ☐ No  If you have a child with special needs, that needs child care, you may have received this notice in error. Contact your caseworker listed on page one of this notice to determine if your case was closed in error.

Your family’s monthly gross income was determined from the following sources:

- Wages or salary (18 NYCRR § 404.5(b)(5)(i)) before taxes in the amount of: $_________ per month.
- Social Security (18 NYCRR §404.5(b)(5)(iv)) in the amount of: $_________ per month.
- Child Support (18 NYCRR §404.5(b)(5)(xi)) in the amount of: $_________ per month.
- *Other income not listed above as defined in New York State regulation 18 NYCRR §404.5(b)(5) in the amount of: $_________ per month.
- 18 NYCRR §404.5(b)(5) in the amount of: $_________ per month.

Your family’s total monthly gross income: $_________.

The following information is an explanation of how your eligibility for child care benefits was determined. To determine eligibility for child care benefits, your family’s monthly gross income for your family size was compared to the Social Service District’s (SSD) priority level for the monthly income standard. For a family to be eligible for child care benefits, a family must make less than the Monthly Income Standard amount listed below for their family size. Below are the Monthly Income Standards used by the district to determine your eligibility for child care benefits.

<table>
<thead>
<tr>
<th>Family Size</th>
<th>SSD’s Priority level = _____% Monthly Income Standard</th>
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</tr>
</tbody>
</table>

For families with more than 8 persons, add $_________ for each additional person.

Your family’s monthly gross income is $_________ for a family size of ________.

This exceeds the maximum income of $_________.

*Other income not listed above and defined in New York State regulation 18NYCRR 404.5(b)(5) are defined as but not limited to the following: net income for non-farm self-employment, i.e. gross receipts minus expenses from one’s own business, professional enterprise or partnership; or net income from farm self-employment, i.e. gross receipts minus operation expenses from the operation of a firm by a person on his own account, as owner, renter or sharecropper; or dividends, interest (on savings or bonds) income from estates or trusts, net rental income or royalties, public assistance (PA) or welfare payments include PA payments such as PA, SSI and home relief; or pensions and annuities include pensions or retirement benefits paid to a retired person or his survivors; or unemployment compensation, workers’ compensation; or alimony; or veterans’ pensions.

In addition to the citations listed on the attached notice refer to the district’s Child and Family Services Plan, at http://ocfs.ny.gov/main/childcare/plans/plans.asp for additional information on how the district closes cases in the event that there are insufficient funds to provide child care benefits to all eligible families and the order in which they will open new cases should funding become available.
This notice is to tell you that you are delinquent in making payment of your family share of $______________ per _____. The total amount overdue is $______________. If the total amount overdue has not been paid, or if a satisfactory arrangement to make payment of the amount overdue has not been made by ____________, this agency will take action to discontinue your child care benefits.

You must pay the total amount overdue or make a satisfactory arrangement for payment of the overdue amount no later than ____________ to avoid further action by this agency.

If you need to arrange a payment plan, contact: ________________________________

Your overdue fees should be paid to: ________________________________

The Law(s) and/or Regulation(s) that allow us to do this is: 18 NYCRR Section 404.6(a) and 404.6(b).

FAILURE TO PAY FAMILY SHARE OR MEET THE REQUIREMENTS OF YOUR PAYMENT PLAN WILL LEAD TO DISCONTINUANCE OF YOUR CHILD CARE BENEFITS.
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NEW YORK STATE
OFFICE OF CHILDREN AND FAMILY SERVICES
APPROVAL OF YOUR REDETERMINATION FOR CHILD CARE BENEFITS

NOTICE DATE: EFFECTIVE DATE NAME AND ADDRESS OF AGENCY/CENTER OR DISTRICT OFFICE
CASE NUMBER CIN NUMBER
CASE NAME (And C/O Name if Present) AND ADDRESS

GENERAL TELEPHONE NO. FOR QUESTIONS OR HELP

OR Agency Conference
Fair Hearing information
and assistance
Record Access
Legal Assistance Information

1-800-342-3334

OFFICE NO. UNIT NO. WORKER NO. UNIT OR WORKER NAME WORKER TELEPHONE NO.

Your application dated for child care benefits has been approved. You are eligible to receive child care benefits for child care provided on through while you are .

Comments: YOU HAVE THE RIGHT TO A CONFERENCE AND/OR A HEARING TO APPEAL THIS DECISION
READ THE BACK OF THIS NOTICE ON HOW TO REQUEST A CONFERENCE AND/OR HEARING TO APPEAL THIS DECISION

BENEFITS. Payment will be provided on behalf of the following:

Child(ren): For this provider: For the amount of:** Full Time or Part Time:

**Payment may vary based on fluctuations in your approved activity and/or absences.

Benefits will be paid: ☐ Directly to you. ☐ Directly to your provider.

Your provider must submit a bill and attendance sheet to your local department of social services.

FAMILY SHARE. You are responsible for paying the following fees:

☐ Effective , a Weekly Family Share must be paid to in the amount of $ per week.

☐ Effective , an Additional Family Share must be paid to in the amount of $ per week.

☐ Effective , a Court Ordered Family Share must be paid to in the amount of $ per week, for the child(ren)

The following information is an explanation of how your weekly family share was determined.

Family’s annual gross income $ Minus 100% annual state income standard for a family size of $ Remaining income $ Remaining income $ X family share % % = $ $ / 52 weeks = $ weekly family share

All family share amounts are rounded to the nearest $0.50. There is a minimum fee of $1 per week for all families not receiving TA.

In order to continue to receive benefits these are your responsibilities:

- Notify your caseworker immediately of any change in family income, who lives in your house, employment, child care arrangements or other changes which may affect your continued eligibility or the amount of your benefit.
- Promptly pay any family share required.

The LAW(S) AND/OR REGULATIONS(S) that allows us to do this is:
RIGHT TO ACCEPT OR DECLINE SERVICES: Approval of your benefits does not obligate you to accept the services. You may choose to decline the services by contacting your local department of social services.

If you disagree with your local department of social services decision you may request a conference and/or a fair hearing.

1. **CONFERENCE:** You have a right to a conference with your local department of social services to review the determination. If you want a conference, you should request one AS SOON AS POSSIBLE, because the outcome of the conference may impact your decision to request a fair hearing. If you want a fair hearing and your child care benefit to remain unchanged (aid continuing) until the fair hearing decision is issued you must request a fair hearing before the EFFECTIVE DATE on the front page of this notice. A request for a conference alone will not result in your benefits being continued. At the conference, you may present information to demonstrate why you believe the agency action is not correct.

You may request a conference by:

(1) **Calling:** _[Phone number]_ (PLEASE HAVE THIS NOTICE WITH YOU WHEN YOU CALL).

(2) **Writing:** Check the box below and mail to

Please keep a copy for yourself.

☐ I want a conference. I do not agree with the agency’s action. You may explain on a separate paper why you disagree, but you do not have to include a written explanation.

2. **FAIR HEARING:** You have a right to a fair hearing to appeal the determination of the local department of social services. If you want a fair hearing, you have 60 DAYS from the NOTICE DATE, located on the front page, to make the request. If you do not want your child care benefit to change until the fair hearing decision is issued, you must request a fair hearing before the EFFECTIVE DATE listed on the front page of this notice. You can request a fair hearing without requesting a conference.

You may request to keep your child care benefit unchanged until a fair hearing decision has been issued. If you request your benefit not to be changed until a fair hearing decision has been issued, and you lose the fair hearing, you will have been overpaid. The local department of social services will seek to recover the overpayment from you by reducing future child care benefits, by collecting a lump sum payment or installment payments, or through legal action.

You may request a fair hearing by:

(1) **Calling:** _[Phone number]_ (PLEASE HAVE THIS NOTICE WITH YOU WHEN YOU CALL).

(2) **Online:** To send your fair hearing request online, go to [http://www.otda.ny.gov/oah](http://www.otda.ny.gov/oah), click on the links to request a fair hearing using the online form, and follow the instructions to complete and submit the form online.

(3) **Writing:** Check the box, complete the information below and mail to the New York State Office of Administrative Hearings, Office of Temporary and Disability Assistance, P.O. Box 1930, Albany, New York, 12201-1930. Please keep a copy for yourself.

(4) **Faxing:** Check the box, complete the information below and fax both sides of this form to (518) 473-6735.

☐ I want a fair hearing. I do not agree with the agency’s action. You may explain on a separate paper why you disagree, but you do not have to include a written explanation.

Select one.

☐ Do NOT change my child care benefit until a fair hearing decision has been issued.

☐ Change my child care benefit on the effective date listed on this notice, pending the fair hearing decision.

Name: ________________________________ District: ________________________________

Address: ________________________________ Case Number: ________________________________

Phone: ________________________________

If you request a fair hearing, the State will send you a notice informing you of the time and place of the hearing. You have the right to be represented by legal counsel, a relative, a friend or other person, or to represent yourself. At the hearing you, your attorney or other representative will have the opportunity to present written and oral evidence to demonstrate why the action should not be taken, as well as an opportunity to question any persons who appear at the hearing. Also, you have a right to bring witnesses to speak in your favor. You should bring to the hearing any documents such as this notice, pay-stubs, receipts, child care bills, medical verification, letters, etc. that may be helpful in presenting your case.

**LEGAL ASSISTANCE:** If you need free legal assistance, you may be able to obtain such assistance by contacting your local Legal Aid Society or other legal advocate group. You may locate the nearest Legal Aid Society or advocate group by checking your Yellow Pages under “Lawyers” or by calling the number indicated on the first page of this notice.

**ACCESS TO YOUR FILE AND COPIES OF DOCUMENTS:** To help you get ready for the hearing, you have a right to look at your case file. If you call or write to us, we will provide you with free copies of the documents from your file, which we will give to the hearing officer at the fair hearing. To ask for documents or to find out how to look at your file, call us at the Record Access telephone number listed at the top of page one of this notice or write to us at the address printed at the top of page one of this notice. Also, if you call or write to us, we will provide you with free copies of other documents from your file which you may need to prepare for your fair hearing. If you want copies of documents from your case file, you should ask for them ahead of time. They will be provided to you within a reasonable time before the date of the hearing. Documents will be mailed to you only if you specifically ask that they be mailed.

**INFORMATION:** If you want more information about your case, how to ask for a conference or fair hearing, how to see your file, or how to get additional copies of documents, call us at the telephone numbers listed at the top of page one of this notice or write to us at the address printed at the top of page one of this notice.
Your transitional child care benefits have been approved. You are eligible to receive child care benefits for child care services provided on __________ through __________ while you are working.

Comments:

**YOU HAVE THE RIGHT TO A CONFERENCE AND/OR A HEARING TO APPEAL THIS DECISION**

READ THE BACK OF THIS NOTICE ON HOW TO REQUEST A CONFERENCE AND/OR HEARING TO APPEAL THIS DECISION

BENEFITS. Payment will be provided on behalf of the following:

<table>
<thead>
<tr>
<th>Child(ren):</th>
<th>For this provider:</th>
<th>For the amount of:**</th>
<th>Full Time or Part Time:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td></td>
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</tbody>
</table>

**Payment may vary based on fluctuations in your approved activity and/or absences.**

Benefits will be paid: ☐ Directly to you. ☐ Directly to your provider.

Your provider must submit a bill and attendance sheet to your local department of social services.

FAMILY SHARE. You are responsible for paying the following fees:

☐ Effective __________, a Weekly Family Share must be paid to __________________ in the amount of $ __________ per week.

☐ Effective __________, an Additional Family Share must be paid to __________________ in the amount of $ __________ per week.

☐ Effective __________, a Court Ordered Family Share must be paid to __________________ in the amount of $ __________ per week, for the child(ren) __________________.

The following information is an explanation of how your weekly family share was determined.

<table>
<thead>
<tr>
<th>Family’s annual gross income</th>
<th>$ __________</th>
</tr>
</thead>
<tbody>
<tr>
<td>Minus 100% annual state income standard for a family size of</td>
<td>$ __________</td>
</tr>
<tr>
<td>Remaining income</td>
<td>$ __________</td>
</tr>
<tr>
<td>Remaining income</td>
<td>$ __________</td>
</tr>
<tr>
<td>X family share %</td>
<td>% = $ __________</td>
</tr>
<tr>
<td>$ __________ / 52 weeks = $ __________ weekly family share</td>
<td></td>
</tr>
</tbody>
</table>

All family share amounts are rounded to the nearest $.50. There is a minimum fee of $1 per week for all families not receiving TA.

In order to continue to receive benefits these are your responsibilities:

- Notify your caseworker immediately of any change in family income, who lives in your house, employment, child care arrangements or other changes which may affect your continued eligibility or the amount of your benefit.
- Promptly pay any family share required.

The LAW(S) AND/OR REGLATIONS(S) that allows us to do this is:
RIGHT TO ACCEPT OR DECLINE SERVICES: Approval of your benefits does not obligate you to accept the services. You may choose to decline the services by contacting your local department of social services.

If you disagree with your local department of social services decision you may request a conference and/or a fair hearing.

1. **CONFERENCE:** You have a right to a conference with your local department of social services to review the determination. If you want a conference, you should request one AS SOON AS POSSIBLE, because the outcome of the conference may impact your decision to request a fair hearing. If you want a fair hearing and your child care benefit to remain unchanged (aid continuing) until the fair hearing decision is issued you must request a fair hearing before the EFFECTIVE DATE on the front page of this notice. A request for a conference alone will not result in your benefits being continued. At the conference, you may present information to demonstrate why you believe the agency action is not correct.

   **You may request a conference by:**
   1. **Calling:**

   (PLEASE HAVE THIS NOTICE WITH YOU WHEN YOU CALL).

   2. **Writing:** Check the box below and mail to

   Please keep a copy for yourself.

   □ I want a conference. I do not agree with the agency’s action. You may explain on a separate paper why you disagree, but you do not have to include a written explanation.

2. **FAIR HEARING:** You have a right to a fair hearing to appeal the determination of the local department of social services. If you want a fair hearing, you have 60 DAYS from the NOTICE DATE, located on the front page, to make the request. If you do not want your child care benefit to change until the fair hearing decision is issued, you must request a fair hearing before the EFFECTIVE DATE listed on the front page of this notice. You do not have to request a conference before requesting a fair hearing.

   You may request to keep your child care benefit unchanged until a fair hearing decision has been issued. If you request your benefit not to be changed until a fair hearing decision has been issued, and you lose the fair hearing, you will have been overpaid. The local department of social services will seek to recover the overpayment from you by reducing future child care benefits, by collecting a lump sum payment or installment payments, or through legal action.

   **You may request a fair hearing by:**
   1. **Calling:** 1-800-342-3334 (PLEASE HAVE THIS NOTICE WITH YOU WHEN YOU CALL).

   2. **Online:** To send your fair hearing request online, go to http://www.otda.ny.gov/oah, click on the links to request a fair hearing using the online form, and follow the instructions to complete and submit the form online.

   3. **Writing:** Check the box and complete the information below. Mail to the New York State Office of Administrative Hearings, Office of Temporary and Disability Assistance, P.O. Box 1390, Albany, New York, 12201-1930. Please keep a copy for yourself.

   □ I want a fair hearing. I do not agree with the agency’s action. You may explain on a separate paper why you disagree, but you do not have to include a written explanation.

   **Select one.**

   □ Do NOT change my child care benefit until a fair hearing decision has been issued.

   □ Change my child care benefit on the effective date listed on this notice, pending the fair hearing decision.

   **Name:** ____________________________ **District:** ____________________________

   **Address:** ____________________________ **Case Number:** ____________________________

   **Phone:** ____________________________

   If you request a fair hearing, the State will send you a notice informing you of the time and place of the hearing. You have the right to be represented by legal counsel, a relative, a friend or other person, or to represent yourself. At the hearing you, your attorney or other representative will have the opportunity to present written and oral evidence to demonstrate why the action should not be taken, as well as an opportunity to question any persons who appear at the hearing. Also, you have a right to bring witnesses to speak in your favor. You should bring to the hearing any documents such as this notice, pay stubs, receipts, child care bills, medical verification, letters, etc. that may be helpful in presenting your case.

LEGAL ASSISTANCE: If you need free legal assistance, you may be able to obtain such assistance by contacting your local Legal Aid Society or other legal advocate group. You may locate the nearest Legal Aid Society or advocate group by checking your Yellow Pages under “Lawyers” or by calling the number printed on the first page of this notice.

ACCESS TO YOUR FILE AND COPIES OF DOCUMENTS: To help you get ready for the hearing, you have a right to look at your case file. If you call or write to us, we will provide you with free copies of the documents from your file, which we will give to the hearing officer at the fair hearing. To ask for documents or to find out how to look at your file, call us at the Record Access telephone number listed at the top of page one of this notice or write to us at the address printed at the top of page one of this notice. Also, if you call or write to us, we will provide you with free copies of other documents from your file which you may need to prepare for your fair hearing. If you want copies of documents from your case file, you should ask for them ahead of time. They will be provided to you within a reasonable time before the date of the hearing. Documents will be mailed to you only if you specifically ask that they be mailed.

INFORMATION: If you want more information about your case, how to ask for a conference or fair hearing, how to see your file, or how to get additional copies of documents, call us at the telephone numbers listed at the top of page one of this notice or write to us at the address printed at the top of page one of this notice.
NEW YORK STATE
OFFICE OF CHILDREN AND FAMILY SERVICES
CHILD CARE ELIGIBILITY RE-DETERMINATION COMING DUE

<table>
<thead>
<tr>
<th>NOTICE DATE</th>
<th>EFFECTIVE DATE</th>
<th>NAME AND ADDRESS OF AGENCY/CENTER OR DISTRICT OFFICE</th>
</tr>
</thead>
<tbody>
<tr>
<td>CASE NUMBER</td>
<td>CIN NUMBER</td>
<td></td>
</tr>
</tbody>
</table>

CASE NAME (And C/O Name if Present) AND ADDRESS

GENERAL TELEPHONE NO. FOR QUESTIONS OR HELP

<table>
<thead>
<tr>
<th>OR Agency Conference</th>
<th>Fair Hearing information and assistance</th>
<th>Record Access</th>
<th>Legal Assistance Information</th>
</tr>
</thead>
</table>

OFFICE NO. UNIT NO. WORKER NO. UNIT OR WORKER NAME WORKER TELEPHONE NO.

In order for your child care assistance to continue, the Local Social Services District must re-determine your continued eligibility for child care assistance. Please complete and return the enclosed application along with all the required documentation indicated below by _______________. If you fail to complete the application and submit the required documentation by the above date, you will no longer be receiving child care benefits beginning on _______________. If this happens, you will receive the Notice of Intent to Discontinue Child Care Benefits that will advise you again when your child care will be discontinued and what appeal rights you have to challenge this action.

We are required to re-determine your eligibility for child care assistance per 18 NYCRR 404.1(d)(2). You must submit the following documentation so that your eligibility for child care assistance can be determined.

- LDSS-2921 Common Application or Local Child Care Application
  The application must be completed, signed and returned to your Social Services District.

- Verification of Earned Income of Household Members
  If you receive child care assistance because you are working:
  - You must provide copies of the last 8 weeks of pay stubs, if the amount you are paid is roughly the same from paycheck to paycheck; or, if your income often notably changes from paycheck to paycheck, you must provide the last 6 months of pay stubs. If you have questions about how many pay stubs you must submit, please contact your worker at the number listed above for help.
  If you are self-employed:
  - You must provide business records, tax records, or records and related materials concerning self-employment earnings and expenses.
  If you or any other household member receives money from the following, you must provide proof of income.
    - Social Security
    - Pensions/Annuities
    - Alimony
    - Other Income
    - Dividends, Interest Income
    - Unemployment Compensation
    - Child Support
    - Public Assistance
    - Worker’s Compensation
    - Veterans Pensions
  If you receive child care assistance because you are participating in an Education/Training program you must provide:
    - A copy of your last report card or transcript, and
    - Documentation of the educational/training program you are attending

- Verification of Residency
  - A statement from your landlord verifying your residency or
  - A copy of current rent receipt, lease, or mortgage statement

- Other:
  If you cannot obtain these items by the above date or have questions, please call your case worker at your Local Social Services District at the number listed above for assistance.

Additional Comments: ______________________________

__
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NEW YORK STATE
OFFICE OF CHILDREN AND FAMILY SERVICES
NOTICE OF CHILD CARE ASSISTANCE OVERPAYMENT AND REPAYMENT REQUIREMENTS

NOTICE DATE: NAME AND ADDRESS OF AGENCY/CENTER OR DISTRICT OFFICE

CASE NUMBER: CIN NUMBER: GENERAL TELEPHONE NO. FOR QUESTIONS OR HELP

CASE Name (And C/O Name if Present) and ADDRESS OR Agency Conference

GENERAL TELEPHONE NO. FOR QUESTIONS OR HELP

OR Agency Conference

Fair Hearings Information and Assistance

Record Access

Legal Assistance Information

1-800-342-3334

OFFICE NO. UNIT NO. WORKER NO. UNIT OR WORKER NAME TELEPHONE NO.

YOU HAVE THE RIGHT TO A CONFERENCE AND/OR A HEARING TO APPEAL THIS DECISION
READ THE BACK OF THIS NOTICE ON HOW TO REQUEST A CONFERENCE AND/OR HEARING TO APPEAL THIS DECISION

SECTION I – NOTICE OF CHILD CARE ASSISTANCE OVERPAYMENT
You received more child care benefits than you should have (an overpayment) from to . The amount of the overpayment is .

The reason the overpayment occurred is:

☐ You or someone in your household failed to inform us of changes that affect your eligibility or benefit level.

☐ We incorrectly gave you more benefits than you should have gotten due to: __________________________

☐ Other:

Explanation and Calculation of Overpayment:

The regulations that allow us to do this are 18 NYCRR 415.4(i) and (j).

SECTION II – REPAYMENT PLAN AGREEMENT: DO NOT COMPLETE IF REQUESTING A CONFERENCE OR FAIR HEARING
If you agree that you received an overpayment, as shown in Section I, you are required to make full repayment by .

Please select a repayment option below, sign, make a copy for yourself, and return to the address at the bottom of this page.

If you are unable to repay the overpayment, want to set up another repayment agreement, or have questions please call .

Please select one of the following repayment plan options:

☐ Revised Family Share – Recovery will be made from my child care benefits. This option is only available if you are still receiving child care benefits. I will pay $ per week, in addition to my current family share of $ per week.

My total family share is now $ per week. I will make this payment each week to my child care provider. My first payment is due on . The Department of Social Services will pay the child care provider $ per week.

☐ Installment Payment. I will make weekly payments of $ to the Department of Social Services. I will send payment to the address below. My first payment is due on . The Department of Social Services will pay the child care provider $ per week.

☐ Lump Sum Payment. I will make one payment of $ to the Department of Social Services. I will send payment to the address below. My payment is due on .

I agree to repay by this method. I understand that failure to pay the amount stated on time will result in a discontinuation of my child care benefits and/or legal action may be taken in the court to recover this overpayment.

SIGNATURE DATE

Return this repayment plan agreement to: Return Payment to:

CLIENT/FAIR HEARING COPY
If you disagree with your local department of social services decision you may request a conference and/or a fair hearing.

1. **CONFERENCE**: You have a right to a conference with your local department of social services to review the determination. If you want a conference, you should request one **AS SOON AS POSSIBLE**, because the outcome of the conference may impact your decision to request a fair hearing. At the conference, you may present information to demonstrate why you believe the agency action is not correct.

   **You may request a conference by:**
   
   (1) **Calling**: (PLEASE HAVE THIS NOTICE WITH YOU WHEN YOU CALL).
   
   (2) **Writing**: Check the box below and mail to
      Please keep a copy for yourself.

   □ I want a conference. I do not agree with the agency’s action. You may explain on a separate paper why you disagree, but you do not have to include a written explanation.

2. **FAIR HEARING**: You have a right to a fair hearing to appeal the determination of the local department of social services. If you want a fair hearing, you have **60 DAYS** from the NOTICE DATE, located on the front page, to make the request. You can request a fair hearing without requesting a conference.

   **You may request a fair hearing by:**
   
   (1) **Calling**: 1-800-342-3334 (PLEASE HAVE THIS NOTICE WITH YOU WHEN YOU CALL).
   
   (2) **Online**: To send your fair hearing request online, go to http://www.otda.ny.gov/oah, click on the links to request a fair hearing using the online form, and follow the instructions to complete and submit the form online.
   
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   (4) **Faxing**: Check the box, complete the information below and fax both sides of this form to (518) 473-6735.

   □ I want a fair hearing. I do not agree with the agency’s action. You may explain on a separate paper why you disagree, but you do not have to include a written explanation.

   **Name:**
   **District:**
   **Address:**
   **Case Number:**
   **Phone Number:**

If you request a fair hearing, the State will send you a notice informing you of the time and place of the hearing. You have the right to be represented by legal counsel, a relative, a friend or other person, or to represent yourself. At the hearing you, your attorney or other representative will have the opportunity to present written and oral evidence to demonstrate why the action should not be taken, as well as an opportunity to question any persons who appear at the hearing. Also, you have a right to bring witnesses to speak in your favor. You should bring to the hearing any documents such as this notice, pay-stubs, receipts, child care bills, medical verification, letters, etc. that may be helpful in presenting your case.

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**INFORMATION**: If you want more information about your case, how to ask for a conference or fair hearing, how to see your file, or how to get additional copies of documents, call us at the telephone numbers listed at the top of page one of this notice or write to us at the address printed at the top of page one of this notice.
NOTICE OF FRAUD DETERMINATION,
DISQUALIFICATION FOR CHILD CARE BENEFITS
AND REPAYMENT PLAN

SECTION I – THIS NOTICE IS TO INFORM YOU:
1. The Department of Social Services has determined that you have fraudulently received child care benefits and you are disqualified from receiving child care benefits, AND
2. You have received an overpayment and you must repay the overpayment.

The regulation which allows us to do this is: 18 NYCRR 415.4(i).

SECTION II – FRAUD DETERMINATION
The Department’s finding of fraudulent receipt of child care benefits was based on:
☐ Your conviction by a court of law on __________ of fraudulently receiving child care benefits.
☐ Your signing a voluntarily admission dated __________.

The fraudulent activity resulted in an overpayment of $__________, occurring from __________ to __________.

SECTION III – LENGTH OF DISQUALIFICATION PERIOD
As a result of the fraudulent receipt of benefits, you are disqualified from receiving child care benefits. New York State regulation, 18 NYCRR 415.4(i)(13), establishes time periods for suspension or termination of benefits depending on the number of offenses and the amount of fraudulent benefits received.

☐ Six months, because this is your first offense.
☐ 12 months, because this is your second offense or the amount of fraudulent benefits you received was between $1,000 and $3,900.
☐ 18 months because this is your third offense, or the amount of fraudulent benefits you received was in excess of $3,900.
☐ Five years, because you have committed four or more previous offenses.
☐ Other (State length of period and reason):

SECTION IV – EFFECTIVE DATE OF DISQUALIFICATION
Your disqualification will begin on __________ and end on __________.

You will be subject to the above disqualification penalty if you apply for and are found eligible for child care benefits at a future date.

Your disqualification period will begin or resume once you are no longer participating in an activity required by TA.

SECTION V: REPAYMENT PLAN AGREEMENT
If you are requesting a Fair Hearing regarding this decision, you are not required to complete and sign the repayment plan at this time. However, you must complete and sign the Fair Hearing request on the reverse side of this form and return it to the address indicated.

You are required to make full repayment by __________. If you are unable to repay the overpayment as shown below or you want to set up another agreement plan, or if you have any questions, please call __________ at __________, right away. Otherwise, sign this agreement, make a copy of it for yourself, and return the agreement to the address at the bottom of this page.

Your repayment plan is shown below.

☐ Recovery will be made from your child care benefits. To repay this debt, you must pay $__________ each week to your child care provider. This is in addition to your current family share of $__________ per week. Effective __________, your total family share will be $__________ per week and the amount we pay to your provider will be reduced to $__________.
☐ To repay this debt, you must pay the Department of Social Services $__________ per week. Your first payment is due on __________. The final payment is due on __________.

Send payments to:

☐ You must continue to follow the repayment plan and/or court order that is already in effect, and is attached to this notice.

I agree to repay by this method. I understand that failure to pay the amount stated above on time will result in a discontinuation of my child care benefits and/or legal action may be taken in the court to recover this overpayment.

SIGNATURE

DATE

Return this repayment plan agreement to:

CLIENT/FAIR HEARING COPY
RIGHT TO A CONFERENCE: You may have an agency conference to review these actions. A conference is when you meet with someone from the agency, other than the person who made the decision, to discuss your case. You may request an agency conference by calling the number on the front of this notice, in the upper right hand corner. At the conference, if we discover that we made a wrong decision or if, because of information you provide, we determine to change our decision, we will take corrective action and give you a new notice. Requesting an agency conference is not the same as requesting a fair hearing. Read below for fair hearing information.

RIGHT TO A FAIR HEARING: If you disagree with the decision made by our agency, you may request a fair hearing. At the hearing you will have the opportunity to present written and oral evidence to demonstrate why you think the agency’s decision is wrong and the action should not be taken. You have the right to be represented by legal counsel, a relative, friend or other person, or you may represent yourself. You have the right to bring witnesses and to question witnesses at the fair hearing. You have the right to present written and oral evidence at the hearing, and should bring any documents that may be helpful in presenting your case, such as this notice, pay stubs, receipts, child care bills, medical verification, letters, etc. There is additional information below on how to obtain access to your file and copies of documents in your file.

YOU HAVE 60 DAYS FROM THE DATE OF THIS NOTICE TO REQUEST A FAIR HEARING: When you request a fair hearing, the State will send you a notice informing you of the time and place of the hearing. You have the right to be represented by legal counsel, a relative, friend or other person, or, to represent yourself.

TO REQUEST A FAIR HEARING:

**Telephoning:** 1 800-342-3334 (Please have this notice with you when you call).

**Online:** Complete an online request form at: [http://www.otda.state.ny.us/oah/forms.asp](http://www.otda.state.ny.us/oah/forms.asp).

**Walk in Locations:** 14 Boerum Place, Brooklyn, NY OR 330 West 34th Street, Third Floor, Manhattan, NY

**Writing:** Complete the following information, sign and mail a copy of this entire notice to the New York State Office of Administrative Hearings, Office of Temporary and Disability Assistance, P.O. Box 1930, Albany, New York 12201. Please keep a copy for yourself.

**Faxing:** Complete the following information, sign and fax this entire notice to the New York State Office of Administrative Hearings at: 518-473-6735.

- I want a fair hearing. The Agency’s action is wrong because: ________________________________

- I understand I may be eligible for aid continuing (current recipients only). My benefits have been stopped and I wish to have my benefits restored (aid continuing) until the hearing decision is issued. If you request a fair hearing and aid continuing, within ten (10) days of the date of the postmark of the mailing of this notice, your child care will be reinstated and will be unchanged until the fair hearing decision is issued. However, if you lose the fair hearing, you will owe any child care that you should not have received. We are required to recover any child care overpayment. We must make a claim against you for any child care you receive that you were not entitled to, which may be collected by reduction of future child care benefits, through lump sum installment payments, or through legal action. If you want to avoid this possibility you can check the box below. You can also indicate over the telephone or in a letter that you do not want reinstatement of your child care.

- I do not want my benefits continued until the hearing decision is issued.

**Signature of Client:** ____________________________ **Date:** ____________________________

LEGAL ASSISTANCE: If you need free legal assistance, you may be able to obtain such assistance by contacting your local Legal Aid Society or other legal advocate group. You may locate the nearest Legal Aid Society or advocate group by checking your Yellow Pages under “Lawyers” or by calling the number indicated on the first page of this notice.

ACCESS TO YOUR FILE AND COPIES OF DOCUMENTS: You have a right to look at your case file, and to receive free copies of the documents that the agency will put into evidence and other documents necessary for you to prepare for the fair hearing. To review your file or receive copies of any documents in your file, you can call us at the Record Access telephone number listed at the top of page 1 of this notice or write us at the address printed at the top of page 1 of this notice. If you want the documents mailed to you, you must specifically ask that they be mailed. You should ask for documents ahead of time. They will be provided to you within a reasonable time before the date of the hearing.

INFORMATION: If you want more information about your case, how to ask for a fair hearing, how to see your file, or how to get copies of documents, call us at the telephone numbers listed at the top of page 1 of this notice or write to us at the address printed at the top of page 1 of this notice.
16-OCFS-LCM-18
Child Care Market Rates 2016

The purpose of this release is to advise local departments of social services (LDSSs) of the adoption of regulations related to the market rates and the maximum reimbursements for expenditures for child care services funded under the New York State Child Care Block Grant (NYSCCBG) and Social Services Block Grant (Title XX). These changes to Title 18 of the New York Codes, Rules and Regulations (NYCRR) Section 415.9 were filed as a notice of emergency adoption and proposed rule-making.
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Local Commissioners Memorandum

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<td>Subject:</td>
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<tr>
<td>Contact Person(s):</td>
<td>Melinda Denham (518) 402-6785</td>
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<td><a href="mailto:Melinda.Denham@ocfs.ny.gov">Melinda.Denham@ocfs.ny.gov</a></td>
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I. Purpose

The purpose of this release is to advise local departments of social services (LDSSs) of the adoption of regulations related to the market rates and the maximum reimbursements for expenditures for child care services funded under the New York State Child Care Block Grant (NYSCCBG) and Social Services Block Grant (Title XX). These changes to Title 18 of the New York Codes, Rules and Regulations (NYCRR) Section 415.9 were filed as a notice of emergency adoption and proposed rule-making. The emergency regulations became effective June 1, 2016. LDSSs were previously notified in 16-OCFS-INF-06, issued on May 27, 2016, about the revisions to the child care market rates. The proposed regulations were adopted as a final rule on August 17, 2016.

II. Background

Federal and New York State law require the state to establish payment rates for child care subsidies that are sufficient to ensure equal access to child care services for eligible children [42 USC 9858c(c)(4)(A); 45 CFR Part 98.43(a); Section 410-x(4) of the Social Services Law]. Federal regulation requires that payment rates be based on a local market rate survey [45 CFR Part 98.43(b)(2)]. State law requires the Office of Children and Family Services (OCFS) to establish, in regulation, the
applicable market-related payment rate, which establishes a ceiling for state and federal reimbursement for payments for child care services (Section 410-x(4) of the Social Services Law).

Payment rates must be sufficient to ensure equal access for eligible families to child care services, comparable to those provided to children whose parents are not eligible to receive assistance under any federal or state child care programs. In addition, market rates must take into account the variations in costs of providing child care in different settings and to children of different age groups, as well as the additional cost of providing child care for children with special needs.

In accordance with the federal regulatory requirement, OCFS contracted with a preferred source contractor in NYS to conduct a telephone survey of a sample of licensed/registered child care providers. Prior to conducting the telephone survey, a letter was sent to all licensed/registered child care providers to inform them that they might be included in the sample of providers called to participate in the market rate survey. A copy of the questions accompanied the letters so that providers could prepare their responses in advance of their possible participation in the market rate survey. The contractor conducted the telephone survey in English and in Spanish, and had resources available to assist providers in other languages. Market rate data was collected from 4,467 providers.

OCFS analyzed data from the survey for five distinct groupings of districts. Market rates were established for each county cluster at the 69th percentile.

The standard market rates for legally-exempt family child care and legally-exempt in-home child care providers are established at a 65 percent differential applied to the market rate established for registered family day care. The enhanced market rates for legally-exempt family child care and legally-exempt in-home child care providers are established at a 70 percent differential applied to the market rates established for registered family day care. Information pertaining to the establishment of the market rates for legally-exempt family child care and legally-exempt in-home child care can be found on pages 10-11.

The market rates for legally exempt group child care providers are established at a 75 percent differential applied to the market rate established for licensed or registered day care centers.

III. Program Implications

**Actual Cost of Care**

Payments for child care services under the NYSCCBG and under Title XX must be only for the actual cost of care, up to the applicable market rate as updated in Attachment A. The actual cost of care is:

- for care provided pursuant to a contract between the LDSS and the provider, the payment rate set forth in the contract; or,
• for care provided in instances other than pursuant to a contract between the LDSS and the provider, the amount charged to the general public for equal care in that facility or home. However, if the facility or home cares only for subsidized children, then the actual cost of care is the amount the provider is currently receiving from the LDSS for such children, unless the provider can demonstrate to the LDSS that the actual cost of providing care to such children is higher than that amount.

Federal and state reimbursement is available for child care services for eligible families only when the cost does not exceed the amount charged by the provider to the general public for similar care.

LDSSs may negotiate contracts with individual providers. The negotiated payment rates may be the same as or lower than the rates charged to non-subsidized families. Even though the negotiated rate may be less than the usual charge to non-subsidized families, the negotiated rate is considered to be the actual cost of care for those child care services provided under a contractual agreement between the LDSS and the provider.

A contract cannot be made a condition of receiving payment under the NYSCCBG.

**Determining Actual Cost of Care for Providers Without a Contract Who Care Only for Subsidized Children**

If a provider cares only for children receiving child care subsidies, and does not have a contract with the LDSS, then the actual cost of care is the rate the provider currently receives from the LDSS. However, if the provider can document that he or she provides similar child care services to a non-subsidized child, currently or in the recent past, and that a higher rate was charged and received from the non-subsidized family, then the LDSS can establish that rate as the actual cost of care. Additionally, if a provider can document that the costs, excluding those that are reimbursed by other sources of funding, related to the provision of child care services have increased in the previous 12 months, then that provider may request a higher payment rate from the LDSS. For this purpose only, the LDSS should consider the increases in costs related to employees’ salaries and benefits, occupancy, insurance, equipment, supplies, and food.

The increases in costs have to be solely related to or clearly attributable to the operation of the child care program. For instance, not all costs of homeowners’ insurance can be considered; only those costs that the insurance carrier has specifically attributed to the existence of the child care program should be considered. Furthermore, costs of home improvement or maintenance to the general residence would not be considered attributable solely to the operation of the child care program.

The costs associated with the child care program to maintain compliance with existing regulatory standards should not be considered. In offering services as a child care provider, the provider is attesting to the fact that he or she has been and
will be satisfying the basic regulatory standards. A statement that he or she now has to charge more because the program was compelled to meet those standards does not present a legitimate expense attributable to the operation of a child care program. However, if new regulatory standards are created, the costs incurred by an existing program to meet the new regulatory standards should be considered. For instance, when Alyssa’s Law was enacted, some providers’ properties required physical modifications to comply with Alyssa’s Law. The cost of modifications that were amortized by the provider over a reasonable period of time should have been considered solely attributable to the operation of the child care program. Other potential includable costs are those associated with compliance with the administration of medication requirements. For example, when out-of-pocket expenses related to retaining a health care consultant or obtaining required training are documented by a provider, who is newly choosing to come into compliance with the administration of medication requirements, those expenses are to be considered by the LDSS.

In order to determine the amount of increase that is reasonable, the LDSS should annualize the appropriate costs, including amortizing any relevant capital expenditures over a reasonable multiple-year period; then the LDSS should spread the annualized costs over the capacity of the program and convert the costs to a weekly (or daily) increased cost per child. Providers and/or LDSSs can contact the local child care resource and referral agency if they need additional information on how to maintain business records for child care programs.

When considering increased food costs, the LDSS may consider whether the provider has chosen to use other available resources to offset food costs, particularly the Child and Adult Care Food Program (CACFP). If a provider has experienced increased food costs because he or she has voluntarily or involuntarily left the CACFP program, such additional food costs should not be considered. If the provider has never participated in CACFP, the LDSS could deny an increase or deny that part of the increase that could be offset by the provider by using the CACFP program.

Generally, the increase in the provider’s own salary or profit drawn from the program would not be considered. However, to the extent that the provider has granted increases in the salaries to his or her employees and the provider also delivers direct child care services on-site to the children in his or her program, then a similar increase in the provider’s own salary, if any, can be considered as an increase in costs to the program. Increased personnel costs for a substitute or additional staff that are documented by the provider may also be considered, so long as it is clear that the enhanced staffing was not offset by additional revenues that the provider was able to generate by serving more children.

**Determining the Applicable Market Rate**

The LDSS must consider at least three factors when selecting the applicable market rate for child care services. The factors that affect payment are: the type of provider, the age of the child, and the duration of care.
Additional factors affecting rates may apply when care is provided outside of the family's district of residence, when care is provided to a child with special needs, when a program is accredited or provides care during non-traditional hours, and when care is provided in excess of a weekly or daily period.

1. Type of Provider

a. **Licensed or registered day care centers** - The maximum payment rate for care provided by licensed or registered day care centers is the applicable market rate for day care centers.

b. **Registered family day care homes** - The maximum payment rate for care provided by registered family day care homes is the applicable market rate for family day care homes.

c. **Licensed group family day care homes** - The maximum payment rate for care provided by licensed group family day care homes is the applicable market rate for group family day care homes.

d. **Registered school-age child care programs** - The maximum payment rate for care provided by registered school-age child care programs is the applicable market rate for school-age child care programs.

e. **Legally-exempt group child care** – The maximum payment rate for care provided by caregivers of legally-exempt group child care as defined in 18 NYCRR Section 415.1 is the applicable market rate for legally-exempt group child care.

f. **Legally-exempt family child care and legally-exempt in-home child care providers** - The maximum payment rate for care provided by legally-exempt family child care and legally-exempt in-home child care providers is the applicable market rate for legally-exempt family child care and in-home child care.

Note: All legally-exempt providers -- including legally-exempt group, legally-exempt family, and legally-exempt in-home providers -- must meet applicable health and safety standards and must be **temporarily enrolled or enrolled** by the **legally-exempt caregiver enrollment agency** before payment is made.

2. Age of Child

Market rates differ according to the age of the child. The age categories differ for center-based child care (licensed or registered day care centers, registered school age child care programs, and legally exempt group care) and home-based child care (registered family day care, licensed group family day care, legally-exempt family child care, and legally-exempt in-home child care). Only two age categories apply to school-age child care programs: 3 years through 5 years and 6 years through 12 years. The age categories are:
a. **under** 1½ years (center-based) or **under** 2 years (home-based);

b. 1½ years **through** 2 years (center-based) or 2 years (home-based);

c. 3 years **through** 5 years; and

d. 6 years **through** 12 years.

When a change in a child's age results in his/her movement from one age category to another, the new market rate limit must be applied at the beginning of the first full month following such a change.

3. **Duration of Care**

Market rates also differ according to the number of hours of care that are needed.

a. **Weekly**

The LDSS must apply the weekly market rates as the maximum payment limit only when the child care services are provided for **30 or more hours over the course of five or fewer days in a single week**.

b. **Daily**

The LDSS must apply the daily market rates as the maximum payment limit only when the child care services are provided for **less than 30 hours over the course of five or fewer days in a single week and for at least six but fewer than twelve hours per day**.

Some providers charge a daily rate for child care services provided for 30 or more hours over the course of five or fewer days in a single week. The daily market rates do not apply in those instances. The LDSS must apply the weekly market rates divided by five as the maximum daily payment limit.

c. **Part-day**

The LDSS must apply the part-day market rates as the maximum payment limit when the child care services are provided for **at least three but fewer than six hours per day**. Part-day market rates also must be applied for children who are enrolled in full-day pre-kindergarten, kindergarten, or higher grade who are provided care before and/or after school for less than three hours per day by day care centers or school-age child care programs that do not charge on an hourly basis.

d. **Hourly**

With the exception noted in the definition of the part-day rate, the LDSS must apply the hourly market rates as the maximum payment limit when the child care
services are provided for fewer than three hours per day.

**Weekly Versus Daily Market Rates**

When a child care provider routinely charges non-subsidized parents on a weekly basis and has not signed a purchase of service contract or other written agreement for payment on a different basis, the LDSS must apply the weekly market rate as the maximum payment limit for child care services that are provided for 30 or more hours over the course of five or fewer days in a single week. To determine if care is provided for 30 or more hours over the course of five or fewer days in a single week, LDSSs must use Monday as the start of the weekly period.

When a child care provider routinely charges non-subsidized parents on a daily basis for child care provided for 30 or more hours over the course of five or fewer days in a single week and has not signed a purchase of service contract or other written agreement for payment on a different basis, the LDSS must apply the weekly market rate divided by five as the maximum daily payment limit for child care services.

When the child care services are provided for fewer than 30 hours over the course of five or fewer days in a single week, the LDSS must apply the daily, part-day or hourly market rates, or a combination thereof, as applicable. The market rate charts reflect daily rates for care that is provided for at least six but less than twelve hours per day, but for less than 30 hours over the course of five or fewer days in a single week.

**Care in Excess of a Weekly or Daily Market Rate Period**

When child care services are provided by a single provider in excess of one weekly or daily market rate period and the provider routinely charges an additional rate for these additional periods, payment for child care services must be based on the actual cost of care up to the applicable market rates. If care is provided for six or seven days in a week, then an additional market rate would apply for the sixth and/or seventh day. If care is provided for 12 hours or more in a day, then an additional market rate (daily, part-day, or hourly) would be applied. When determining the appropriate market rates, LDSSs must use Monday as the start of the weekly period.

An example of care in excess of a daily market rate period is as follows: a provider, whose normal operating hours are 7:00 AM to 5:30 PM, cares for a child from 7:00 AM to 11:00 PM (16 hours) per day, Monday through Friday, and charges an additional amount for care after 5:30 PM. In this example, the maximum payment available is one weekly market rate plus five part-day rates. One weekly market rate applies since care is provided for 30 or more hours over the course of five or fewer days in a single week. Since care is provided for 12 or more hours per day, five part-day market rates also apply for the four additional hours of care above the 12 hours per day provided from 7:00 PM to 11:00 PM, Monday through Friday.
An example of care in excess of a weekly market rate period is as follows: a provider, whose normal operating hours are Monday through Friday 7:00 AM to 5:30 PM, cares for a child from 9:00 AM to 5:00 PM (8 hours) per day, Monday through Friday, and from 7:00 AM to 11:00 AM (4 hours) on Sunday, and charges an additional amount for care after 5:30 PM and for care on the weekend. To determine if care is provided for 30 or more hours over the course of five or fewer days in a single week, start on Monday and determine the number of hours, if any, that service was provided for five days. Then, determine if any care is provided for any days beyond the five days and determine if the daily, part-day or hourly market rate applies. In this example, the maximum payment available is one weekly market rate plus one part-day market rate for Sunday. One weekly market rate applies because care is provided for 30 or more hours for the five-day period Monday through Friday. Because care is provided for a sixth day in the week, one part-day market rate applies for the four hours of care on Sunday.

Care Provided for 24 Hours in a Day

LDSSs have the option to pay for child care services that are needed for 24 hours in a single day. Reimbursement is available to the LDSS if the LDSS has selected this option in its Child and Family Services Plan.

When a single provider provides child care services for 24 hours in a day, the LDSS must determine if care is provided for 30 or more hours over the course of five or fewer days in a single week. Then, the LDSS must evaluate whether the care provided is in excess of a weekly or daily market rate period. Payment for the child care services must be based on the actual cost of care up to the applicable market rate.

An example of 24-hour care that leads to a total amount of care in excess of 30 or more hours over the course of five or fewer days in a single week is as follows: a provider, whose normal operating hours are Monday through Friday 7:00 AM to 5:30 PM, cares for a child from 12:00 AM on Monday to 12:00 AM on Tuesday (24 hours) and from 9:00 AM to 5:00 PM (8 hours) per day, Tuesday through Friday. The provider also charges an additional amount for care after 5:30 PM. In this example, the maximum payment available is one weekly market rate plus one daily market rate. One weekly market rate applies since care is provided for 30 or more hours during Monday through Friday. One daily market rate also applies because care is provided for 12 or more hours per day on Monday.

Care Provided by Multiple Providers

Where child care services are provided by multiple providers, reimbursement will be made for the actual cost of such services up to the applicable rate for each provider used. However, if the combined reimbursement to the multiple providers would exceed one weekly market rate, then in order to receive such reimbursement, the parent or caretaker must demonstrate that their schedule of employment, or other approved activity, or the special needs of the child necessitate that child care services be arranged with multiple providers. If the
LDSS determines that the parent or caretaker has not demonstrated that there is a necessity to use multiple providers, reimbursement is limited to the one weekly market rate that is applicable for the type of provider who provides care for the highest number of hours. The LDSS will determine how to distribute the reimbursement for the multiple providers.

If the LDSS determines that the parent or caretaker has demonstrated that there is a need to use multiple providers when the combined reimbursement to the multiple providers would exceed one weekly market rate, reimbursement will be made to each provider for the actual cost of such services up to the applicable market rate for each provider. For example, a provider cares for a child from 7:30 AM to 4:30 PM, Monday through Friday. Another provider cares for that child from 6:00 PM to 9:30 PM on Tuesday and Thursday. The maximum payment available is one weekly market rate for the first provider and two part-day market rates for the second provider.

**Children with Special Needs**

When child care services are provided for a child with special needs, LDSSs will receive reimbursement for payments in excess of the applicable market rate up to the statewide limit. Any payments in excess of the market rates must be related to the increased costs associated with meeting the special care needs of the particular child. Detailed requirements relative to the provision of child care services to children with special needs are set forth in 91 ADM-34.

The rate of reimbursement to a provider caring for a child determined to have special needs is the actual cost of care up to the statewide limit of the highest weekly, daily, part-day or hourly market rate for child care services in the state, as applicable, based on the amount of time the child care services are provided per week, irrespective of the type of child care provider used or the age of the child.

The highest applicable market rates in the state are as follows. These rates are also the maximum reimbursable rates for special needs children:

- **Weekly** $371.00
- **Daily** $60.00
- **Part-Day** $40.00
- **Hourly** $17.00

**Location of Care**

Whenever child care services are provided by a provider located outside the social services district that authorizes the subsidy, the LDSS must make payments based on the cost of care, up to applicable market rates, for the county in which the care is provided. The same standard applies to care provided in another state, but the LDSS must use NYS rules for calculating payments.
Standard and Enhanced Market Rates for Legally-Exempt Family Child Care Homes and Legally-Exempt In-Home Child Care Providers

The standard market rates for legally-exempt family child care and legally-exempt in-home child care providers are based on a 65 percent differential applied to the market rates established for registered family day care. The enhanced market rate for legally-exempt family and legally-exempt in-home child care providers is a 70 percent differential applied to the market rates established for registered family day care.

The enhanced market rate is available for providers of legally-exempt family child care and legally-exempt in-home child care who have demonstrated to the enrollment agency that they have completed ten or more hours of training annually in the areas set forth in section 390-a(3)(b) of the Social Services Law.

The enrollment agency will inform the LDSS of the providers whom they have verified to have completed ten or more hours of training. When the LDSS is notified by the enrollment agency that a legally-exempt family child care or legally-exempt in-home child care provider has completed ten or more hours of training, then the provider is eligible to receive the enhanced market rate for a period of 12 consecutive months. The LDSS must increase the payment amount to the enhanced market rate no later than the beginning of the first full month after the LDSS has been notified that the provider completed the ten hours of training. The provider remains eligible to receive the enhanced market rate for a period of 12 consecutive months, even if there is a gap in the family’s child care subsidy or if the child care subsidy ends and the provider begins providing care for a different subsidized child during the 12-month period. In order to continue to receive the enhanced market rate beyond the 12-month enhanced rate eligibility period, the provider must complete an additional ten or more hours of training and submit documentation to the enrollment agency. The enrollment agency will notify the LDSS if the provider has completed an additional ten or more hours of training.

The regulation also provides flexibility to those LDSSs that wish to maintain the enhanced rate at a higher level (up to 75 percent of the registered family day care market rate). An LDSS has the option, if it so chooses in the child care portion of its Child and Family Services Plan, to increase the enhanced market rate for eligible legally-exempt family child care and in-home child care categories up to 75 percent of the applicable registered family day care market rate:

- for all such providers; or
- for those providers who were receiving the enhanced rate on the date of the regulations for the remainder of the time they remain enrolled and continue to meet the ten-hour annual training requirement.
The standard and enhanced market rates for legally-exempt family child care and legally-exempt in-home providers are included in Attachment A.

**Market Rates for Legally-Exempt Group Child Care Providers**

The market rates for legally exempt group child care providers are established at a 75 percent differential applied to the market rate established for licensed or registered day care centers.

**Differential Payment Rates**

**Nationally Accredited Programs**

LDSSs may establish differential payment rates for child care services provided by validly licensed or registered child care providers that have been accredited by a nationally recognized child care organization. Nationally recognized organizations that provide accreditation to licensed/registered child care providers include the National Association for Education of Young Children (NAEYC), National Association for Family Child Care (NAFCC), and National School Age Child Care Association (NSACCA).

Legally-exempt group child care, legally-exempt family child care and legally-exempt in-home child care providers are **not** eligible for the differential payment rate for nationally accredited programs.

**Non-traditional Hours**

LDSSs may establish differential payment rates for any eligible child care provider for child care services that are provided during non-traditional hours: evening, night or weekend hours. Social services districts may establish a differential rate for non-traditional hours provided by legally-exempt group, legally-exempt family, and legally-exempt in-home child care providers as well as by licensed/registered providers.

**Conditions Pertaining to Differential Payments**

If an LDSS chooses to offer a differential payment, the LDSS must indicate this in its Child and Family Services Plan. The information in the plan must include the percentage above the applicable market rate that the LDSS opts to allow for accredited programs and/or for care provided during non-traditional hours, as applicable. The LDSS must also indicate in its Child and Family Services Plan if any restrictions or limitations are placed on providers who may be eligible for any differential payment.

The differential payment rates established by the LDSS may be up to 15 percent higher than the applicable market rates. For example, if the market rate is $200, a differential of 15 percent would raise the market rate up to $230 for eligible providers. LDSSs must pay a provider who qualifies for a differential payment rate the lower of the rate charged by that provider to the general public for equal care,
or the differential payment rate.

The differential payment rates the LDSS sets for accredited programs may be different than the rates it sets for care provided during non-traditional hours. There can be a total of only 15 percent in differential payment to any one provider. For instance, a provider who is nationally accredited and who also provides child care during non-traditional hours is eligible only for a maximum rate of a 15 percent increase above the market rate for the respective type of care and age of the child.

Waivers to Exceed 15 Percent

LDSSs may request a waiver from OCFS to establish differential payment rates that are in excess of 15 percent above the applicable market rate. The LDSS waiver request must show that the 15 percent maximum is insufficient to provide access within the district to accredited programs and/or care provided during non-traditional hours.

IV. System Implications

This LCM has no Welfare Management System implications.

V. Required Actions

All previous market rates are superseded by those published in this issuance.

LDSSs are required to use these market rates when determining the payment amounts for all cases that are opened on or after the effective date of the rates, and they must review all currently authorized cases to determine that payment is authorized for the actual cost of care up to the applicable market rate. Reviews must take place as soon as possible, but no later than the next case action or redetermination, whichever comes first.

Recipients of child care subsidies that have paid for child care costs in excess of the previous market rate are eligible for an increased payment from the LDSS (their actual child care charges up to the updated market rate). For example, a parent who has been paying an amount in excess of the previous market rates as of January 1, 2016, would only be eligible for the increased amount as of June 1, 2016. Parents who have documented out of pocket payments for the increased cost must be reimbursed for the out of pocket payment up to the market rate effective June 1, 2016.

Where the new market rates have increased from the previous market rates, providers who can provide documentation of the cost of care to private pay families in excess of the previous market rate are eligible for an increased payment from the LDSS (their actual child care charges for private pay families, up to the updated market rate). The increased payment is effective the date the provider begins charging the increased rate, but no earlier than June 1, 2016. For example, a provider who has been charging private pay families an amount in excess of the
previous market rates as of January 1, 2016, would only be eligible for the increased amount as of June 1, 2016. However, if the provider increased the rate for private pay families on or after June 1, 2016, the provider is eligible for the cost of care up to the market rate from the date the provider increased the rate or June 1, 2016, whichever is later, upon proper documentation of this increase.

In instances in which the market rates have decreased from the previous market rates, the LDSS will need to reduce benefits. Please note that when a benefit is reduced due to changes in the market rates, the effective date for the reduction is not retroactive to June 1, 2016. Benefit reductions are to be made prospectively. For those cases in which an LDSS did not make the necessary reductions at the next case action that occurred on or after June 1, 2016, the amount the LDSS paid above the market rate is not reimbursable from State and federal funds.

Whenever the amount of child care benefits changes, LDSSs must provide recipients with appropriate notice as required by 18 NYCRR Subpart 358-2.

If the provider’s rate is in excess of the market rate and the LDSS does not have a contract with the provider, the parent who chooses to continue care with the provider must make up the difference. If the LDSS has a contract to pay a rate that is higher than the market rate, the amount above the market rate is not reimbursable from State and federal funds.

VI. Effective Date

The effective date of this release is June 1, 2016.

__________________________
Janice M. Molnar, Ph.D.
Deputy Commissioner
Division of Child Care Services
ATTACHMENT A

CHILD CARE MARKET RATES

Market rates are established in five groupings of social services districts as follows:

Group 1: Nassau, Putnam, Rockland, Suffolk, Westchester

Group 2: Columbia, Erie, Monroe, Onondaga, Ontario, Rensselaer, Schenectady, Tompkins, Warren


Group 4: Albany, Dutchess, Orange, Saratoga, Ulster

Group 5: Bronx, Kings, New York, Queens, Richmond

MARKET RATES

The market rates established for each group apply to all districts in the designated group.
GROUP 1 COUNTIES:
Nassau, Putnam, Rockland, Suffolk, and Westchester

DAY CARE CENTER

<table>
<thead>
<tr>
<th>Age of Child</th>
<th>Under 1 ½</th>
<th>1 ½ - 2</th>
<th>3 - 5</th>
<th>6-12</th>
</tr>
</thead>
<tbody>
<tr>
<td>WEEKLY</td>
<td>$350</td>
<td>$312</td>
<td>$289</td>
<td>$290</td>
</tr>
<tr>
<td>DAILY</td>
<td>$60</td>
<td>$57</td>
<td>$50</td>
<td>$57</td>
</tr>
<tr>
<td>PART-DAY</td>
<td>$40</td>
<td>$38</td>
<td>$33</td>
<td>$38</td>
</tr>
<tr>
<td>HOURLY</td>
<td>$9.50</td>
<td>$10.00</td>
<td>$10.00</td>
<td>$10.00</td>
</tr>
</tbody>
</table>

FAMILY DAY CARE HOME AND GROUP FAMILY DAY CARE HOME

<table>
<thead>
<tr>
<th>Age of Child</th>
<th>Under 2</th>
<th>2</th>
<th>3 - 5</th>
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</tr>
</thead>
<tbody>
<tr>
<td>WEEKLY</td>
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<td>$275</td>
<td>$265</td>
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<td>DAILY</td>
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<td>PART-DAY</td>
<td>$40</td>
<td>$37</td>
<td>$35</td>
<td>$34</td>
</tr>
<tr>
<td>HOURLY</td>
<td>$10.00</td>
<td>$10.00</td>
<td>$10.00</td>
<td>$10.00</td>
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</tbody>
</table>

SCHOOL-AGE CHILD CARE

<table>
<thead>
<tr>
<th>Age of Child</th>
<th>Under 1 ½</th>
<th>1 ½ - 2</th>
<th>3 - 5</th>
<th>6-12</th>
</tr>
</thead>
<tbody>
<tr>
<td>WEEKLY</td>
<td>$0</td>
<td>$0</td>
<td>$289</td>
<td>$290</td>
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<tr>
<td>DAILY</td>
<td>$0</td>
<td>$0</td>
<td>$50</td>
<td>$57</td>
</tr>
<tr>
<td>PART-DAY</td>
<td>$0</td>
<td>$0</td>
<td>$33</td>
<td>$38</td>
</tr>
<tr>
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<td>$0</td>
<td>$10.00</td>
<td>$10.00</td>
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</table>
### LEGALLY-EXEMPT GROUP CHILD CARE

<table>
<thead>
<tr>
<th>Age of Child</th>
<th>Under 1 ½</th>
<th>1 1/2 – 2</th>
<th>3 - 5</th>
<th>6-12</th>
</tr>
</thead>
<tbody>
<tr>
<td>Weekly</td>
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<td>$217</td>
<td>$218</td>
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<tr>
<td>Daily</td>
<td>$0</td>
<td>$0</td>
<td>$38</td>
<td>$43</td>
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<tr>
<td>Part-Day</td>
<td>$0</td>
<td>$0</td>
<td>$25</td>
<td>$29</td>
</tr>
<tr>
<td>Hourly</td>
<td>$0</td>
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<td>$7.50</td>
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</tbody>
</table>

### LEGALLY-EXEMPT FAMILY CHILD CARE AND IN-HOME CHILD CARE

#### STANDARD RATE

<table>
<thead>
<tr>
<th>Age of Child</th>
<th>Under 2</th>
<th>2</th>
<th>3 - 5</th>
<th>6-12</th>
</tr>
</thead>
<tbody>
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<td>$179</td>
<td>$172</td>
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<tr>
<td>Daily</td>
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</tr>
<tr>
<td>Part-Day</td>
<td>$26</td>
<td>$24</td>
<td>$23</td>
<td>$22</td>
</tr>
<tr>
<td>Hourly</td>
<td>$6.50</td>
<td>$6.50</td>
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#### ENHANCED RATE

<table>
<thead>
<tr>
<th>Age of Child</th>
<th>Under 2</th>
<th>2</th>
<th>3 - 5</th>
<th>6-12</th>
</tr>
</thead>
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<td>$186</td>
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<td>Daily</td>
<td>$42</td>
<td>$39</td>
<td>$37</td>
<td>$36</td>
</tr>
<tr>
<td>Part-Day</td>
<td>$28</td>
<td>$26</td>
<td>$25</td>
<td>$24</td>
</tr>
<tr>
<td>Hourly</td>
<td>$7.00</td>
<td>$7.00</td>
<td>$7.00</td>
<td>$7.00</td>
</tr>
</tbody>
</table>
GROUP 2 COUNTIES: Columbia, Erie, Monroe, Onondaga, Ontario, Rensselaer, Schenectady, Tompkins and Warren

## DAY CARE CENTER

<table>
<thead>
<tr>
<th>Age of Child</th>
<th>Under 1 ½</th>
<th>1 ½ - 2</th>
<th>3 - 5</th>
<th>6-12</th>
</tr>
</thead>
<tbody>
<tr>
<td>Weekly</td>
<td>$259</td>
<td>$242</td>
<td>$225</td>
<td>$200</td>
</tr>
<tr>
<td>Daily</td>
<td>$53</td>
<td>$49</td>
<td>$45</td>
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</tr>
<tr>
<td>Part-Day</td>
<td>$35</td>
<td>$33</td>
<td>$30</td>
<td>$28</td>
</tr>
<tr>
<td>Hourly</td>
<td>$9.00</td>
<td>$8.50</td>
<td>$8.25</td>
<td>$8.00</td>
</tr>
</tbody>
</table>

## FAMILY DAY CARE HOME AND GROUP FAMILY DAY CARE HOME

<table>
<thead>
<tr>
<th>Age of Child</th>
<th>Under 2</th>
<th>2</th>
<th>3 - 5</th>
<th>6-12</th>
</tr>
</thead>
<tbody>
<tr>
<td>Weekly</td>
<td>$185</td>
<td>$175</td>
<td>$175</td>
<td>$165</td>
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<tr>
<td>Daily</td>
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<tr>
<td>Part-Day</td>
<td>$27</td>
<td>$24</td>
<td>$23</td>
<td>$23</td>
</tr>
<tr>
<td>Hourly</td>
<td>$6.00</td>
<td>$6.00</td>
<td>$6.00</td>
<td>$6.00</td>
</tr>
</tbody>
</table>

## SCHOOL-AGE CHILD CARE

<table>
<thead>
<tr>
<th>Age of Child</th>
<th>Under 1 ½</th>
<th>1 ½ - 2</th>
<th>3 - 5</th>
<th>6-12</th>
</tr>
</thead>
<tbody>
<tr>
<td>Weekly</td>
<td>$0</td>
<td>$0</td>
<td>$225</td>
<td>$200</td>
</tr>
<tr>
<td>Daily</td>
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<td>$0</td>
<td>$45</td>
<td>$42</td>
</tr>
<tr>
<td>Part-Day</td>
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<td>$0</td>
<td>$30</td>
<td>$28</td>
</tr>
<tr>
<td>Hourly</td>
<td>$0</td>
<td>$0</td>
<td>$8.25</td>
<td>$8.00</td>
</tr>
</tbody>
</table>
(Group 2 Counties)

**LEGALLY-EXEMPT GROUP CHILD CARE**

<table>
<thead>
<tr>
<th>Age of Child</th>
<th>Under 1 ½</th>
<th>1 1/2 – 2</th>
<th>3 - 5</th>
<th>6-12</th>
</tr>
</thead>
<tbody>
<tr>
<td>Weekly</td>
<td>$0</td>
<td>$0</td>
<td>$169</td>
<td>$150</td>
</tr>
<tr>
<td>Daily</td>
<td>$0</td>
<td>$0</td>
<td>$34</td>
<td>$32</td>
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<tr>
<td>Part-Day</td>
<td>$0</td>
<td>$0</td>
<td>$23</td>
<td>$21</td>
</tr>
<tr>
<td>Hourly</td>
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<td>$0</td>
<td>$6.19</td>
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**LEGALLY-EXEMPT FAMILY CHILD CARE AND IN-HOME CHILD CARE**

**STANDARD RATE**

<table>
<thead>
<tr>
<th>Age of Child</th>
<th>Under 2</th>
<th>2</th>
<th>3 - 5</th>
<th>6-12</th>
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<tr>
<td>Weekly</td>
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<td>$114</td>
<td>$107</td>
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<tr>
<td>Daily</td>
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</tr>
<tr>
<td>Part-Day</td>
<td>$18</td>
<td>$16</td>
<td>$15</td>
<td>$15</td>
</tr>
<tr>
<td>Hourly</td>
<td>$3.90</td>
<td>$3.90</td>
<td>$3.90</td>
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**ENHANCED RATE**

<table>
<thead>
<tr>
<th>Age of Child</th>
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<th>2</th>
<th>3 - 5</th>
<th>6-12</th>
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<tbody>
<tr>
<td>Weekly</td>
<td>$130</td>
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<td>$123</td>
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<tr>
<td>Daily</td>
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<td>Part-Day</td>
<td>$19</td>
<td>$17</td>
<td>$16</td>
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<tr>
<td>Hourly</td>
<td>$4.20</td>
<td>$4.20</td>
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GROUP 3 COUNTIES:

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<thead>
<tr>
<th>DAY CARE CENTER</th>
<th>AGE OF CHILD</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Under 1 ½</td>
</tr>
<tr>
<td>WEEKLY</td>
<td>$200</td>
</tr>
<tr>
<td>DAILY</td>
<td>$43</td>
</tr>
<tr>
<td>PART-DAY</td>
<td>$29</td>
</tr>
<tr>
<td>HOURLY</td>
<td>$7.00</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>FAMILY DAY CARE HOME AND GROUP FAMILY DAY CARE HOME</th>
<th>AGE OF CHILD</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Under 2</td>
</tr>
<tr>
<td>WEEKLY</td>
<td>$150</td>
</tr>
<tr>
<td>DAILY</td>
<td>$33</td>
</tr>
<tr>
<td>PART-DAY</td>
<td>$22</td>
</tr>
<tr>
<td>HOURLY</td>
<td>$5.00</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>SCHOOL-AGE CHILD CARE</th>
<th>AGE OF CHILD</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Under 1 ½</td>
</tr>
<tr>
<td>WEEKLY</td>
<td>$0</td>
</tr>
<tr>
<td>DAILY</td>
<td>$0</td>
</tr>
<tr>
<td>PART-DAY</td>
<td>$0</td>
</tr>
<tr>
<td>HOURLY</td>
<td>$0</td>
</tr>
</tbody>
</table>
(Group 3 Counties)

### LEGALLY-EXEMPT GROUP CHILD CARE

<table>
<thead>
<tr>
<th>Age of Child</th>
<th>Under 1 ½</th>
<th>1 1/2 – 2</th>
<th>3 - 5</th>
<th>6-12</th>
</tr>
</thead>
<tbody>
<tr>
<td>WEEKLY</td>
<td>$0</td>
<td>$0</td>
<td>$135</td>
<td>$128</td>
</tr>
<tr>
<td>DAILY</td>
<td>$0</td>
<td>$0</td>
<td>$29</td>
<td>$28</td>
</tr>
<tr>
<td>PART-DAY</td>
<td>$0</td>
<td>$0</td>
<td>$19</td>
<td>$19</td>
</tr>
<tr>
<td>HOURLY</td>
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</tbody>
</table>

### LEGALLY-EXEMPT FAMILY CHILD CARE AND IN-HOME CHILD CARE

#### STANDARD RATE

<table>
<thead>
<tr>
<th>Age of Child</th>
<th>Under 2</th>
<th>2</th>
<th>3 - 5</th>
<th>6-12</th>
</tr>
</thead>
<tbody>
<tr>
<td>WEEKLY</td>
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<td>$98</td>
<td>$93</td>
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<tr>
<td>DAILY</td>
<td>$21</td>
<td>$20</td>
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<td>$20</td>
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<tr>
<td>PART-DAY</td>
<td>$14</td>
<td>$13</td>
<td>$13</td>
<td>$13</td>
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<tr>
<td>HOURLY</td>
<td>$3.25</td>
<td>$3.25</td>
<td>$3.25</td>
<td>$3.25</td>
</tr>
</tbody>
</table>

#### ENHANCED RATE

<table>
<thead>
<tr>
<th>Age of Child</th>
<th>Under 2</th>
<th>2</th>
<th>3 - 5</th>
<th>6-12</th>
</tr>
</thead>
<tbody>
<tr>
<td>WEEKLY</td>
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<td>$105</td>
<td>$100</td>
</tr>
<tr>
<td>DAILY</td>
<td>$23</td>
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<td>$21</td>
<td>$21</td>
</tr>
<tr>
<td>PART-DAY</td>
<td>$15</td>
<td>$14</td>
<td>$14</td>
<td>$14</td>
</tr>
<tr>
<td>HOURLY</td>
<td>$3.50</td>
<td>$3.50</td>
<td>$3.50</td>
<td>$3.50</td>
</tr>
</tbody>
</table>
GROUP 4 COUNTIES: Albany, Dutchess, Orange, Saratoga, and Ulster

### DAY CARE CENTER

<table>
<thead>
<tr>
<th>Age of Child</th>
<th>Under 1 ½</th>
<th>1 ½ - 2</th>
<th>3 - 5</th>
<th>6-12</th>
</tr>
</thead>
<tbody>
<tr>
<td>Weekly</td>
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<td>$225</td>
<td>$220</td>
</tr>
<tr>
<td>Daily</td>
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<td>$46</td>
<td>$46</td>
</tr>
<tr>
<td>Part-Day</td>
<td>$37</td>
<td>$34</td>
<td>$31</td>
<td>$31</td>
</tr>
<tr>
<td>Hourly</td>
<td>$8.50</td>
<td>$8.25</td>
<td>$8.50</td>
<td>$9.00</td>
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</tbody>
</table>

### FAMILY DAY CARE HOME AND GROUP FAMILY DAY CARE HOME

<table>
<thead>
<tr>
<th>Age of Child</th>
<th>Under 2</th>
<th>2</th>
<th>3 - 5</th>
<th>6-12</th>
</tr>
</thead>
<tbody>
<tr>
<td>Weekly</td>
<td>$225</td>
<td>$200</td>
<td>$200</td>
<td>$200</td>
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<tr>
<td>Daily</td>
<td>$45</td>
<td>$45</td>
<td>$42</td>
<td>$40</td>
</tr>
<tr>
<td>Part-Day</td>
<td>$30</td>
<td>$30</td>
<td>$28</td>
<td>$27</td>
</tr>
<tr>
<td>Hourly</td>
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### SCHOOL-AGE CHILD CARE

<table>
<thead>
<tr>
<th>Age of Child</th>
<th>Under 1 ½</th>
<th>1 ½ - 2</th>
<th>3 - 5</th>
<th>6-12</th>
</tr>
</thead>
<tbody>
<tr>
<td>Weekly</td>
<td>$0</td>
<td>$0</td>
<td>$225</td>
<td>$220</td>
</tr>
<tr>
<td>Daily</td>
<td>$0</td>
<td>$0</td>
<td>$46</td>
<td>$46</td>
</tr>
<tr>
<td>Part-Day</td>
<td>$0</td>
<td>$0</td>
<td>$31</td>
<td>$31</td>
</tr>
<tr>
<td>Hourly</td>
<td>$0</td>
<td>$0</td>
<td>$8.50</td>
<td>$9.00</td>
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</tbody>
</table>
(Group 4 Counties)
LEGALLY-EXEMPT GROUP CHILD CARE

<table>
<thead>
<tr>
<th>Age of Child</th>
<th>Under 1 ½</th>
<th>1 1/2 - 2</th>
<th>3 - 5</th>
<th>6-12</th>
</tr>
</thead>
<tbody>
<tr>
<td>Weekly</td>
<td>$0</td>
<td>$0</td>
<td>$169</td>
<td>$165</td>
</tr>
<tr>
<td>Daily</td>
<td>$0</td>
<td>$0</td>
<td>$35</td>
<td>$35</td>
</tr>
<tr>
<td>Part-Day</td>
<td>$0</td>
<td>$0</td>
<td>$23</td>
<td>$23</td>
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<tr>
<td>Hourly</td>
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<td>$0</td>
<td>$6.38</td>
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</table>

LEGALLY-EXEMPT FAMILY CHILD CARE AND IN-HOME CHILD CARE
STANDARD RATE

<table>
<thead>
<tr>
<th>Age of Child</th>
<th>Under 2</th>
<th>2</th>
<th>3 - 5</th>
<th>6-12</th>
</tr>
</thead>
<tbody>
<tr>
<td>Weekly</td>
<td>$146</td>
<td>$130</td>
<td>$130</td>
<td>$130</td>
</tr>
<tr>
<td>Daily</td>
<td>$29</td>
<td>$29</td>
<td>$27</td>
<td>$26</td>
</tr>
<tr>
<td>Part-Day</td>
<td>$20</td>
<td>$20</td>
<td>$18</td>
<td>$18</td>
</tr>
<tr>
<td>Hourly</td>
<td>$5.69</td>
<td>$5.20</td>
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</table>

LEGALLY-EXEMPT FAMILY CHILD CARE AND IN-HOME CHILD CARE
ENHANCED RATE

<table>
<thead>
<tr>
<th>Age of Child</th>
<th>Under 2</th>
<th>2</th>
<th>3 - 5</th>
<th>6-12</th>
</tr>
</thead>
<tbody>
<tr>
<td>Weekly</td>
<td>$158</td>
<td>$140</td>
<td>$140</td>
<td>$140</td>
</tr>
<tr>
<td>Daily</td>
<td>$32</td>
<td>$32</td>
<td>$29</td>
<td>$28</td>
</tr>
<tr>
<td>Part-Day</td>
<td>$21</td>
<td>$21</td>
<td>$20</td>
<td>$19</td>
</tr>
<tr>
<td>Hourly</td>
<td>$6.13</td>
<td>$5.60</td>
<td>$5.60</td>
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</tbody>
</table>
GROUP 5 COUNTIES:  
Bronx, Kings, New York, Queens, and Richmond

**DAY CARE CENTER**

<table>
<thead>
<tr>
<th>Age of Child</th>
<th>Under 1 ½</th>
<th>1 ½ - 2</th>
<th>3 - 5</th>
<th>6-12</th>
</tr>
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<tbody>
<tr>
<td>WEEKLY</td>
<td>$371</td>
<td>$268</td>
<td>$242</td>
<td>$210</td>
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<tr>
<td>DAILY</td>
<td>$59</td>
<td>$51</td>
<td>$46</td>
<td>$42</td>
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<tr>
<td>PART-DAY</td>
<td>$39</td>
<td>$34</td>
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</tr>
<tr>
<td>HOURLY</td>
<td>$15.75</td>
<td>$17.00</td>
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**FAMILY DAY CARE HOME AND GROUP FAMILY DAY CARE HOME**

<table>
<thead>
<tr>
<th>Age of Child</th>
<th>Under 2</th>
<th>2</th>
<th>3 - 5</th>
<th>6-12</th>
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</thead>
<tbody>
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<td>WEEKLY</td>
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<td>$185</td>
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<tr>
<td>DAILY</td>
<td>$37</td>
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<td>$33</td>
<td>$32</td>
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<tr>
<td>PART-DAY</td>
<td>$25</td>
<td>$23</td>
<td>$22</td>
<td>$21</td>
</tr>
<tr>
<td>HOURLY</td>
<td>$12.00</td>
<td>$12.00</td>
<td>$10.00</td>
<td>$12.00</td>
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**SCHOOL-AGE CHILD CARE**

<table>
<thead>
<tr>
<th>Age of Child</th>
<th>Under 1 ½</th>
<th>1 ½ - 2</th>
<th>3 - 5</th>
<th>6-12</th>
</tr>
</thead>
<tbody>
<tr>
<td>WEEKLY</td>
<td>$0</td>
<td>$0</td>
<td>$242</td>
<td>$210</td>
</tr>
<tr>
<td>DAILY</td>
<td>$0</td>
<td>$0</td>
<td>$46</td>
<td>$42</td>
</tr>
<tr>
<td>PART-DAY</td>
<td>$0</td>
<td>$0</td>
<td>$31</td>
<td>$28</td>
</tr>
<tr>
<td>HOURLY</td>
<td>$0</td>
<td>$0</td>
<td>$15.75</td>
<td>$9.00</td>
</tr>
</tbody>
</table>
(Group 5 Counties)

**LEGALLY-EXEMPT GROUP CHILD CARE**

<table>
<thead>
<tr>
<th>Age of Child</th>
<th>Under 1 ½</th>
<th>1 1/2 – 2</th>
<th>3 - 5</th>
<th>6-12</th>
</tr>
</thead>
<tbody>
<tr>
<td>Weekly</td>
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<td>$0</td>
<td>$182</td>
<td>$158</td>
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<tr>
<td>Daily</td>
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<td>$0</td>
<td>$35</td>
<td>$32</td>
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<tr>
<td>Part-Day</td>
<td>$0</td>
<td>$0</td>
<td>$23</td>
<td>$21</td>
</tr>
<tr>
<td>Hourly</td>
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<td>$0</td>
<td>$11.81</td>
<td>$6.75</td>
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</tbody>
</table>

**LEGALLY-EXEMPT FAMILY CHILD CARE AND IN-HOME CHILD CARE**

**STANDARD RATE**

<table>
<thead>
<tr>
<th>Age of Child</th>
<th>Under 2</th>
<th>2</th>
<th>3 - 5</th>
<th>6-12</th>
</tr>
</thead>
<tbody>
<tr>
<td>Weekly</td>
<td>$130</td>
<td>$120</td>
<td>$114</td>
<td>$104</td>
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<tr>
<td>Daily</td>
<td>$24</td>
<td>$23</td>
<td>$21</td>
<td>$21</td>
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<tr>
<td>Part-Day</td>
<td>$16</td>
<td>$15</td>
<td>$14</td>
<td>$14</td>
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<tr>
<td>Hourly</td>
<td>$7.80</td>
<td>$7.80</td>
<td>$6.50</td>
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**ENHANCED RATE**

<table>
<thead>
<tr>
<th>Age of Child</th>
<th>Under 2</th>
<th>2</th>
<th>3 - 5</th>
<th>6-12</th>
</tr>
</thead>
<tbody>
<tr>
<td>Weekly</td>
<td>$140</td>
<td>$130</td>
<td>$123</td>
<td>$112</td>
</tr>
<tr>
<td>Daily</td>
<td>$26</td>
<td>$25</td>
<td>$23</td>
<td>$22</td>
</tr>
<tr>
<td>Part-Day</td>
<td>$18</td>
<td>$16</td>
<td>$15</td>
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</tr>
<tr>
<td>Hourly</td>
<td>$8.40</td>
<td>$8.40</td>
<td>$7.00</td>
<td>$8.40</td>
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</table>
SPECIAL NEEDS CHILD CARE

The rate of payment for child care services provided to a child determined to have special needs is the actual cost of care up to the statewide limit of the highest weekly, daily, part-day or hourly market rate for child care services in the State, as applicable, based on the amount of time the child care services are provided per week regardless of the type of child care provider used or the age of the child.

The highest full time market rate in the State is:

- **WEEKLY**: $371
- **DAILY**: $60
- **PART-DAY**: $40
- **HOURLY**: $17.00
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17-OCFS-LCM-05
Child Care Services for Families Experiencing Homelessness and Differential Payment Rates

The purpose of this Local Commissioners Memorandum (LCM) is to inform social services districts of changes to Title 18 of the official compilation of Codes, Rules and Regulations of the State of New York (18 NYCRR) Part 415, pursuant to the federal Child Care and Development Block Grant Act of 2014 (42 U.S.C. 9858 et. seq.), regarding the provision of child care services funded under the New York State Child Care Block Grant (NYSCCBG) and Title XX of the federal Social Security Act. The changes to 18 NYCRR Part 415 include: adding families experiencing homelessness as a priority population; adding certain families experiencing homelessness to the category of eligible families when districts have funds available; exempting families experiencing homelessness from contributing to the cost of care; providing an allowable grace period for children to attend child care programs, in accordance with New York State Public Health Law; establishing a differential payment rate for child care services provided to a child experiencing homelessness; and amendments to the provisions for differential payment rates to child care providers who are accredited by a nationally recognized child care organization and/or provide care during nontraditional hours. Additionally, this LCM informs districts about reporting requirements, effective March 1, 2017.
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Local Commissioners Memorandum

<table>
<thead>
<tr>
<th>Transmittal:</th>
<th>17-OCFS-LCM-05</th>
</tr>
</thead>
</table>
| To:         | Local District Commissioners  
               Director of Services  
               Child Care Unit Supervisors  
               Temporary Assistance Unit Supervisors |
| Issuing Division/Office: | Division of Child Care Services |
| Date:       | April 28, 2017 |
| Subject:    | Child Care Services for Families Experiencing Homelessness and Differential Payment Rates |
| Contact Person(s): | Child Care Plan and Subsidy Program information:  
               Joseph Ziegler (518) 402-6520  
               Joe.Ziegler@ocfs.ny.gov |
| Attachments: | None |

I. Purpose

The purpose of this Local Commissioners Memorandum (LCM) is to inform social services districts of changes to Title 18 of the official compilation of Codes, Rules and Regulations of the State of New York (18 NYCRR) Part 415, pursuant to the federal Child Care and Development Block Grant Act of 2014 (42 U.S.C. 9858 et. seq.), regarding the provision of child care services funded under the New York State Child Care Block Grant (NYSCCBG) and Title XX of the federal Social Security Act. The changes to 18 NYCRR Part 415 include: adding families experiencing homelessness as a priority population; adding certain families experiencing homelessness to the category of eligible families when districts have funds available; exempting families experiencing homelessness from contributing to the cost of care; providing an allowable grace period for children to attend child care programs, in accordance with New York State Public Health Law; establishing a differential payment rate for child care services provided to a child experiencing homelessness; and amendments to the provisions for differential payment rates to child care providers who are accredited by a nationally recognized child care
organization and/or provide care during nontraditional hours. Additionally, this LCM informs districts about reporting requirements, effective March 1, 2017.

II. Background

The federal Child Care and Development Block Grant Act of 2014 and recent changes to federal regulations in 45 CFR Part 98 (Child Care and Development Fund) include provisions to improve access to quality child care for children experiencing homelessness and to require reporting of the homelessness status of children receiving child care services. The federal Administration for Children and Families believes that supporting children’s learning and development in safe, stable and nurturing child care environments can buffer children and families from the challenges and risks associated with homelessness.

III. Program Implications

Provision of Child Care Services to Homeless Families

18 NYCRR §415.2(a)(2)(v) is added to expand the category of families for which a social services district must provide child care services, to the extent that the district continues to have funds available under either the district’s allocation from the NYSCCBG program or any local funds appropriated for such program subject to any priorities and set asides. This category now includes a family experiencing homelessness with income up to 200 percent of the State Income Standard when child care services are needed for the child’s caretaker(s) to seek housing and to:

- seek employment as defined in 18 NYCRR §415.1(p);
- be engaged in work as defined in 18 NYCRR §415.1(o);
- attend educational or vocational activities as defined in 18 NYCRR §415.2(a)(3)(vii)(b) or 18 NYCRR §415.2(a)(3)(iv). Notwithstanding the potential for some of these educational or vocational training programs to allow for the eventual attainment of a bachelor's degree or like certificate of completion for a four-year college program, this regulation does not permit the renewal of such educational or vocational training program enrollment for any additional period in excess of 30 consecutive calendar months except as authorized under 18 NYCRR §415.2(a)(3)(iv), nor does it permit enrollment in more than one such program; or
- access or participate in counseling services programs.

Social services districts now have the option, when funds are available and if indicated in their Child and Family Services Plans in Appendix P for Title XX, to provide the revised provisions as outlined under 18 NYCRR §415.2(a)(2)(v) for families experiencing homelessness with incomes up to the levels established in Appendix P. Further, districts continue to have the option, to provide child care services to families experiencing homelessness under 18 NYCRR §415.2(a)(3)(iii)(b), and to families experiencing homelessness in an emergency situation of short duration under 18 NYCRR §415.2(a)(3)(iii)(c), when funds are available and if indicated in their Child and Family Services Plan in Appendix L for the NYSCCBG for families experiencing homelessness with incomes up to 200 percent of the State Income Standard and/or in Appendix P Title XX for families with incomes up to the levels established in Appendix P.
The Administration for Children and Families defines the term ‘child experiencing homelessness’ as a child who is homeless as defined in section 725 of Subtitle VII–B of the McKinney-Vento Act (42 U.S.C. 11434a). The McKinney-Vento Act, as amended by the Every Student Succeeds Act, defines homeless children and youths as individuals who lack a fixed, regular, and adequate nighttime residence (within the meaning of Section 103(a)(1) of the McKinney-Vento Act (42 U.S.C. 11302(a)(1)), and includes children and youths who are:

- sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason; living in motels, hotels, trailer parks, or camping grounds due to the lack of alternative adequate accommodations; living in emergency or transitional shelters; or abandoned in hospitals;
- living in 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 Section 103(a)(2) of the McKinney-Vento Act (42 U.S.C. 11302(a)(2));
- living in cars, parks, public spaces, abandoned buildings, substandard housing, bus or train stations, or similar settings; and
- migratory children (as such term is defined in section 1309 of the Elementary and Secondary Education Act of 1965, 20 U.S.C. 6399) who qualify as homeless because the children are living in circumstances described above.

The category of families to which social services districts must give priority is expanded by 18 NYCRR §415.2(d)(1)(i)(c) to include families experiencing homelessness. Each district must indicate in its Child and Family Services Plan how it will prioritize child care services funded under the NYSCCBG for families experiencing homelessness along with the federally mandated priorities of families with very low income and families with children who have special needs. The term “family experiencing homelessness” applies to the caretaker of the child experiencing homelessness.

18 NYCRR §415.3(e)(1) is amended to provide that families experiencing homelessness must not be required to pay a family share for child care services. Social services districts must identify if a family in its current child care caseload is experiencing homelessness and discontinue applying a family share for that case by no later than the next case action.

A family experiencing homelessness may not have access to all documentation needed to determine eligibility for child care services and, may have an immediate need for child care services. Districts must establish procedures to permit an interim eligibility period for child care services while a family experiencing homelessness obtains all required documentation. Districts have the discretion to establish the circumstances under which a family experiencing homelessness can qualify for an interim eligibility and the duration of the interim eligibility period, consistent with the parameters of this LCM, applicable regulations and statutes. However, the interim eligibility period may not exceed three months. If upon the full determination of eligibility, it is determined that the family is ineligible, the child care provider must receive payment for child care services rendered during the interim eligibility period. Claims for such district expenditures are reimbursable up to the district’s NYSCCBG or Title XX allocation. Payments made during the interim period of eligibility for families experiencing homelessness will not be considered errors or improper payments for the purpose of federal or state audits. Further, the district must not seek recoupment from the family for payments made during the interim period of eligibility, unless fraud is involved.
Tier II shelters are reimbursed under Temporary Assistance for Needy Families (TANF) funds for the provision of child care services to homeless families. Districts must have procedures in place to preclude duplicate billing under TANF and NYSCCBG.

While a social services district has internal and local resources to determine whether an applicant for services is experiencing homelessness, additional materials developed for New York Head Start programs by NYS-TEACHS may be useful. NYS-TEACHS is an agency funded by the New York State Education Department to provide technical assistance on the McKinney-Vento Act. These materials can be accessed at www.nysteaches.org.

**Grace Period for Immunization Records**

New York State Public Health Law (PHL) allows children, including homeless children and children in foster care, to be temporarily enrolled in a child care program while a family obtains documentation of immunizations. A child care provider must not unduly delay temporary enrollment of a child experiencing homelessness or a child in foster care due to a lack of immunization records. According to PHL, once attending the child care program, the parent or caretaker has a grace period of no more than 14 calendar days from the date the program began to provide care for the child to submit the required documentation of immunizations. The grace period can be extended by the child care program to 30 calendar days from the date the child care provider began to provide care to the child in cases where the child is from out-of-state or from another country and the parent or caretaker has shown a good faith effort to get the necessary documentation of the immunizations. This grace period applies to licensed, registered and enrolled legally-exempt child care programs.

**Differential Payment Rates**

18 NYCRR §415.9(h) was revised to include a new differential payment rate for families experiencing homelessness and to set new requirements for the differential payment rates for nontraditional hours and accredited programs. Differential payment rates apply to the actual cost of care or the applicable market rate, whichever is less. For more information on market rates, consult the most recent market rate LCM (16-OCFS-LCM-18).

**Homelessness Differential Payment Rates**

Social services districts must pay a licensed or registered child care provider a differential payment rate of at least 5 percent above the actual cost of care or the applicable market rate, whichever is less, for child care provided to a child experiencing homelessness. A district may establish a differential payment rate for care provided to a child experiencing homelessness by a licensed or registered child care provider that is greater than 5 percent, but that rate must not be more than 15 percent above the actual cost of care or the applicable market rate, whichever is less. The district must indicate in its Child and Family Services Plan if it will pay a differential rate that exceeds 5 percent, and include the applicable rate. Districts must apply the differential payment rate for care provided to a child experiencing homelessness to all eligible licensed or registered providers and cannot restrict the differential payment rate only to certain types of licensed or registered providers. For instance, a district cannot apply the differential payment rate only to day care centers.

A district may establish a differential payment rate for child care services provided to a child experiencing homelessness by legally-exempt child care providers as long as the rate does not exceed 15 percent above the actual cost of care or the applicable market rate, whichever is
less. There is no minimum differential payment rate percentage for legally-exempt child care providers. The district must indicate in its Child and Family Services Plan if it will pay a differential rate, and include the applicable rate. If the district chooses to set a differential payment rate for legally-exempt child care providers, then that rate must be applied to all eligible legally-exempt providers and cannot be limited only to certain types of legally-exempt providers. For instance, a district cannot set a differential payment rate that applies only to legally-exempt group providers.

**Accredited Program Differential Payment Rates**

A social services district may establish a differential payment rate for child care services provided by a licensed or registered child care provider that has been accredited by a nationally recognized child care organization. The district must indicate in its Child and Family Services Plan if it will pay a differential rate, and include the applicable rate. Legally-exempt child care providers are not eligible for a differential payment rate for accreditation. If the district chooses to set a differential payment rate for licensed or registered child care providers for accreditation, then that rate must be at least 5 percent above the actual cost of care or the applicable market rate, whichever is less. The differential payment rate must not exceed 15 percent of the actual cost of care or the applicable market rate, whichever is less.

**Nontraditional Hours Differential Payment Rates**

Social services districts must pay an eligible child care provider a differential payment rate of at least 5 percent above the actual cost of care or the applicable market rate, whichever is less, for child care provided during nontraditional hours. A district may choose to set a differential payment rate that is greater than 5 percent, but that rate must not exceed 15 percent of the actual cost of care or the applicable market rate, whichever is less. The district must indicate in its Child and Family Services Plan if it will pay a differential rate that exceeds 5 percent, and include the applicable rate. Districts must apply the differential payment rate for nontraditional hours to all eligible licensed, registered, and legally-exempt child care providers, and cannot restrict the differential payment rate only to certain types of child care providers. For instance, a district cannot apply the differential payment rate only to day care centers.

For the purpose of applying the differential payment rate, nontraditional hours are defined as child care provided before 6 a.m. or after 7 p.m. during Monday through Friday as well as any hour during Saturday and Sunday and the following federal holidays: New Year's Day, Memorial Day, Independence Day, Labor Day, Thanksgiving Day, and Christmas Day.

**Payment Rules for the Nontraditional Hours Differential Payment Rates**

The payment amount for child care providers for child care services during nontraditional hours must be calculated based on the rate that applies to the hours during which the nontraditional hours of care occurred. This means that the differential payment rate should be applied in accordance with the following rules:

- If care is provided during nontraditional hours then the required 5 percent differential payment rate, or the higher differential payment rate that the district has selected up to 15 percent, is applied to the actual cost of care or the applicable market rate, whichever is less.
• The differential payment rate would be applied to the Weekly, Daily, Part-Day or Hourly rate that applies to the time period during which the nontraditional hours of care occurred. If payment is calculated based on a weekly rate, then the differential would be applied to the weekly rate.

Example #1: The district has not set a differential payment rate higher than the required 5 percent differential payment rate. The actual cost of care is $200 per week (which is less than the applicable market rate in this example), and care is provided for a total of 40 hours during the week. The weekly market rate applies as child care services are provided for 30 or more hours over the course of five or fewer days in a single week. The required 5 percent differential payment rate is applied to the $200 actual cost of care. The total amount due to the provider is $210 ($200 actual cost of care plus $10 differential payment).

Example #2: The district has not set a differential payment rate higher than the required 5 percent differential payment rate. The daily market rate applies as care is provided for less than 30 hours over the course of five or fewer days in a single week and for at least six but fewer than 12 hours per day. The actual cost of care is $50 per day (which is less than the applicable market rate in this example), and care is provided for a total of three days during the week, of which there are nontraditional hours on two days of the care. The required 5 percent differential payment rate is applied to the $50 actual cost of care on the days when nontraditional hours of care were provided, but not on the day when they were not. The total amount due to the provider is $155 ($150 actual cost of care plus $5 differential payment).

Example #3: The district has chosen to set a higher differential payment rate of 10 percent for nontraditional hours. The actual cost of care is $300 per week (which is more than the applicable market rate of $240 per week in this example), and care is provided for a total of 40 hours during the week, five hours of which occur during nontraditional hours. The higher differential payment rate of 10 percent set by the district is applied against the actual cost of care up to the applicable market rate of $240. The total amount due to the provider is $264 ($240 market rate plus $24 differential payment).

Payment Rules for Providers Qualifying for More Than One Differential Payment Rate

A child care provider may qualify for multiple differential payment rates: for care provided to a child experiencing homelessness, child care provided during nontraditional hours, and/or a program being accredited by a nationally recognized child care organization. To calculate the payment, all differential payment rates for which the provider qualifies are added to calculate a total differential payment rate that must not exceed 25 percent of the actual cost of care or the applicable market rate.

Example #1: The district has not set a differential payment rate higher than the required 5 percent for care provided during nontraditional hours or for care provided to a child experiencing homelessness. The actual cost of care is $200 per week (which is less than the applicable market rate in this example); care is provided for a total of 40 hours during the week, of which 20 hours are nontraditional hours; and the family is experiencing homelessness. The required 5 percent differential payment rate for nontraditional hours is added to the required 5 percent differential payment rate for homelessness. The sum of the two qualifying differential payment rates is 10 percent. This is applied to the $200 actual cost of care. The total amount due to the provider is $220 ($200 actual cost of care plus $20 for the total differential for nontraditional hours and homelessness).
Example #2: The district has chosen to set a 15 percent differential payment rate for families experiencing homelessness and a 15 percent differential payment rate for accredited programs. The actual cost of care is $200 per week (which is less than the applicable market rate in this example); care is provided for a total of 40 hours during the week for a family experiencing homelessness; and the program is accredited. The sum of the two qualifying differential payment rates is 30 percent. However, the maximum differential payment rate is capped at 25 percent, which is applied to the actual cost of care. The total amount due to the provider is $250 ($200 cost of care plus $50 maximum differential payment).

Upon demonstrating that the 25 percent maximum is insufficient to provide access within the district to such child care providers or services, social services districts may request a waiver from the New York State Office of Children and Family Services (OCFS) to establish a differential payment rate in excess of 25 percent above the actual cost of care, or the applicable market rate.

**Child and Family Services Plan Amendment Requirements**

To comply with changes to 18 NYCRR Part 415, each social services district must review and revise, as necessary, the following sections of the 2017 Annual Plan Update to the Child and Family Services Plan: the “Federal and Local Priorities” section in Appendix M #1, the “Case Closing and Openings” section in Appendix M #2, and the “Differential Payment Rate” section in Appendix T. Each district must specify provisions for serving homeless families and for required differential payment rates for homeless families, and for care provided during nontraditional hours effective March 1, 2017.

Each district must indicate in the “Federal and Local Priorities” section in Appendix M #1 how the case opening and closing process reflects the district’s prioritization of the provision of child care services to families experiencing homelessness in instances where the district does not have sufficient funds to serve all eligible families, in consideration of the other federally mandated priorities for families. Additionally, each district must indicate in the “Case Closing and Openings” section in Appendix M #2 how other categories of families are prioritized in the case opening and closing process in the event the district does not have sufficient funds to serve all eligible families.

Each district must indicate in the “Differential Payment Rate” section in Appendix T whether:

- the district will provide differential payment rates higher than the required 5 percent differential payment rates for child care services provided by a licensed or registered child care provider to a child experiencing homelessness (and, if so, the percentage);
- the district will provide differential payment rates higher than the required 5 percent differential payment rates for child care services provided by a licensed, registered or legally-exempt child care provider during nontraditional hours (and, if so, the percentage);
- the district opts to set a differential payment rate for licensed and registered child care providers that have been accredited by a nationally recognized child care organization (and, if so, the percentage); and whether
- the district opts to set a differential payment rate for legally-exempt child care providers that provide care to a child experiencing homelessness (and, if so, the percentage).
**Reporting Requirements**

The *Child Care and Development Block Grant Act of 2014* requires the state to report whether children receiving child care services funded under the NYSCCBG program are children experiencing homelessness. When child care cases are selected by OCFS as part of the federal reporting sample, social services districts must indicate on form ACF-801, *Child Care Quarterly Case Record*, whether the child selected is experiencing homelessness.

**Automated Systems**

The Child Care Time and Attendance (CCTA) system has been modified to calculate both the required 5 percent differential payment rate to a licensed or registered child care provider serving a child experiencing homelessness and the required 5 percent differential payment rate to a licensed, registered, or a legally-exempt child care provider for services provided during nontraditional hours, effective for dates of service on or after March 1, 2017. Districts must enter the homelessness status for families in CCTA so that appropriate payments can be calculated by CCTA. Also, CCTA provides payment calculation for districts that opt to set: a differential payment rate that is higher than the required 5 percent, a differential payment rate for licensed and registered child care providers that have been accredited by a nationally recognized child care organization, and a differential payment rate for a legally-exempt provider serving children experiencing homelessness.

Further, CCTA has been revised to calculate the payment amount for child care providers that qualify for multiple differential payment rates. For questions concerning CCTA, please contact the CCTA Support Center at telephone number (877) 369-6106, option 9, or at fax (315) 752-0034.

If a payment for child care services is not processed through CCTA, the district must establish procedures to calculate the required differential payment rates accurately and appropriately effective for dates of service on or after March 1, 2017.

The OCFS-6025, *Application for Child Care Assistance*, and the LDSS-2921, *New York State Application for Certain Benefits and Services*, include a question to identify families experiencing homelessness. In addition, the Welfare Management System (WMS) – Services section has been modified to add a homelessness indicator as a required data entry field for families receiving child care services funded under the NYSCCBG.

/s/ Janice M. Molnar

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**Issued By:**
Janice M. Molnar, Ph.D.
Deputy Commissioner
Division of Child Care Services
The purpose of this Local Commissioners Memorandum (LCM) is to inform social services districts (SSD), other than New York City, of a change in the deduction of union dues and fair share fees from child care subsidy payments made to providers of family day care, group family day care, legally exempt in-home, and legally exempt family day care.
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Local Commissioners Memorandum

Transmittal: 17-OCFS-LCM-01
To: Local District Commissioners
Issuing Division Office: Division of Child Care Services
Date: March 22, 2017
Subject: Child Care Providers Deduction of Union Dues in Social Services Districts Other Than New York City
Contact Person(s): See page 3
Attachments: Attachment 1: Revised BICS Vendors Inquiry for Union Dues Exclusion and Membership
Attachment 2: Generate New SICS Union Dues Report for Union Members
Attachment 3: Generate Revised BICS Union Dues Report for Excluded Vendors and Update SICS Child Care Vendor ID Union Dues Exclusion Flag
Attachment 4: Generate Revised BICS Union Dues Report for Period
Attachment 5: WMS Codes that Include Union Dues
Attachment 6: WMS Codes that Exclude Union Dues

I. Purpose
The purpose of this Local Commissioners Memorandum (LCM) is to inform social services districts (SSD), other than New York City, of a change in the deduction of union dues and fair share fees from child care subsidy payments made to providers of family day care, group family day care, legally exempt in-home, and legally exempt family day care.

II. Background
On October 1, 2010, provisions permitting the unionization of certain child day care providers were added to the New York State Labor Law through the enactment of Chapter 540 of the Laws of 2010, which added a new Article 19-c (sections 695-a through 695-g).

The legislation allowed child day care providers to organize themselves and select representatives for the purpose of discussing with the state the conditions of their employment, the stability of funding and operation of child care programs, and the expansion of quality child care.

The legislation does not:

1. permit child care providers the right to engage collectively in a strike or to take work action to secure any right or privilege from the state or its agencies;
2. make providers state officers or employees or in any way imply an employee-employer relationship with the state or its subdivisions, including but not limited to the public retirement system, public health insurance program, unemployment insurance, workers' compensation, disability coverage, New York Civil Service Law or indemnification under the Public Officers Law;
3. alter any current regulations, policies or procedures for health, safety, discipline, inspection or enforcement applicable to child care providers or programs, unless agreed to and enacted;
IV.

4. interfere with the existing relationship between consumers and child care providers, including existing rights of parents or guardians to change or terminate a provider's service;
5. interfere with any ability of child care providers or child care provider representatives to meet or correspond with any state agency with regard to any matter of relevance; or
6. create any contractual right or obligation.

In accordance with the provisions of the law, eligible providers outside of New York City designated the Civil Service Employees Association (CSEA), Local 1000, AFSCME, AFL- CIO as their union; it remains the designated union. Under the authority of Article 19-c of the New York State Labor Law, the New York State Office of Children and Family Services (OCFS) processed deductions from provider checks for union dues and fair share fees.

On June 30, 2014, the United States Supreme Court held in *Harris v. Quinn*, 134 S. Ct. 2618 (2014) that the First Amendment prohibits unions from imposing mandatory agency fees on nonmembers. As a result, CSEA requested that New York State cease the deduction of fair share fees from child care subsidy payments made to nonmember providers of family day care, group family day care, legally exempt in-home, and legally exempt family day care.

III. **Program Implications**

Until now, OCFS and the SSDs have manually managed stopping the deduction of union dues / fair share fees from subsidy payments of those who are nonmembers. The Benefit Issuance and Control System (BICS) has been updated to allow for the designation of union members.

Effective December 5, 2016, SSDs may view BICS Child Care Vendors (services vendor commodity code 01) who are union members on the BICS Vendor Inquiry (LV0200) screen. LV0200 will also display whether the provider is excluded from the union dues deduction process. Refer to Attachment 1 for instructions on how to see if a provider is a union member or is excluded from the union dues deduction process.

Beginning on January 1, 2017, union dues deductions will occur only for child care providers who are union members. CSEA will provide BICS with a daily interface file identifying child care vendors who are union members and updating union membership data.

For union members who receive child care subsidy payments, BICS will deduct up to 2 percent from each child care subsidy payment made to eligible providers up to the annual maximum allowable union dues deduction amount ($748.25 - 2017). Each provider check will include contact information for CSEA. In the event that a provider has questions about union dues deductions, the provider should contact CSEA directly.

SSDs should continue to remit the collected union dues, at least once per month, to CSEA by using BICS Production Request (BPR) 38. Instructions on how to generate a check for CSEA can be found in Chapter 6 of the BICS Services Payment Processing Subsystem Manual.

SSDs continue to have the ability to exclude providers from the union dues deduction process by using BICS Vendor Operations in the event that, by operation of judgment or lien, the subsidy payments must be directed to a judgment creditor or lienholder. SSDs should verify that existing provider exclusions on BICS are still valid. Refer to Attachment 3 for instructions on how to produce the Union Dues Report for Excluded Vendors and how to update the BICS Child Care Vendor ID Union Dues Exclusion Flag. In the event that a child care provider no longer wishes to be a member of CSEA, that provider should contact CSEA directly. Child care providers who are union members and do not receive child care subsidies or are excluded from the deduction process will be notified of union dues directly by CSEA with instructions on how to remit payment.

Attachments:

The 6 attachments include directions for SSDs to access the BICS Vendor Inquiry screen for union dues exclusion and membership information. In addition, instructions are provided on how to generate three BICS union dues reports through BPR 38, including the new Union Dues Report for Union Members, which identifies BICS vendors who are union members.
Attachment 1: Revised BICS Vendors Inquiry for Union Dues Exclusion and Membership
Attachment 2: Generate New BICS Union Dues Report for Union Members
Attachment 3: Generate Revised BICS Union Dues Report for Excluded Vendors and Update BICS Child Care Vendor ID Union Dues Exclusion Flag
Attachment 4: Generate Revised BICS Union Dues Report for Period
Attachment 5: WMS Codes that Include Union Dues
Attachment 6: WMS Codes that Exclude Union Dues

IV. Contact Persons

If you have programs questions regarding information contained in this LCM, contact Joe Ziegler of the OCFS Division of Child Care Services at (518) 402–6520 or by email at joe.ziegler@ocfs.ny.gov.

If you have any fiscal questions regarding information contained in this LCM, contact James Carroll of the OCFS Bureau of Financial Operations at (518) (518) 474-0131or by email at james.carroll@ocfs.ny.gov.

If you have Welfare Management System (WMS) authorization questions regarding information contained in this LCM, contact Maureen Godwin at (212) 383-2483 or by email at maureen.godwin@ocfs.ny.gov.

All calls, inquiries, or communications about union dues that SSDs receive from child care providers residing in the SSD outside of New York City should be directed to CSEA at the following address: CSEA Membership Department, 143 Washington Ave., Albany, NY, 12210; or by phone at (877) 483-CSEA (2732); or by email at ccptny@cseainc.org.

Issued By:
Janice M. Molnar, Ph.D.
Deputy Commissioner
Division of Child Care
Revised BICS Vendors Inquiry for Union Dues Exclusion and Membership

Effective 12/5/16, districts may view BICS Child Care Vendors (services vendor commodity code 01) flagged for Union Dues Exclusion and BICS Child Care Vendors who are Union members on the BICS Vendor Inquiry (LVO200) screen.

1. To view BICS Child Care Vendors who are excluded from Union Dues deductions or who are Union members:
   a. On BICS LDMIP Menu (LDMENU):
      o Enter selection 09 – Vendor and Misc Inquiry

```
* LDMENU

LDMIP MENU
USE APPROPRIATE SF KEY (1-15) OR INDICATE SELECTION NUMBER 09 XMT ^

01  BICS PRODUCTION REQUEST
02  SNAP & PA RECON STATS MENU
03  RESERVED FOR FUTURE USE
04  CASE RECORD OF ASSIST INQ
05  VENDOR OPERATIONS
06  SIGN OFF
07  VOUCHER PROCESSING
08  LOCAL DATA INFORMATION
09  VENDOR AND MISC. INQUIRY
10  ACCOUNTS MENU
11  ASCU
12  SNAP, PAB/CHK, VCH# INQ
13  SERVICES INQUIRY
14  TIPLOG INQUIRY
15  LDMENU
16  WELFARE MANAGEMENT SYSTEM (WMSMNU) 32
```

DATA MIGRATION INQUIRY
CAMS AR CLAIM INQUIRY
CAMS CASH RECEIPTS MENU
CAMS CASE CLAIMS MENU
VENDOR RECEIVABLE (VR) ENTRY
CAMS CASH RECEIPTS INQUIRY
CONTRACT RATE TABLE UPDATE
CONTRACT RATE TABLE INQUIRY
ADJ CLAIMS REPORTS
TREASURY OFFSET MENU
VENDOR RECEIVABLE (VR) INQUIRY
UNION DUES INQUIRY MENU
LIEN ACCOUNTING
b. **On BICS Vendor and Miscellaneous Inquiry Menu (LVMMNU):**

- Enter BICS Vendor ID on the 1st line – Vendor Data

```
** VENDOR INQUIRY **
VENDOR ID  EMP NO/SSN  CASE NO  CHECK NO  XMT
>LV0200  00000002  PLCMNT ID  ^ VENDOR DATA
>LV0210  ^^^^^^^^^  ^^^^^^^^^  ^ VENDOR PAYMENT HISTORY
>LV0220  ^^^^^^^^^  ^^^^^^^^^  ^ VENDOR VOUCHER STATUS
>LV0230  ^^^^^^^^^  ^^^^^^^^^  ^ EMPL NO/SSN VEN LIST
>LV0290  ^^^^^^^^^  ^^^^^^^^^  ^ VENDOR CASE PAY ISS
>LV0300  ^^^^^^^^^  ^^^^^^^^^  ^ VENDOR REFUND DATA
>LV0310  ^^^^^^^^^  ^^^^^^^^^  ^ VENDOR NAME INQUIRY
>BSFS10  EMP NO/SSN  ^^^^^^^^^  SFS VEN ID  ^^^^^^^^^  ^ SFS VENDOR INQUIRY
** VOUCHER INQUIRY **
VOUCHER NO  CHECK NO  XMT
>LV0240  ^^^^^^^^^  ^ VOUCHER DATA
>LV0270  ^^^^^^^^^  ^ VOUCHER LIST BY CHECK NO INQUIRY
** UTILITY TAPE INQUIRY **
XMT
>LV0280  ^ UTILITY TAPE VOUCHER BILLING DATA
** CUSTOMER ACCOUNT NUMBER INQUIRY **
ACCOUNT NO  VENDOR ID  XMT
>LV0330  ^^^^^^^^^  ^^^^^^^^^  ^ CUSTOMER ACCOUNT NUMBER DATA
```
### BICS Vendor Inquiry (LVO200):

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<td>SFS VENDOR ID</td>
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<td>LOCATION</td>
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<td>DCCI-IND</td>
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<td>ALBANY</td>
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<tr>
<td>ZIP</td>
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<tr>
<td>PHONE</td>
<td>518 8720663</td>
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<td>TO PARENT</td>
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<tr>
<td>STATUS</td>
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<tr>
<td>UDX</td>
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<tr>
<td>UDM</td>
<td>11/10/14-07/01/16</td>
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<td>CERTIFICATION PERIOD</td>
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<td>CONN-RESOURCE-ID</td>
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<td>CONN VENDOR</td>
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<td>INTERCEPT AMOUNT</td>
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<tr>
<td>INTERCEPT PERCENTAGE</td>
<td>000</td>
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<tr>
<td>REGULAR-PBH</td>
<td>SPECIAL-PBH</td>
</tr>
<tr>
<td>THERAPEUTIC-PBH</td>
<td>EMERGENCY-PBH</td>
</tr>
</tbody>
</table>

- **UDX = Union Dues Exclusion:**
  - **N = No**
  - **Y = Yes**

- **UDM = Union Member:**
  - **N = No**
  - **Y = Yes**

DATA PRIOR TO 10/01/14 WAS MIGRATED ON 07/07/16
Generate New BICS Union Dues Report for Union Members

Effective 11/27/16, CSEA is providing an interface file to BICS with Child Care Vendors who are Union members and any changes to their Union membership. BICS is updated on a daily basis with Union membership data.

A new report displaying all BICS Child Care Vendors (services vendor commodity code 01) who are Union members is available on BICS BPR 38 - Union Dues.

1. To generate new BICS Union Members Report – UNION DUES REPORT FOR UNION MEMBERS - BICS RPT UNIONRPT:
   a. On BICS LDMIP Menu (LDMENU):
      o Enter selection 01 – BICS Production Requests (BPR)

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<tr>
<td>01</td>
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</tr>
<tr>
<td>03</td>
<td>RESERVED FOR FUTURE USE</td>
</tr>
<tr>
<td>04</td>
<td>CASE RECORD OF ASSIST INQ</td>
</tr>
<tr>
<td>05</td>
<td>VENDOR OPERATIONS</td>
</tr>
<tr>
<td>06</td>
<td>SIGN OFF</td>
</tr>
<tr>
<td>07</td>
<td>VOUCHER PROCESSING</td>
</tr>
<tr>
<td>08</td>
<td>LOCAL DATA INFORMATION</td>
</tr>
<tr>
<td>09</td>
<td>VENDOR AND MISC. INQUIRY</td>
</tr>
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<td>10</td>
<td>ACCOUNTS MENU</td>
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<td>ASCU</td>
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<tr>
<td>12</td>
<td>SNAP, PAB/CHK, VCH# INQ</td>
</tr>
<tr>
<td>13</td>
<td>SERVICES INQUIRY</td>
</tr>
<tr>
<td>14</td>
<td>TIPLOG INQUIRY</td>
</tr>
<tr>
<td>15</td>
<td>LDMENU</td>
</tr>
<tr>
<td>16</td>
<td>WELFARE MANAGEMENT SYSTEM (WMSMNU)</td>
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</table>

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<th>XMT</th>
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<tr>
<td>02 SNAP &amp; PA RECON STATS MENU</td>
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<td>03 RESERVED FOR FUTURE USE</td>
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<td></td>
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<tr>
<td>04 CASE RECORD OF ASSIST INQ</td>
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<td>05 VENDOR OPERATIONS</td>
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<td>07 VOUCHER PROCESSING</td>
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<td>08 LOCAL DATA INFORMATION</td>
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<td>14 TIPLOG INQUIRY</td>
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b. On BICS Run Request Menu (LPARM1):

- Enter selection 38 – Union Dues

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<td>11/29/16</td>
<td><em><strong>SF2 TO PAGE FORWARD</strong></em></td>
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*SNAP BENEFIT OPERATION
- 01 EMERGENCY SNAP CONTROL
- 02 RESERVED
- 03 RESERVED
- 04 RESERVED
- 05 RESERVED
- 06 SNAP BENEFIT REPORTS
- 07 RESERVED
- 08 RESERVED
- 09 RESERVED

*INDIRECT PAYMENT OPERATION
- 21 VOUCHER GENERATION
- 22 FUEL/UTILITY LIST
- 23 SERVICES LIST
- 24 VOUCHER REPORTS
- 25 VENDOR REPORTS
- 26 PAY SELECTED VOUCHERS
- 27 VENDOR CHECK DEST/REPL
- 28 IRS 1099 FORMS
- 29 DAY CARE REQUEST GENERATION
- 30 SERVICES ROSTER GENERATION
- 31 UTILITY TAPE FUNCTIONS
- 32 SELF-SELECTED DAYCARE CERTS
- 33 BATCH ROSTER PROCESSING
- 34 VENDOR DATA EXTRACT
- 35 ROSTERS BEYOND TO DATE
- 36 FC & ADOPTION RATE RPTS
- 37 SERVICES PRE-ROSTER GEN
- 38 UNION DUES
c. On Union Dues Payment/Report Function Code 38 (LPARM2):

- Enter Y for Report of Union Members (Y)

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<td>PRE-ROLL (P) ..................................</td>
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<tr>
<td></td>
<td>CHECK ISSUANCE (I) ..........................</td>
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<tr>
<td></td>
<td>ENTER CHECK NO ..............................</td>
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<td></td>
<td>ENTER CHECK DATE (MMDDYY) ..................</td>
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<tr>
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<td>CHECK DESTROY-CANC-VOID/REPLACE (D/C/V)</td>
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<td>ENTER CHECK NO TO BE REPLACED .............</td>
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<td></td>
<td>ENTER THE NEW CHECK NO ....................</td>
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<td>NEW CHECK DATE (MMDDYY) ...................</td>
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<tr>
<td></td>
<td>REPORT FOR (T-TAXID, V-VENDOR, A-ALL)....</td>
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<tr>
<td></td>
<td>IF T/V ENTER TAX-ID/VENDOR-ID ............</td>
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</tr>
<tr>
<td></td>
<td>PERIOD (MMYMMYY) ...........................</td>
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<tr>
<td></td>
<td>REPORT OF EXCLUDED VENDORS (Y) ...........</td>
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<td>REPORT OF UNION MEMBERS (Y) ..............</td>
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<td></td>
<td>RUN NOW OR OVERNIGHT (N OR O) ............</td>
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XMIT ^
d. UNION DUES REPORT FOR UNION MEMBERS - BICS RPT UNIONRPT

- All BICS Child Care Vendors identified by CSEA as Union members are included in the report

<table>
<thead>
<tr>
<th>EMP NO/SSN</th>
<th>VENDOR-ID</th>
<th>VENDOR NAME</th>
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<tr>
<td></td>
<td>DCDUP40</td>
<td>DAY CARE ANONYMOUS</td>
<td></td>
<td>T(2016)</td>
<td>Y 10/17/16</td>
</tr>
<tr>
<td>012547852</td>
<td>00001888</td>
<td>SERVICE 3C</td>
<td></td>
<td></td>
<td>Y 10/17/16</td>
</tr>
<tr>
<td>0001999</td>
<td>SERVICE 3C</td>
<td></td>
<td></td>
<td></td>
<td>Y 10/17/16</td>
</tr>
</tbody>
</table>

- MEMBER DATE:
  - Y = BICS Vendor is a Union Member

- Membership Date is displayed
- **EXCL DATE**: Date Union Dues Exclusion entered by the District

- **EXCL FLAG**:
  - *T* = Vendor excluded by the Union or OCFS at Tax ID level
    - Exclusion year is in parenthesis
    - Districts cannot change Union Dues Exclusion Flag at Tax ID level

  - *V* = Vendor excluded by the District at Vendor ID level
    - Districts can change Union Dues Exclusion Flag at BICS VID level

**NOTE:** Updates to BICS Vendor Union Dues Exclusion Flag made prior to 1/1/17 will impact Union Dues Deductions on checks issued in 2016.

When the BICS Vendor Union Dues Exclusion Flag is removed, Union Dues Deductions will start on next Child Care Vendor check.

When the flag is added, deductions will not be made on the next Child Care Vendor check.
Generate Revised BICS Union Dues Report for Excluded Vendors and Update BICS Child Care Vendor ID Union Dues Exclusion Flag

Effective 12/5/16, districts may review BICS Child Care Vendors (services vendor commodity code 01) who are excluded from Union Dues deductions by generating a revised BICS Union Dues Report for Excluded Vendors. Beginning 1/1/17, Union Dues deductions will occur only for Child Care Providers who are union members.

It is recommended that districts review the BICS Union Dues Report for Excluded Vendors to ensure that the BICS Vendor ID Union Dues Exclusion Flag is up to date. Any updates made to the Union Dues Exclusion Flag in 2016 will be applied to Child Care Vendor checks issued in 2016. It is recommended to wait until after 1/1/17 to update BICS Vendor ID Union Dues Exclusion Flag if updates are necessary for Child Care Vendor checks issued in 2017.

A revised report displaying BICS Vendors Excluded from Union Dues Deductions is available on BICS BPR 38 – Union Dues.

1. To generate a revised BICS Union Dues Excluded Vendors Report – UNION DUES REPORT FOR EXCLUDED VENDORS - BICS RPT UNIONRPT:
   a. On BICS LDMIP Menu (LDMENU):
      - Enter selection 01 – BICS Production Requests (BPR)

<table>
<thead>
<tr>
<th>LDMENU MENU</th>
<th>USE APPROPRIATE SF KEY (1-15) OR INDICATE</th>
<th>SELECTION NUMBER</th>
<th>01</th>
<th>XMT</th>
</tr>
</thead>
<tbody>
<tr>
<td>01 BICS PRODUCTION REQUEST</td>
<td>17 DATA MIGRATION INQUIRY</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>02 SNAP &amp; PA RECON STATS MENU</td>
<td>18 CAMS AR CLAIM INQUIRY</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>03 RESERVED FOR FUTURE USE</td>
<td>19 CAMS CASH RECEIPTS MENU</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>04 CASE RECORD OF ASSIST INQ</td>
<td>20 CAMS CASE CLAIMS MENU</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>05 VENDOR OPERATIONS</td>
<td>21 VENDOR RECEIVABLE (VR) ENTRY</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>06 SIGN OFF</td>
<td>22 CAMS CASH RECEIPTS INQUIRY</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>07 VOUCHER PROCESSING</td>
<td>23 CONTRACT RATE TABLE UPDATE</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>08 LOCAL DATA INFORMATION</td>
<td>24 CONTRACT RATE TABLE INQUIRY</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>09 VENDOR AND MISCELLANEOUS INFORMATION</td>
<td>25 ADJ CLAIMS REPORTS</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 ACCOUNTS MENU</td>
<td>26 TREASURY OFFSET MENU</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 ASCU</td>
<td>27 VENDOR RECEIVABLE (VR) INQUIRY</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12 SNAP, PAB/CHK, VCH# INQ</td>
<td>28 UNION DUES INQUIRY MENU</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13 SERVICES INQUIRY</td>
<td>29 LIEN ACCOUNTING</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14 TIPLOG INQUIRY</td>
<td>30</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15 LDMENU</td>
<td>31</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16 WELFARE MANAGEMENT SYSTEM (WMSMNU)</td>
<td>32</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
b. **On BICS Run Request Menu (LPARM1):**

   - **Enter selection 38 – Union Dues**

<table>
<thead>
<tr>
<th>LPARM1</th>
<th>BICS RUN REQUEST</th>
<th>DIST BLOO 11/30/16</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td><em><strong>SF2 TO PAGE FORWARD</strong></em></td>
<td></td>
</tr>
<tr>
<td>ENTER THE NUMBER OF THE SELECTION REQUESTED: 38</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SNAP BENEFIT OPERATION</td>
<td>INDIRECT PAYMENT OPERATION</td>
<td></td>
</tr>
<tr>
<td>01 EMERGENCY SNAP CONTROL</td>
<td>21 VOUCHER GENERATION</td>
<td></td>
</tr>
<tr>
<td>02 RESERVED</td>
<td>22 FUEL/UTILITY LIST</td>
<td></td>
</tr>
<tr>
<td>03 RESERVED</td>
<td>23 SERVICES LIST</td>
<td></td>
</tr>
<tr>
<td>04 RESERVED</td>
<td>24 VOUCHER REPORTS</td>
<td></td>
</tr>
<tr>
<td>05 RESERVED</td>
<td>25 VENDOR REPORTS</td>
<td></td>
</tr>
<tr>
<td>06 SNAP BENEFIT REPORTS</td>
<td>26 PAY SELECTED VOUCHERS</td>
<td></td>
</tr>
<tr>
<td>07 RESERVED</td>
<td>27 VENDOR CHECK DEST/REPL</td>
<td></td>
</tr>
<tr>
<td>08 RESERVED</td>
<td>28 IRS 1099 FORMS</td>
<td></td>
</tr>
<tr>
<td>09 RESERVED</td>
<td>29 DAY CARE REQUEST GENERATION</td>
<td></td>
</tr>
<tr>
<td>10 RESERVED</td>
<td>30 SERVICES ROSTER GENERATION</td>
<td></td>
</tr>
<tr>
<td>11 NSVS CHECK PRODUCTION</td>
<td>31 UTILITY TAPE FUNCTIONS</td>
<td></td>
</tr>
<tr>
<td>12 MANUAL CHECK REPORTS</td>
<td>32 SELF-SELECTED DAYCARE CERTS</td>
<td></td>
</tr>
<tr>
<td>13 NSVS CHECK PREROLL</td>
<td>33 BATCH ROSTER PROCESSING</td>
<td></td>
</tr>
<tr>
<td>14 CHECK DEST/REPL</td>
<td>34 VENDOR DATA EXTRACT</td>
<td></td>
</tr>
<tr>
<td>15 SVCS CHECK PRODUCTION</td>
<td>35 ROSTERS BEYOND TO DATE</td>
<td></td>
</tr>
<tr>
<td>16 SVCS CHECK PREROLL</td>
<td>36 FC &amp; ADOPTION RATE RPTS</td>
<td></td>
</tr>
<tr>
<td>17 EMERGENCY PAB CONTROL</td>
<td>37 SERVICES PRE-ROSTER GEN</td>
<td></td>
</tr>
<tr>
<td>18 UNEMPLOYMENT</td>
<td>38 UNION DUES</td>
<td></td>
</tr>
</tbody>
</table>
c. On Union Dues Payment/Report Function Code 38 (LPARM2):
   - Enter Y for Report of Excluded Vendors (Y)

<table>
<thead>
<tr>
<th>LPARM2</th>
<th>UNION DUES PAYMENT/REPORT FUNCTION CODE 38</th>
<th>DATE 11/30/16</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>COMPLETE ENTRIES FOR THE FOLLOWING:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>ENTRY</td>
<td></td>
</tr>
<tr>
<td></td>
<td>PRE-ROLL (P)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>CHECK ISSUANCE (I)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>ENTER CHECK NO</td>
<td></td>
</tr>
<tr>
<td></td>
<td>ENTER CHECK DATE (MMDDYY)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>CHECK DESTROY-CANC-VOID/REPLACE (D/C/V)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>ENTER CHECK NO TO BE REPLACED</td>
<td></td>
</tr>
<tr>
<td></td>
<td>ENTER THE NEW CHECK NO</td>
<td></td>
</tr>
<tr>
<td></td>
<td>NEW CHECK DATE (MMDDYY)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>REPORT FOR (T-TAXID, V-VENDOR, A-ALL)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>IF T/V ENTER TAX-ID/VENDOR-ID</td>
<td></td>
</tr>
<tr>
<td></td>
<td>PERIOD (MMYMMYY)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>REPORT OF EXCLUDED VENDORS (Y)</td>
<td>Y</td>
</tr>
<tr>
<td></td>
<td>REPORT OF UNION MEMBERS (Y)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>RUN NOW OR OVERNIGHT (N OR O)</td>
<td></td>
</tr>
</tbody>
</table>

XMIT ^
d. UNION DUES REPORT FOR EXCLUDED VENDORS - BICS RPT UNIONRPT

- All BICS Child Care Vendors excluded by the Union or OCFS at Tax ID level and by the district at BICS Vendor ID level are included in the report
- Report revised to display Union Membership and effective date

<table>
<thead>
<tr>
<th>EMP NO/SSN</th>
<th>VENDOR-ID</th>
<th>VENDOR NAME</th>
<th>EXCL DATE</th>
<th>EXCL FLAG</th>
<th>MEMBER DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>000001700</td>
<td>00000002</td>
<td>TEST DAY CARE VENDOR NAME-1</td>
<td>09/20/16</td>
<td>V</td>
<td>N</td>
</tr>
<tr>
<td>012345678</td>
<td>DAYCAR40</td>
<td>MOMS DAYCARE</td>
<td>11/28/16</td>
<td>V</td>
<td>Y 10/17/16</td>
</tr>
<tr>
<td>DCDUP40</td>
<td>DAY CARE ANONYMOUS</td>
<td></td>
<td>T(2016)</td>
<td>Y</td>
<td>Y 10/17/16</td>
</tr>
<tr>
<td>074526489</td>
<td>404521</td>
<td>CHILD CARE PAR EXCELLENCE</td>
<td>03/14/12</td>
<td>V</td>
<td>Y 10/17/16</td>
</tr>
<tr>
<td>074989898</td>
<td>ANTEST1</td>
<td>IST UNION DUES TEST</td>
<td>09/14/11</td>
<td>V</td>
<td>Y 10/17/16</td>
</tr>
<tr>
<td>075648972</td>
<td>07462548</td>
<td>AVAILABLE</td>
<td>10/31/11</td>
<td>V</td>
<td>Y 10/17/16</td>
</tr>
<tr>
<td>089786755</td>
<td>DCVID1</td>
<td>MR ROBOT FAMILY DAY CARE</td>
<td>T(2016)</td>
<td>Y</td>
<td>Y 10/17/16</td>
</tr>
<tr>
<td>DCVIDI</td>
<td>TEST CSEA INTERFACE 501</td>
<td></td>
<td>10/20/16</td>
<td>V</td>
<td>Y 10/20/16</td>
</tr>
<tr>
<td>111111111</td>
<td>DAYCARE</td>
<td></td>
<td>T(2016)</td>
<td>N</td>
<td></td>
</tr>
</tbody>
</table>

- **EXCL DATE** = Date Union Dues Exclusion entered by the District
- **EXCL FLAG:**
  - V = Vendor excluded by the District at Vendor ID level
    - Districts can change Union Dues Exclusion Flag at BICS Vendor ID level
  - T = Vendor excluded by the Union or OCFS at Tax ID level
    - Exclusion year is in parenthesis
    - Districts cannot change Union Dues Exclusion Flag at Tax ID level
2. To Change BICS Vendor ID Union Dues Exclusion Flag:

**NOTE:** Updates to BICS Vendor Union Dues Exclusion Flag made prior to 1/1/17 will impact Union Dues Deductions on checks issued in 2016.

When the BICS Vendor Union Dues Exclusion Flag is removed, Union Dues Deductions will start on next Child Care Vendor check.

When the flag is added, deductions will not be made on the next Child Care Vendor check.

a. **On BICS LDMIP Menu (LDMENU):**

   - Enter selection 05 – Vendor Operations

```
<table>
<thead>
<tr>
<th></th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>BICS PRODUCTION REQUEST</td>
</tr>
<tr>
<td>02</td>
<td>SNAP &amp; PA RECON STATS MENU</td>
</tr>
<tr>
<td>03</td>
<td>RESERVED FOR FUTURE USE</td>
</tr>
<tr>
<td>04</td>
<td>CASE RECORD OF ASSIST INQ</td>
</tr>
<tr>
<td>05</td>
<td>VENDOR OPERATIONS</td>
</tr>
<tr>
<td>06</td>
<td>SIGN OFF</td>
</tr>
<tr>
<td>07</td>
<td>VOUCHER PROCESSING</td>
</tr>
<tr>
<td>08</td>
<td>LOCAL DATA INFORMATION</td>
</tr>
<tr>
<td>09</td>
<td>VENDOR AND MISC. INQUIRY</td>
</tr>
<tr>
<td>10</td>
<td>ACCOUNTS MENU</td>
</tr>
<tr>
<td>11</td>
<td>ASCU</td>
</tr>
<tr>
<td>12</td>
<td>SNAP, PAB/CHK, VCH# INQ</td>
</tr>
<tr>
<td>13</td>
<td>SERVICES INQUIRY</td>
</tr>
<tr>
<td>14</td>
<td>TIPLOG INQUIRY</td>
</tr>
<tr>
<td>15</td>
<td>LDMENU</td>
</tr>
<tr>
<td>15</td>
<td>WELFARE MANAGEMENT SYSTEM (WMSMNU)</td>
</tr>
</tbody>
</table>
```

05  XMT  ^
b. On BICS Vendor Operations Menu (LVOMNU):

- Enter Vendor ID
- Enter Selection 02 – Change Vendor Data

<table>
<thead>
<tr>
<th>LVOMNU</th>
<th>VENDOR OPERATIONS MENU</th>
<th>DIST BLOO 11/29/16</th>
</tr>
</thead>
<tbody>
<tr>
<td>VENDOR ID 00000002</td>
<td>ENTER SELECTION NUMBER 02</td>
<td>VENDOR REUSE ^ XMT ^</td>
</tr>
<tr>
<td>(SELECTION 01)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

01 DATA ENTRY - INITIAL VENDOR ENTRY/ADD

02 CHANGE VENDOR DATA

03 DELETE VENDOR
c. On BICS Vendor File Maintenance Change Vendor Data (LVO110) screen:

- To remove BICS Vendor from Exclusion of Union Dues:
  - Remove X displayed under NO DUES
  - Enter at XMIT

- To Exclude BICS Vendor from Union Dues:
  - Enter X under NO DUES
  - Enter at XMIT

- Message **Vendor Data Updated** will be displayed after the update is performed

- Updates to the BICS Vendor ID Union Dues Exclusion Flag are in effect until another update is made. They do not expire at the end of the year.

```
LVO110

VENDOR FILE MAINTENANCE
CHANGE VENDOR DATA

VENDOR ID 00000002 UTIL TAPE LAST TRANSACTION WAS CHANGE ON 09/20/16
SFS VENDOR ID ^^^^^^^^^^ LOCATION ^^^^^^^^^^^ ADDRESS SEQ ^^
EMPLOYER NO/SSN 000001700 VENDOR TYPE 02 01 99 ^^ ^^ ^^

NAME 1 TEST DAY CARE VENDOR NAME-1 ADOPT. SUB. RATE DISTRICT
NAME 2
STREET 999999999999999999999999
CITY ALBANY STATE/PROVINCE NY ZIP 12208
PHONE 518 8720663 CONTACT ^^^^^^^^^^^^^^^^^^^^^^^^^^^^^^^^^^^^^
1099 NAME
LOCAL X-REF ID ^^^^^^^^^ REPORT INCOME ON IRS-1099 Y LIEN EXISTS ^
PARENT ID ^^^^^^^ VOUCHERS TO PARENT ^ CHECKS TO PARENT ^

CONTRACT NUMBER NO DUES CERTIFICATION PERIOD SUSPENSION PERIOD
^^^^^^^^ X - -

XMIT ^
```
Generate Revised BICS Union Dues Report For Period

Effective 12/5/16, a revised BICS Union Dues Report For Period is available on BICS BPR 38 – Union Dues. The revised report now displays Union Membership and the effective date.

1. To generate a revised BICS Union Dues Report For Period For Tax ID, VID, or ALL – UNION DUES REPORT - BICS RPT UNIONRPT:
   a. On BICS LDMIP Menu (LDMENU):
      ○ Enter selection 01 – BICS Production Requests (BPR)

```
LDMENU

USE APPROPRIATE SF KEY (1-15) OR INDICATE SELECTION NUMBER  01  XMT ^

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>BICS PRODUCTION REQUEST</td>
</tr>
<tr>
<td>02</td>
<td>SNAP &amp; PA RECON STATS MENU</td>
</tr>
<tr>
<td>03</td>
<td>RESERVED FOR FUTURE USE</td>
</tr>
<tr>
<td>04</td>
<td>CASE RECORD OF ASSIST INQ</td>
</tr>
<tr>
<td>05</td>
<td>VENDOR OPERATIONS</td>
</tr>
<tr>
<td>06</td>
<td>SIGN OFF</td>
</tr>
<tr>
<td>07</td>
<td>VOUCHER PROCESSING</td>
</tr>
<tr>
<td>08</td>
<td>LOCAL DATA INFORMATION</td>
</tr>
<tr>
<td>09</td>
<td>VENDOR AND MISC. INQUIRY</td>
</tr>
<tr>
<td>10</td>
<td>ACCOUNTS MENU</td>
</tr>
<tr>
<td>11</td>
<td>ASCU</td>
</tr>
<tr>
<td>12</td>
<td>SNAP, PAB/CHK, VCH# INQ</td>
</tr>
<tr>
<td>13</td>
<td>SERVICES INQUIRY</td>
</tr>
<tr>
<td>14</td>
<td>TIPLOG INQUIRY</td>
</tr>
<tr>
<td>15</td>
<td>LDMENU</td>
</tr>
<tr>
<td>16</td>
<td>WELFARE MANAGEMENT SYSTEM (WMSMNU)</td>
</tr>
</tbody>
</table>
```
b. On BICS Run Request Menu (LPARM1):

- Enter selection 38 – Union Dues

<table>
<thead>
<tr>
<th>LPARM1</th>
<th>BICS RUN REQUEST</th>
<th>DIST BLOO 11/30/16</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td><em><strong>SF2 TO PAGE FORWARD</strong></em></td>
<td>PAGE 1 OF 2</td>
</tr>
<tr>
<td>ENTER THE NUMBER OF THE SELECTION REQUESTED: 38</td>
<td>XMIT ^</td>
<td></td>
</tr>
</tbody>
</table>

*SNAP BENEFIT OPERATION
01 EMERGENCY SNAP CONTROL
02 RESERVED
03 RESERVED
04 RESERVED
05 RESERVED
06 SNAP BENEFIT REPORTS
07 RESERVED
08 RESERVED
09 RESERVED

*DIRECT PAYMENT OPERATION
11 NSVS CHECK PRODUCTION
12 MANUAL CHECK REPORTS
13 NSVS CHECK PREROLL
14 CHECK DEST/REPL
15 SVCS CHECK PRODUCTION
16 SVCS CHECK PREROLL
17 EMERGENCY PAB CONTROL

*INDIRECT PAYMENT OPERATION
21 VOUCHER GENERATION
22 FUEL/UTILITY LIST
23 SERVICES LIST
24 VOUCHER REPORTS
25 VENDOR REPORTS
26 PAY SELECTED VOUCHERS
27 VENDOR CHECK DEST/REPL
28 IRS 1099 FORMS
29 DAY CARE REQUEST GENERATION
30 SERVICES ROSTER GENERATION
31 UTILITY TAPE FUNCTIONS
32 SELF-SELECTED DAYCARE CERTS
33 BATCH ROSTER PROCESSING
34 VENDOR DATA EXTRACT
35 ROSTERS BEYOND TO DATE
36 FC & ADOPTION RATE RPTS
37 SERVICES PRE-ROSTER GEN
38 UNION DUES
c. On Union Dues Payment/Report Function Code 38:
   - Enter T for Union Dues Report for Tax ID
   - Enter V for Union Dues Report for BICS Vendor ID
   - Enter A for Union Dues Report for both Tax ID and BICS Vendor ID
   - Enter Tax ID or BICS Vendor ID when T or V is entered
   - Enter effective period for Union Dues Report

<table>
<thead>
<tr>
<th>LPARM2</th>
<th>UNION DUES PAYMENT/REPORT FUNCTION CODE 38</th>
<th>DATE 11/30/16</th>
<th>DISTRICT</th>
<th>BLOO</th>
</tr>
</thead>
<tbody>
<tr>
<td>COMPLETE ENTRIES FOR THE FOLLOWING:</td>
<td>ENTRY</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PRE-ROLL (P)</td>
<td>^^^^^^^^^^^^^^^</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CHECK ISSUANCE (I)</td>
<td>^^^^^^^^^^^^^</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ENTER CHECK NO</td>
<td>^^^^^^^^^^^^^</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ENTER CHECK DATE (MMDDYY)</td>
<td>^^^^^^^^^^^^^</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CHECK DESTROY-CANCE-VOID/REPLACE (D/C/V)</td>
<td>^^^^^^^^^^^^^</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
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<tr>
<td>RUN NOW OR OVERNIGHT (N OR O) ........</td>
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**d. UNION DUES REPORT FOR PERIOD - BICS RPT UNIONRPT**

- Report revised to display Union Membership and effective date
- Selection A for ALL:

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**DUES AMT:** $24.00

**CHECK NUMBER: 20160226009**
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**STATUS: I**
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| NET UNION DUES AMOUNT:     | $90.00 |

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**STATUS: I**
**DUES AMT:** $70.00

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UNION DUES CANCELLED AMOUNT: $34.00  
NET UNION DUES AMOUNT: $90.00

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CHECK DATE: 09/14/16  
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UNION DUES CANCELLED AMOUNT: $0.00  
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CHECK NUMBER: 20161013011  
CHECK DATE: 10/13/16  
STATUS: I  
DUES AMT: $70.00  
GROSS UNION DUES AMOUNT: $35.00  
UNION DUES CANCELLED AMOUNT: $0.00  
NET UNION DUES AMOUNT: $35.00

TAX-ID: 565585222 TOTAL: $85.00
### Attachment A: WMS Codes that Include Union Dues/Fees

<table>
<thead>
<tr>
<th>WMS PURCHASE OF SERVICE TYPE (CASE TYPE 40)</th>
<th>WMS Mnemonic</th>
<th>NYS Child Care Modality</th>
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</thead>
<tbody>
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<td>30 Legally Exempt In-Home Child Care Non-Relative (Full time)</td>
<td>LEI-NR-F</td>
<td>Legally Exempt In-Home Child Care Non-Relative</td>
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<tr>
<td>31 Legally Exempt In-Home Child Care Non-Relative (Part time)</td>
<td>LEI-NR-P</td>
<td>Legally Exempt In-Home Child Care Non-Relative</td>
</tr>
<tr>
<td>32 Day Care-Family-Full Time</td>
<td>DC-F-FT</td>
<td>Family Day Care-Registered</td>
</tr>
<tr>
<td>33 Day Care-Family-Part Time</td>
<td>DC-F-PT</td>
<td>Family Day Care-Registered</td>
</tr>
<tr>
<td>34 Day Care-Family-Group-Full Time</td>
<td>FG-DC-FT</td>
<td>Group Family Day Care-Licensed</td>
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<tr>
<td>35 Day Care-Family-Group-Part Time</td>
<td>FG-DC-PT</td>
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<tr>
<td>3B Legally Exempt Family Child Care Non-Relative (Full time)</td>
<td>LEF-NR-F</td>
<td>Legally Exempt Family Child Care Non-Relative</td>
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<tr>
<td>3C Legally Exempt Family Child Care Non-Relative (Part time)</td>
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<tr>
<td>3D Legally Exempt Family Child Care Relative (Full time)</td>
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<td>3E Legally Exempt Family Child Care Relative (Part time)</td>
<td>LEF-R-P</td>
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<td>3F Legally Exempt In-Home Child Care Relative (Full time)</td>
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<table>
<thead>
<tr>
<th>WMS PAYMENT TYPE CODES (PA, MA, FS)</th>
<th>WMS Mnemonic</th>
<th>NYS Child Care Modality</th>
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</thead>
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<tr>
<td>R0 Legally Exempt In-Home Child Care Relative (Full Time)</td>
<td>LEI-R-F</td>
<td>Legally Exempt In-Home Child Care Relative</td>
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<td>R1 Legally Exempt In-Home Child Care Relative (Part Time)</td>
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<td>R2 Legally Exempt Family Child Care Relative (Full Time)</td>
<td>LEF-R-F</td>
<td>Legally Exempt Family Child Care Relative</td>
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<tr>
<td>R3 Legally Exempt Family Child Care Relative (Part Time)</td>
<td>LEF-R-P</td>
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</tr>
<tr>
<td>R4 Legally Exempt Family Child Care Non Relative (Full Time)</td>
<td>LEF-NR-F</td>
<td>Legally Exempt Family Child Care Non-Relative</td>
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<tr>
<td>R5 Legally Exempt Family Child Care Non Relative (Part Time)</td>
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<td>LEI-NR-F</td>
<td>Legally Exempt In-Home Child Care Non-Relative</td>
</tr>
<tr>
<td>31 Legally Exempt In-Home Child Care Non-Relative (Part-Time)</td>
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<td>Legally Exempt In-Home Child Care Non-Relative</td>
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<tr>
<td>33 Day Care Family Home (Part-Time)</td>
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<tr>
<td>34 Day Care Group Family (Full-Time)</td>
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<tr>
<td>36 Day Care Group Family (Part-Time)</td>
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<td>Group Family Day Care-Licensed</td>
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## Attachment B: WMS Codes that Exclude Union Dues/Fees

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<tr>
<th>WMS PURCHASE OF SERVICE TYPE (CASE TYPE 40)</th>
<th>WMS Mnemonic</th>
<th>NYS Child Care Modality</th>
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<tbody>
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<tr>
<td>37 Day Care-Center-Part Time</td>
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<td>SACC</td>
<td>School Age Child Care-Registered</td>
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<td>3H Legally Exempt Group Child Care (Full Time)</td>
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<td>3I Legally Exempt Group Child Care (Part Time)</td>
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<td>NYS Child Care Modality</td>
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<td>03 Legally Exempt Group Child Care (Part Time)</td>
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<tr>
<td>38 Day Care Center (Part-Time)</td>
<td>DC-C-PT</td>
<td>Day Care Center - Licensed</td>
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</table>
Memorandum,
*CSEA Fair Share Payments*

The purpose of this memorandum is to inform Social Services Districts of changes to the collection of CSEA fair share payments.
Dear Colleagues,

The information below is being sent as an FYI. Thank you.

**CSEA FAIR SHARE PAYMENTS:**

Beginning in 2012, BICS began deducting Union Dues and Fair Share payments from the child care subsidy checks issued to all providers of family day care, group family day care, legally-exempt in home providers and legally exempt family child care providers outside of New York City (see 11-OCFS – LCM-13). These deductions were then transmitted to CSEA, the union designated to represent these providers. Earlier in 2014, the U.S. Supreme Court issued a ruling (Harris v. Quinn, 2014) which prohibits the collection of fair share payments (payments deducted from those providers who have elected not to become members of the Union). As a system fix is being developed to differentiate between day care providers who are union members from those who aren’t, OCFS has begun to manually flag BICS to stop the dues deductions from those providers who are not CSEA members. Accordingly, districts may start seeing instances where providers are not having dues deducted from their subsidy checks. Until the provider has signed on with CSEA, OCFS is assuming the provider does not want to be a CSEA member and there will be no deduction made from their subsidy check.

Providers should contact CSEA if they wish to become a member.

**Michael A. Miller, LMSW**  
Children & Family Services Specialist 1  
NYS Office of Children & Family Services - Division of Child Care Services  
52 Washington St., Room 309S, Rensselaer, NY 12144-2834  
(518) 408-3395 | Michael.Miller@ocfs.ny.gov
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09-OCFS-LCM-07
Training Programs for Dislocated Worker, One-time Disbursement Under the American Recovery and Reinvestment Act of 2009, Enhanced Market Rate for Legally-Exempt Family and In-Home Child Care Providers

The purpose of this release is to advise social services districts of the revised regulations related to the market rates and the maximum reimbursement for expenditures for all child care services funded under the New York State Child Care Block Grant (NYSCCBG) and Social Services Block Grant (Title XX). This LCM contains very important instructions on how payment amounts are determined.
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Local Commissioners Memorandum

<table>
<thead>
<tr>
<th>Transmittal:</th>
<th>09-OCFS-LCM-07</th>
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<tr>
<td>To:</td>
<td>Local District Commissioners</td>
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<tr>
<td>Issuing Division/Office:</td>
<td>Division of Child Care Services</td>
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<tr>
<td>Date:</td>
<td>May 18, 2009</td>
</tr>
<tr>
<td>Subject:</td>
<td>Training Programs for Dislocated Worker One-time Disbursement Under the American Recovery and Reinvestment Act of 2009 Enhanced Market Rate for Legally-Exempt Family and In-Home Child Care Providers</td>
</tr>
<tr>
<td>Contact Person(s):</td>
<td>Rhonda Finlayson: (518) 474-3775 E-mail Address <a href="mailto:Rhonda.Finlayson@ocfs.state.ny.us">Rhonda.Finlayson@ocfs.state.ny.us</a></td>
</tr>
<tr>
<td>Attachments:</td>
<td>Attachment A: Market Rates for Legally-Exempt Family and In-Home Child Care Providers Including the Enhanced Market Rate Effective May 15, 2009 Attachment B: Child and Family Services Plan Amendment</td>
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<td>Attachment Available Online:</td>
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I. Purpose

The purpose of this Local Commissioners Memorandum (LCM) is to inform social services districts of regulatory changes to Title 18 of the New York State Codes, Rules and Regulations (NYCRR), sections 404.5, 415.2 and 415.9, related to eligibility requirements for child care subsidies funded under the New York State Child Care Block Grant (NYSCCBG) and Title XX funds. The regulations were filed on an emergency basis and are effective as of May 15, 2009.

II. Background

The child care initiatives recently enacted into State regulation address the expanded need for child care services by families affected by the extensive loss of jobs and employment opportunities as a result of the economic downturn of the State and national economies. The changes to New York State regulations benefit needy families by allowing social services districts more options to serve low-income families.
III. Program Implications

There are three areas that are impacted by this change in regulation:

A. Dislocated Worker

The change in regulation to 18 NYCRR section 415.2(a)(3)(vii)(c) expanding the categories of families that are eligible if funds are available and if a social services district has listed such families as eligible in its Child and Family Services Plan to address the needs of families where the caretaker(s) is a dislocated worker and is participating in a training program. Social services districts may choose to serve these families to provide safe and affordable child care to enable these caretakers to be trained in various skills, and rejoin the workforce in new employment.

18 NYCRR section 415.2(a)(3)(vii)(c) is added to read as follows:

(c) a program to train workers in an employment field that currently is or is likely to be in demand in the near future, if the caretaker documents that he or she is a dislocated worker and is currently registered in such a program, provided that child care services are only used for the portion of the day the caretaker is able to document is directly related to the caretaker engaging in such a program. For the purposes of this provision, a dislocated worker is any person who: has been terminated or laid off from employment; has received a notice of termination or layoff from employment that will occur within six months of such notice; or was self-employed but is unemployed as a result of general economic conditions in the community in which the individual resides or because of natural disasters.

B. One-time Disbursement Under the American Recovery and Reinvestment Act of 2009

The change to regulation 18 NYCRR section 404.5(b)(6)(xx) reflects the federal requirement that one-time payments disbursed under the American Recovery and Reinvestment Act of 2009 to recipients of Social Security, Supplemental Security Income (SSI), Railroad Retirement Benefits, and Veterans Disability Compensation or Pension Benefits be excluded as income for determining eligibility for any programs in receipt of federal funds.

18 NYCRR section 404.5(b)(6)(xx) is added to read as follows:

(xx) one time $250 payments made under the American Recovery and Reinvestment Act of 2009 to Social Security, Supplemental Security Income (SSI), Railroad Retirement Benefits and Veterans Disability Compensation or Pension Benefits recipients for 10 months from the date the payment was received, including the month payment was received.

Child care programs funded under the New York State Child Care Block Grant and Title XX are federally funded programs to which this income exclusion applies. Local social services districts may not count the receipt of these payments as income in determining eligibility for child care services for ten months (including the month of receipt).

Local social services districts were previously notified of this income exclusion through a General Information System (GIS) notice, #09-006, dated March 31, 2009.
C. Enhanced Market Rate for Legally-Exempt Family and In-Home Child Care Providers

Some social services districts have indicated that, in these difficult economic times, more families could be served, without a negative impact on family access to child care, if the enhanced market rate for legally-exempt family and in-home child care providers were lowered. Currently, there are two child care market rates established for legally-exempt family and in-home child care providers. The enhanced market rate is based on a 75 percent differential applied to the child care market rates established for registered family day care. It reflects an incentive to legally-exempt providers to pursue and obtain a minimum of ten hours of approved training. The other, the standard market rate, is based on a 65 percent differential applied to the child care market rates established for registered family day care and applies to legally-exempt family and in-home child care providers that have not obtained ten hours of training annually. Therefore, to assist the districts to serve more families during these difficult economic times, effective May 15, 2009, the change to New York State regulation establishes the enhanced market rate for legally-exempt family and in-home child care providers at a 70 percent differential applied to the child care market rates established for registered family day care. The adjusted enhanced market rates for legally-exempt family and in-home child care providers, as well as the current market rates for all other types of providers, are provided as Attachment A.

The regulation also provides flexibility to those social services districts that wish to maintain the enhanced rate at a higher level. A social services district has the option, if it so chooses in the child care portion of its Child and Family Services Plan, to increase the enhanced market rate for eligible legally-exempt family child care and in-home child care categories up to 75 percent of the applicable registered family day care market rate:

- for all providers;
- for those providers who were receiving the enhanced rate on the date of the regulations but only for the remainder of their current one-year enrollment period; or
- for those providers who were receiving the enhanced rate on the date of the regulations for the remainder of the time they remain enrolled and continue to meet the ten-hour annual training requirement.

The standard market rate will apply to all other caregivers of legally-exempt family child care and in-home child care.

IV. Required Actions

A social services district selecting the option in which the caretaker(s) is a dislocated worker participating in a training program and/or to expand the enhanced market rate for legally-exempt family and in-home child care providers must amend its 2007-2009 Child and Family Services Plan. The district must publish a public notice or publish a written press release notifying the public of the plan amendment. The district must complete Attachment B: Request to Amend the 2007-2009 Child and Family Services Plan.

The district’s request to amend its plan, along with a copy of the public notice or written press release, should be mailed to: Ms. Amy Ryan, Office of Children and Family Services, Division of Child Care Services, Room 309S, 52 Washington Street, Rensselaer, NY 12144-2796, emailed to Amy.Ryan@ocfs.state.ny.us or faxed to Ms Ryan at (518) 474-9617. A district may implement the amendment after it receives written approval from the Office of Children and Family Services.
Social services districts that have not amended their Child and Family Services Plans to maintain the enhanced market rate for legally-exempt providers must review all currently authorized cases to determine that payment is authorized for the actual cost of care up to the applicable market rate. Reviews must take place as soon as possible, but no later than the next case action or recertification, whichever comes first.

Whenever the amount of child care benefits changes, social services districts must provide recipients with OCFS-LDSS 4781-Notice of Intent to Change Child Care Benefits as required by 18 NYCRR Part 358. In instances in which the market rates have decreased from the previous market rates, the district will need to reduce benefits. Please note that when a benefit is reduced due to changes in the market rates, the effective date for the reduction is not retroactive to May 15, 2009. Benefit reductions are to be made prospectively.

If the provider’s rate is in excess of the market rate and the district does not have a contract with the provider, the parent who chooses to continue care with the provider must make up the difference. If the district has a contract to pay a rate that is higher than the market rate, the amount above the market rate is not reimbursable from State and federal funds.

V. System Implications

None.

VI. Effective Date

Changes are effective on May 15, 2009.

Issued By:

/s/ Janice M. Molnar

Name: Janice M. Molnar
Title: Deputy Commissioner
Division/Office: Division of Child Care Services
Attachment A:

Market Rates for Legally-Exempt Family and In-Home Child Care Providers Including the Enhanced Market Rate Effective May 15, 2009

GROUP A COUNTRIES:
Nassau, Putnam, Rockland, Suffolk, and Westchester

<table>
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<th>DAY CARE CENTER</th>
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<th>1 ½ - 2</th>
<th>3 - 5</th>
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Group A continued

GROUP FAMILY DAY CARE

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Exceptions:
- Rockland:
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  - 1 ½ - 2: --
  - 3 - 5: $261
  - 6-12: --
- Westchester:
  - Under 1 ½: $255
  - 1 ½ - 2: $255
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  - 6-12: $276

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SCHOOL AGE CHILD CARE

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LEGALLY-EXEMPT FAMILY CHILD CARE AND IN-HOME CHILD CARE STANDARD RATE

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Group A continued

LEGALLY-EXEMPT FAMILY CHILD CARE AND IN-HOME CHILD CARE ENHANCED RATE

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GROUP B COUNTIES: Columbia, Erie, Monroe, Onondaga, Ontario, Rensselaer, Saratoga, Schenectady, Tompkins and Warren

**DAY CARE CENTER**

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**REGISTERED FAMILY DAY CARE**

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#### LEGALLY-EXEMPT FAMILY CHILD CARE AND IN-HOME CHILD CARE

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**LEGALLY-EXEMPT FAMILY CHILD CARE AND IN-HOME CHILD CARE ENHANCED RATE**

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GROUP C COUNTIES:

DAY CARE CENTER

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REGISTERED FAMILY DAY CARE

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Group C continued

GROUP FAMILY DAY CARE

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**Exceptions:**

- **Oneida:** $150 $150 $135 --
- **Steuben:** -- -- $135 $138
- **Washington:** -- -- $145 $130

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SCHOOL AGE CHILD CARE

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**Exceptions:**

- **Niagara:** -- -- -- $138

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LEGALLY-EXEMPT FAMILY CHILD CARE AND IN-HOME CHILD CARE

STANDARD RATE

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### Group C continued

**LEGALLY-EXEMPT FAMILY CHILD CARE AND IN-HOME CHILD CARE ENHANCED RATE**

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GROUP D COUNTIES:
Albany, Dutchess, Orange, and Ulster

DAY CARE CENTER

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REGISTERED FAMILY DAY CARE

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Group D continued

**GROUP FAMILY DAY CARE**

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**SCHOOL AGE CHILD CARE**

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**LEGALLY-EXEMPT FAMILY CHILD CARE AND IN-HOME CHILD CARE STANDARD RATE**

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Group D continued

**LEGALLY-EXEMPT FAMILY CHILD CARE AND IN-HOME CHILD CARE ENHANCED RATE**

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GROUP E COUNTIES:
Bronx, Kings, New York, Queens, and Richmond

**DAY CARE CENTER**

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**REGISTERED FAMILY DAY CARE**

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**GROUP FAMILY DAY CARE**

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**SCHOOL AGE CHILD CARE**

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Group E continued

LEGALLY-EXEMPT FAMILY CHILD CARE AND IN-HOME CHILD CARE
STANDARD RATE

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LEGALLY-EXEMPT FAMILY CHILD CARE AND IN-HOME CHILD CARE
ENHANCED RATE

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SPECIAL NEEDS CHILD CARE

The rate of payment for child care services provided to a child determined to have special needs is the actual cost of care up to the statewide limit of the highest weekly, daily, part-day or hourly market rate for child care services in the State, as applicable, based on the amount of time the child care services are provided per week, regardless of the type of child care provider used or the age of the child.

The highest full-time market rate in the State is:

- Weekly $378
- Daily $80
- Part-Day $53
- Hourly $17.64
Attachment B:
Request to Amend 2007-2009 Child and Family Services Plan

District requesting the amendment ________________

Check the option(s) that your district wishes to implement.

Dislocated Worker

Our district is requesting an amendment to Appendix G-2, Other Eligible Families if Funds are Available.

☐ If funds are available, our district will serve families where the caretaker(s) is a dislocated worker who is participating in a program to train workers in an employment field that currently is or is likely to be in demand in the near future, if the caretaker documents that he or she is a dislocated worker and is currently registered in such a program, provided that child care services are only used for the portion of the day the caretaker is able to document is directly related to the caretaker engaging in such a program.

A dislocated worker is any person who: has been terminated or laid off from employment; has received a notice of termination or layoff from employment that will occur within six months of such notice; or was self-employed but is unemployed as a result of general economic conditions in the community in which the individual resides or because of natural disasters.

Does your district apply any limitations to the programmatic eligibility? ☐Yes ☐No
If yes, describe eligibility criteria:

This amendment is effective _____________. This option cannot be effective prior to May 15, 2009.

________________________________                       __________________
Commissioner Signature     Date
Attachment B: continued

District requesting the amendment ________________

Enhanced Market Rate For Legally-Exempt Family and In-Home Child Care Providers

If a district elects to establish a payment rate that is in excess of the enhanced market rate for legally-exempt family and in-home child care providers, a district must state the percentage above the market rate it proposes to use:

☐ Our district is requesting to increase the legally-exempt enhanced market rate up to ______ percent of the applicable registered family day care market rate. Market rate may not exceed 75 percent of the child care market rates established for registered family day care.

Districts that select the option to increase the legally-exempt enhanced market rate must also select one of the options listed below for which the legally-exempt enhanced market rate applies:

☐ for all legally-exempt family and in-home child care providers that have been approved by the applicable legally-exempt caregiver enrollment agency or by the district for those portions of the district that are not covered by a legally-exempt caregiver enrollment agency as having completed ten or more hours of training annually;

☐ for those legally-exempt family and in-home child care providers who were receiving the enhanced rate on the date of the regulations, but only for the remainder of their current one-year enrollment period; or

☐ for those legally-exempt family and in-home child care providers who were receiving the enhanced rate on the date of the regulations, for the remainder of the time they remain enrolled and continue to meet the ten-hour annual training requirement.

This amendment is effective _____________. This option cannot be effective prior to May 15, 2009.

________________________________                       __________________
Commissioner Signature     Date

Requests to amend the Child and Family Services Plan should be mailed to: Ms. Amy Ryan, Office of Children and Family Services, Division of Child Care Services, 52 Washington Street, Rensselaer, NY 12144-2796, emailed to Amy.Ryan@ocfs.state.ny.us or faxed to Ms. Ryan at (518) 474-9617.
The purpose of 92-LCM-138, *Child Care Certificate Program*, is to provide social services districts with instructions relative to the implementation of a child care certificate program. Note that the use of child care certificates is a federal requirement.
The purpose of this Local Commissioners Memorandum (LCM) is to provide social services districts with instructions relative to the implementation of a child care certificate program as mandated by the federal Child Care and Development Block Grant (CCDBG) Act of 1990. Only recently the Department received 45 CFR Parts 98 and 99, the final federal rule governing the CCDBG program. After an initial review of these regulations we believe that these preliminary instructions comply with the federal requirements. This LCM is being released in order to provide social services districts with the information needed to develop local procedures for the implementation of the child care certificate program. Subsequent to completion of a thorough examination of the federal regulations, an Administrative Directive relative to the CCDBG child care certificate program will be issued.

The use of child care certificates must be implemented effective October 1, 1992 in order for New York State and social services districts to continue to receive CCDBG funds. These procedures and instructions build on existing systems and incorporate suggestions made by social services districts during the recent series of regional technical assistance meetings conducted by the Department.

For purposes of this LCM, the term parent means any person who is either a parent of an eligible child, a caretaker relative as defined in Section 369.1(b) of Department regulations or a person standing in loco parentis. Person standing in loco parentis means any person who is not related to the
A child care certificate is a document which the social services district issues directly to a parent who is eligible to receive a child care subsidy. It is intended to give parents greater control and flexibility in addressing their child care needs by assisting them to self-arrange care with any child day care provider, caregiver of informal child care or caregiver of legally exempt group child care. When accompanied with information on the full range of options available for child care services and how to identify and access quality child care, the child care certificate provides parents with opportunities to develop self-sufficiency skills.

The Department has developed policies and procedures for the child care certificate program by modifying DSS-3546, Order for Supplies/Services (Voucher) and existing WMS/BICS systems supports. The child care certificate may be used for all income eligible child care programs, regardless of funding source. In order to promote consistency across child care programs and to ease administration of the various subsidies, social services districts are encouraged to make the child care certificates available to all parents who are eligible for child care services. The child care certificate must be available for those parents who are eligible for CCDBG services.

The child care certificate program implemented by the social services district must:

- issue certificates directly to the parents in order to insure parental choice;
- provide certificates with a value commensurate with the actual cost of care up to the applicable market rates;
- allow certificates to be used as flexibly as cash between the parent and eligible providers;
- establish procedures to ensure prompt issuance of the child care certificate and speedy payment for child care services;
- ensure that certificates are available continually to parents as long as CCDBG subsidy funds are available;
- provide a process to enroll providers who are not required to be licensed or registered before issuing payment; and
- facilitate payment to providers.
PARENTAL CHOICE

Effective October 1, 1992, the social services district must inform parents requesting CCDBG services (and other subsidy program services at district option) that they may:

1) choose to have care provided by one of the child day care providers with which the social services district has contracted for the provision of child care services; or

2) request a child care certificate which enables parents to select from a wide range of child care arrangements including care by child day care providers, caregivers of informal child care and caregivers of legally exempt group child care.

Attachment A provides a list and definitions of eligible providers. In order to inform parents of the full range of child care options which are eligible for payment, social services districts may wish to distribute this attachment to all parents who will be subsidized by CCDBG funds. Parents must be given full discretion in selecting or arranging for the purchase of child care services from any eligible provider, including a sectarian caregiver. The case record should document that parents have been apprised of the full range of providers eligible for payment and of their right to elect to use a child care certificate.

The social services district must allow parents to select, and must have a method to pay, any and all providers with whom it does not contract. A contract may not be made a condition of receiving payment from CCDBG subsidies.

Effective October 1, 1992, recipients of CCDBG services also may elect to use caregivers of legally exempt group child care. This category includes:

- a pre-kindergarten or nursery school program for children three years of age or older, or a program for school-age children conducted during non-school hours, operated by a public school district or by a private school or academy which is providing elementary or secondary education or both in accordance with the compulsory education requirements of the Education Law, provided that such pre-kindergarten, nursery school or school-age program is located on the premises or campus where the elementary or secondary education is provided;

- a nursery school or program for preschool-age children operated by a nonprofit agency or organization or a private proprietary agency which provides services for three or less hours per day;

- a summer day camp for children under thirteen years of age operated by a nonprofit agency or organization or a private proprietary agency in accordance with Subpart 7-2 of the State Sanitary Code; and

- a day care center, family day care home or other child care program located on federal property and operated in compliance with federal laws and regulations for such child care services.
Social services districts must provide parents who were in receipt of CCDBG services prior to October 1, 1992 with information regarding their right to select from the full range of eligible child care providers and to receive a child care certificate to assist them in accessing the child care of their choice. Social services districts may wish to use Attachments A, B, and C to provide such information to families currently in receipt of CCDBG services. Parents who wish to change child care providers must be allowed to do so.

Consistent with other programs, social services districts must provide parents with information to assist them in making an informed choice of child care arrangements. The Department has prepared two documents to assist social services districts in providing such information to applicants for child care services. Social services districts are encouraged to distribute Attachment B, Client Rights and Responsibilities, and Attachment C, Parent Letter, to all applicants for child care services.

**CHILD CARE CERTIFICATE PROCEDURES**

Whenever a family is determined to be eligible to receive CCDBG services (and other subsidy program services at district option), the social services district must offer parents the choice of utilizing a child day care provider with which it contracts for services or of receiving a child care certificate with which the family may self-arrange care. When a family elects to use a child day care provider with which the social services district contracts, the child must be enrolled with the provider selected by the parent to the maximum extent practical.

When a family elects to use a child care certificate to self-arrange care, the social services district is responsible for preparing a child care certificate for each eligible child in the family. Attachment D is the child care certificate form which must be utilized by all social services districts, exclusive of Erie County and New York City. Since the processing of child care certificates relies on WMS/BICS support, Erie County and New York City must develop and implement a local equivalent child care certificate form, subject to Department approval. Attachment E provides instructions to providers which should be attached to each child care certificate issued.

When preparing the child care certificate, the social services district is responsible for completing the following sections:

- authorized by;
- date;
- date of issue;
- case number, if known;
- authorization number, if known;
- description of supplies or services including: name of eligible child; CIN number, if known; whether care is full-time or part-time; 30 day period for which the certificate is valid; and parent fee, if any, which is to be collected by the provider;
the applicable full-time, part-time or hourly market rates as set forth in 18 NYCRR 415.9 for the age of the child for each category of child care listed; and

date that the certificate is to be returned to the social services district by the child care provider.

The social services district may wish to provide parents who indicate that they may be interested in arranging care with a caregiver of informal child care or a caregiver of legally exempt group child care with enrollment forms. Providers then may complete the appropriate enrollment form and return it to the social services district with the child care certificate, thus facilitating prompt payment.

A child care certificate is valid for a 30 day period commencing on the date of issue. During this 30 day period the parent may present the child care certificate to any eligible provider. If the parent is unable to locate care during the 30 day period, the parent may request another child care certificate in order to continue to try to self-arrange care or may ask the social services district to arrange care with one of the child day care providers with whom it contracts.

When a child day care provider, caregiver of informal child care or caregiver of legally exempt group child care agrees to provide services to an eligible child, the parent is responsible for signing the child care certificate in the recipient signature block and giving it and the instruction sheet to the child care provider. The child care provider is responsible for returning the child care certificate, and enrollment form if applicable, to the social services district by the date specified after completing the following sections:

- type of program;
- vendor ID, if known;
- vendor name and address;
- permit/registration ID #;
- days of care provided;
- hours of care/day;
- hours of care/week;
- $ amount week billed;
- claimant signature; and
- date.

Upon return of a child care certificate, and enrollment form if applicable, the social services district will review all submitted items to ensure that the child care provider selected by the parent is eligible to receive payment. The social services district should notify the parent or child care provider immediately if additional information is required in order to determine that such provider is eligible to receive child care subsidy funds. In order to facilitate speedy payment for services, social services districts are encouraged to send information about on-going billing processes to all eligible child care providers as soon as possible after the return of the child care certificate.
PAYMENT RATES

The rate of payment must be the actual cost of care (rate charged by the provider) up to the applicable market rate as specified in Section 415.9 of Department regulations. Payments for legally exempt group child care providers will be based upon the actual cost of care up to the market rate for day care center providers. When care is provided by a child care provider located outside the social services district which authorizes the subsidy, the applicable market rate is the market rate of the county in which the care is located. When a parent who is using a child care certificate selects a child day care provider with which the social services district has a contract for services, the rate established by the contract will apply unless all contractual obligations have been met.

The social services district should review the rate charged by the child care provider to determine that it is within the applicable market rate. If the rate charged by the child care provider exceeds the applicable market rate, the social services district should ensure that both the parent and the child care provider understand what amount the social services district will pay. Parents may elect to pay the amount in excess of the market rate, plus their parent fees, or may wish to locate a different child care provider.

ENROLLMENT PROCEDURES

Each social services district must establish procedures for enrolling a caregiver of informal child care or a caregiver of legally exempt group child care before payment can be made for child care services. Consistent with federal requirements, such enrollment procedures must:

- collect only such information about the caregiver as is determined by the Department to be necessary to make payment;
- facilitate appropriate and prompt payments;
- allow the caregiver to enroll with the social services district after selection by the parent(s); and
- be simple and timely.

Currently, social services districts have established procedures for reviewing "Approval of Informal Child Care" forms for JOBS-related, Employment-related and Transitional Child Care. In response to suggestions from social services districts, as well as changes to State Law and other rules, the Department has revised the two existing forms used for this purpose. The forms also have been renamed as Enrollment Forms. The revised forms will be released under separate cover.

Caregivers of informal child care and caregivers of legally exempt group child care will be considered to be enrolled when review of their enrollment form indicates that such care is not subject to regulation by the Department. Social services districts should employ the same procedures as
currently established for making such determinations for recipients of JOBS-related, Employment-related and Transitional Child Care services.

SYSTEMS INSTRUCTIONS

Modifications to the WMS Services System will be available October 1, 1992 to allow payment to be made to all eligible providers. In compliance with federal CCDBG requirements, the system also will support monitoring the issuance and return of child care certificates. Whenever a child care certificate is issued to a parent, the social services district will follow the usual conventions to open a WMS/Services case. Attachment F provides detailed systems instructions.

CLAIMING INSTRUCTIONS

CCDBG program expenditures for child care subsidies made on or after October 1, 1991 should be claimed on the newly designed Schedule H - Non-Title XX - Services For Recipients (DSS-4283). The payments should be claimed on line 2 (Day Care Services for Children), Column 8 (Block Grant Day Care). These claiming instructions are included in Volume 2, Chapter 3, pages 99-106 of the Department's Fiscal Reference Manual.

CCDBG expenditures should continue to be reported on the Schedule G-2B (Summary of Payments for Day Care - Services Authorization) for the Service Types line currently accommodated on the form. Expenditures made under the Service Types currently allowed, but previously excluded from the Schedule, (3F, 3G, 30, 31, 3D, 3E, 3B, 3C), should not be reported on the G-2B until a change is made to the claim form, the BICS Schedule G-2B Report, and to the Automated Claiming System. All CCDBG Day Care costs should be reported on the Schedule H even if they were not reported on the G-2B.

In order to allow the Department to finalize federal reporting of CCDBG expenditures for the federal fiscal year ending in September 1992, all CCDBG expenditures for the period ending September 30, 1992 must be claimed by November 8, 1992.

ADDITIONAL INFORMATION

BICS operators will generate the modified DSS-3546 form for use as the child care certificate. The BICS Operations Manual will be amended to include instructions for generating such certificates.

Attachment G provides a copy of the letter explaining the child care certificate program which the Department will send to all child day care providers prior to October 1, 1992. Social services districts may wish to send additional information or conduct provider meetings in order to ensure that providers understand local procedures relative to the child care certificate and payment processes.

Please refer to 92 LCM-1 for additional information related to the provision of CCDBG services.
CONTACT PERSON

If you have questions regarding information contained in this LCM or need assistance implementing the child care certificate program, please contact Ms. Dee Woolley at the Bureau of Early Childhood Services at 1-800-342-3715, extension 4-9324 or dial direct (518) 474-9324. Ms. Woolley may be contacted on-line, Userid #89A800.

If you have any questions regarding WMS systems, please contact Mr. Gerald Seeley at 1-800-342-3727, extension 432-2932 or dial direct (518) 432-2932. Mr. Seeley may be contacted on-line, Userid #0FL130.

If you have questions regarding the fiscal areas, please contact:

Upstate - Mr. Roland Levie at 1-800-342-3715, extension 4-7549 or dial direct (518) 474-7549. Mr. Levie also may be contacted on-line, Userid #FM0020.

Metropolitan - Mr. Marvin Gold at (212) 804-1108. Mr. Gold also may be contacted on-line, Userid #OFM0270

___________________________
Joseph Semidei
Deputy Commissioner
Division of Family and
Children Services
LIST OF ATTACHMENTS

Attachment A  Eligible Providers (Available on-line)
Attachment B  Client Rights and Responsibilities (Available on-line)
Attachment C  Parent Letter (Available on-line)
Attachment D  Child Care Certificate (Not available on-line)
Attachment E  Child Care Certificate – Instructions to Providers (Available on-line)
Attachment F  System Instructions (Available on-line)
Attachment G  Letter to Child Day Care Providers (Available on-line)
Effective October 1, 1992, the following providers are eligible to receive payment for Child Care and Development Block Grant services:

Child day care providers – This category includes:

a. a day care center with a valid license to operate or properly registered to operate;

b. a family day care home properly registered to operate;

c. a group family day care home with a valid license to operate;

d. a public school providing care to preschool-age children or as part of a before-school or after-school program for children in accordance with a contract entered into between a public school district and a social services district; and

e. a school-age child care program properly registered to operate.

Caregivers of informal child care – This category includes:

a. care for one or two children provided outside the child’s home in the residence of a caregiver who is at least 18 years of age, or who is less than 18 years of age and meets the requirements for employment of minors as set forth in Article 4 of the State Labor Law;

b. care for more than two children for less than three hours per day provided outside the child’s home in the residence of a caregiver who is at least 18 years of age, or who is less than 18 years of age and meets the requirements for employment of minors as set forth in Article 4 of the State Labor Law;

c. care provided by a relative within the third degree of consanguinity to the parent(s) or step-parent(s), specifically:

- grandparents of the child;
- great grandparents of the child;
- aunts and uncles of the child, including spouses of the aunts or uncles;
- brothers and sisters of the child;
- great-aunts and great uncles of the child, including spouses of the great-aunts or great-uncles;
- first cousins of the child, including spouses of the first cousins; and
- great-great grandparents of the child; and

(OVER)
d. child care furnished in the child's own home by a caregiver who is chosen and monitored by the child's caretaker relative and who is at least 18 years of age or who is less than 18 years of age and meets the requirements for the employment of minors as set forth in Article 4 of the State Labor Law; provided, however that the caretaker relative must provide the caregiver with all employment benefits required by State and/or federal law and if such a caregiver furnishes in-home child care for more than four hours a day and more than four days a week, the caretaker relative must pay the caregiver at least the minimum wage set forth in Article 19 of the State Labor Law.

Caregivers of legally exempt group child care - This category includes:

a. a pre-kindergarten or nursery school program for children three years of age or older, or a program for school-age children conducted during non-school hours, operated by a public school district or by a private school or academy which is providing elementary or secondary education or both in accordance with the compulsory education requirements of the Education Law, provided that such pre-kindergarten, nursery school or school-age program is located on the premises or campus where the elementary or secondary education is provided;

b. a nursery school or program for preschool-age children operated by a nonprofit agency or organization or a private proprietary agency which provides services for three or less hours per day;

c. a summer day camp for children under thirteen years of age operated by a nonprofit agency or organization or a private proprietary agency in accordance with Subpart 7-2 of the State Sanitary Code; and

d. a day care center, family day care home or other child care program located on federal property and operated in compliance with federal laws and regulations for such child care services.
Dear Parent or Caretaker Relative:

Choosing care for your child is an important decision. This letter has information which might help you make a good choice for you and your child.

Many types of programs provide day care in New York State. The State Department of Social Services regulates some of these programs. Programs the State regulates must meet certain standards. These standards cover areas such as: program content, nutrition, safety, and appropriate discipline to name a few. Generally a program must meet the State's standards if it cares for 3 or more children for more than 3 hours a day. Most day care programs serve children from 6 weeks to 12 years old. The five types of day care programs which the State regulates are:

- Day Care Centers
- Family Day Care Homes
- Group Family Day Care Homes
- School-Age Child Care Programs
- Small Day Care Centers

There are other types of settings which provide child care that the State does not regulate. These settings are legal forms of child care and may meet your needs. This category includes friends, neighbors or relatives who care for 1 or 2 children in their own home or who care for your child in your home. There are also group child care programs such as nursery schools and programs operated by private schools or academies which are not regulated by the State.

Here are some hints to keep in mind when you are choosing a day care provider for your child.

1. Learn as much as you can about day care in your community. Talk to friends, neighbors, and relatives with children. You may wish to choose a provider close to where you live or close to where you work or go to school. The child care provider you select does not have to be located in the county where you live. The amount the county department of social services is able to pay may differ when the care is not located in the county where you live. Ask your caseworker how much they can pay if you select a provider in a different county.

2. Visit as many day care programs as possible. Visit when the children are there.

3. Ask the people in charge any questions you may have. Find out how they will handle situations which concern you. Has the provider been convicted of a crime or been the subject of an indicated report of child abuse and maltreatment?

4. See how the caregivers act with the children. Do they show warmth and understanding toward the children? Do they pay attention to all the children?

(OVER)
5. Observe the children. Are there lots of activities and things for children to do?

6. Make sure the program site seems safe to you. Are there any visible hazards? Is there enough room for indoor and outdoor activities? Is there enough equipment and play materials for all the children?

7. Visit and observe as much as you can once your child has started a program. Talk to your child's caregiver. Ask questions and take part in the program.

8. Listen to your child. Does he or she like to go to the program? If your child is unhappy, talk to the caregivers.

9. Keep in touch with the parents of the other children in care.

10. Get feedback from the provider. Does the provider give you regular updates about how your child is doing? Does the program encourage your questions and visits?

There is no absolute guarantee of quality in any child care setting. AS A PARENT, YOU ARE THE KEY TO QUALITY DAY CARE. You have the right to drop in to see your child, observe the program, inspect the child care areas, review written records regarding your child and to speak with the caregivers at any time. You will see the provider more than anyone else. You know your child best. You will probably be the first to know when things are not going well. Whatever type of child care setting you select, it is your responsibility to monitor the quality of care that your child receives.

If you have a question or concern, talk to the caregiver. If you think there is a violation of the regulations, you can call the State Social Services Regional Office nearest you or the Statewide complaint line (1-800-732-5207). The State Department of Social Services set up this line to respond to complaints about day care programs.

Abuse or maltreatment of children in day care programs is rare. However, it can happen. If you have a concern, talk to the child care provider. Compare notes with other parents. If you are still concerned, report your concern to the New York State Child Abuse and Maltreatment Register at 1-800-342-3720. In Onondaga County, call (315)-422-9701, and in Monroe County call (716)-461-5690. These hotlines operate 24 hours a day, seven days a week.

Choosing a day care provider is an individual matter. Each family has different needs. Trust your judgement and feelings. If you need help finding day care, ask your caseworker for help.

Sincerely,

______________________________
County Department of Social Services
CHILD CARE CERTIFICATE
INSTRUCTIONS TO PROVIDERS

The accompanying child care certificate verifies that the county department of social services has determined that the identified child is eligible to receive a child care subsidy. You may accept this child care certificate at any time during the service period indicated in the center block. The county department of social services will make child care payments for the amount you charge other families, less any parent fee indicated, up to the market rate indicated for the type of program you operate. The parent will pay the parent fee directly to you.

If you currently contract with the county department of social services, the rate established by your contract will apply unless your contractual obligations have been met.

In order to receive payment for care you have provided, or will be providing, you must return the child care certificate to the county department of social services after completing the following sections:

1. Vendor ID If you have been paid by the county department of social services in the past you have been issued a vendor identification number. Enter that number, if known.

2. Vendor Name and Address Fill in your program's name and address where the program is located. If you are a family day care, group family day care or informal child care provider and do not have a name for your program fill in your own name and address.

3. Permit/Registration ID #: This is the number of your State license or registration. If you are not a regulated child care provider, you must complete and return an enrollment form with the child care certificate. If you do not have an enrollment form, call ______________ at ____________.

4. Check Appropriate Category Check the line that indicates the type of child care you provide. Caregivers of legally exempt group child care should check the day care center line. The market rate following the category you check is the maximum amount that the county department of social services will pay for the care you provide.

5. Check whether services have or will be provided

6. Days of Care Provided List the days of the week on which care has been, or will be, provided (e.g., Monday, Tuesday, Thursday).

7. Hours of Care/Day Identify how many hours of care have been, or will be, provided each day (e.g., 11 hours per day).

(OVER)
8. Hours of Care/Week  Identify how many hours of care have been, or will be, provided for the total week (e.g., 44 hours).

9. $ Amount Week Billed  Fill in the amount that you will be charging per week for the amount of care previously listed.

If services have been provided during the service period indicated you must complete, sign and date the statement at the bottom of the child care certificate.

If services have not been provided during the service period indicated you should enter a zero (0) in the statement at the bottom of the child care certificate and sign and date it.

Keep the yellow copy of the child care certificate for your records. Return all other copies to the county department of social services by the date indicated.

Upon receipt of the completed child care certificate, and enrollment form if care is to be provided by a caregiver of informal child care or a caregiver of legally exempt group child care, the county department of social services will process payment for services already provided and will send you information regarding how on-going payments will be made.

If you need assistance in completing the child care certificate, please call:

_________________________________________________

_________________________________________________

_________________________________________________
SYSTEM INSTRUCTIONS:
CHILD CARE AND DEVELOPMENT BLOCK GRANT

Open a WMS/Services case following the usual conventions. The Direct Service Type must be 03 with or without a suffix code. To process a child care certificate and authorize payment three POS lines are required.

Line #1 (To be completed at the time the child care certificate is issued). Complete the POS line as follows:

  LN - Line number of Day Care recipient.
  Service Type - A valid Day Care Service Type between 30 and 37 or 3A and 3G, with or without a suffix.
  POS Authorization Period - Up to 30 day period covered by the certificate.
  Rate Amount - Maximum certificate amount (center rate for the 30 day period authorized).
  Rate Period - S (Single Issue).
  Maximum Time Units per Frequency Interval (MTU/FI) - Leave blank.
  PUB/PRI - 2 (public) or 3 (private).
  PSS - 01 (new)
  Provider/Vendor ID - leave blank.
  Provider Name - Enter eight character certificate number in V9999999 format, in first eight positions of the field (left justify).
  Provider Address - leave blank.
  Fees - system generated.

When the child care certificate is returned by the provider, change the PSS code on line #1 from 01 to 03. This will delete the original certificate line. PSS code 04 should be used only if the original certificate line is in error.

Complete line #2, the initial payment line, as follows:

  LN - Line number of Day Care recipient.
  Service Type - Valid Day Care Service Type (30-37 or 3A-3G) with or without a suffix.
  POS Authorization Period - Up to 30 day period covered by certificate.
  Rate Amount - Actual numeric dollar amount.
  Rate Period - S (Single Issue).
MTU/FI - leave blank.

PUB/PRI - 1 if direct payment to recipient; 2 or 3 if vendor payment.

PSS - 01 (new)

Provider/Vendor ID - For PUB/PRI entry of 2 or 3, enter eight character ID for vendor payment; leave blank for direct payment to recipient.

Provider Name - Enter eight character certificate number in V9999999 format, in first eight positions of the field (left justify).

Provider Address - leave blank.

Fees - system generated.

Complete the subsequent payment line as follows:

LN - Line number of Day Care recipient.

Service Type - 30-37 or 3A-3G with or without a suffix.

POS Authorization Period - Remainder of authorization period.

Rate Amount - Actual numeric amount.

Rate Period - M (Monthly).

MTU/FI - Months per authorization.

PUB/PRI - 1 if direct payment to recipient; 2 or 3 if vendor payment.

Provider/Vendor ID - Leave blank for direct payment to recipient; enter actual ID for vendor payment.

Provider Name - leave blank for direct payment to recipient; entry is optional for vendor payment.

Provider Address - leave blank for direct payment to recipient; optional for vendor payment.

Fees - system generated.

NOTES:

1. When authorizing payment for a caregiver of legally exempt group child care use the day care center POS codes, either full-time (36) or part-time (37) as applicable.

2. All vendors who will receive payment via the WMS authorization must be loaded onto the local BICS file.

3. Fees are system generated and apply only to the first POS line for each services family unit.
Dear Child Day Care Provider:

Effective October 1, 1992 New York State is implementing a child care certificate program as mandated by the federal Child Care and Development Block Grant (CCDBG) Act of 1990. This program must be implemented in order for New York State to continue to receive federal CCDBG funds. The purpose of this letter is to explain how the child care certificate program may affect you as a child day care provider.

When the child care certificate program is implemented, the county department of social services must inform families who are determined eligible to receive child care subsidies through the CCDBG (and other programs at county option) that they may:

1) choose to have care provided by one of the child day care providers with which the county department of social services has contracted for the provision of child care services; or

2) request a child care certificate which enables the parents to select from a wide range of child care arrangements including care by child day care providers, caregivers of informal child care and caregivers of legally exempt group child care.

Parents must be given full choice in selecting or arranging for the purchase of child care services from any of the child care providers listed above, including sectarian providers. In addition, the county department of social services must provide parents with information to assist them in making an informed choice of child care arrangements.

Parents who request a child care certificate will be given one certificate for each child who needs care. The parent may give the child care certificate to the child care provider selected to care for the child. The child care certificate is your assurance that the county department of social services has determined that the child named is eligible to receive a child care subsidy and that the county department of social services will be making payments for services provided within the limits indicated. You may accept child care certificates that have been issued by any county. If you accept a certificate from another county the market rate limit for the county in which you are located will be applied.

Consistent with licensing and registration regulations and federal CCDBG requirements, the certificate program requires that all child care providers must allow parents unlimited and on demand access to their
children, to written records regarding their children, and to the providers caring for their children during the normal hours of operation and whenever children are in the provider's care. In addition, parents have the right to inspect on demand during the program's hours of operation any area of the child care facility to which the child has access or which could present a hazard to the health or safety of the child.

A sample child care certificate and the instructions to providers are enclosed. The enclosed samples will be used in all areas of the state except Erie County and New York City. While the actual form and instructions for completion used in these two areas will vary from the samples, all the requirements previously discussed apply to the child care certificate programs which these counties implement.

When a parent presents you with a child care certificate and you accept the child for enrollment in your program, you should complete the sections outlined in the instruction sheet and return by the date indicated to the county department of social services which issued it.

If you have questions regarding how the child care certificate program will be implemented in your county, please call the day care unit of your county department of social services.

The child care certificate program provides the opportunity to increase the child care options that are available to low income families. We look forward to working with you to assure that quality child care services are available for all children in New York State.

Sincerely,

Jo Ann Friedell, Director
Bureau of Early Childhood Services
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The purpose of this Local Commissioners Memorandum (LCM) is to inform local social services districts (districts) of the regulatory changes to Part 415 of the Rules and Regulations of the State of New York (NYCRR) for child care subsidies funded through the New York State Child Care Block Grant (NYSCCBG) and the federal Social Security Act.

The Child Care Subsidy Fraud Regulations, which went into effect October 5, 2011, promote the fiscal integrity of the child care subsidy program by establishing a clear, regulatory basis for holding child care providers accountable for committing fraud.
Local Commissioners Memorandum

Transmittal: 14-OCFS-LCM-04
To: Local District Commissioners
Issuing Division/Office: Division of Child Care Services
Date: May 30, 2014
Subject: Child Care Subsidy Fraud Regulations
Contact Person(s): Rhonda Duffney (518) 474-9454 Rhonda.Duffney@ocfs.ny.gov

Attachments:
- Attachment A: Desk Aid for Administrative Review Process for Child Care Subsidy Claims
- Attachment B: Provider Notice of Deferral of Claim(s) for Reimbursement
- Attachment C: Deferred Claim Review-Claims are Reimbursable
- Attachment D: Preliminary Review Report-Inaccurate Claim(s) Submitted
- Attachment E: Final Review Report-Inaccurate Claim(s) Submitted
- Attachment F: Final Review Report-Inaccurate Claim(s) Unsubstantiated
- Attachment G: Final Determination-False Claim(s) Substantiated
- Attachment H: Final Determination-False Claim(s) Unsubstantiated
- Attachment I: Provider Notice of Disqualification from Receiving Child Care Subsidy Reimbursement
- Attachment J: Parent Notice of Provider Disqualification from Receiving Child Care Subsidy Reimbursement
- Attachment K: Notice of Your Responsibilities as an Eligible Provider of Subsidized Child Care

Attachment Available Online: No

I. PURPOSE

The purpose of this Local Commissioners Memorandum (LCM) is to inform local social services districts (districts) of the regulatory changes to Part 415 of the Rules and Regulations of the State of New York (NYCRR) for child care subsidies funded through
The New York State Child Care Block Grant (NYSCCBG) and the federal Social Security Act.

The Child Care Subsidy Fraud Regulations, which went into effect October 5, 2011, promote the fiscal integrity of the child care subsidy program by establishing a clear, regulatory basis for holding child care providers accountable for committing fraud.

1. 18 NYCRR § 415.4(c)(9) establishes a 30-day timeframe for districts to review and determine whether to allow, disallow, or defer a claim for reimbursement to an eligible provider of subsidized child care and specifies the circumstances when a deferral or disallowance can be made.

2. 18 NYCRR § 415.4(h)(2) delineates the circumstances under which a district may disqualify licensed, registered, and enrolled legally-exempt child care providers from receiving subsidy funds; allows for a district to establish an administrative procedure for internally reviewing claims and imposing a disqualification when the district has determined an eligible provider has submitted false claims; establishes periods of disqualification during which child care providers are ineligible to receive child care subsidies; and requires a district to inform the appropriate New York State Office of Children and Family Services (OCFS) child care regional office of disqualified licensed or registered child care providers, and appropriate legally-exempt enrollment agencies of disqualified enrolled legally exempt providers.

3. 18 NYCRR § 415.4(h)(3) allows districts to make announced or unannounced inspections of the records or premises of any provider of subsidized child care in accordance with a plan approved by OCFS.

4. Subparagraphs were added to 18 NYCRR § 414, 416, 417, 418-1 and 418-2 to clarify the ability of OCFS to revoke/deny renewal of the registrations/licenses of providers who file false child care subsidy claims with districts by clearly stating that all registered school age child care programs, licensed group family day care homes, registered family day care homes, licensed day care centers, and registered small day care centers that accept direct and indirect payments from a district or a payment from a parent or caretaker for providing subsidized child care must comply with all relevant requirements of the Child Care Subsidy Program.

5. 18 NYCRR § 415.12 describes the responsibilities that are applicable to all eligible providers of subsidized child care services. It provides the basis for OCFS to take enforcement action against a licensed or registered provider who is not in compliance with the Child Care Subsidy Program regulations; requires providers of subsidized child care to maintain current and accurate attendance records for each child and certify to the accuracy and truthfulness of information and documentation provided to a district; and reiterates the district’s right to act on false or fraudulent claims by deferring or disallowing payment on claims, referring a provider for criminal prosecution, and/or making a referral to OCFS for the revocation of a provider’s registration or license to operate a child care program.
II. BACKGROUND

OCFS has oversight responsibilities for the provision of child care subsidies funded under the NYSCCBG for over 223,000 children as of Federal Fiscal Year (FFY) 2013. It also promotes the development of children in a safe, caring, and healthy environment through licensure and registration of over 19,000, child day care programs and the annual enrollment of approximately 39,000 legally-exempt child care providers.

In recent years, concerns regarding program integrity prompted OCFS to take strong steps to minimize waste, fraud, and abuse in the Child Care Subsidy Program and maintain the health and safety of children in child care. According to national estimates, anywhere from 10% to 40% of child care subsidy dollars are spent fraudulently. In October 2010, OCFS hosted a Roundtable Discussion seeking to identify strategies to prevent and eliminate fraud in the Child Care Subsidy Program and to maximize the efficient use of limited child care funds. The roundtable was attended by more than 90 local district staff, fraud investigators, local county prosecutors, child care advocates, and others who discussed what changes were needed in current law, regulations, policies, and procedures, and what would be needed to make those changes. There was consensus among the stakeholders that districts need the regulatory authority to hold fraudulent providers accountable.

III. PROGRAM IMPLICATIONS

It is important to note that nothing contained within this guidance document will diminish the authority of the districts to refer a matter to the appropriate district attorney or law enforcement agency.

OCFS recommends that districts establish timeframes for providers to submit claims, include these timeframes in local written policies, and notify child care providers and parents in writing of these timeframes. OCFS also recommends that districts establish a local payment policy and make every effort to issue a payment to the provider for child care services within 30 days from the date a child care claim is submitted to the district.

Contained in this LCM are model notices that may be used to defer claims, inform providers of various decisions made in the Administrative Review process, and inform child care provider’s and parents of child care provider’s disqualification. Districts may elect to use these notices or develop their own notices. Also attached to this LCM is a Desk Aid that provides a flow chart of the Administrative Review Process for Child Care Provider Disqualification, see Attachment A: Administrative Review Process for Child Care Providers Disqualification.

A. District Determinations on Payment of Provider Claims for Reimbursement

1) Districts have up to 30 days from receipt of a claim for reimbursement from an eligible provider to review the claim and make a payment determination to allow, defer, or disallow a payment. An eligible provider is a licensed, registered, or
enrolled provider who has been found to meet the criteria to participate in the Child Care Subsidy Program. “Eligible provider” is defined in 18 NYCRR § 415.1(g).

2) A district may defer – that is, postpone the payment determination for – a claim(s) only in the three following circumstances:

   a) A federal, state, or local government agency has recommended that the district postpone payments, and informed the district that the district is at risk of making payments for services that were not provided in accordance with applicable state regulations. Examples of agencies whose recommendation may be considered include, but are not limited to: NYS OCFS, NYS Office of the State Comptroller, U.S. Government Accountability Office (GAO), New York State Department of Health, applicable county Comptroller, etc. OCFS recommends that the district send a notification of deferral of payment to the implicated child care provider while it completes a more intensive review and makes a determination within 30 days of the date postmarked on the notification of deferral as to whether it will allow or disallow the payment(s) in question.

   b) The district has conducted an initial review of the claim and found inaccuracies that warrant a more detailed review. OCFS recommends that the district send a notification of deferral of payment to the implicated child care provider while it completes a more intensive review and makes a determination within 30 days of the date postmarked on the notification of deferral as to whether it will allow or disallow the payment(s) in question.

   c) The district has been notified of the existence of a pending criminal charge against the provider involving fraud. “Pending” means that there are open criminal charges against the provider that have not yet reached disposition. In such instances, the district can defer its determination about payment until the charges have reached disposition.

When a district defers a claim, regardless of the circumstances, they must notify the provider, in writing, of the claims that have been deferred (see Attachment B: Provider Notice of Deferral of Claim(s) for Reimbursement). The district should conduct a more intensive review and inform the affected provider of the district’s determination within the 30-day timeframes unless there is a pending criminal charge (see Attachment C: Deferred Claim Review-Claims are Reimbursable or Attachment D: Preliminary Review Report-FALSE Claims Submitted).

3) In accordance with 18 NYCRR § 415.4(c)(9)(iii), districts may disallow claims for reimbursement for services provided to children receiving a subsidy for the time period in which OCFS has determined that:

   a) A licensed or registered provider is found to be operating or has operated over its licensed or registered capacity. A district may disallow subsidy payments for the number of children over the provider’s licensed or registered capacity, but this number shall not exceed the total number of subsidized children during the period of time the program was overcapacity. For example, a program has a licensed capacity of 50 children. After investigation, it was determined that the program is caring on a full time basis for 55 children, which is five children over its licensed
capacity. Six of the 55 children are subsidized. In this example, the district may choose to disallow payments for five of the six children at the highest payment rate. The disallowance may be held from future subsidy payments.

b) An enrolled legally-exempt family child care or in-home child care provider is caring for, or has cared for, more children than the limits defined in 18 NYCRR § 415.1(h), which stipulates that informal child care does not include members of the child’s or caretaker’s public assistance unit, nor does it include other adult members of the child care service unit except the child’s sibling. For example, an enrolled legally-exempt in-home child care provider who is in receipt of Temporary Assistance (TA) is receiving child care subsidy payments to care for her sibling and an unrelated infant. After an investigation, it was determined that the provider and the provider’s sibling are in the same TA filing unit and therefore the provider is not eligible to receive child care subsidy payments to care for her sibling. In this example, the district would disallow payment for the provider’s sibling. The provider’s sibling may continue to receive child care subsidy as long as the care is provided by an eligible provider who is not a member of the TA filing unit.

c) An enrolled legally-exempt provider is found to be operating or operated, a child care program which was required to be licensed or registered, without obtaining such license or registration. For example, an enrolled legally-exempt family child care provider is caring for two siblings; the mother of the two children now brings her infant to this provider. After an investigation, it was determined that the enrolled legally-exempt provider was caring full-time for all three children. In this example, the district may choose to disallow payments for one of the three children at the highest payment rate.

B. Reasons for District Disqualification of Providers from Receiving Child Care Subsidy Payments

1) A district may disqualify licensed, registered, and enrolled legally-exempt child care providers from receiving subsidy funds if any of the following circumstances occurs:

a) The provider is criminally convicted of child care subsidy fraud.

b) The provider is found to be civilly liable for child care subsidy fraud.

c) The provider has voluntarily admitted, in writing, to filing a false claim for reimbursement for child care services.

d) The provider has been disqualified from the Child and Adult Care Food Program by the New York State Department of Health or its sponsoring agency for submission of false information on the application, submission of a false claim for reimbursement, or failure to keep required records.

e) The provider has failed to comply with the terms of a repayment plan with the district.

f) The provider has a conviction of any activity that occurred in the past seven years that indicated a lack of business integrity. For some examples, see articles from the New York State Penal Law: Article 156, Offenses Involving Computers;
Article 158; Welfare Fraud; Article 170, Forgery; Article 175, False Written Statements; Article 176, Insurance Fraud; Article 177, Health Care Fraud; Article 180, Bribery; Article 185, Frauds on Creditors; Article 187, Residential Mortgage Fraud; Article 190, Other Frauds; Article 195, Official Misconduct; Article 200, Bribery Involving Public Servants.

g) The provider has been found by a district, after completion of an Administrative Review in accordance with 18 NYCRR § 415.4(h)(2)(ii), to have submitted a false claim(s) to a district for reimbursement. (See below: Administrative Review by the District)

C. Administrative Review by the District for Child Care Provider Disqualification

A district may conduct an Administrative Review of a provider’s claims submitted for reimbursement to determine the accuracy of the information contained in the claims. If, after the completion of the Administrative Review, the district has determined that the provider submitted a false claim(s), the district may disqualify the provider from providing subsidized child care.

The Administrative Review must include the following:

1) Review of Claims and/or Payments: The district will conduct a review of the claims and/or payments and any other information or documentation obtained by the district to determine the accuracy of the information contained in the claims. If the district determines that deferred claims are accurate the district will reimburse the claims and send written notice to the provider (See Attachment C: Deferred Claim Review-Claim(s) are Reimbursable).

2) Preliminary Review Report Issued to the Provider: If after a review of the claims and/or payments, a district determines that a provider submitted inaccurate information in the claims, then a Preliminary Review Report must be prepared by the district and sent to the child care provider that is the subject of the Administrative Review for a response (see Attachment D: Preliminary Review Report-Inaccurate Claim(s) Submitted). The district must inform the child care provider of the following:

a) The district has reviewed claims and made a preliminary determination that inaccurate claims for payment have been submitted.

b) The dates and hours of the child care services, the amount billed, and the names of the affiliated subsidy eligible child(ren) the district determined as inaccurate.

c) The child care provider has 20 days, from the date postmarked on the Preliminary Review Report to respond.

d) The child care provider may respond by presenting written evidence and arguments that the provider believes refute the findings of the Preliminary Review Report or the child care provider, may request in writing, a Formal Review by the
district, which allows the provider, or his or her designee, to present evidence and arguments, in person, in support of his/her position.


   a) No Response to Preliminary Review Report from Provider—Preliminary Review Report becomes Final Determination: If the district does not receive a written response from the provider who is the subject of the Administrative Review within 20 days from the date of the postmark of the Preliminary Review Report, this report becomes the basis for the district to issue the Final Determination (see Attachment G: Final Determination—False Claim(s) Substantiated). Such Final Determination may be the basis for a district to disqualify a provider from providing subsidized child care. If a provider fails to respond to the Preliminary Review Report, the provider cannot request a Formal Review after the Final Determination has been made.

   b) Provider Responds to the Preliminary Review Report in Writing: If the district receives a response from the child care provider, who is the subject of the Administrative Review, within 20 days from the date of the postmark of the Preliminary Review Report, the district:

      i. must evaluate the evidence and arguments presented in writing or in person by the provider;

      ii. make appropriate changes to the Report based on the evidence and arguments presented by the provider, before issuing the Final Review Report (see below Final Review Report).

   c) Provider Responds to the Preliminary Review Report with a written request for a Formal Review: If the district receives a written request for a Formal Review within 20 days from the date of the postmark of the Preliminary Review Report, the district must:

      I. conduct a Formal Review within 30 days of receipt of the request;

      II. notify the provider, in writing, five or more days in advance of the Formal Review date;

      III. allow a provider, or his or her designee, to present evidence and arguments, in person, in support of the provider’s position;

      IV. evaluate the evidence and arguments presented in writing or in person by the provider and or his or her designee;

      V. make appropriate changes to the findings before issuing the Final Determination.

4) Final Review Report Issued to the Provider: A Final Review Report must be sent to the child care provider that is the subject of the Administrative Review and it must describe how the district reached its determination (see Attachment E: Final Review

a) The district must state what reliance, if any, it placed upon documents/arguments received from the provider in opposition to the district’s findings, including any additional documentation provided by the provider in response to the Preliminary Review Report.

b) A child care provider, upon receipt of a Final Review Report, must be given 10 days from the date of the postmark of the Final Review Report to respond, and to request, in writing, a Formal Review by the district.

c) If a district does not receive a written request for a Formal Review within 10 days from the date of the postmark of the Final Review Report, this will finalize the report.

5) Formal Review: A district, upon written receipt of a request for a Formal Review within the required timeframes stated above by a provider, or his or her designee, must:

   a) Conduct a Formal Review within 30 days of receipt of the request;
   
   b) Notify the provider, in writing, five or more days in advance of the Formal Review date;
   
   c) Allow a provider, or his or her designee, to present evidence and arguments, in person, in support of the provider’s position; and
   
   d) Evaluate the evidence and arguments presented in writing or in person by the provider and or his or her designee;
   
   e) Make appropriate changes to the findings before issuing the Final Determination.

6) Final Determination Issued to the Provider

   a) After reviewing the evidence and arguments supplied by a provider, or his or her designee, at a Formal Review, the district must make a Final Determination to uphold, amend or reverse the findings contained in the Preliminary Review or Final Review Report. Within 30 days of the Formal Review, the district must issue a Final Determination Report (see Attachment G Final Determination-False Claims(s) Substantiated and Attachment H: Final Determination-False Claim(s) Unsubstantiated).

   b) A final determination that a provider submitted false claims may be the basis for a district to disqualify a provider from providing subsidized child care (see section D below for required notifications of provider disqualifications).
D. Duration of District Disqualification of Providers from Receiving Child Care Subsidy Payments

A provider who has been disqualified by a district from receiving payment for child care services provided under the Child Care Subsidy Program is ineligible to receive such services through any district for five years from the date of the disqualification. If after five (5) years from the date of the disqualification, such provider paid full restitution of any and all falsely obtained funds to the district then the provider will be eligible to provide subsidized child care. However, if after five (5) years from the date of the disqualification, such a provider did not make full restitution to the district, then the provider will remain ineligible to provide subsidized child care indefinitely.

E. Required Notifications of District Disqualifications of Providers from Receiving Child Care Subsidy Payments

When a district disqualifies a licensed, registered, or enrolled legally-exempt child care provider from receiving subsidy funds, the following notifications must be issued:

1) **Child Care Provider:** The district must notify the child care provider, in writing, within ten (10) days upon reaching the decision to disqualify the provider (see Attachment I: Provider Notice of Provider Disqualification form Receiving Child Care Subsidy Reimbursement). In determining the date of disqualification the district must allow the parent/caretaker time to locate an eligible child care provider, therefore, the provider disqualification date should be made two weeks from the date of the provider notice of disqualification.

2) **Parent/Caretaker:** The district must notify, in writing, the parent/caretaker within ten (10) days upon reaching the decision to disqualify the provider. This notification to the parent must indicate that the district’s decision to disqualify a provider from child care subsidy payment has no bearing on the parent’s continuing eligibility for child care services, as long as the parent finds a different, eligible provider (see Attachment J: Parent Notice of Provider Disqualification from Receiving Child Care Subsidy Reimbursement). In addition, the district should include the name and contact information of the local Child Care Resource and Referral agency to assist the parent/caretaker with finding child care.

3) **OCFS Division of Child Care Services Home Office and Enrollment Agency or Regional Office:** The district must send written notice of all provider disqualifications to both OCFS Division of Child Care Services Home Office and the appropriate Enrollment Agency when the disqualified provider is an enrolled legally exempt child care provider or the appropriate OCFS child care Regional Office Manager when the disqualification pertains to a licensed or registered child care provider. Said notification must identify the provider who is being disqualified, and include the reason(s) for the disqualification and the timeframe of the disqualification i.e., a minimum of five years or indefinitely in adherence to the regulation (see Attachment I: Provider Notice of Provider Disqualification form Receiving Child Care Subsidy Reimbursement).
4) **Legally Exempt Child Care Provider:** The Enrollment Agency must notify the legally exempt child care provider that he/she is disqualified from receiving child care subsidies and his/her enrollment is terminated. OCFS CCFS LE 010: Notice of Termination of Enrollment Legally-Exempt Child Care will be used by the Enrollment Agency.

**F. Recording Child Care Provider Disqualifications in the Child Care Facility System (CCFS)**

If the provider who has been disqualified by the district is an enrolled legally-exempt provider, the district must provide the Enrollment Agency with the disqualification start and end date. The enrollment agency must document the district’s disqualification and the termination of enrollment of the provider in the Child Care Facility System (CCFS), the State system of record for child care providers.

If the provider who has been disqualified by the district from receiving child care subsidy funding, is a licensed or registered provider, the district must provide the OCFS child care Regional Office with the disqualification start and end date. The OCFS child care Regional Office will enter the child care subsidy disqualification start and end date in CCFS. The disqualification from receiving child care subsidy funding may affect the provider’s license or registration.

**G. Other Sources of Information**

1) **Announced and Unannounced Inspections by Social Services Districts**

   In accordance with OCFS regulations, districts may conduct announced or unannounced inspections of the records and premises of any child care provider that provides care for subsidized children. Subsequently, a social services district must inform the appropriate OCFS child care Regional Office of any violations of child care subsidy regulations, where applicable, and must provide the Regional Office with an inspection report documenting the results of the inspection.

   This does not take away the district’s right to conduct an audit or fraud investigation of a child care provider. Districts have the authority to examine all of a provider’s payment records, including those of private pay families, to determine if the provider is charging more for subsidized child care than for private pay, in violation of state regulation 18 NYCRR 415.6(e)(2).

2) **New York State Department of Health Child and Adult Care Food Program (CACFP)**

   CACFP is a meal reimbursement program that helps child care providers serve nutritious meals and snacks to the children in their care. CACFP Sponsor agencies are required to conduct three on-site monitoring reviews of participating providers per year. CACFP encourages its Sponsor agencies to share child enrollment and attendance records for any participating provider, regardless of modality, with local social services districts for the purpose of investigating child care subsidy fraud. Districts may also contact CACFP to request information about specific providers.
H. Compliance of Subsidized Child Care Providers with OCFS Regulations

1) Provider Responsibilities: Districts must notify all eligible providers who are in receipt of child care subsidy funds of their responsibilities for complying with OCFS regulations (see Attachment K: Notice of Your Responsibilities as an Eligible Provider of Subsidized Child Care). Providers of subsidized child care must:

a) Adhere to all applicable OCFS regulations when operating their program and sign an agreement that sets forth and underlines their responsibilities when participating in the Child Care Subsidy Program;

b) Maintain current and accurate daily attendance records at the program site for each child, showing the date of attendance with the time of arrival and departure, and noting full day absences, where applicable;

c) Certify that all documents and information provided to the district are accurate and true and that any false claims for payments by a provider may result in the deferral or disallowance of payment for such claims, a referral to OCFS for the revocation of a provider’s license or registration, and/or a referral for criminal prosecution; and

d) Not charge more for subsidized child care than the provider charges for private pay child care.

2) Provider Non-Compliance: Districts may request that OCFS initiate an enforcement action against child care providers who receive child care subsidies and are found to be non-compliant with the subsidy regulations. A district seeking such action shall contact the appropriate OCFS child care Regional Office and present such evidence as requested by the Regional Office of the provider’s non-compliant actions, where appropriate.

IV. SYSTEM IMPLICATIONS

This LCM has no Welfare Management System or Child Care Time and Attendance system implications.

V. CONTACT PERSONS

If you have any program questions regarding information contained in this LCM, contact Rhonda Duffney of the Division of Child Care Services at (518) 474-9454 or Rhonda.Duffney@ocfs.ny.gov

If you need to contact an OCFS Regional Manager about a potential enforcement action against a regulated child care provider, contact the following:
OCFS Region 1 (Buffalo Regional Office): Patricia Harper at (716) 847-3828; Patricia.Harper@ocfs.ny.gov
OCFS Region 2 (Rochester Regional Office): Terry Chylinski at (585) 238-8531; Terry.Chylinski@ocfs.ny.gov
OCFS Region 3 (Syracuse Regional Office): Dianne McLaughlin at (315) 423-1202; Dianne.McLaughlin@ocfs.ny.gov
OCFS Region 4 (Albany Regional Office): Tracey Turner at (518) 402-3038; Tracey.Turner@ocfs.ny.gov
OCFS Region 5 (Spring Valley Regional Office): Frances Franco-Montero at (845) 708-2400; Frances.Franco-Montero@ocfs.ny.gov
OCFS Region 6 (NYC Regional Office): Patricia Lewis at (212) 383-1415; Patricia.Lewis@ocfs.ny.gov
OCFS Region 7 (Long Island Regional Office): Robin Beller at (631) 342-7100; Robin.Beller@ocfs.ny.gov

/s/ Janice M. Molnar

Issued By:
Janice M. Molnar Ph.D.
Deputy Commissioner
Division of Child Care Services
Attachment A: DESK AID for Administrative Review Process for Child Care Subsidy Claims

Initial Review of Claim(s)

Claims are Reimbursable

Preliminary Review Report
Inaccurate Claim(s)

20 DAYS

No Response

Written Response

Formal Review Requested

Final Review Report
Inaccurate Claim(s)
Unsubstantiated

10 DAYS

Final Review Report
Inaccurate Claim(s)
Submitted

Final Determination
False Claim(s)

30 DAYS

Formal Review Requested

30 DAYS

Final Determination
False Claim(s)

Final Determination
False Claim(s)

Provider Disqualification
Attachment B: Provider Notice of Deferral of Claim(s) for Reimbursement

[County Name and Address/Logo]

[Date]

[Provider Name and Address]

Provider Notice of Deferral of Claim(s) for Reimbursement

Dear [Child Care Provider]:

This notice is to advise you that the [local social services district] is deferring or postponing your claim(s) for reimbursement for the following:

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<thead>
<tr>
<th>Child’s Name</th>
<th>Service Date(s) and Time in /Time out</th>
<th>Amount of Deferred Claim(s)</th>
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Following Title 18 of the New York State Codes Rules and Regulations § 415.4(c)(9)(ii), the local social services district is deferring the claim(s) listed above for the following reason(s):

☐ The district has conducted an initial review of the claim(s) and found inaccuracies that warrant a more detailed review.

☐ A federal, state, or local government agency has recommended that the district postpone payments because the district is at risk of making payments for services that were not provided in accordance with applicable state regulations.

☐ The district has been notified of the existence of a pending criminal charge against you involving fraud.

The social services district has begun an administrative review of the claim(s) in accordance with 18 NYCRR § 415.4(h)(2)(ii) You will be notified, in writing, of our decision.

Sincerely,
Deferred Claim Review—Claim(s) are Reimbursable

Dear [Child Care Provider]:

You were previously notified that the [local social services district] deferred or postponed payment of your claim(s) for reimbursement for providing child care services under the child care subsidy program. We have reviewed those deferred claim(s) listed below, and found that the claim(s) are reimbursable and will be paid.

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<th>CLAIMS</th>
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<td>Child’s Name</td>
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</table>

Any reviewed claims that were found to be accurate and were previously deferred are now eligible for payment. Payment of those claim(s):

- [ ] Is included with this notice.
- [ ] Will be sent at a later date.

No response is required by you at this time. Thank you for your cooperation.

The social services district retains its rights to review these and any other claims made by you and/or payments made to you for providing child care services under the subsidy program as new claims and evidence are received in the future.

Sincerely,
Attachment D: Preliminary Review Report—Inaccurate Claim(s) Submitted

[County Name and Address/Logo]

[Date]

[Provider Name and Address]

Preliminary Review Report—Inaccurate Claim(s) Submitted

Dear [Child Care Provider]:

This notice is to advise you that the [local social services district] has conducted a Preliminary Review of claim(s) for subsidized child care reimbursement in accordance with Title 18 of the New York Code of Rules and Regulations § 415.4(h)(2)(ii)(a). We have found that you submitted inaccurate claim(s) and are ineligible for payment(s) of the following:

<table>
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<tr>
<th>CLAIMS REVIEWED</th>
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<tbody>
<tr>
<td>Child’s Name</td>
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This decision was based on the following reason(s)/documentation:

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
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______________________________________________________________________________
______________________________________________________________________________

What does this mean for you?
The purpose of this Administrative Review Process is to allow you the opportunity to refute the district’s findings, and for the district to make a Final Determination as to whether or not you submitted false claim(s) for reimbursement to the Child Care Subsidy Program. If there is a Final Determination that you submitted false claim(s), you will be required to repay any overpayments that the district identifies during the course of their review, and the district may disqualify you from receiving child care subsidy for a minimum period of five (5) years.
Your Response Options pursuant to 18 NYCRR § 415.4(h)(2)(ii)(b)&(c):

Option 1: You may respond in writing presenting evidence and arguments that you believe refute the findings of the Preliminary Review. In order to be considered, your response must be received by the social service district within 20 days from the postmarked date of this letter. Please send your response to:
____________________________________________________

Option 2: You may request, in writing, a formal review by the social services district, where you, or your designee, will be allowed to present evidence and arguments in person in support of your position. In order to be granted a formal review, your response must be received by the social services district within 20 days from the postmarked date of this letter. Please send your response to: _____________________________________________________

Option 3: If you do not respond within 20 days from the postmarked date of this Notice, the findings of the Preliminary Review will become Final, and you will not receive payment for any deferred claim(s) listed above, or if you have received any payment(s) that you were not eligible for, you will be required to repay that amount. Additionally, you may be disqualified from receiving payment for child care services provided under the child care subsidy program for a minimum period of five (5) years. Failure to repay the full amount of money that you were ineligible to receive may disqualify you from receiving payment for child care services under the Child Care Subsidy Program indefinitely.

The social services district retains its rights to pursue other administrative, civil, or criminal remedies in connection with this matter, as determined appropriate.

Sincerely,
Final Review Report of Administrative Review—Inaccurate Claim(s) Submitted

Dear [Child Care Provider]:

In accordance with Title 18 of the New York Code of Rules and Regulations § 415.4(h)(2)(ii)(d), the [local social services district] has conducted a final review of the available documentation and evidence related to claim(s) that you submitted for payment for providing child care services under the subsidy program (including your timely response to the Preliminary Review Report). We have found that you submitted an inaccurate claim(s) and are ineligible for payment(s) on the following claim(s):

| CLAIMS REVIEWED |
|-----------------|-----------------|-----------------|
| Child’s Name    | Service Date(s) and Time In / Time Out | Amount of Claim(s) |
|                 |                  |                  |
|                 |                  |                  |

This decision was based on the following reason(s)/documentation:

_____________________________________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________

What does this mean for you?
The purpose of this Administrative Review Process is to allow you the opportunity to refute the district’s findings, and for the district to make a Final Determination as to whether or not you submitted false claim(s) for reimbursement to the Child Care Subsidy Program. If there is a Final Determination that you submitted false claim(s), you will be required to repay any overpayments that the district identifies during the course of their review, and the district may disqualify you from receiving child care subsidy for a minimum period of five (5) years.
Your Response Options pursuant to 18 NYCRR § 415.4(h)(2)(ii)(e):

**Option1:** You may request, in writing, a formal review by the social services district, where you, or your designee, will be allowed to present evidence and arguments in person in support of your position. In order to be granted a formal review, your response must be received by the social services district within 10 days from the postmarked date of this letter. Please send your response to: _____________________________________________________

**Option2:** If you do not request a Formal Review within 10 days from the postmarked date of this Notice, the findings of the Final Review will become the Final Determination, and you will not receive payment for any deferred claim(s) listed above, or if you have received any payment(s) that you were not eligible for, you will be required to repay that amount. Additionally, you may be disqualified from receiving payment for child care services provided under the child care subsidy program for a minimum period of five (5) years. Failure to repay the full amount of money that you were ineligible to receive may disqualify you from receiving payment for child care services under the child care subsidy program indefinitely.

The social services district retains its rights to pursue other administrative, civil, or criminal remedies in connection with this matter, as determined appropriate.

Sincerely,
**Attachment F: Final Report of Administrative Review—Inaccurate Claim(s) Unsubstantiated**

[County Name and Address/Logo]

[Date]

[Provider Name and Address]

**Final Report of Administrative Review—Inaccurate Claim(s) Unsubstantiated**

Dear [Child Care Provider]:

This notice is to inform you that the [local social services district] has conducted a final review of the additional information that you provided regarding the claim(s) and/or payment(s) listed below, and we found that the claim(s) are reimbursable and will be paid.

### CLAIMS REVIEWED

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<tr>
<th>Child’s Name</th>
<th>Service Date(s) and Time in / Time Out</th>
<th>Amount of Deferred Claim(s)</th>
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</table>

Any reviewed claims that were found to be accurate and were previously deferred are now eligible for payment. Payment of those claim(s):

- [ ] Is included with this notice.
- [ ] Will be sent at a later date.

No response is required at this time. Thank you for your cooperation.

The social services district retains its rights to review these and any other claims made by you and/or payments made to you for providing child care services under the subsidy program as new claims and evidence are received in the future.

Sincerely,
Final Determination—False Claim(s) Substantiated

Dear [Child Care Provider]:

The [local social services district] has considered all available documentation and evidence. Pursuant to Title 18 of the New York Code of Rules and Regulations § 415.4(h)(2)(ii)(h), we have made a Final Determination that you submitted a false claim(s) and are ineligible for payments on the following claim(s):

<table>
<thead>
<tr>
<th>CLAIMS REVIEWED</th>
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<tbody>
<tr>
<td>Child’s Name</td>
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This decision was based on the following reason(s)/documentation:

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

You will not receive payment for any deferred claim(s) listed above that have been found ineligible for payment.

If you have received any payment(s) that you were not eligible for, you will receive a Notice of Overpayment with the amount owed and payment instructions. Additionally, you may be disqualified from receiving payment for child care services provided under the child care subsidy program for a minimum period of five (5) years. Failure to repay the full amount of money that you were ineligible to receive may disqualify you from receiving payment for child care services under the child care subsidy program indefinitely.

The social services district retains its rights to pursue other administrative, civil, or criminal remedies in connection with this matter, as determined appropriate.

Sincerely,
**Attachment H: Final Determination—False Claim(s) Unsubstantiated**

[County Name and Address/Logo]

[Date]

[Provider Name and Address]

**Final Determination—False Claim(s) Unsubstantiated**

Dear [Child Care Provider]:

The [local social services district] has considered all available documentation and evidence. Pursuant to Title 18 of the New York Code of Rules and Regulations § 415.4(h)(2)(ii)(h), we have made a Final Determination that the claims are reimbursable. The claim(s) included in this review are listed below.

<table>
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<tr>
<th>CLAIMS REVIEWED</th>
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<tbody>
<tr>
<td><strong>Child's Name</strong></td>
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</tbody>
</table>

Any reviewed claims that were found to be accurate and were previously deferred are now eligible for payment. Payment of those claim(s):

☐ Is included with this notice.
☐ Will be sent at a later date.

No response is required at this time. Thank you for your cooperation.

The social services district retains its rights to review these and any other claims made by you and/or payments made to you for providing child care services under the subsidy program as new claims and evidence are received in the future.

Sincerely,
Provider Notice of Disqualification from Receiving Child Care Subsidy Reimbursement

Dear [Child Care Provider]:

This notice is to advise you that the [local social services district] has disqualified you from receiving child care subsidy reimbursement for a minimum period of five (5) years. The regulations that allow us to take this action are Title 18 of the New York State Codes Rules and Regulations § 415.4(h)(2)(ii)(h) & § 415.4(h)(2)(iii).

If after five (5) years from the effective date of the disqualification, you make full restitution of all falsely obtained funds to the social services district, you will be eligible to provide subsidized child care. However, if after five (5) years from the effective date of the disqualification, you have not made full restitution to the social services district, you will remain ineligible to provide subsidized child care indefinitely.

The effective date of your disqualification is ________________________ .

Disqualification Reason
You have been disqualified from receiving child care subsidy reimbursement because:

☐ You have been criminally convicted of fraud.
☐ You have been found to be civilly liable for fraud.
☐ You voluntarily admitted to filing a false claim for reimbursement for child care services.
☐ You were disqualified from the Child and Adult Care Food Program, by the New York State Department of Health and/or its sponsoring agency, for submission of false information on the application, submission of a false claim for reimbursement or failure to keep required records.
☐ You failed to comply with the terms of a repayment plan with the social services district.
☐ You have been convicted of an activity that occurred in the past seven (7) years that indicated a lack of business integrity.
☐ You have been found by a social services district, after the social services district has conducted an administrative review, to have submitted a false claim(s) to the social services district for reimbursement.

Our exercise of regulatory authority does not waive the social services district’s rights to pursue other administrative, civil, or criminal remedies in connection with this matter, as determined appropriate.

Sincerely,

Copy 1: OCFS Division of Child Care Services Home Office
Copy 2: Regional Office (if licensed or registered) OR Enrollment Agency (if enrolled legally exempt)
Attachment J: Parent Notice of Provider Disqualification from Receiving Child Care Subsidy Reimbursement

[County Name and Address/Logo]

[Date]

[Parent(s) Name and Address]

Parent Notice of Provider Disqualification from Receiving Child Care Subsidy Reimbursement

Provider Name: ________________________________________________

Effective Date of Provider Disqualification: ________________________

Dear [Parent(s) Name]:

This notice is to advise you that [local social services district] has disqualified your child care provider from receiving child care subsidy reimbursement. Your child care provider will be disqualified from receiving payment for child care services provided under the child care subsidy program through any social services district for a minimum period of five (5) years. The regulations that allow us to take this action are Title 18 of the New York State Codes Rules and Regulations § 415.4(h)(2)(ii)(h) & § 415.4(h)(2)(iii).

The provider’s disqualification does not affect your eligibility for child assistance. However, you must select a different child care provider who is eligible to provide subsidized child care. An eligible child care provider is any provider that is licensed, registered, or enrolled and has not been disqualified from receiving child care subsidy reimbursement.

If you need assistance finding another child care provider, you can contact [Child Care Resource and Referral Name and phone number]. Information about child care providers is also available on the New York State Office of Children and Family Services website at http://ocfs.ny.gov/main/childcare/looking.asp.

If you decide to continue to use the provider listed above after the disqualification date, the social services district will not pay the provider and you will be responsible for paying the provider for services provided.

If you have questions about your eligibility, please contact [worker name] at [worker phone number].

Sincerely,
Attachment K: Notice of Your Responsibilities as an Eligible Provider of Subsidized Child Care

Notice of Your Responsibilities as an Eligible Provider of Subsidized Child Care

Dear Child Care Provider:

This notice is being sent to you to advise you of your responsibilities as an eligible provider of subsidized child care.

1. Compliance with NYS Regulations. You must operate your child care program in compliance with all applicable New York State Office of Children and Family Services (OCFS) regulations. Failure to do so may result in OCFS taking enforcement action pursuant to Title 18 of the New York Code of Rules and Regulations § 413.3. You can find the full text of the regulations on the OCFS website [http://www.ocfs.state.ny.us/main/childcare/daycare_regs.asp](http://www.ocfs.state.ny.us/main/childcare/daycare_regs.asp).
   a. Child care subsidy program regulations can be found in 18 NYCRR § 415.
   b. Some child care provider regulations are specific to your provider type. You can use the chart below to find regulations that apply specifically to your provider type.

<table>
<thead>
<tr>
<th>Eligible Provider Type</th>
<th>NYS Regulations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Enrolled Legally-Exempt In-Home Child Care Provider</td>
<td>18 NYCRR § 415</td>
</tr>
<tr>
<td>Enrolled Legally-Exempt Family Child Care Provider</td>
<td>18 NYCRR § 415</td>
</tr>
<tr>
<td>Enrolled Legally-Exempt Group Child Care Provider</td>
<td>18 NYCRR § 415</td>
</tr>
<tr>
<td>Registered Family Day Care Home</td>
<td>18 NYCRR § 417 &amp; 413</td>
</tr>
<tr>
<td>Registered School Age Child Care</td>
<td>18 NYCRR § 414 &amp; 413</td>
</tr>
<tr>
<td>Licensed Group Family Day Care Home</td>
<td>18 NYCRR § 416 &amp; 413</td>
</tr>
<tr>
<td>Licensed Child Day Care Center</td>
<td>18 NYCRR § 418-1 &amp; 413</td>
</tr>
<tr>
<td>Registered Small Child Day Care Center</td>
<td>18 NYCRR § 418-2 &amp; 413</td>
</tr>
<tr>
<td>Public school district operating a child care program that</td>
<td>18 NYCRR § 413</td>
</tr>
<tr>
<td>meets State and Federal Requirements</td>
<td></td>
</tr>
</tbody>
</table>

2. Attendance Records. You must, keep current and accurate attendance records for each child on a daily basis at the child care site. The records must show the date of attendance, the time of arrival, and time of departure. Full day absences must also be recorded.

3. True and Accurate Claims for Reimbursement. You must submit true and accurate attendance information to the social services district for reimbursement for providing child care to a child receiving a subsidy. Any false or fraudulent claims for payments by a provider may result in:
   a. Deferral or disallowance of payment(s) for such claims with a social services district;
   b. Referral to the New York State Office of Children and Family Services Regional Office or Enrollment Agency, which may lead to revocation of a provider’s registration or license, or termination of enrollment;
   c. Referral for criminal prosecution; and/or
   d. Disqualification to provide subsided child care for five (5) or more years.

4. Subsidized Child Care Charges. You must not charge more for subsidized child care than you charge for non-subsidized care.
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02-OCFS-INF-05,  
*Child Care Case Referrals to FEDS and EVR*

The purpose of this informational letter is to inform social services districts of their ability to refer applicants to be funded under the New York State Child Care Block Grant (NYSCCBG) to their Front End Detection System (FEDS) or Eligibility Verification Review (EVR) programs. Additionally, districts have the ability to refer NYSCCBG applicants and recipients to other fraud and abuse control programs that may be instituted in the district and have appropriate costs distributed and reimbursed with NYSCCBG funds.
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I. Purpose

The purpose of this informational letter is to inform social services districts of their ability to refer applicants to be funded under the New York State Child Care Block Grant (NYSCCBG) to their Front End Detection System (FEDS) or Eligibility Verification Review (EVR) programs. Additionally, districts have the ability to refer NYSCCBG applicants and recipients to other fraud and abuse control programs that may be instituted in the district and have appropriate costs distributed and reimbursed with NYSCCBG funds. The Automated Claiming System Fraud and Abuse Control Function (F10) has been revised to calculate and claim fraud activities and costs as appropriate to the NYSCCBG. This letter includes information on the plan for and reporting of NYSCCBG cases referred to FEDS and/or EVR and on the procedures for claiming fraud and abuse control activities for NYSCCBG cases.
II. Background

Chapter 41 of the Laws of 1992 mandated that each social services district establish a FEDS for public assistance applicants. FEDS is a procedure designed to identify intentionally fraudulent or inadvertently erroneous information supplied by an applicant for assistance before that applicant is found eligible for benefits. Districts were issued requirements for implementing a FEDS program in 92 ADM-33 dated August 26, 1992.

EVR is a fraud and abuse detection and prevention process designed to identify fraud and overpayments. EVR is not mandated and the process is defined by the local district. Some EVR districts have chosen to review public assistance applications in which a FEDS indicator is not present, public assistance cases that are undercare, or Food Stamp or Medical Assistance cases. Depending upon the district, EVR may include an intensive interview in which the applicant/recipient may be required to provide documentation and personal records to verify identity, address and/or employment. Computer searches and other checks may be done to obtain leads and determine whether there may be other income, employment or resources.

The Section 404.1(e)(1) of 18 NYCRR provides that no determination of eligibility for Services may be made solely on the basis of the application. Documentation (the collection, verification and recording of information) must be part of the eligibility determination process. The success districts have had in avoiding inappropriate payments in the public assistance program area through the implementation of FEDS and EVR indicates that there will be even greater savings when the process is implemented for child care cases. Therefore, the Office of Children and Family Services recommends inclusion of child care subsidy cases into the FEDS and/or EVR programs.

III. Program Implications

Districts have the ability to construct their FEDS and EVR programs to include applicants and recipients of NYSCCBG child care subsidies. For child care cases, any or all of the FEDS indicators can be selected. Districts may develop and implement other referral indicators.

IV. Required Actions

A. Amendment of Plans

Districts that select to include child care cases in their FEDS or EVR programs must amend their FEDS Plan. This amendment may be included in the public assistance FEDS plan or may be submitted separately. Districts must address the following in their plan amendments:

-Identify the criteria for making a referral to the investigation unit;

-Describe the investigative unit procedures and processes;

-Establish procedures between eligibility units and the investigators unit for receiving, controlling and investigating referrals;
- Specify the turnaround time from the point of referral to the investigators until the return from the investigators to the originating eligibility unit;

- Include the methodology for completing the monthly FEDS and/or EVR report and submitting it by the 10th day of the following month; and

- Stipulate the timeframe for implementation for child care cases and identify the anticipated staffing levels.

Plans or plan amendments must also be submitted 60 days in advance of its implementation date and approved by the Office of Children and Family Services. The plans will be reviewed to determine whether minimum standards for processing referrals are met. All plans and plan amendments must be submitted to:

Office of Children and Family Services  
Office of Audit and Quality Control  
52 Washington Street – Room 309  
Rensselaer, New York 12144

B. FEDS/EVR Reporting

The reporting forms, Front End Detection Monthly Investigation Report (Attachment A) and Eligibility Verification Review Monthly Investigation Report (Attachment B), are revised to include information on child care cases and a monthly cost avoidance value for child care cases. The reports must be submitted by the 10th day of the month following the report month. Reports are submitted to the Bureau of Program Integrity, Audit and Quality Control, Office of Temporary and Disability Assistance (OTDA). Copies of the reporting forms can be obtained from the Bureau of Program Integrity, OTDA.

C. Client Rights

While the FEDS and EVR programs are geared toward reducing inappropriate costs, it is important that these reductions not occur at the expense of applicants who are properly eligible for benefits. There will be many applicants whose circumstances will require a FEDS/EVR referral based on meeting one or more referral conditions. In all cases, the client must be afforded a legitimate opportunity to explain his or her circumstances. Applicants may have a plausible explanation for the circumstances. For example, a district may include as referrals those persons who have a post office box and self-employed individuals. The client who has a post office box may live in a high crime area or on a rural delivery route. The self-employed individual may have precise tax and business records. A FEDS/EVR referral in no way constitutes evidence that an applicant is committing fraud. An individual who is able to document and justify the circumstances relating to referral criteria should not be referred.

D. Claiming Procedures

Expenditures for Fraud and Abuse Control (F10) activities are considered administrative costs and are claimed in the Automated Claiming System (ACS). The ACS was revised effective October 1, 2001 to
include NYSCCBG fraud activities. Allocation percentages are determined to distribute F10 administrative costs to the Public Assistance, Medical Assistance, NYSCCBG and Food Stamps programs for the completion of Schedule D-10. The allocation percentages are based on the total number of cases investigated during the previous quarter.

The fraud activities related to NYSCCBG are reimbursed from federal and/or state funds when NYSCCBG claims are settled at 100 percent up to the district’s allocation. There is a five percent cap on administrative costs under NYSCCBG.

For detailed claiming instructions, refer to the New York State Fiscal Reference Manual, Fraud and Abuse Control (F10), Volume 3 (Volume 4 for New York City), Chapter 16.

E. Contacts

If you have any FEDS/EVR questions related to child care, please contact the Office of Audit and Quality Control (OCFS):

   Ted Nabywaniec at (518) 474-2554. E-mail at gg6919@dfa.state.ny.us.

If you have any FEDS/EVR questions related to Public Assistance, Food Stamp or Medical Assistance, please contact the Bureau of Program Integrity (OTDA):

   Steve Melnyk at (518) 402-0130. E-mail at mailto:89d044@dfa.state.ny.us.

If you have any child care subsidy questions, please contact the Bureau of Early Childhood Services:

   Eileen Mahoney at (518) 473-0711. E-mail at svc109@dfa.state.ny.us.

If you have any fiscal questions, please contact the Bureau of Financial Services (OTDA):

   Regions 1-4: Roland Levie at toll free 800-343-8859, extension 4-7549 or directly at (518) 474-7549. E-mail at roland.levie@dfa.state.ny.us. Fax at (518) 486-6350.

   Region 5: Marvin Gold at(212) 383-1733. E-mail at marvin.gold@dfa.state.ny.us. Fax at (212) 383-2539.

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**Issued By**
Larry G. Brown
Deputy Commissioner
Division of Development and Prevention Services
The purpose of this Informational Letter is to inform local social services districts (LSSD) that the New York State Office of Children and Family Services (OCFS) has revised the OCFS-LDSS-4700, Enrollment Form for Provider of Legally-Exempt Group Child Care.
Informational Letter

| Transmittal: | 14-OCFS-INF-05 |
| To: | Commissioners of Local Social Services Districts |
| Issuing Division/Office: | The Division of Child Care Services |
| Date: | August 6, 2014 |
| Subject: | Revision of OCFS-LDSS-4700, Enrollment Form for Provider of Legally-Exempt Group Child Care |
| Suggested Distribution: | Director of Services, Directors of Temporary Assistance, Supervisors of Services, Supervisors of Temporary Assistance, Child Care Assistance Staff, Legally-exempt caregiver enrollment agencies |
| Contact Person(s): | Kara Boni (518) 408-6394, Kara.Boni@ocfs.ny.gov |
| Attachments: | OCFS-LDSS-4700, Enrollment Form for Provider of Legally-Exempt Group Child Care (Rev. 7/2014) |
| Attachments Available Online: | OCFS-LDSS-4700, Enrollment Form for Provider of Legally-Exempt Group Child Care, is available at: http://ocfs.ny.gov/main/documents/ (OCFS Internet website) http://ocfs.state.nyenet/admin/forms/ (OCFS intranet website) |

Filing References

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<td>05-OCFS-ADM-03</td>
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<td>06-OCFS-INF-06</td>
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<td>05-OCFS-ADM-01</td>
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<td>01-OCFS-LCM-11</td>
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<td></td>
<td>18 NYCRR 415.4</td>
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</tbody>
</table>
I. Purpose

The purpose of this Informational Letter is to inform local social services districts (LSSD) that the New York State Office of Children and Family Services (OCFS) has revised the OCFS-LDSS-4700, Enrollment Form for Provider of Legally-Exempt Group Child Care.

II. Background

Federal guidelines mandate that all states have requirements in place designed to protect the health and safety of children that are applicable to the providers who service children under the Child Care and Development Fund, one of the primary federal sources for the New York State (NYS) Child Care Block Grant. In NYS, to be eligible to provide subsidized child care, child care providers must meet basic health and safety standards, which are verified through one of the following processes:

- Licensing by OCFS, or
- Licensing by New York City Department of Mental Health and Hygiene, or
- Registration by OCFS or one of its subcontractors, or
- Enrollment by a legally-exempt caregiver enrollment agency (LECEA)

When an applicant/recipient of a child care subsidy initially chooses a legally-exempt provider, the district must facilitate the children’s enrollment with the provider by providing an enrollment form to the applicant/recipient, with instructions to complete the enrollment form jointly with the provider, and submitting the completed form to the LECEA serving the geographic area where the child care is being provided. The LECEA determines whether the provider can be enrolled, or if the provider is currently enrolled, whether the enrollment can be extended to include the children of the applicant/recipient. A child-specific determination is then documented in the Child Care Facility System by the LECEA.

Once a legally-exempt child care provider is enrolled, the LECEA is responsible for sending re-enrollment forms annually to the enrolled child care provider. Therefore, at the time of the applicant/recipient recertification, if the legally-exempt child care provider is currently enrolled to provide care for all applicable child(ren) of the applicant/recipient and is currently caring for them, the LSSD is not required to provide the applicant/recipient with another enrollment form.

The form used for enrollment of legally-exempt group providers in NYS is OCFS-LDSS-4700, Enrollment Form for Provider of Legally-Exempt Group Child Care. OCFS revised this form in June 2014, in order to better obtain information necessary to verify the legally-exempt status of group child care programs.
III. Program Implication

Beginning no later than September 1, 2014, all LSSD and LECEAs must provide the OCFS-LDSS-4700, Enrollment Form for Provider of Legally-Exempt Group Child Care (rev.7/2014), to legally-exempt child care providers and child care subsidy applicants/recipient selecting a legally-exempt child care provider.

As of November 1, 2014, the LECEAs must require that the revised version of the form be submitted.

IV. Access to Legally-Exempt Enrollment Forms

The revised OCFS-LDSS-4700 form can be downloaded from:

- [http://ocfs.state.nyenet/admin/Forms](http://ocfs.state.nyenet/admin/Forms) (OCFS intranet)

To request hard copies of the OCFS-LDSS-4700 form:

- Submit the form, OCFS-4627 “Request for Forms and Publications,” which is found on the following sites:
  - [http://ocfs.state.nyenet/admin/forms/Management_Services/](http://ocfs.state.nyenet/admin/forms/Management_Services/)
  or
- Call the OCFS Forms Hotline: 518-473-0971

Mail the completed OCFS-4627 form to the following address:

**OCFS Resource Distribution Center**
11 Fourth Ave
Rensselaer, NY 12144-2629
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NEW YORK STATE
OFFICE OF CHILDREN AND FAMILY SERVICES

ENROLLMENT FORM FOR PROVIDER OF LEGALLY-EXEMPT GROUP CHILD CARE

Group child care providers, who are not required by NYS law to be licensed or registered to operate a day care program, and who are not providing “informal” child care in a residence, use this form to enroll with a legally-exempt caregiver enrollment agency to provide subsidized child care. (Regulatory reference: 18 NYCRR 415).

Instructions: Please use black/blue pen.

- Provider/director must complete the “Child Care Provider Section” of this form and parent must review.
- Parent/caretaker must complete the “Parent Information Section” of this form and provider/program director must review.
- Both parent and provider/program director must sign at the end of the section.
- Submit the completed form to the enrollment agency serving the location where the child care is being provided.

I. CHILD CARE PROVIDER SECTION

A. CHILD CARE PROVIDER/DIRECTOR AND PROGRAM

1. Child Care Provider/Program Director\(^1\) Name:

- Mr.  Mrs.  Ms.

<table>
<thead>
<tr>
<th>Last</th>
<th>First</th>
<th>MI</th>
<th>Suffix</th>
</tr>
</thead>
</table>

Other names known by: Maiden, married, aliases, etc.

2. Program Name and Federal Identification Number (Complete only if applicable):

- DBA (Doing Business As):  

- Federal Identification No:

- Legal Name:

3. Identifying and Contact Information:

- Enrollment Number:  

- Site Phone:  

- □ Unlisted

- Date of Birth: (mm/dd/yyyy)  

- Home Phone:  

- □ Unlisted

- Gender (M or F):  

- Cell Phone:  

- Fax:  

- Social Security No.\(^2\):  

- E-Mail Address\(^3\):  

- □ No E-Mail Address

4. Child Care Location:  Give address where the child care is being provided.

<table>
<thead>
<tr>
<th>Building Number</th>
<th>Street</th>
<th>Apt.</th>
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<table>
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<tr>
<th>Address Line 2</th>
<th></th>
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</table>

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip</th>
<th>County/Borough</th>
</tr>
</thead>
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<tr>
<th>(For Enrollment Agency Use)</th>
<th>(For Local District Use)</th>
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</thead>
<tbody>
<tr>
<td>Received Date  / / /</td>
<td>Parent’s Case No.</td>
</tr>
<tr>
<td>Complete Date  / / /</td>
<td>Type:  Local □  WMS □</td>
</tr>
<tr>
<td>LSSD Office/Unit/Wkr. No.  / / /</td>
<td></td>
</tr>
</tbody>
</table>

\(^1\) Director means the person who has responsibility for the development and supervision of the daily activity programs for children and the administrative authority and responsibility for the daily operations of the child care program.

\(^2\) The Social Security Number is not required when a federal identification number is present. The social security number or federal identification number is required when the local social services district issues child care subsidy payments directly to a child care provider/program. Failure to provide the social security or federal identification number may delay payment. Social security number of the provider or federal identification of the program is optional when the local social services district issues child care subsidy checks to subsidy recipient (parent/caretaker). If the social security number or federal identification is provided, it may also be used by federal, State & local agencies for federal reporting, to prevent duplication of services and to prevent fraud.

\(^3\) The e-mail address, if given, may be used by the enrollment agency to contact you.
5. Mailing Address: Is your mailing address the same as the child care location address given on page one?
   □ Yes. □ No. If No, give address below.
   
   Building Number   Street   Apt.

   Address Line 2   Floor

   City   State   Zip   County/Borough

6. Do you read English? □ Yes □ No. If No, what language do you read best?

7. Do you speak English? □ Yes □ No. If No, what language do you speak best?

8. Operating schedule for the program listed on page one.

   A) The program operates (choose one):
      □ The full calendar
      □ School year only
      □ Summers Only
      □ Other (please describe):

   B) Provide information in the table below regarding the days and hours of operation for each age group and the numbers of children served.

<table>
<thead>
<tr>
<th>Ages Served</th>
<th>Days of the Week</th>
<th>Daily Start and End Times</th>
<th>Current Number of Children</th>
<th>Maximum Number of Children</th>
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<tbody>
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<td>7-12 y</td>
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<tr>
<td>13+ y</td>
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9. Does your organization operate any other child care program at the SAME site/location where you intend to provide child care?
   □ No. □ Yes. List below all other child care programs operated by your organization at the same site. Attach additional papers if needed.
10. Legally-exempt group child care means child care provided by a provider/program, which is not a legally-exempt family child care or in-home childcare provider/program, AND, which is not required to be licensed or registered with the Office of Children and Family Services, or licensed by the City of New York, but which meets all applicable State or local requirements for such child care programs. The provider/program must meet the following requirement to be enrolled as legally-exempt.

I, the provider and/or program director, attest that my program is NOT providing child care that is required to be licensed or registered with the Office of Children and Family Services, or licensed by the City of New York.

☐ Yes. If you have supportive documentation, please provide it.
☐ No.

**B. TYPE OF LEGALLY-EXEMPT CHILD CARE THAT YOU PROVIDE**

To be enrolled to provide subsidized child care services, the provider/program director must attest that:
- The provider/program is LEGALLY OPERATING under the auspices of another federal, State or local government agency; OR
- The provider/program is NOT REQUIRED to operate under the auspices of another federal, State or local government agency. These programs must meet additional health and safety requirements.

*Indicate in question 1 below, whether your program legally operates under the authority of another federal, State, or local government, or tribal agency, or, is not required to do so. Your answer to question 1 will determine whether you answer question 2 or question 3, within this subsection B.*

1. Choose the statement below that describes your program.
   - ☐ A) My program legally operates under the auspices of another federal, State, or local government, or a tribal agency AND my program meets all State and local requirement for such program. My program is described in question B.2. PROGRAMS OPERATING UNDER THE AUSPICES OF ANOTHER GOVERNMENT AGENCY.

Programs operating under the auspices of another federal, State, tribal or government agency must:
- Answer question B.2, PROGRAMS OPERATING UNDER THE AUSPICES OF ANOTHER GOVERNMENT AGENCY, and then
- Complete only the sections and questions listed immediately below.

I. Child Care Provider Section
   - A. Child Care Provider/Director and Program *(All questions.)*
   - B. Type of Legally-Exempt Child Care That You Provide *(Questions 1 and 2)*
   - C. Other Qualifications and Program Characteristics,
     *#2) Program’s Hours of Operation, and*
     *#3) Cost of Care*
   - F. Relevant History,
     *#2) Provider, Employees and Volunteers*
   - G. Provider Agreements and Certification *(All questions.)*
   - H. Provider Certification *(All.)*

II. Parent Information Section
   - A-D. #5. *(All questions are to completed by the parent/caretaker)*
   - D. Parental Acknowledgments & Certifications,
     *#6) Provider Certification*

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4 Supportive documentation, issued by NYS Office of Children and Family Services, or the City of New York, may be required to establish that the provider/program is exempt from the requirement to be licensed/registered by NYS OCFS or NYC DOHMH.
□ B) My program does not operate under the auspices of another federal, State, or local government or a tribal agency AND my program is not legally required to do such.

Programs that are NOT required to operate under the auspices of another federal, State, tribal or government agency, must:

- Skip question B.2 PROGRAMS OPERATING UNDER THE AUSPICES OF ANOTHER GOVERNMENT AGENCY, on page 4, and
- Answer question B.3 PROGRAMS NOT OPERATING UNDER THE AUSPICES OF ANOTHER GOVERNMENT AGENCY, on page 6, then
- Complete the Child Care Provider Section: ALL remaining subsections and questions.
- Complete within II. Parent Information Section, D. Parental Acknowledgements & Certifications: #6, Provider Certification, on page 19.

□ C) None of the above. Your program might not be eligible to be enrolled. Contact the enrollment agency for assistance.

2. PROGRAMS OPERATING UNDER THE AUSPICES OF ANOTHER GOVERNMENT AGENCY:

Answer this question only if your answer to question 1, above, was “A”. Check ☑ to choose the statement A, B, C, D, E, or F, that describes your legally-exempt child care program and the government or tribal agency under which you operate. Answer all related questions for the selected program.

□ A) The program is operated in compliance with applicable federal laws and regulations and is located on federal property.

1) Name of Federal agency/property where located: ________________________________

2) The type of child care provided is: (check ☑ all that apply)
  - Day care center
  - Family day care home
  - Other child care program:

□ B) The program is operated in compliance with applicable tribal laws and regulations and is located on tribal property.

1) Name of Tribe: ________________________________

2) Name of tribal property where located:

3) The type of child care provided is: (check ☑ all that apply)
  - Day care center
  - Family day care home
  - Other child care program:

□ C) The program is operated under the auspices of the NYS Department of Education,

- Is operated by a public school district, that is providing elementary or secondary education or both, in accordance with the compulsory education requirements of NYS Education Law. AND
- Is located on the same premises or campus where the elementary or secondary education is provided, AND
- The program meets all State and local requirements for such child care programs.

1) Name of school: ________________________________

2) Name of school district: ________________________________

3) The type of child care provided is: (check ☑ all that apply)
  - Nursery school program, providing services only to children three years of age or older
  - Pre-kindergarten program, providing services only to children three years of age or older,
  - School-age child care programs conducted during non-school hours.
The program is a nursery school, voluntarily registered with the NYS Department of Education,
- Operating in accordance with Part 125 of NYSED regulations, AND
- Is operated by a nonprofit agency or organization or private proprietary organization, AND
- Is providing services for 3 hours or less per day, to pre-school age\(^5\) children, AND
- The program meets all State and local requirements for such child care programs.

1) □ I HAVE ATTACHED a copy of my current certificate of registration which is valid for up to 5 years.

2) Registration Number:

3) Date of Certificate of Registration:

4) The program hours are:

The program, located WITHIN New York City, is operated under Article 43 of the NYC Health Code
- Has filed appropriate notice with the New York City Department of Education on a form provided or approved by the NYC Department of Education, AND
- Is operated by a school recognized under the State Education law and which provides compulsory education for children, AND
- Is located within or as part of such school and has identical ownership, operation management and control of kindergarten and pre-kindergarten classes for children ages three through five and all other classes provided by the school, AND
- Is a pre-kindergarten or kindergarten program of instruction for children no younger than 3 years of age, through 5 years and serving only children ages 3 to 5 years, AND
- The program meets all State and local requirements for such child care programs.

1) Name of School:

2) □ I HAVE ATTACHED a copy of the current Certificate of Filing issued by the NYC Department of Health and Mental Hygiene (DOHMH).

3) Certificate of Filing DCID Number:

4) Filing Date:

The program is a Summer Day Camp operating under the auspices of the Department of Health AND
- Does meet all State and local requirements for such child care programs, AND
- Does NOT concurrently hold a current license or registration to operate a day care program issued by the New York State Office of Children and Family Services or by the New York City DOHMH for this site and program, AND
1) The Summer Day Camp is operated under the jurisdiction of the: (choose the appropriate authority)
   - □ New York State Department of Health (NYSDOH) in accordance with subpart 7-2 of the State Sanitary Code OR,
   - □ New York City Department of Health and Mental Hygiene (NYCDOHMH).
2) The Summer Day Camp opened on or is scheduled to open on (date):

3) Does the program have a current year permit, from the New York State Department of Health or the New York City DOHMH, to operate as a legally-exempt summer day camp program?
   a) □ Yes. You must attach the permit. Check \[\checkmark\] below to show you have met the requirement.
      i) □ I HAVE ATTACHED a copy of my current year permit from the NYS DOH or the NYC DOHMH.
      ii) Permit number:
      iii) Expiration date:

\[\] 

\(^5\) Per 18 NYCRR 413.2, “Preschooler” means a child who is at least three years of age and who is not yet enrolled in kindergarten or a higher grade.

\(^6\) Programs operating under NYC Health Code Article 43 use the definition within Article 43 for Three years of age: A child attending an elementary school where the school year starts in September shall be deemed to be three years of age if the child’s third birthday occurs or will occur on or before December 31st of the school year. In a school where the school year starts during any other month, all children in a class of three year olds shall have their third birthday within four months of the start of the school year.
b) □ No. You cannot be fully enrolled until you submit the current year summer camp permit from DOH. To be conditionally enrolled prior to the issuance of the current year’s DOH summer camp permit, you must:

- Attach proof that you have completed the application to DOH for a permit to operate a summer day camp, and,
- Have no outstanding compliance issues with the NYS DOH or NYC DOHMH, and,
- Agree to immediately notify the enrollment agency if you are denied a summer camp permit by the DOH or if you withdraw your request for a summer day camp permit, and,
- Agree to submit your current year’s DOH summer day camp permit to the enrollment agency as soon as it is issued so that your enrollment will change from conditional enrollment to full enrollment. Failure to submit the permit within 30 days of camp opening WILL result in a TERMINATION of enrollment.

i) □ I have ATTACHED proof of my application for the DOH permit.

ii) I submitted the camp permit application to DOH on (date):

3. PROGRAMS NOT OPERATING UNDER THE AUSPICES OF ANOTHER GOVERNMENT AGENCY:

Choose the statement, A), B) or C), that describes your legally-exempt child care program(s) that does not operate under the auspices of a federal, State, local government, or tribal agency.

□ A) The program is operated OUTSIDE OF New York City, by a private school or academy, that is providing elementary or secondary education or both, in accordance with the compulsory education requirements of the NYS Education Law, and,

- Is (are) located on the same premises or campus where the elementary or secondary education is provided, and,
- Meets all State and local requirements for such child care programs.

1) Name of School:

2) The type of child care provided is: (check all that apply)

□ Nursery school program or pre-kindergarten program, providing services only to children three years of age or older,
□ A program for school-aged children conducted during non-school hours.

□ B) The program is operated WITHIN New York City, by a private school or academy, that is providing elementary or secondary education or both, in accordance with the compulsory education requirements of the NYS Education Law, and,

- Is (are) located on the same premises or campus where the elementary or secondary education is provided, and,
- Meets all State and local requirements for such child care programs.

1) Name of School:

2) The program is for school-aged children conducted during non-school hours and the program does not serve any children ages 0 to 4 years of age.

□ C) The program is a nursery school for children 3 years of age or older or program for preschool age children,

- Is not voluntarily registered with NYS Education Department, and,
- Is operated by a non-profit agency or organization or a private proprietary agency, and,
- Provides services for three or less hours per day, and,
- Meets all State and local requirements for such child care programs.

1) Name of Agency/Organization:

2) The type of child care provided is: (check all that apply)

□ A nursery school
□ A program for preschool aged children, at least 3 years of age.

3) The program hours are:

□ D) The program cares for not more than six school age children, during non-school hours, for three hours or less per day, and,

- Is not located in a residence, and,
- Meets all State and local requirements for such child care programs.

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7 Per 18 NYCRR 413.2, “Preschooler” means a child who is at least three years of age and who is not yet enrolled in kindergarten or a higher grade.
C. OTHER QUALIFICATIONS & PROGRAM CHARACTERISTICS

1. PROVIDER’S/PROGRAM’S QUALIFICATIONS TO ADMINISTER MEDICATION

The questions pertaining to the administration of medication apply ONLY to group programs NOT operating under auspices of another government agency (Refer to pages 3-6 if you are not sure if this applies to your program.)

Note: The parent’s/caretaker’s plan for who is responsible for meeting the child(ren)’s medication needs is addressed in the Parent Information Section of this form.

NYS Law restricts the right to administer medication, other than over-the-counter topical ointments, sunscreen and topically applied insect repellent, to specific medical professionals who are authorized by New York State. A caregiver may not administer medication to any child in his or her care except to the extent that the caregiver is a medical professional authorized under the Education Law to administer medications OR both the program and the medication administrant have met the requirements for the administration of medication as defined in 18 NYCRR 418-1.11. Pursuant to 18 NYCRR 418-1.11, some child care providers/programs may be “permitted”, to administer medications when certain requirements are met.

Legally-exempt group child care programs, NOT operating under the auspices of another government agency, may administer medication on a limited basis only when the following conditions are met:

- The program director is a Physician, Physician Assistant, Registered Nurse or Nurse Practitioner currently licensed by New York State Department of Education (NYSED) to administer medication

OR

- The program must be authorized by the Office of Children and Family Services (OCFS), to administer medication under a Health Care Plan for Administration of Medication, approved by a qualified health care consultant AND
  - The program’s designated medications administrant must meet OCFS training requirements,
  - The program’s medications administrant must be at least 18 years of age, and literate in the language in which the parental permissions and health care provider’s instructions will be given,
  - The program must be operating in compliance with the NYS regulation,
  - The program’s medications administrant must have permission to administer medication to a specific child from the child’s parent/caretaker, step-parent, legal guardian, or legal custodian,
  - The program’s medications administrant must follow the health care provider’s instructions for administration of medication, and
  - The program’s medications administrant may administer medication to subsidized children in care.

Any child care provider, program employee or program volunteer who is not authorized by NYS Law or child care regulations, may only administer over-the-counter topical ointments, sunscreen and topical insect repellent. Examples of medication they MAY NOT ADMINISTER include, but are not limited to: Tylenol, Ritalin, insulin, antibiotics, and ear, eye or nose drops.

A) The provider/program director agrees the provider/program director will administer medication only as the provider/program is permitted by NYS Law, as described above. The provider/program director will make sure that each of the program’s employees and volunteers (present and future) administers medication only to the extent allowed by NYS Law.

☐ Yes.  ☐ No.

B) Is the program interested in seeking OCFS authorization to administer medication to the child(ren) in subsidized care?

☐ Yes. The provider/program wants to learn how to start the process. Please send me the OCFS-LDSS-7007 Obtaining Authorization to Administer Medication to the Child(ren) in Legally-Exempt Care.

☐ No. The provider/program will not be seeking authorization to administer medication at this time.

C) Does this program (includes provider/director, employees, caregivers and/or volunteers) administer medication to any subsidized children in care?

☐ Yes.  ☐ No.
D) Is the provider/program legally permitted to administer medication to the child(ren) in subsidized care? Check ☐ statements 1 or 2. Provide all other information as it applies.

☐ 1) Yes. Complete the applicable section below, a) or b), to show the legal authority.

a) The program director is legally permitted to administer medication because the provider/program director is a NYS medical professional authorized by New York State Department of Education (NYSED) to administer medication. Therefore, the program director is allowed to administer medication to children in the program director’s care when the program director has appropriate permissions from the parent(s) and in accordance with the health care provider’s instructions.

1) Profession (Check ☐ one):
   - ☐ Registered Nurse
   - ☐ Nurse Practitioner
   - ☐ Physician
   - ☐ Physician Assistant

2) License number:
   - ☐ I have attached a copy of the current NYS professional medical license.

b) The program’s medication administrant, designated in the Health Care Plan for the Administration of Medication, is legally permitted to administer medication because the provider/program has an OCFS-LDSS-7000, Health Care Plan for the Administration of Medication approved within the past 2 years and the designated medication administrant has met all basic and training requirements. The medications administrant named below is authorized to administer medication to subsidized children in the program’s care when there are appropriate permissions from the parent, and, in accordance with the Health Care Plan for the Administration of Medication and the health care provider’s instructions.

i) Approval date for Health Care Plan for the Administration of Medication:
   - ☐ I have attached a copy of the first page AND the approval page of my Health Care Plan for the Administration of Medication (OCFS-LDSS-7000).

ii) Name of the qualified medication administrant:

iii) Health Care Consultant (HCC) name:

iv) Health Care Consultant Profession (Check ☐ one):
   - ☐ Registered Nurse
   - ☐ Nurse Practitioner
   - ☐ Physician
   - ☐ Physician Assistant

v) License Number:

☐ 2) No. None of the above permissions apply to the provider/program. The provider/program is not authorized by OCFS or NYSED. The program, cannot administer medication to child(ren) in care, except: over-the-counter topical ointments, sunscreen, and topically applied insect repellent.

2. PROGRAM’S PERIODS OF OPERATION

(All programs must answer.)

Indicate when the program is operating by checking ☐ all that apply.

☐ Full Year (school year and summer)
☐ School Year
☐ Summer Only (June-September)

3. COST OF CARE

Do you charge parents receiving subsidy the same amount or less than you charge for non-subsidy child(ren) of the same age and similar care?

☐ Yes.

☐ No. I charge parents receiving subsidy more than I charge other parents.
**D. Health and Safety Checklist**

*The Health and Safety Checklist questions must be answered by group programs that are not under auspices of another government agency as explained in Subsection I B.*

The provider/director and parent/caretaker must walk through and inspect the site, then complete the health and safety checklist together.

Check ☑ an answer for each item below:

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<tr>
<th>YES</th>
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YES NO

The provider/program director agrees the program meets and will continue to meet the following basic health and safety requirements.

☐ ☐ 14. The provider/program staff will hold fire/evacuation drills monthly with the child(ren) during hours that the child(ren) are in care so that the child(ren) and I will know what to do in the case of an emergency.

☐ ☐ 15. The provider/program has a working telephone OR can get to one very quickly in an emergency. Emergency telephone numbers for the fire department, local or State police or sheriff's department, poison control center and ambulance service are posted near the phone and are easy to see.

☐ ☐ 16. The provider/program will use protective caps, covers or permanently installed safety devices on all electrical outlets that the child(ren) could reach when I am caring for the child(ren) under 5 years old.

☐ ☐ 17. Paint and plaster are in good repair so that there is no danger of the child(ren) putting paint or plaster chips in their mouths or of it getting into food.

☐ ☐ 18. The child care premises has at least one operating smoke detector on each floor of the program site. I will check regularly to make sure all detectors work.

☐ ☐ 19. The provider/program has a portable first aid kit at the program site that is easy to get to in an emergency and my first aid supplies are kept in a clean container or cabinet away from the child(ren). It is stocked to treat common childhood injuries and problems. I will always replace things in the first aid kit as soon as possible after something has been used or is too old to be used.

☐ ☐ 20. The provider/program director has RECEIVED from the child(ren)'s parent/caretaker:
   • signed proof from a doctor or other health care provider that: the child(ren) has received all of the immunizations appropriate for the child(ren)'s age; OR
   • proof that one or more of the immunizations would harm the child(ren)'s health; OR
   • a statement saying that the child(ren) has not been immunized due to the parent/caretaker's religious beliefs.

☐ ☐ 21. The stairs, railings, porches and balconies are in good repair.

E. PROVIDER/PROGRAM BEHAVIORAL CONDITIONS

The Provider/Program Behavioral Conditions Checklist questions must be answered by group programs that are not operating under auspices of another government agency as explained in Subsection I B.

YES NO

The provider/program director agrees the program meets and will continue to meet the following basic health and safety requirements before caring for children:

☐ ☐ 1. The provider/program director understands and agrees that the provider, program staff and program volunteers will never use physical punishment or let others use physical punishment while child(ren) are in their care. Physical punishment means doing things directly to the child(ren)’s body to punish them, such as:
   • Spanking, biting, slapping, shaking, twisting, or squeezing;
   • Making the child(ren) do physical exercises beyond what is normal;
   • Forcing the child(ren) to stay still for long periods of time;
   • Making the child(ren) stay in positions that hurt the child(ren) or are bizarre;
   • Bathing the child(ren) in unusually hot or cold water; and
   • Forcing child(ren) to eat or have in the child(ren)’s mouth soap, foods, hot spices or foreign substances.

☐ ☐ 2. The provider/program director understands and agrees that provider, program staff and program volunteers will never use or be under the influence of alcohol or drugs while the child(ren) are in care and will make sure that the child(ren) being cared for do not have contact with people using drugs or alcohol.

☐ ☐ 3. The provider/program director understands and agrees that provider, program staff and program volunteers will not smoke or allow smoking in indoor areas or other enclosed areas, such as cars or other vehicles, when the child(ren) are present.

☐ ☐ 4. The provider/program director understands and agrees that provider, program staff and program volunteers will never leave the child(ren) alone or unsupervised.
F. Relevant History

1. Provider’s History

The questions in F.1.(A-C), must be answered only by Group Programs that are not operating under auspices of another government agency as explained in Subsection I.B.

A) Provider/Director Termination of Parental Rights

I certify and attest that (Check one):

- I have never had my parental rights terminated under Social Services Law 384-b or equivalent legal authority.
- I have had my parental rights terminated under Social Services Law 384-b or equivalent legal authority.
  - I have ATTACHED the OCFS-LDSS-4917, History of Court-Ordered Removal Of A Child And/or Termination of Parental Rights.

B) Provider/Director Court Ordered Article 10 Removal

I certify and attest that (Check one):

- I have never had a child removed from my care by court order in a proceeding under Article 10 (child protective) of the Family Court Act.
- I have had a child removed from my care by court order in a proceeding under Article 10 (child protective) of the Family Court Act.
  - I have ATTACHED the OCFS-LDSS-4917, History of Court-Ordered Removal Of A Child And/or Termination of Parental Rights.

C) Provider/Director Day Care Enforcement

A child “day care” program includes licensed or registered day care centers, family day care homes, group family day care homes, small day care centers and/or school age child care programs.

1) I certify and attest that (Check one):

- I have had an application for a license or registration to operate a child day care program denied.
- I have not had an application for a license or registration to operate a child day care program denied.

2) I certify and attest that (Check one):

- I have had a license or registration to operate a child day care program revoked or suspended.
- I have not had a license or registration to operate a child day care program revoked or suspended.

3) If the provider/program director has been denied a license or registration to operate a child day care program, OR if provider/program director has had a license or registration to operate a child day care program revoked or suspended, complete the following:

   a) Name of the child day care program(s) for which this action occurred:

   b) Location:

   c) I have ATTACHED the OCFS-LDSS-4916, History of Day Care Enforcement and Parental Acknowledgement.

2. Provider’s, Employee’s and Volunteer’s History

These questions must be answered by ALL Group programs.

The provider/director must ask each employee and each volunteer who is likely to have regular contact with the child(ren) in care if they have been convicted of a crime.

A) Did the provider/director ask each employee and each volunteer who is likely to have regular contact with the child(ren) in care, if they have been convicted of a crime?

- Yes.
- No.

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8 If you need a copy of this form, please contact your local social services district or your legally-exempt child care provider enrollment agency.
B) Has the provider/program director and/or the program’s employee(s) and/or volunteer(s) ever been convicted of a crime in New York State or any other place?

☐ No. Skip to Question D.

☐ Yes. If yes, you must complete and attach the OCFS-LDSS-4915, History of Criminal Convictions And Parental Acknowledgement for person with a criminal convictions history and answer question C.

☐ The provider/program director has ATTACHED the OCFS-LDSS-4915, History of Criminal Convictions And Parental Acknowledgement.

C) In the chart below, provide additional information on each person with a criminal convictions history who is present at the child care site.

<table>
<thead>
<tr>
<th>NAME (INCLUDE AND SPECIFY MAIDEN NAME AND ANY OTHER ALIAS NAMES BY WHICH VOLUNTEERS AND EMPLOYEES MAY BE KNOWN)</th>
<th>ROLE: EMPLOYEE, OR VOLUNTEER</th>
<th>GENDER (M or F)</th>
<th>DATE OF BIRTH</th>
</tr>
</thead>
<tbody>
<tr>
<td>1) Last First MI Suffix</td>
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<td>5) Last First MI Suffix</td>
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D) Indicated Reports Of Child Abuse Or Maltreatment

The provider/program director must ask all volunteers who are likely to have regular contact with children in care and all employees, if they have been the subject of an indicated report of child abuse or maltreatment (Child Protective).

The provider/program must provide each parent/caretaker with a true and accurate written statement, indicating whether the provider/program director, any program employee, and/or any volunteers who are likely to have regular contact with children in care, have been the subject and person responsible on any indicated report of child abuse or maltreatment, including: a description of the incident, the date of the indication and any other relevant information.

1) I, the provider/program director, have asked all volunteers and employees if they have been the subject of an indicated report of child abuse or maltreatment. When any report of child abuse or maltreatment has been indicated against the provider/program director, employee or volunteers, I have given the parent/caretaker a true and accurate written description of the incident, the indication and any other relevant information.

☐ Yes.

☐ No.

G. PROVIDER AGREEMENTS AND CERTIFICATIONS

1. RECORD KEEPING

☒ On a daily basis, the provider/program maintains current and accurate attendance records, at the child care program, for each child being cared for, minimally including: the date, arrival time, departure time, and if absent for the full day, a note that the child is absent.

2. SUBMITTING UPDATES AND CHANGES OF ENROLLMENT INFORMATION

☒ I understand that enrollment of this provider/program to provide subsidized child care will only apply to the specific provider/program located at the site specified on page one. If the program relocates temporarily or permanently to a child care location different from the one given on this form, this enrollment will end. To remain eligible to provide subsidized child care I must submit a new enrollment request for the new site to the enrollment agency and begin the enrollment process anew.

☒ I understand that if, in the future there are new employees or volunteers, the requirements on pages 11-12 for Criminal History and Child Protective Indicated Reports apply to them.

☒ I understand I am required to inform the enrollment agency promptly if I add any new employees or volunteers who have a criminal conviction so their criminal history can be evaluated.
I understand that the decision to enroll the program is based on the facts provided on the enrollment form and when there is a change to any of the information I have attested to, my eligibility to provide subsidized child care may also change. I will inform the enrollment agency immediately if there are changes in any information provided on the enrollment form or changes to the attachments.

3. INFORMATION SHARING

I understand the enrollment agency and the local social services district will exchange information regarding the child care program's enrollment status.

4. ELIGIBILITY AND PAYMENT

I understand that the program cannot be enrolled until all items marked “No” on the Health and Safety Checklist have been corrected.

I understand that the program must be enrolled with the enrollment agency before any payment can be made.

The program agrees to maintain and provide accurate attendance records as required by the local social services district.

The program agrees to collect the family share (fee) if instructed to do so by the local social services district. The program will immediately notify the local social services district if the parent/caretaker fails to pay the required family share.

I understand that when I, any volunteer who is likely to have regular contact with the child(ren), or any employee has been convicted of a crime, the provider must give the parent and the Enrollment Agency true and accurate information about the crime which will enable the parent and Enrollment Agency to evaluate whether the criminal background poses an unreasonable risk to the safety or welfare of the children.

I understand that no person convicted of a felony or misdemeanor against children or, for caregivers of legally-exempt family child care, whose household includes an individual convicted of such a crime may be enrolled by a legally-exempt caregiver enrollment agency as a child care caregiver.

I understand that no legally-exempt informal child care program or legally-exempt group child care program which employs an individual or uses a volunteer convicted of a felony or misdemeanor against children may be enrolled by a legally-exempt caregiver enrollment agency as a child care caregiver.

I understand that if the enrollment agency determines the program cannot be enrolled, then the local social services district cannot issue payment for care provided. The program will not be paid by the local social services district for any child care that it provides to a child(ren) receiving a child care subsidy, while the program is deemed an ineligible provider by the enrollment agency. The parent/caretaker has the right and responsibility to decide whether he/she wants to use the program. If the parent/caretaker chooses to use the program when it cannot be enrolled, the parent/caretaker is responsible to pay the program for the child care.

5. ADDITIONAL REQUIREMENTS FOR PROGRAMS NOT OPERATING UNDER THE AUSTRICIES OF ANOTHER GOVERNMENT AGENCY-ONLY

(This section does not apply to programs operating under the auspices of another government agency).

I understand the program may not be eligible to provide child care AND that the local social services district may not be able to pay the program when:

- I have a history of Article 10 (child protective) removal of a child by family court order, or
- I have a history of termination of parental rights, or
- I have a history of denial, revocation and/or suspension of a license or registration to operate a child day care program.

I understand the provider/program may request, within 30 days of the Notice Date, that the enrollment agency review any extenuating circumstances, when the program’s enrollment is denied or terminated based on:

- Article 10 (child protective) removal of a child by family court order, or
- History of termination of parental rights, OR
- History of denial, revocation and/or suspension of a license or registration to operate a child day care program.
6. Other Agreements

☒ I agree to operate in compliance with all applicable State and local laws.

☒ I understand and agree the program will allow the parent/caretaker unlimited and on demand access including:
  o Access to the parent’s/caretaker’s child(ren),
  o The right to inspect at any time during the hours of operation, all parts of the facility used for child care
    or which could present a hazard to the health and/or safety to the child(ren),
  o Access to the providers/caregivers caring for the child(ren),
  o Access to written records about the parent’s/caretaker’s child(ren) except when otherwise restricted by
    law.

☒ I understand and agree that the program will allow representatives of the enrollment agency, the local social
  services district and the State of New York access to the premises where subsidized child care is provided to
  confirm that information on my enrollment form and/or on attendance forms is true and accurate and that child
  care services are being provided as listed on these forms. I understand that if I do not allow such access, then
  the program will be considered ineligible, the program’s enrollment will be terminated and the program will not
  be paid by the local social services district.

☒ I understand and agree to meet all of the conditions stated on this form for as long as I am providing child care.

I understand that I am required to inform the enrollment agency and the parent/caretaker if there is a change in
the information stated on the enrollment form.

H. Certification

1. Provider Certification

By signing this form I certify to the best of my knowledge that:

• I understand and agree to continue to meet all conditions stated above.
• I have reviewed the “Parent Information Section” of this form.
• I understand the decision to enroll the program is based on the facts provided and attested to on the enrollment
  form. Providing false information or deliberately concealing information may result in an inaccurate
determination of my eligibility to provide subsidized child care, and/or a denial or termination of enrollment. If I provide child care
  services while enrolled under false pretenses, or while I am an ineligible child care provider, the Local Social
  Services District may refuse to issue child care subsidy payments, terminate child care subsidy payments, take
  legal action against the provider/program or the parent/caretaker and the provider/program may be required to
  repay any money I receive for such services.
• Under the penalty of perjury, I agree that to the best of my knowledge all statements made on this enrollment form
  and any attachments to it are true and accurate.

<table>
<thead>
<tr>
<th>PROVIDER SIGNATURE:</th>
<th>DATE:</th>
</tr>
</thead>
<tbody>
<tr>
<td>X</td>
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</tr>
</tbody>
</table>

2. Parent Certification

I have reviewed the “child care provider” section of this form. Under the penalty of perjury, I agree that to the best of
my knowledge all statements made on this enrollment form and any attachments to it are true and accurate.

<table>
<thead>
<tr>
<th>PARENT/CARETAKER SIGNATURE:</th>
<th>DATE:</th>
</tr>
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<tbody>
<tr>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>
II. PARENT INFORMATION SECTION

The parent/caretaker receiving or applying for child care subsidy must complete this section AND review the “Child Care Provider” Section. The provider must review and sign this section.

A. PARENT/CARETAKER INFORMATION

1. Parent/Caretaker’s Name:
   - [ ] Mr.  [ ] Mrs.  [ ] Ms.
   - Last  First  MI  Suffix
   - Other names known by: Maiden, married, aliases, etc

2. Identifying and Contact Information:
   - Date of Birth: / / (mm/dd/yyyy)
   - Home Phone: ( )
     - Listed  Unlisted
   - Work Phone: ( )
   - Cell Phone: ( )
   - E-Mail Address: No E-Mail Address

3. Do you read English? [ ] Yes  [ ] No. If No what languages do you read best?

4. Do you speak English? [ ] Yes  [ ] No. If No, what languages do you speak best?

5. Home Address:
   - House Number  Street  Apt.
   - Address Line 2  Floor
   - City  State  Zip  County/Borough

6. Mailing Address: Is your mailing address the same as your home address? [ ] Yes  [ ] No. If no, give mailing address below.
   - House Number  Street  Apt.
   - Address Line 2  Floor
   - City  State  Zip  County/Borough

7. Parent’s/Caretaker’s Child Care Subsidy Case:
   - Subsidy Paying County: 
   - Temporary Assistance No.: 
   - Subsidy Case Number: 
   - Parent’s CIN Number: 

8. Child Care Provider’s Name:
   - [ ] Mr.  [ ] Mrs.  [ ] Ms.
   - Last  First  MI  Suffix

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9 Caretaker means the child’s parent, legal guardian, caretaker relative or any other person with whom a child lives and who has assumed responsibility for the day-to-day care and custody of the child.
10 The e-mail address if given may be used by the enrollment agency to contact you.
11 The Temporary Assistance Number, Subsidy Case Number and Parent’s CIN (Client Identification Number) are optional. If given, they will be used to facilitate information sharing with the local social services district regarding your eligibility and payment for child care.
B. CHILD(REN) IN THE PROVIDER’S CARE

1. MY CHILD(REN) THAT THE PROVIDER CARES FOR.

A) Child’s Name: ______________________  Last  ______________________  First

District CIN: ______________________

Date of Birth: / / (mm/dd/yyyy)  □ Male  □ Female

B) Child’s Name: ______________________  Last  ______________________  First

District CIN: ______________________

Date of Birth: / / (mm/dd/yyyy)  □ Male  □ Female

C) Child’s Name: ______________________  Last  ______________________  First

District CIN: ______________________

Date of Birth: / / (mm/dd/yyyy)  □ Male  □ Female

D) Child’s Name: ______________________  Last  ______________________  First

District CIN: ______________________

Date of Birth: / / (mm/dd/yyyy)  □ Male  □ Female

2. MY CHILD(REN)’S MEDICATION NEEDS

A). Child care providers/programs can only administer medication in accordance with State Laws and regulations.

1) OCFS does NOT oversee the administration of medication by legally-exempt group programs operating under the auspices of a federal, State or local government or tribal agency (see pages 3-5). Such programs must follow the regulations set forth by the federal, State or local government or tribal agency that the program is operating under. If your child is attending such a program, ask the program about its medication administration policies.

2) OCFS DOES OVERSEE administration of medication by legally-exempt group programs NOT operating under the auspices of a federal, State or local government or tribal agency (see pages 3-6).

a) Review pages 7-8 to determine if the child care program is authorized to administer medication. When the child care program IS AUTHORIZED by OCFS and following a Health Care Plan for the Administration of Medication, the medications administrator designated in the Health Care Plan for the Administration of Medication may administer over-the-counter medication and some prescription medication to subsidized child(ren) with the permission of the parent and following physician’s instructions.

b) When the child care program is authorized by OCFS to administer medication and following a Health Care Plan for the Administration of Medication, the child’s parent/caretaker may choose to allow the program to be responsible for the medication needs of the child. When the child care program is responsible for medication administration, the parent must provide written permissions and physician’s instructions to the child care program.
c) Parent/Caretaker, indicate below your decision on who will be responsible for administering medication to each of your child(ren).

I, the parent/caretaker, have read the Provider’s Qualifications to Administer Medication on pages 7-8 and the section above. I understand whether this provider/program is or is not legally permitted to administer medication to my child(ren) and my plan is: (Choose the correct statement(s) below and list children’s names).

☐ The Child Care Program is NOT legally permitted to administer medication to my children, AND, I, the parent/caretaker will be responsible for the medication needs of (list children’s names):

☐ Although, the Child Care Program is legally permitted to administer medication to my children; I, the parent/caretaker will be responsible for administering medication to my child (ren):

☐ The Child Care Program is legally permitted to administer medications through its Health Care Plan for the Administration of Medication. The medications administrant(s) designated in the program’s Health Care Plan for Administration of Medications will administer medication to my child(ren) in accordance with the procedures set forth in the Child Care Program’s Health Care Plan for the Administration of Medication. The CHILD CARE PROGRAM\[12\] will be responsible for administering medication to my child (ren):

3. MY CHILD(REN)'S MEALS AND SNACKS

For each of my child(ren) in the provider’s care, either the parent or the provider must provide meals and snacks. Who will provide meals and snacks for your child(ren) while in care?

☐ The parent/caretaker will be responsible for the meals and snacks for the following child(ren):

☐ The provider/program will be responsible for the meals and snacks for the following child(ren):

C. RELEVANT HISTORY OF THE PROVIDER AND PEOPLE AT THE CHILD CARE LOCATION

1. I understand the child care provider must tell me whether the provider, employees and volunteers who are likely to have regular contact with child(ren) in care, have been the subject of an indicated report of child abuse or maltreatment.

   • I have specifically asked the provider if the provider, volunteers who are likely to have regular contact with child(ren) in care and/or employees, have been the subject of an indicated report of child abuse or maltreatment.

   • The provider has informed me whether any indicated reports of child abuse or maltreatment exist, which name as subject of the report: the provider, employees and/or volunteers who are likely to have regular contact with child(ren) in care.

   • When an indication of child abuse or maltreatment exists, the provider has given me written information regarding such indication of child abuse or maltreatment, including: a description of the incident, the date of the indication and any other relevant information.

   • I understand I have the right to select another provider. I agree that I have carefully considered the information on child abuse and maltreatment indications that I have been given and I am selecting this provider.

     ☐ Yes.
     ☐ No.

\[12\] The program may only be chosen to be responsible for medication administration when the program is legally permitted to administer medication.
D. PARENTAL ACKNOWLEDGEMENTS & CERTIFICATIONS

1. PARENT RESPONSIBILITIES TO MONITOR QUALITY OF CARE
- I understand it is my responsibility to choose a provider that meets the needs of my child(ren). I certify that I have selected this provider/program to care for my child(ren).
- My child care provider/program must give me unlimited and on demand access including:
  - Access to my child(ren),
  - The right to inspect, at any time during the hours of operation, all parts of the facility used for child care or which could present a hazard to the health and/or safety of my child(ren),
  - Access to the provider/caregivers caring for my child(ren),
  - Access to written records about my child(ren) except when otherwise restricted by law.
- I understand the provider/program director must provide me with a written statement indicating whether the provider/program director, any program employee, and/or any volunteers who are likely to have regular contact with children in care has been the subject of any indicated report of child abuse or maltreatment, including: a description of the incident, the date of the indication and any other relevant information.
- I understand it is my responsibility to monitor the quality of care my child(ren) receives from the child care provider/program. I understand that these agreements apply for as long as this provider is caring for my child(ren).

2. CHANGES TO ENROLLMENT INFORMATION
- I will notify the enrollment agency immediately if:
  - My address or phone number changes,
  - I have any concerns about the health and safety of my child(ren) in the provider’s care.

3. ELIGIBILITY AND PAYMENT ISSUES
- I understand that this enrollment applies ONLY to the provider/program and the location of care listed on page one. If the provider/program OR the location of care changes, this enrollment ends, and I must submit a new enrollment form for the new provider/program or the new location.
- I will immediately notify the local social services district and my provider if the hours that I need child care or other circumstances related to my need or eligibility for child care change.
- I agree to pay my family share (fee), if any, as directed by the local social services district.
- I understand that the provider/program must be accepted for enrollment with the Enrollment Agency before any payment can be made.
- I understand a provider/program may not be eligible to provide child care if the provider, any volunteer who is likely to have regular contact with my child(ren) or any employee has been convicted of a crime.
- I understand a provider/program is not eligible to provide child care if the provider, any volunteer who is likely to have regular contact with my child(ren), or any employee has been convicted of a crime against a child.
- I understand that if the provider/program is denied enrollment or has his or her enrollment terminated, the provider/program will be considered ineligible to provide child care. The local social services district cannot pay the provider/program or issue payment for care given by a provider/program who cannot be enrolled or who is ineligible.
  - If I choose to use an ineligible provider/program, I am responsible to pay for the child care myself.
  - I understand I have the right to select another provider/program.

4. PROGRAM NOT OPERATING UNDER THE AUSPICES OF ANOTHER GOVERNMENT AGENCY
- For the duration of the enrollment, the provider must meet all the basic health and safety requirements listed on the Health and Safety checklist. The provider/program director and I have inspected the program site and completed the Health and Safety checklist together. All statements on the Health and Safety checklist located in the Child Care Provider Section of this form are true and accurate.
- I understand, that for group child care programs not operating under the auspices of another federal, State, or local government or tribal agency, payment cannot be made until all items marked “No” on the Health and Safety Checklist have been corrected.
- The provider and I will notify and provide documentation to the enrollment agency when any item on the checklist has been corrected or changed.
- I understand that my provider/program may not be eligible to provide child care and that the local social services district may not be able to pay the provider when the provider has a history of:
  - Termination of parental rights, or
  - Article 10 (child protective) removal of a child(ren) by family court order, or
  - Denial, revocation and/or suspension of a license or registration to operate a child day care program.
5. **Parent Certification**

By signing this form I certify to the best of my knowledge that:

- I have reviewed the "Child Care Provider" section of this form.
- I understand and agree to continue to meet all conditions stated above.
- I understand the decision to enroll my provider is based on the facts provided and attested to on the enrollment form. Providing false information or deliberately concealing information may result in an inaccurate determination of my provider’s eligibility to provide subsidized child care, and/or a denial or termination of enrollment. If my provider/program provides child care services while enrolled under false pretenses, or while the provider/program is an ineligible child care provider, the Local Social Services District may refuse to issue child care subsidy payments, terminate child care subsidy payments, and/or take legal action against me or the child care provider.
- Under the penalty of perjury, I agree that to the best of my knowledge all statements made on this enrollment form and any attachments to it are true and accurate.

<table>
<thead>
<tr>
<th>Parent/Caretaker Signature:</th>
<th>Date:</th>
</tr>
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<tbody>
<tr>
<td>X</td>
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</tbody>
</table>

6. **Provider Certification**

I have reviewed the "Parent Information Section" of this form. Under the penalty of perjury, I agree that to the best of my knowledge all statements made on this enrollment form and any attachments to it are true and accurate.

<table>
<thead>
<tr>
<th>Provider Signature:</th>
<th>Date:</th>
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<tbody>
<tr>
<td>X</td>
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</table>

This enrollment form is a legal agreement. Make a copy of this form for your records. Return this form and its attachments to:
This page left intentionally blank.
The purpose of this Local Commissioners Memorandum (LCM) is to inform the Social Services Districts (districts) of changes in the Legally-Exempt Child Care Provider (LECCP) enrollment process and of planned enhancements to the Child Care Facility System (CCFS) that will impact district procedures. This LCM also clarifies the districts’ roles and responsibilities in the enrollment of LECCPs for the purpose of providing child care subsidized by the New York State Child Care Block Grant (NYSCCBG).

New and revised enrollment forms, to be distributed by districts to applicants and recipients of child care services who choose to use an LECCP, are provided, as is a new state form for notifying legally-exempt caregiver enrollment agencies (enrollment agencies) of district decisions relevant to enrollment.

Finally, we discuss a 2010 change in Social Services Law Section 410-x, subdivision 7, which allows a district to suspend the eligibility of an LECCP who is the subject of a report of child abuse or maltreatment that is under investigation by Child Protective Services (CPS).
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# Local Commissioners Memorandum

| Transmittal: | 12-OCFS-LCM-01 |
| To: | Local District Commissioners |
| Issuing Division/Office: | Division of Child Care |
| Date: | February 3, 2012 (Revised February 8, 2012) |
| Subject: | Changes to the Legally-Exempt Child Care Provider Enrollment Process |
| Suggested Distribution | Directors of Social Services and Temporary Assistance Child Care and Temporary Assistance Staff Accounting and Child Welfare Supervisors LAN Administrators |
| Contact Person: | See page 11 |
| Attachments Available Online: | Attachments A, B, F, G, H, I, J and K are available at the OCFS Forms website: [http://www.ocfs.state.ny.us/main/forms/](http://www.ocfs.state.ny.us/main/forms/) All of the attachments are available, listed with this policy, at the OCFS policies |
I. Purpose

The purpose of this Local Commissioners Memorandum (LCM) is to inform the Social Services Districts (districts) of changes in the Legally-Exempt Child Care Provider (LECCP) enrollment process and of planned enhancements to the Child Care Facility System (CCFS) that will impact district procedures. This LCM also clarifies the districts’ roles and responsibilities in the enrollment of LECCPs for the purpose of providing child care subsidized by the New York State Child Care Block Grant (NYSCCBG). New and revised enrollment forms, to be distributed by districts to applicants and recipients of child care services who choose to use an LECCP, are provided, as is a new state form for notifying legally-exempt caregiver enrollment agencies (enrollment agencies) of district decisions relevant to enrollment. Finally, we discuss a 2010 change in Social Services Law Section 410-x, subdivision 7, which allows a district to suspend the eligibility of an LECCP who is the subject of a report of child abuse or maltreatment that is under investigation by Child Protective Services (CPS).

II. Background

The federal guidelines require that all states have requirements in place designed to protect the health and safety of children applicable to the providers who serve children under the Child Care and Development Fund (CCDF), one of the primary federal sources for the NYSCCBG. In NYS, to provide child care services under the NYSCCBG, all child care providers must demonstrate they meet basic health and safety standards through one of the following processes: Licensing, Registration or Enrollment.

New York State Social Services Law (SSL) §390 defines “child day care” and mandates which providers must be licensed or registered to operate a child care program in New York State. Providers and programs not required to be licensed or registered have come to be known as “legally-exempt.” In accordance with federal guidelines, the enrollment process was developed to establish a set of health and safety requirements for the otherwise unregulated “legally-exempt” child care providers (LECCP) and programs to establish their eligibility to provide subsidized child care services.

III. Program Implications

Jurisdiction

Prior to the release of this LCM, the enrollment agency with jurisdiction for the enrollment of LECCPs outside of New York City was the district where the child resided, usually the district issuing the subsidy. Effective upon release of this LCM, the enrollment agency with jurisdiction will change to the enrollment agency serving the district where the child care site is located. This change takes place immediately for all newly enrolling LECCPs. For LECCPs who are currently enrolled, the enrollment agency must transfer the child care provider’s enrollment to the appropriate enrollment agency at the next case action, or at re-enrollment.

This jurisdictional change is reflected on page one of the revised enrollment forms. Districts must make corresponding changes in the cover letter given to applicants/recipients of child care assistance to
instruct them to return the enrollment packet to the enrollment agency serving the county where the child care site is located. Please refer to Attachment A, OCFS-LDSS-4699, Enrollment Form for Provider of Legally-Exempt Family Child Care and Legally-Exempt In-Home Child Care (Rev. 6/2011) and Attachment B, OCFS-LDSS-4700, Enrollment Form for Provider of Legally-Exempt Group Child Care (Rev. 6/2011).

The district in which the LECCP resides still remains responsible for conducting the state-required child welfare database check for the LECCP’s history of termination of parental rights and court-ordered removal/placement of a child under Family Court Act Article 10, as well as the review of extenuating circumstances. For districts situated along the New York State border with other states and/or Canada, there will be times when the child care provider does not reside within New York State. In those situations, the enrollment agency will identify an otherwise affiliated district within New York State, usually the subsidy-issuing district, to perform the child welfare database check.

The subsidy-issuing district still remains responsible for evaluating the LECCP’s compliance with any state–approved additional local standards for enrollment. Districts must inform the OCFS Division of Child Care Services (DCCS) if they intend to exempt child care providers who provide child care in a location out of the county, state, or country from any additional local standard for enrollment. This may be done by specifying the exemption in the Child and Family Services Plan.

CCFS Enhancements

At present, all districts, in collaboration with enrollment agencies, have processes in place to perform their roles related to legally-exempt child care subsidized under the NYSCCBG. However, CCFS enhancements planned by OCFS will drive changes in existing enrollment processes. Districts must assess the extent to which these changes will have an impact on their work processes for carrying out local responsibilities including, but not limited to, conducting the local child welfare database checks and authorizing child care payments. Upon the implementation of the planned CCFS enhancements:

- CCFS will automatically provide enrollment-related notifications, hereafter referred to as E-notices, directly to districts via E-mail delivered to the address created by the districts for this purpose. The E-notices will identify enrollment-related tasks which the district is required to perform. E-notices from CCFS to districts will not contain personal identifiers for either LECCPs or persons included on subsidy cases. Districts will be instructed to run a report in CCFS to retrieve the specific LECCP and subsidy case-level information required to complete the enrollment-related task.

- To the extent that CCFS performs an automated notification or referral function, enrollment agencies will be relieved of that notification responsibility. Enrollment agencies will no longer be required to routinely provide districts with copies of enrollment forms or notifications.

- Districts will have the option of updating a subsidy case decision directly in CCFS instead of informing the enrollment agency in writing.

CCFS will record when updates are made to the system and who makes them. This will eliminate the need to have some documents exchanged between the local districts and the enrollment agencies, thus saving time and money for districts and enrollment agencies.
CCTA-CCFS Interface

All child care providers providing care subsidized under the NYSCCBG must meet state health and safety requirements. Prior to issuing payments for child care services, local districts must verify that a child care provider was “eligible” to provide subsidized care during the period care was provided. With the exception of day care centers in New York City, CCFS is the system of record for all licensed, registered and enrolled child care providers in New York State. CCFS documents child care provider compliance with state health and safety requirements and other information necessary to determine provider eligibility for payment. With the advent of the Child Care Time and Attendance System (CCTA), the provider eligibility verification process is partially automated, as the nightly CCTA interface with CCFS draws the information needed to determine whether pending payments are payable (eligible), not payable (not eligible), or need review by the district.

District Suspension of Legally-Exempt Child Care Provider Eligibility

Social Services Law (SSL) § 410-x (7) permits districts to suspend an LECCP from providing child care services funded under the NYSCCBG when the LECCP is the subject of a report of child abuse or maltreatment under investigation by CPS. Districts that elect to suspend any of these providers must develop written local policy and procedures, in accordance with the guidance in this LCM, to support staff in their decision-making. The district must inform the applicable enrollment agency, in writing, at the start and end of each suspension. OCFS-2114 (7/2011), District Notification To Legally-Exempt Caregiver Enrollment Agency, included as Attachment C, may be used for this purpose. Upon receiving such notification, the enrollment agency documents the suspension in CCFS. The subsequent change in the provider’s CCFS record will be transmitted to CCTA during the nightly CCTA-CCFS interface and result in an advisement to the district to stop payment.

IV. Required Action

Receipt of CCFS E-notices, Retrieval of Reports, and Completion of Required Actions

Automated CCFS E-notices sent to districts will be of two kinds: those containing a required action and those for informational purposes. When an E-notice contains a required action, the required action must be completed in the time frame indicated on the E-notice. E-notices will refer the district to a specific CCFS report for the confidential, provider-specific information needed to perform the task. To prepare, each local district must:

- Establish an E-mail account box solely for the purpose of receiving E-notices from CCFS. The E-mail address must be a single E-mail address that should be structured so that it is not subject to frequent change. It may represent a distribution list or mailbox. Access and management of the generic E-mail address is the responsibility of the district.

- Designate a primary contact person and a backup contact person who will be responsible for monitoring the mailbox.

- Within one month of the issuance of this LCM, notify Ann Haller, in writing, at the Division of Child Care Services, Child Care Subsidy Unit, at Ann.Haller@ocfs.state.ny.us of:

  1. The E-mail address to which E-notices will be sent from CCFS to the district.
2. The designated contact persons at the district, including a backup contact person, who will be responsible for managing the CCFS mailbox for your district. Include for each person: name, title, E-mail address and phone number.

- Develop a process to ensure that the required actions included on the E-notice are completed within the specified time frame. The local process must include timely review of all E-notices, recommended to be done each business day; completion of the required actions; and timely written response to the designated enrollment agency. Districts must identify individuals who will be responsible for reviewing E-notices and running reports in CCFS. Districts may wish to assign different program areas (child care subsidy unit, child welfare unit, accounts payable, fraud prevention, etc.) and staff to be responsible for the timely review and required actions for different types of E-notices, based on the content of the “subject line.” Note that the personal information of LECCPs will not be transmitted in the E-notices. The district must utilize the specified CCFS reports to obtain a list of specific LECCPs for whom local district action is required. The subject lines and brief descriptions of the CCFS E-notices are listed below for your reference and planning.

1. LE-CCFS LD-001, Legally-Exempt Child Welfare Referral List: This notice informs the district that there are one or more legally-exempt child care providers for whom the district must conduct a check of the local child welfare database to determine if the district has a record showing the provider had a child removed from his or her care by court order under Family Court Act Article 10 or had his or her parental rights terminated under Social Services Law 384-b. The notice informs the district to run the LE Child Welfare Database Referral List (DSS) report in CCFS to obtain the detailed listing of providers.

2. LE-CCFS LD-002, Legally-Exempt Child Welfare Database Results Due/Overdue: This notice informs the district that the results of the child welfare database checks, requested in E-notice number one, are overdue. The district must run the LE Child Welfare Database Results Due/Overdue (DSS) report in CCFS to obtain the detailed listing of providers.

3. LE-CCFS LD-003, Legally-Exempt Additional Standard Referral: This notice informs the district that there are one or more legally-exempt child care providers for whom the district must conduct the OCFS-approved additional local standard process specified in the district’s approved Child and Family Services Plan. The district must run the LE Additional Standard Referral List (DSS) report in CCFS to obtain the detailed listing of providers and other persons to whom the standard applies.

4. LE-CCFS LD-004, Legally-Exempt Additional Standards Due/Overdue: This notice informs the district that the results of the OCFS-approved, additional local standard, requested in E-notice number three, are overdue. The district must run the LE Additional Standards Due/Overdue (DSS) report in CCFS to obtain the detailed listing of providers.

5. LE-CCFS LD-005, Legally-Exempt Child Welfare Extenuating Circumstances Review Referrals: This notice informs the district that there is one or more legally-exempt child care providers for whom the district must conduct a review of extenuating circumstances related to the provider’s child welfare history. The district must run the LE Child Welfare EC Review Referrals (DSS) report in CCFS to obtain the detailed listing of providers. The district must, in accordance with the Guide to Enrollment, conduct the
review of extenuating circumstances and determine whether an exception can be made to the presumption against enrollment.

6. LE-CCFS LD-006, Legally-Exempt Family Child Care & In-Home Training Approvals by Approval Date: This notice informs the district that a legally-exempt child care family or in-home provider for whom the district issues a subsidy has met the requirement for the enhanced rate of reimbursement. The district must run the LE FCC & IH Training Approvals by Approval Date (DSS) report in CCFS to obtain the provider-specific data and apply the enhanced market rate for a 12-consecutive-month period, starting no later than the beginning of the first full month following the date of the E-notice.

7. LE-CCFS LD-007, Legally-Exempt Parent-Provider Eligibility Changes: This notice informs the district that an enrollment agency has made changes to a family decision and/or to the enrollment status of a provider that may impact issuance of subsidy payments. The district may obtain specific information regarding changes made to a family decision and/or to the enrollment status of a provider by running the LE Parent-Provider Notification of Eligibility Changes (DSS) report in CCFS.

- Obtain appropriate permissions in CCFS for designated local district staff. District staff with a role in the enrollment process may request “view” access to relevant CCFS data. District staff performing child care subsidy-related functions and who plan to enter data directly into CCFS may request “data entry” access to CCFS. With the planned CCFS enhancements, districts will have the option of updating the subsidy case decision directly in CCFS instead of informing the enrollment agency in writing. Requests for access to CCFS must be directed to the CCFS Security Administrator, Shane Stone, by E-mail: Shane.Stone@ocfs.state.ny.us.

**CCFS Training**

District staff and/or subcontractor staff who are responsible for retrieving CCFS reports, including lists of providers for whom an action is required, must participate in training to learn how variable report parameters will affect the data retrieved. CCFS training for district staff is currently under development. Topics covered in the CCFS training will include: “searching” in CCFS, reviewing the provider profile, running reports, understanding report data, using CCFS to determine providers’ eligibility for payment, and entering data on local district screens in CCFS. CCFS training for districts will be available one to two months prior to implementation of the above described CCFS enhancements. OCFS will inform district Staff Development Coordinators when the training will be available.

**Subcontractors**

- When a district uses a subcontractor that requires CCFS, the subcontractor must submit requests for CCFS access to the district for pre-approval. The district then forwards the locally approved requests to the CCFS Security Administrator, Shane Stone. The subcontract agency staff must not be represented as district staff.

- We are now requiring districts that use subcontractors for any task requiring access to CCFS and CCTA to have appropriate written non-disclosure agreements in place to protect and preserve
confidentiality of data and information, prior to pre-approving any request for state system access. OCFS has prepared model forms which may be used for this purpose:

- Model Non-disclosure Agreement for District and Contractor, Attachment D
- Model Non-disclosure Agreement for District and Contractor’s Employee, Attachment E

**Revised LECCP Enrollment Forms and Attachments**

The enrollment forms for legally-exempt child care providers and the required attachments to the enrollment forms have been updated to address the changes in enrollment agency jurisdiction and other policy issues. Per 18 NYCRR 415.4(f), the district must provide an enrollment form and applicable required attachments to each child’s parent/caretaker who has applied for, or is receiving, child care subsidies under the NYSCCBG and who chooses an LECCP to care for his or her child.

Districts must use the most recent revisions of the LECCP enrollment forms and required attachments. The enrollment forms and required attachments are listed in Table One with their most recent revision dates. Spanish versions of these forms are available on the OCFS website. To access the enrollment forms, go to the main OCFS internet site, [www.ocfs.state.ny.us](http://www.ocfs.state.ny.us), then navigate the following path: Forms> Child Care> Legally-Exempt Provider Forms.

Within 30 days of the release of this LCM, districts must make corresponding changes in cover letters and local forms to instruct applicants/recipients of child care assistance to return the enrollment packet to the enrollment agency *serving the county where the child care site is located*.

Changes to the enrollment forms are described below.

- **OCFS-LDSS-4699, Enrollment Form for Provider of Legally-Exempt Family Child Care and Legally-Exempt In-Home Child Care**, and the **OCFS-LDSS-4700, Enrollment Form for Provider of Legally-Exempt Group Child Care**, have been reformatted for ease of completion and data entry.

- **OCFS-LDSS-4699.1, Employment of Minors Form (Rev.9/2010)**, Attachment F, and **OCFS-LDSS 4699.1A, Employment of Minors, Information (Rev. 9/2010)**, Attachment G, have been updated to address the exception inherent in the New York State Labor Law (NYSLL) pertaining to minors who are providing legally-exempt in-home child care. Detailed information is available in **OCFS-LDSS 4699.1A, Employment of Minors, Information (Rev. 9/2010)**.

- **OCFS-LDSS-4699.2A, Parental Responsibilities When Employing a Legally-Exempt In-Home Child Care Provider** was updated and is included as Attachment H.

- **OCFS-LDSS-4699.4, Parental Acknowledgment**, has been discontinued and replaced by three forms specific to the safety issue being acknowledged by the parent:
  - **OCFS-LDSS-4915, History of Criminal Convictions and Parental Acknowledgment**,  
  - **OCFS-LDSS-4916, History of Day Care Enforcement and Parental Acknowledgment**, and  
  - **OCFS-LDSS-4917, History of Termination of Parental Rights and/or Court–Ordered Article 10 Removal and Parental Acknowledgment**.

They are included as Attachments I, J and K, respectively.
Table One—Enrollment Forms and Required Attachments with Revision Dates

<table>
<thead>
<tr>
<th>Form Number and Name</th>
<th>Revision Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>OCFS-LDSS-4699, Enrollment Form for Provider of Legally-Exempt Family Child Care</td>
<td>6/2011</td>
</tr>
<tr>
<td>and Legally-Exempt In-Home Child Care</td>
<td></td>
</tr>
<tr>
<td>OCFS-LDSS-4700, Enrollment Form for Provider of Legally-Exempt Group Child Care</td>
<td>6/2011</td>
</tr>
<tr>
<td>OCFS-LDSS-4699.1, Employment of Minors Form</td>
<td>9/2010</td>
</tr>
<tr>
<td>OCFS-LDSS-4699.1A, Employment of Minors, Information</td>
<td>9/2010</td>
</tr>
<tr>
<td>OCFS-LDSS-4699.2, Legally-Exempt In-Home Child Care Provider Agreement Form</td>
<td>7/2006</td>
</tr>
<tr>
<td>OCFS-LDSS-4699.2A, Parental Responsibilities When Employing a Legally-Exempt In-Home</td>
<td>8/2010</td>
</tr>
<tr>
<td>Child Care Provider</td>
<td></td>
</tr>
<tr>
<td>OCFS-LDSS-4699.3, Legally-Exempt Provider Training Record Form</td>
<td>7/2006</td>
</tr>
<tr>
<td>OCFS-LDSS-4916, History of Day Care Enforcement and Parental Acknowledgment</td>
<td>New in 7/2010</td>
</tr>
<tr>
<td>OCFS-LDSS-4917, History of Termination of Parental Rights and/or Court–Ordered Article 10</td>
<td>New in 7/2010</td>
</tr>
<tr>
<td>Removal and Parental Acknowledgment</td>
<td></td>
</tr>
</tbody>
</table>

With the exception of OCFS-LDSS-4700, Enrollment Form for Provider of Legally-Exempt Group Child Care, Spanish versions of the above forms are available online.

New Form to Standardize Districts’ Notifications to Enrollment Agencies

The new OCFS-2114 (7/2011), District Notification To Legally-Exempt Caregiver Enrollment Agency, provides a standard form for districts to use in informing enrollment agencies of subsidy case decisions which may impact the provider’s eligibility and enrollment status as an LECCP. The district must inform the enrollment agency, in writing, of the following determinations or results pertaining to a legally-exempt child care provider and relevant changes to the affiliated child care subsidy case:

1. The results of the local child welfare database check required at enrollment and re-enrollment. Per 18 NYCRR 415.4(f)(8)(ii), the district where the legally-exempt in-home or family child care provider resides must, within 15 days of the receipt of the request for a check of the local Child Welfare Database Check at initial enrollment and re-enrollment, conduct a check of the district’s local Child Welfare Database, and inform the enrollment agency whether the LECCP:

   - Does or does not have a history of termination of parental rights under SSL 384-b, and
   - Does or does not have a history of court-ordered removal/placement of a child under Family Court Act Article 10.

Note that due to the highly confidential nature of the child welfare database, districts must release to the enrollment agency only that information which is specifically allowed by regulation and/or law. The district must assign responsibility for searching the database only to employees of the district who understand the confidentiality issues pertaining to foster care and adoption information.
Additionally, sharing indicated or unfounded reports in the Statewide Central Register of Child Abuse and Maltreatment with the enrollment agency is prohibited.

2. The results of the district’s determination of compliance with any OCFS-approved additional local standard for legally-exempt child care enrollment. Per 18 NYCRR 415.4(g), to the extent that any district has established additional standards for LECCPs, the local district must evaluate the LECCPs’ compliance with state-approved additional local standard(s) for enrollment set forth in the district’s Child and Family Services Plan. For all additional standards that are evaluated during the initial enrollment or annual re-enrollment process, the district must inform the enrollment agency whether the requirement(s) has been met or has not been met within 25 days of the receipt of the notification.

3. The results of the district’s review of extenuating circumstances pertaining to child welfare history, within 60 days of the receipt of the request for the review. The results must include whether the district has:
   - Granted an exception to the presumption against enrollment, because the provider has demonstrated to the district’s satisfaction that enrollment will not jeopardize the health, safety or welfare of children in the provider’s care, thus allowing the provider to be considered for enrollment; or,
   - Denied an exception to the presumption against enrollment, thus precluding the provider from enrollment.

4. The district’s determination that the LECCP is not eligible to provide care for a specific family, per 18 NYCRR,
   - 415.1(l), because the provider is an adult member of this family’s Child Care Services Unit who is not a sibling to the child(ren).
   - 415.1 (g)(6) and (7) and 415.4(c)(1)(i), because the recipient may not choose an LECCP when Title XX funding is being used to pay for child care services.
   - 415.4(c)(1)(ii), the district has disapproved a provider chosen by recipient in a preventive or protective services case because the district has reason to believe it would be contrary to the health, safety or welfare of the child to receive child care services from the provider.

5. In accordance with SSL 410-x (7),
   - The district has suspended a legally-exempt child care provider’s eligibility to care for all subsidized children, while the provider is under investigation for child abuse or maltreatment; or,
   - The district’s suspension of eligibility to provide subsidized child care for an LECCP has ended.

6. If applicable, that the district has disqualified an enrolled provider from receiving payment under the child care subsidy program per 18 NYCRR 415.4(h). The notification must include the disqualification period start date, and, if applicable, the disqualification period end date.

7. If applicable, that the district has reason to believe an enrolled or enrolling LECCP is violating health and safety regulations pertaining to subsidized legally-exempt child care and is making a complaint to the enrollment agency.
8. A child care subsidy case decision or change which impacts the provider’s enrollment:

- The approval date and child care subsidy start date for a parent’s subsidy case,
- Disapproval or closing of the parent’s case,
- When a parent with subsidy stops or begins using the LECCP, and/or
- When a parent reports a change in the location where child care is given.

**District Suspension of Legally-Exempt Child Care Provider Eligibility**

Districts may elect to suspend the eligibility of LECCPs who are under investigation for child abuse or maltreatment, in accordance with SSL 410-x (7). To the extent a district elects this option, the district must develop and implement a local policy to guide decision-making. The policy must:

1. Identify which modalities of legally-exempt child care will be included:

   - Legally-exempt in-home child care,
   - Legally-exempt family child care,
   - Legally-exempt group providers operating under the auspices of another government or tribal agency, and/or
   - Legally-exempt group providers not required to operate under the auspices of another government or tribal agency.

2. Specify whether the suspension of eligibility will be applied to all LECCPs with the modality identified in step number one; or, if not, identify the risk or safety related criteria that will be used to determine which providers in the designated modalities will have their eligibility to provide subsidized child care suspended while a CPS report is under investigation.

3. Specify how the population of enrolled or enrolling legally-exempt child care providers specified in steps one and two, who are under investigation for child abuse or maltreatment, will be identified by the district and which district staff will be responsible for informing the enrollment agency of the beginning and ending of the suspension of eligibility for child care subsidy.

4. The suspension start date can be no earlier than the date the provider is notified, in writing, of the suspension of eligibility.

5. State that the following parties will be informed, in writing, by the district of the suspension of the child care provider’s eligibility to provide subsidized child care:

   - The enrollment agency responsible for the LECCP enrollment. The district must use the OCFS-2114 (9/2011), District Notification To Legally-Exempt Caregiver Enrollment Agency. **The correspondence must not disclose the existence of the CPS investigation.** Note that the enrollment agency must close the LECCP enrollment upon notification of a district “suspension” of the child care provider’s eligibility to provide subsidized child care.
   - The LECCP. The district must provide a contact person at the district who can explain the district’s decision to the LECCP. The letter from the district must also state that the suspension of the child care provider’s eligibility ends when the CPS investigation ends.
• The applicant/recipient of child care services. The district must use the OCFS-LDSS-4781, Notice of Intent to Change Child Care Benefits, to inform the applicant/recipient that payment for child care services rendered by the provider is suspended and the parent/caretaker should seek another provider. *The correspondence must not disclose the existence of the CPS investigation.*

6. The enrollment agency will be informed, in writing, by the district when the district’s suspension of eligibility to provide subsidized child care for an LECCP has ended.

V. Contacts:

If you have questions regarding information contained in this LCM, please contact Ann Haller of the OCFS Division of Child Care Services, Child Care Subsidy Unit, at 518 408-0759, or via E-mail at Ann.Haller@ocfs.state.ny.us.

If you have questions regarding access to CCFS, permissions in CCFS, or changes to your district network which may impact E-mail or CCFS, please contact Shane Stone, at 518 473-0486, or via E-mail at Shane.Stone@ocfs.state.ny.us.

If you have problems with CCFS, please contact the Help Desk at 1-800-697-1323.

OCFS forms are available on the OCFS intranet website, [http://ocfs.state.nyenet/](http://ocfs.state.nyenet/) and the OCFS internet website, [http://www.ocfs.state.ny.us/main/forms/day_care/#dss](http://www.ocfs.state.ny.us/main/forms/day_care/#dss).

/s/ Janice M. Molnar

Issued By:
Janice M. Molnar, PhD
Deputy Commissioner
Division of Child Care Services
ENROLLMENT FORM FOR PROVIDER OF LEGALLY-EXEMPT
FAMILY CHILD CARE AND LEGALLY-EXEMPT IN-HOME CHILD CARE

Child Care providers who are not required by NYS law to be licensed or registered to operate a day care program use this form to enroll with a legally-exempt caregiver enrollment agency to provide subsidized child care.

Instructions: Please use black/blue pen.
- Provider: Complete the “Child Care Provider Section” of this form.
- Parent/caretaker: Complete the “Parent Information Section” of this form.
- The provider and parent/caretaker walk though and inspect the site, review sections of the form, then sign and date where indicated.
- Submit the completed form to the enrollment agency serving the location where the child care is being provided.

I. CHILD CARE PROVIDER SECTION

A. CHILD CARE PROVIDER AND PROGRAM

1. Child Care Provider Name:
   Mr.  Mrs.  Ms.
   Last  First  MI  Suffix

   Other names known by: Maiden, married, aliases, etc.

2. Identifying and Contact Information:
   Enrollment Number:  Site Phone: (   )  □ Listed  □ Unlisted
   (If Applicable)
   Date of Birth: / / (mm/dd/yyyy)
   Home Phone: (   )  □ Listed  □ Unlisted
   Gender (M or F):
   Cell Phone: (   )

   Social Security # 1:  E-Mail Address 2: □ No E-Mail Address

3. Child Care Location: Give address where child care is provided.
   House Number  Street
   Address Line 2  Apt.
   City  State  Zip  County

4. Home Address: Is your home address the same as the child care location given above?
   □ Yes.  □ No. If No, give address below.
   House Number  Street
   Address Line 2  Apt.
   City  State  Zip  County

(For Enrollment Agency Use)  (For Local District Use)
Received Date: ____________  Parent’s Case No.: _________________________
Complete Date: ____________  Type: □ Local
LSSD Office/Unit/Wkr. No.: / /

1 The social security number is required when the local social services district issues child care subsidy payments directly to a child care provider. Failure to provide the social security number may delay payment. The social security number of provider is optional when a local social services district issues child care subsidy checks to the subsidy recipient (parent/caretaker). If the social security number is provided, it may be used by federal, State and local agencies for federal reporting, to prevent the duplication of services and to prevent fraud.
2 The E-mail address if given may be used by the enrollment agency to contact you.
5. **Mailing Address:** Is your mailing address the same as the child care location or home address given above?
   - [ ] Yes, same as child care location.
   - [ ] Yes, same as home address.
   - [x] No. If No, give address below.

<table>
<thead>
<tr>
<th>House Number</th>
<th>Street</th>
<th>Apt.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

   | Address Line 2 | Floor |
   |               |       |

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip</th>
<th>County</th>
</tr>
</thead>
</table>

6. Were you previously enrolled as a legally-exempt child care provider?
   - [ ] Yes. If Yes, give year enrolled, ________, and county where you resided, ____________________.
   - [ ] No.

7. List below the Counties/Districts issuing subsidy payments for child care that you currently provide.

<table>
<thead>
<tr>
<th>District:</th>
<th>Local ID/Vendor Number if any:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

8. Do you read English?  [ ] Yes.  [ ] No. If No, what language do you read best?    ____________________.

9. Do you speak English?  [ ] Yes.  [ ] No. If No, what language do you speak best?    ____________________.

10. Does any other person provide child care at the SAME location you intend to provide child care?
   - [ ] Yes. Describe: ____________________________________________________________________
   - [ ] No.

**B. TYPE OF LEGALLY-EXEMPT CHILD CARE THAT YOU PROVIDE:**

1. Choose the statement which describes the child care services you provide. Check ☑️ A, B, or C. Provide additional information as indicated.
   - [ ] A) I am an “In-Home Child Care” Provider. I provide care in the child’s home and I care only for children who live in the home. *(Provider and parent/caretaker: Please read the OCFS-LDSS-4699.2A, then complete and ATTACH the OCFS-LDSS-4699.2, Agreement For Legally-Exempt In-Home Child Care form.)*
   - [ ] B) I am a “Family Child Care” Provider. I provide care in my own home, or another person’s home. I care for at least one child who does not live in the home where care is given. *(Choose ☑️ 1, 2, or 3 below, whichever describes your situation best.)*
     - [ ] 1) Relative Care—I am either the grandparent, great-grandparent, great-great-grandparent, aunt/uncle, great aunt/great uncle, brother/sister or first cousin of ALL the children in care;  OR
     - [ ] 2) I care for no more than 2 children (not counting my own children or any children older than 13 years); OR
     - [ ] 3) I care for 3 or more children. However, I never have more than 2 children in care at the same time for more than three hours a day.
   - [ ] C) Other—I provide care other than choices A or B above. Explain: ____________________________

   *(You cannot be enrolled until you prove that you are legally-exempt from the licensing and registering requirements).*

2. Are you less than 18 years of age?
   - [ ] Yes. You must comply with the NYS Department of Labor’s requirements. *Provide the documents listed below to show you meet the requirements. Check ☑️ to show item is attached.*
     - [ ] I have ATTACHED the OCFS-LDSS-4699.1, Employment of Minors Form (Rev. 2010).
     - [ ] I have ATTACHED a copy of my working papers which are required if I am a minor providing Family Child Care. *(Not required for “In-Home” child care providers.)*
   - [ ] No.
C. **People Who May Be Present At Child Care Location**

People who are present at the child care location when child care is provided and may have contact with child(ren) you care for must have background checks as required by NYS health and safety regulations. These checks apply to the following people:

- An employee—a person you hire to work at the child care location.
- A volunteer—a person who is sometimes at the child care location and who may have contact with the children you provide care for.
- For family child care, a household member—a person who lives in the home where care is provided.

**NOTE:** The enrolled child care provider is the person authorized to care for the subsidized child(ren). The enrolled child care provider must be present and supervising at all times. Employees, volunteers and household members **CANNOT** substitute for the provider in caring for the child(ren) and cannot be left alone with the child(ren).

### 1. Do you have any employees or volunteers, as described above?

- [ ] No.
- [ ] Yes.

If yes, list all in Table 1, below and attach more sheets as necessary.

#### TABLE 1-CHILD CARE PROVIDER’S VOLUNTEERS AND EMPLOYEES

<table>
<thead>
<tr>
<th>NAME (INCLUDE AND SPECIFY MAIDEN NAME AND ANY OTHER ALIAS NAMES BY WHICH VOLUNTEERS AND EMPLOYEES MAY BE KNOWN)</th>
<th>ROLE: EMPLOYEE, OR VOLUNTEER</th>
<th>GENDER (M OR F)</th>
<th>DATE OF BIRTH</th>
</tr>
</thead>
<tbody>
<tr>
<td>A) Last First MI Suffix</td>
<td></td>
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<td>/ /</td>
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<tr>
<td>B) Last First MI Suffix</td>
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<tr>
<td>C) Last First MI Suffix</td>
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<td>D) Last First MI Suffix</td>
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<tr>
<td>E) Last First MI Suffix</td>
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<tr>
<td>F) Last First MI Suffix</td>
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<td></td>
<td>/ /</td>
</tr>
</tbody>
</table>

### 2. Only “Family Child Care” providers must answer this following question:

Are there any adults, age 18 and older, (not including the child care provider) living in the residence where child care is given? This includes: family members, non-family members, renters sharing the home, apartment mates, adults placed in your care, and any other adult person who lives in the residence where child care is provided.

- [ ] No.
- [ ] Yes.

Identify in Table 2 below everyone who lives in the residence where care is provided. Attach more sheets as necessary.

#### TABLE 2-HOUSEHOLD MEMBERS AGE 18 AND OVER, LIVING AT CHILD CARE SITE

<table>
<thead>
<tr>
<th>NAME (INCLUDE AND SPECIFY MAIDEN NAME AND ANY OTHER ALIAS NAMES BY WHICH HOUSEHOLD MEMBERS MAY BE KNOWN)</th>
<th>GENDER (M OR F)</th>
<th>DATE OF BIRTH</th>
</tr>
</thead>
<tbody>
<tr>
<td>A) Last First MI Suffix</td>
<td></td>
<td>/ /</td>
</tr>
<tr>
<td>B) Last First MI Suffix</td>
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<td>C) Last First MI Suffix</td>
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<td>D) Last First MI Suffix</td>
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<td>E) Last First MI Suffix</td>
<td></td>
<td>/ /</td>
</tr>
<tr>
<td>F) Last First MI Suffix</td>
<td></td>
<td>/ /</td>
</tr>
</tbody>
</table>
D. OTHER QUALIFICATIONS & PROGRAM CHARACTERISTICS

1. PROVIDER’S ELIGIBILITY FOR ENHANCED RATE BASED ON TRAINING

Have you completed in the past 12 months, 10 hours of training aimed at improving the quality of the care you provide?

☐ Yes. If Yes, you may be eligible to receive an enhanced rate. ATTACH the OCFS-LDSS-4699.3- Legally-Exempt Child Care Provider Training Record and your training certificates.

☐ No.

2. FEDERAL FOOD PROGRAM ASSISTANCE

The Child and Adult Care Food Program (CACFP) helps Family Child Care programs to pay for meals and snacks served to child(ren) in care. Are you currently participating in CACFP?

☐ A) No. If you want information about CACFP call: 1(800) 942-3858.

☐ B) Yes. If “yes”, provide information about your participation in CACFP and ATTACH proof of your participation dated within the past 12 months below:

1) Sponsor Agency Name: _____________________________________________

2) Sponsoring Agency ID Number (if known): _______________________________________

3) Your CACFP Provider Number:________________________________________

4) Agreement Number: ________________________________________________

5) Proof of Participation: Type of Proof: (Check ☐ below to show proof attached)

   Date on Proof:_____________

   ☐ CACFP Claim Reimbursement Stub
   ☐ CACFP Monitoring Checklist (DOH-4118)
   ☐ CACFP Continuous Application and Agreement (DOH-3705)

3. AMOUNT YOU CHARGE

Do you charge parents receiving subsidy the same amount that you charge parents for non-subsidy child(ren) of the same age and similar care?

☐ A) Yes.

☐ B) No. If, No choose the statement below which describes the amount you charge.

   ☐ 1) I charge parents receiving subsidy less than I charge other parents.

   ☐ 2) I charge parents receiving subsidy more than I charge other parents.

4. ADMINISTRATION OF MEDICATION

NYS Law restricts the right to administer medication other than over-the-counter topical ointments, sunscreen and topically applied insect repellent to specific medical professionals who are authorized by NYS to administer medication. Some individuals are exempt from this requirement based on their relationship to the child, family, or household and are permitted to administer medications, including:

- The child’s parent/caretaker, step-parent, legal custodian, legal guardian, or member of the child’s household,
- A child care provider employed by the parent/caretaker to provide child care in the child’s home,
- Family members who are related within the 3rd degree of consanguinity to the child’s parent or step parent. This includes the child’s grandparent, great-grandparent, great-great grandparent, aunt/uncle (and spouse), great aunt/uncle (and spouse), first cousin (and spouse), and brother/sister.
- Child care providers who are trained and authorized by the Office of Children and Family Services (OCFS) under the Health Care Plan for Administration of Medication, approved by a qualified health care consultant, and who are:
  - Operating in compliance with the NYS regulation which includes receiving training on medication administration,
  - Authorized by the child’s parent/caretaker, step parent, legal guardian, or legal custodian to administer medication, and
  - Administering medication to subsidized children in care.

To receive OCFS authorization to administer medication, a child care provider must be at least 18 years of age and literate in the language in which the parental permissions and health care provider’s instructions will be given. Any person who is NOT AUTHORIZED by NYS Law or NOT EXEMPT from this legal requirement, may ONLY administer over-the-counter topical ointments, sunscreen and topical insect repellent. Examples of medication they MAY NOT ADMINISTER include, but are not limited to: Tylenol, Ritalin, insulin, antibiotics, and ear, eye, or nose drops.
A) Are you, your employees or volunteers LEGALLY PERMITTED to administer medication to child(ren) in subsidized care?

*Check ☑ all statements that apply to you. Provide all other information as it applies.*

☐ 1) **Yes.** I am RELATED within the 3rd degree by blood or marriage to the child(ren)’s parent or step-parent. Therefore, I am allowed to administer medication to the child(ren) following the health care provider’s instructions and when I have appropriate permission from the parent.

☐ I am grandparent of: ____________________________________________

☐ I am great-grandparent of: ________________________________________

☐ I am great-great-grandparent of: ________________________________

☐ I am aunt/uncle of (includes spouse) of: ______________________________

☐ I am great aunt/great uncle (includes spouse) of: _______________________

☐ I am first cousin (includes spouse) of: ________________________________

☐ I am brother/sister of: ____________________________________________

☐ 2) **Yes.** I am PROVIDING CARE IN THE HOME of the following child(ren): ______________________________________. Therefore, I am PERMITTED to administer medication to these children when I have appropriate permission from the parent and I am following the health care provider’s instructions.

☐ 3) **Yes.** I am a NYS medical professional AUTHORIZED BY NYS DEPARTMENT OF EDUCATION (NYSED) to administer medication. Therefore, I am allowed to administer medication to child(ren) in my care when there are appropriate permissions from the parent and when following the health care provider’s instructions.

a) My profession is *(check ☑ one):*

☐ Registered Nurse

☐ Nurse Practitioner

☐ Physician

☐ Physician Assistant

b) License number: ________________________________________________

☐ I have attached a copy of my current NYS professional medical license. *(Required).*

☐ 4) **Yes.** I HAVE a **Health Care Plan for the Administration of Medication** (OCFS-LDSS-7000) approved within the past 2 years. Therefore, the qualified medications administrant named below is AUTHORIZED BY OCFS to administer medication to subsidized children in my care according to the health care provider’s instructions and when there are appropriate permissions from the parent.

a) Plan approval date: ____________________________________________

☐ I have attached a copy of the **first page AND the approval page** of my Health Care Plan for the Administration of Medication (OCFS-LDSS-7000).

b) Name of the qualified Medications Administrant: ______________________

c) Health Care Consultant (HCC) name: ________________________________

d) Health Care Consultant Profession *(check ☑ one):*

☐ Registered Nurse

☐ Nurse Practitioner

☐ Physician

☐ Physician Assistant

e) License Number: ________________________________________________

☐ 5) **No.** None of the above permissions apply to me. I am not authorized by OCFS or NYSED. I understand I **cannot administer** medication to the child(ren) in care, except: **Over-the-counter topical ointments, sunscreen, and topically applied insect repellent.**

B) Are you interested in seeking authorization to administer medication to child(ren) in subsidized care?

☐ **Yes.** I want to learn how to start the process. Please send me the OCFS-LDSS-7007, **Obtaining Authorization to Administer Medication to Children in Legally-Exempt Care.**

☐ **No.** I will not be seeking authorization to administer medication at this time.

C) I agree I will administer medication in compliance with NYS Law and only to the extent that I am permitted by NYS Law which I have indicated by my choice on this page above.

☐ **Yes.** ☐ **No.**

D) If I have employees or volunteers, I will make sure that each of my employees and volunteers administers medication in compliance with NYS Law and only to the extent permitted by NYS Law.

☐ **Yes.** ☐ **No.**
5. **HOURS OF OPERATION**

What hours do you generally provide care? *Check all that apply.*

- [ ] Mornings
- [x] Afternoons
- [ ] Evenings
- [ ] Overnight
- [ ] Back-Up Only
- [ ] Before School
- [ ] After School
- [ ] Weekends
- [ ] Saturday
- [ ] Sunday
- [ ] Weekdays
- [ ] Monday
- [ ] Tuesday
- [ ] Wednesday
- [ ] Thursday
- [ ] Friday

E. **VERIFICATION OF LEGALLY EXEMPT STATUS**

1. **CHILD CARE SCHEDULES**
   
   A) For each **subsidized child** you provide child care for or plan to provide care for, provide ALL the requested information.
   
   B) For each **non-subsidized child** provide the same information, except DO NOT provide the Child's LAST name.

<table>
<thead>
<tr>
<th>Child Information and Child Care Schedules</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child Name:</td>
</tr>
<tr>
<td>Child Age:</td>
</tr>
<tr>
<td>Parent Name:</td>
</tr>
<tr>
<td>Provider's Relationship To The Child:</td>
</tr>
<tr>
<td>Subsidy Case? [ ] Yes [x] No</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Schedule of Child Care</th>
</tr>
</thead>
<tbody>
<tr>
<td>Drop Off</td>
</tr>
<tr>
<td>----------</td>
</tr>
<tr>
<td>Monday</td>
</tr>
<tr>
<td>PM PM</td>
</tr>
<tr>
<td>Tuesday</td>
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<tr>
<td>PM PM</td>
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<tr>
<td>Wednesday</td>
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<tr>
<td>PM PM</td>
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<td>Saturday</td>
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<tr>
<td>PM PM</td>
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<td>Sunday</td>
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<td>PM PM</td>
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<table>
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<th>Total Hours per Week</th>
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<tbody>
<tr>
<td>Total Hours per Week</td>
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<tr>
<td>Total Hours per Week</td>
</tr>
</tbody>
</table>
2. CHILD(REN) IN THE PROVIDER’S CARE
A) How many of your own child(ren) do you care for at this child care location during child care hours?
   Give numbers below. Do not leave spaces blank. Write “zero,” if applicable.
   1) Age newborn through 4 years: _______.
   2) Age 5 through 12 years old: _______.
B) Are you caring for any children, other than your own, who are NOT receiving child care subsidy funds?
   1) ☐ Yes. If yes, indicate the number of non-subsidized children, other than your own, below.
      a) Number of relative non-subsidized children: _______.
      b) Number of non-relative non-subsidized children: _______.
   Note: All non-subsidized children in care MUST be listed on the preceding schedule page.
   2) ☐ No.
C) Have you started providing child care for all of the children whose schedules you listed above?
   1) ☐ Yes.
   2) ☐ No. If No, when care will begin? ___________________________________________________
   NOTE: Any changes in the number of children you care for, the hours you provide care and the location where you
   provide care may affect your eligibility as a legally-exempt child care provider and/or require that you become licensed
   or registered to operate a day care program. Such changes must be reported to the enrollment agency immediately.

F. HEALTH AND SAFETY CHECKLIST
The provider and parent/caretaker inspect the child care location and complete this section together.

I meet and agree to continue to meet the basic health and safety requirements listed below.
Check ☑ an answer for each item below.

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>The provider meets the following basic health and safety requirements before caring for children:</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐</td>
<td>☐</td>
<td>☐ 1. The provider and all children have two separate &amp; remote ways to leave the building in an emergency.</td>
</tr>
<tr>
<td>☐</td>
<td>☐</td>
<td>☐ 2. The rooms for children at my child care location are well-heated, well-lighted and well-ventilated.</td>
</tr>
<tr>
<td>☐</td>
<td>☐</td>
<td>☐ 3. My child care location is free of unsafe areas (such as swimming pools, open drainage ditches, wells, holes, wood or coal burning stoves, fireplaces, and gas space heaters). If there are unsafe areas, sturdy barriers are in place around the areas that keep the child(ren) from getting to them.</td>
</tr>
<tr>
<td>☐</td>
<td>☐</td>
<td>☐ 4. If child care is provided above the first floor, there are barriers or locks on the windows so the child(ren) cannot fall out.</td>
</tr>
<tr>
<td>☐</td>
<td>☐</td>
<td>☐ 5. The water supply at my child care location is safe. I have working toilets. There is hot and cold running water all the time.</td>
</tr>
<tr>
<td>☐</td>
<td>☐</td>
<td>☐ 6. I, all employees, and volunteers who are likely to have regular contact with the child(ren) are physically, emotionally and mentally able to provide child care.</td>
</tr>
<tr>
<td>☐</td>
<td>☐</td>
<td>☐ 7. I, all employees, and volunteers who are likely to have regular contact with the child(ren) are free from any communicable diseases that pose a risk to the health and safety of the child(ren) in care. If I, any employee, or volunteer who is likely to have regular contact with the child(ren) has a communicable disease, I must have a statement from such person’s health care provider that indicates that the presence of a communicable disease does not pose a risk to the health and safety of the child(ren) in care. ☐ I have ATTACHED a doctor’s statement, if I, any employee or volunteer who is likely to have regular contact with the child(ren) has a communicable disease and that such disease does not pose a risk to the health and safety of the child(ren) in care.</td>
</tr>
</tbody>
</table>
8. My child care location is free of any dangerous or unsafe conditions that could hurt a child(ren). This includes but is not limited to:
   - Knives and other sharp objects are out of the reach of child(ren).
   - Small rugs, runners, and electrical cords are held in place so a child won’t trip.
   - Electrical cords do not run under furniture or rugs and are out of the reach of small children.
   - Extension cords are not overloaded.
   - Any guns and other firearms are unloaded and stored in a locked drawer or cabinet and the key is kept in a safe place. Ammunition is locked separately.
   - Cords to window blinds and shades are out of the reach of child(ren).
   - Hot liquids are out of the reach of children.
   - Small items that the child(ren) could choke on are out of the child(ren)'s reach.
   - Carbon monoxide detectors are installed where the child(ren) that I provide care for sleep or nap and on each story of the home where care is provided where a carbon monoxide source is located.

9. All matches, lighters, medicines, drugs, cleaning materials, detergents, aerosol cans, and other poisonous or toxic materials are stored in their original containers. Care is taken so that they do not come in contact with child(ren), where food is prepared, or otherwise may be a danger to the child(ren). I store all of these materials safely away from the child(ren).

10. I will give each child(ren) meals and snacks according to what the parent/caretaker and I have agreed.

11. I will refrigerate milk, formula and any other food that goes bad if not refrigerated.

12. I agree not to heat formula, breast milk and other food items for infants in a microwave oven.

13. I will always allow the custodial parent/caretaker or caretaker to have unlimited access to his/her child(ren) in care, to the program site while the child(ren) is in care, and to any written records concerning the child(ren).

14. I will hold fire/evacuation drills monthly with child(ren) during hours that the child(ren) are in care so that the child(ren) and I will know what to do in the case of an emergency.

15. I have a working telephone OR can get to one very quickly in an emergency. Emergency telephone numbers for the fire department, local or State police or sheriff’s department, poison control center and ambulance service are posted near the phone and are easy to see.

16. I will use protective caps, covers or permanently installed safety devices on all electrical outlets that a child(ren) could reach when I am caring for a child(ren) under 5 years old.

17. Paint and plaster are in good repair so that there is no danger of a child(ren) putting paint or plaster chips in their mouths or of it getting into food.

18. I have at least one operating smoke detector on each floor of my child care location. I will check regularly to make sure all detectors work.

19. I have a portable first aid kit at my child care location that is easy to get to in an emergency and my first aid supplies are kept in a clean container or cabinet away from child(ren). It is stocked to treat common childhood injuries and problems. I will always replace things in the first aid kit as soon as possible after something has been used or is too old to be used.

20. I have RECEIVED from the child(ren)'s parent/caretaker:
   - Signed proof from a doctor or other health care provider that: the child(ren) has received all of the immunizations appropriate for the child(ren)'s age; OR
   - Proof that one or more of the immunizations would harm the child(ren)'s health; OR
   - A statement saying that the child(ren) has not been immunized due to the parent/caretaker's religious beliefs.

21. The stairs, railings, porches and balconies are in good repair.

Only Family Child Care providers must answer question number 22 below.

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>The provider meets the following basic health and safety requirements before caring for the child(ren):</td>
<td></td>
</tr>
</tbody>
</table>

22. All persons living in the home where care is given are free of any communicable diseases. If any person living in the home does have a communicable disease, I must have a statement from the person’s health care provider that indicates that the presence of a communicable disease does not pose a risk to the health and safety of the child(ren) in care.

☐ I have attached a doctor’s statement, if any person living in home has a communicable disease and such disease does not pose a risk to the health and safety of the child(ren) in care.
G. PROVIDER BEHAVIORAL CONDITIONS

All child care providers must answer the questions below.

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>The provider meets and agrees to continue to meet the following basic health and safety requirements before caring for the child(ren):</td>
<td></td>
</tr>
<tr>
<td>☐ ☐ 1. I understand and agree that I will never use physical punishment or let others use physical punishment while child(ren) are in my care. Physical punishment means doing things directly to a child(ren)’s body to punish child, such as:</td>
<td></td>
</tr>
<tr>
<td>☐ Spanking, biting, slapping, shaking, twisting, or squeezing;</td>
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</tr>
<tr>
<td>☐ Making the child(ren) do physical exercises beyond what is normal;</td>
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</tr>
<tr>
<td>☐ Forcing the child(ren) to stay still for long periods of time;</td>
<td></td>
</tr>
<tr>
<td>☐ Making the child(ren) stay in positions that hurt the child or are bizarre;</td>
<td></td>
</tr>
<tr>
<td>☐ Bathing the child(ren) in unusually hot or cold water; and</td>
<td></td>
</tr>
<tr>
<td>☐ Forcing child(ren) to eat or have in child(ren)’s mouth soap, foods, hot spices or foreign substances.</td>
<td></td>
</tr>
<tr>
<td>☐ ☐ 2. I understand and agree that I will never use or be under the influence of alcohol or drugs while children are in care and will make sure that child(ren) being cared for do not have contact with people using drugs or alcohol.</td>
<td></td>
</tr>
<tr>
<td>☐ ☐ 3. I understand and agree that I will not smoke or allow smoking in indoor areas or other enclosed areas, such as cars or other vehicles, when child(ren) are present.</td>
<td></td>
</tr>
<tr>
<td>☐ ☐ 4. I understand and agree that I will never leave child(ren) alone or unsupervised.</td>
<td></td>
</tr>
<tr>
<td>☐ ☐ 5. I understand and agree that I will ALWAYS be present when the child(ren) are in the care of employees, volunteers and if care is provided in a home other than the child’s home, household members.</td>
<td></td>
</tr>
</tbody>
</table>

H. RELEVANT HISTORY - PEOPLE AT THE CHILD CARE LOCATION

1. PROVIDER ONLY

A) PROVIDER TERMINATION OF PARENTAL RIGHTS

I certify and attest that (check ☐ one):

1) ☐ I have never had my parental rights terminated under Social Services Law 384-b or equivalent legal authority.

2) ☐ I have had my parental rights terminated under Social Services Law 384-b or equivalent legal authority.

☐ I have ATTACHED the OCFS-LDSS-4917, History of Termination of Parental Rights and/or Court Ordered Article 10-Removal of a Child and Parental Acknowledgement form.

B) PROVIDER COURT ORDERED ARTICLE 10 REMOVAL

I certify and attest that (check ☐ one):

1) ☐ I have never had a child(ren) removed from my care by court order in a proceeding under Article 10 (child protective) of the Family Court Act.

2) ☐ I have had a child(ren) removed from my care by court order in a proceeding under Article 10 (child protective) of the Family Court Act.

☐ I have ATTACHED the OCFS-LDSS-4917, History of Termination of Parental Rights and/or Court Ordered Article 10-Removal of a Child and Parental Acknowledgement form.

C) PROVIDER DAY CARE ENFORCEMENT

Note: A child “day care” program includes licensed or registered day care centers, family day care homes, group family day care homes, small day care centers and/or school age child care programs.

1) I certify and attest that (check ☐ one):

☐ I have had an application for a license or registration to operate a child day care program denied.

☐ I have not had an application for a license or registration to operate a child day care program denied.

2) I certify and attest that (check ☐ one):

☐ I have had a license or registration to operate a child day care program revoked or suspended.

☐ I have not had a license or registration to operate a child day care program revoked or suspended.

3) If you have been denied a license or registration to operate a child day care program, or if you have had a license or registration to operate a child day care program revoked or suspended, complete the following:

a) Program Name and Location: ________________________________

4 If you need a copy of this form, please contact your local social services district or your legally-exempt caregiver enrollment agency.
b) ☐ I have ATTACHED the OCFS-LDSS-4916, History of Day Care Enforcement and Parental Acknowledgement.

2. PROVIDER, EMPLOYEES, VOLUNTEERS, AND HOUSEHOLD MEMBERS

A) CRIMINAL HISTORY

1) I have listed on subsection I. C of this form: ALL employees, volunteers, and if I provide care in a home other than the child’s home, all of the household members, 18 years of age or older who are likely to have regular contact with the child(ren) in care.

☐ Yes.
☐ No.

2) If I provide care in a home other than the child(ren)’s home, I also have listed all household members on subsection I. C of this form.

3) I certify that I have asked the following people if they have been convicted of a crime:
   • Each person living in the home (other than the child(ren)’s own home) who is age 18 or over,
   • Each volunteer who is likely to have regular contact with child(ren) in care, and
   • Each employee.

☐ Yes.
☐ No.

4) Have you, your employee, or your volunteer ever been convicted of a crime in New York State or any other place?

☐ Yes. Give name(s) of person(s) convicted ____________________________.

☐ I have ATTACHED a completed OCFS-LDSS-4915, History of Criminal Convictions and Parental Acknowledgement for each person with a criminal history.

☐ No.

5) For provider type of Family Child Care only: has any person living in the home where care is given and who is 18 years of age or older been convicted of a crime in New York State or any other place?

☐ Yes. Give name(s) of person(s) convicted: ____________________________.

☐ I have ATTACHED a completed OCFS-LDSS-4915, History of Criminal Convictions and Parental Acknowledgement for each household member with a criminal history.

☐ No.

B) INDICATED REPORTS OF CHILD ABUSE AND MALTREATMENT

I have asked ALL employees, volunteers, and individuals who may be helping to care for or who have regular contact with the child(ren), and, if I provide care in a home other than the child(ren)’s home, all household members 18 years of age or older, if they have been the subject of an indicated report of child abuse or maltreatment. I have informed the parent/caretaker whether I or any of these individuals have been the subject of any indicated reports of child abuse or maltreatment. When an indication of child abuse or maltreatment exists, I have given the parent/caretaker, in writing, true and accurate information, including:

• a description of the incident(s), and
• the date of the indication(s), and
• any other relevant information regarding the indication(s).

☐ Yes.
☐ No.

I. PROVIDER AGREEMENTS AND CERTIFICATIONS

1. SUBMITTING UPDATES AND CHANGES OF ENROLLMENT INFORMATION

☒ I will immediately submit a new enrollment form to the enrollment agency if I start providing child care at a child care location different from the one given on this form.

☒ I will inform the enrollment agency immediately if there are changes in:
   • my contact information,
   • the child(ren) I care for, or, the hours that I provide care,
   • the people who have contact with the child(ren) in my care,
   • any information provided on the enrollment form or changes to the attachments.

☒ I will inform the enrollment agency immediately when:
   • Any person 18 years or older moves into the household where “Family Child Care” is provided or stays there for more than a few days (Family Child Care only).
• Any child(ren) living in the household where “Family Child Care” is provided, turns 18. (Family Child Care only)
• I hire or receive help caring for the child(ren).

2. HEALTH AND SAFETY REQUIREMENTS

☑ I understand that I cannot be enrolled and payment cannot be made until all items marked “No” on the Health and Safety Checklist and Provider Behavioral Conditions Checklist have been corrected.
☑ I will continue to meet all the basic health and safety requirements listed on the checklists and
  • The parent/caretaker and I have inspected the home and completed the Health and Safety Checklist and Provider Behavioral Conditions Checklists together.
  • I will notify and provide documentation to the enrollment agency when any item on the checklists has been corrected or changed.

3. INFORMATION SHARING AND DATABASE CHECKS

☑ I authorize the enrollment agency and the Child and Adult Care Food Program (CACFP) to exchange information regarding my child care enrollment status and my participation in the CACFP.
☑ I understand the enrollment agency and the local social services district will exchange information regarding my child care enrollment status.
☑ I understand that the local social services district will check its child welfare database for my history of any court ordered removal of a child under Family Court Act (FCA) Article 10 and any termination of parental rights.
☑ I understand that the enrollment agency will check the New York State Sex Offender Registry to determine if I, any volunteer who is likely to have regular contact with child(ren) in care, any employee, and for the legally-exempt family child care provider, any person living in the home where child care is provided, age 18 years or older is listed on the Sex Offender Registry.
☑ I understand that the enrollment agency will check the New York State Child Care Facility System to determine whether I have ever been denied a child day care license or registration or had a child day care license or registration suspended or revoked.

4. ELIGIBILITY AND PAYMENT

☑ I understand I cannot be paid as a legally-exempt child care provider if I am the child(ren)’s parent, stepparent, adoptive parent, legal guardian or other person legally responsible for that child(ren), or, if I live in the same household and have a child(ren) in common with the parent.
☑ I agree to collect the family share (fee) if instructed to do so by the local social services district. I will immediately notify the local social services district if the parent/caretaker fails to pay the required family share.
☑ I agree to provide accurate attendance records in a timely manner, as required by the local social services district.
☑ I understand that I will not be paid by the local social services district for any child care that I provide to a child(ren) receiving a child care subsidy while I am deemed an ineligible provider by the enrollment agency.
☑ I understand that I must be enrolled with the enrollment agency before any payment may be made.
☑ I understand that I may not be eligible to provide child care AND that the local social services district may not be able to pay me when:
  • I have a history of Article 10 (child protective) removal of a child by family court order, or
  • I have a history of termination of parental rights, or
  • I have a history of denial, revocation and/or suspension of a license or registration to operate a child day care program or
  • I, any volunteer who is likely to have regular contact with the child(ren), any employee, or, for family child care, any person age 18 years or older living in the home has been convicted of a crime.
☑ I understand I am not eligible to provide child care if I, any volunteer who is likely to have regular contact with the child(ren), any employee, or person living in the home (other than the child(ren)’s home) age 18 years or older has been convicted of a crime against a child or is listed on the Sex Offender Registry.
☑ I understand that if the enrollment agency determines I cannot be enrolled, then the local social services district cannot issue payment for care that I have provided. The parent/caretaker has the right and responsibility to decide whether he/she wants to use my child care services. If the parent/caretaker chooses to use my child care services when I cannot be enrolled, the parent/caretaker is responsible to pay me for the child care.
5. **Other Agreements**

- I understand and agree to allow representatives of the enrollment agency, the local social services district and the State of New York access to the premises where subsidized child care is provided to confirm that information on my enrollment form and/or on attendance forms is true and accurate and that child care services are being provided as listed on these forms. I understand that if I do not allow such access, then I will be considered an ineligible provider, my enrollment will be terminated and I will not be paid by the local social services district.

- I understand that if I am denied enrollment I may request that the enrollment agency review any extenuating circumstances to determine if an exception could be made to allow me to provide child care. If I request an exception, I must provide all documents or references required by the enrollment agency.

- I understand and agree to meet all of the conditions stated on this form for as long as I am providing child care. I understand that I am required to inform the enrollment agency and the parent/caretaker if there is a change in the information stated on the enrollment form.

6. **Provider Certification**

By signing this form I certify to the best of my knowledge that:

- I understand and agree to continue to meet all of the conditions stated above.
- I have reviewed the “Parent Information Section” of this form.
- I understand the decision to enroll me is based on the facts provided and attested to on the enrollment form. Providing false information or deliberately concealing information may result in an inaccurate determination of my eligibility to provide subsidized child care, and/or a denial or termination of enrollment. If I provide child care services while enrolled under false pretenses, or while I am an ineligible child care provider, the Local Social Services District may refuse to issue child care subsidy payments, terminate child care subsidy payments, take legal action against me or the parent/caretaker and I may be required to repay any money I receive for such services.
- Under the penalty of perjury, I agree that to the best of my knowledge all statements made on this enrollment form and any attachments to it are true and accurate.

<table>
<thead>
<tr>
<th>PROVIDER SIGNATURE:</th>
<th>DATE:</th>
</tr>
</thead>
<tbody>
<tr>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>
II. PARENT INFORMATION SECTION

The parent/caretaker receiving or applying for child care subsidy must complete this section AND review the “Child Care Provider” Section.

A. PARENT/CARETAKER INFORMATION

1. Parent/Caretaker’s Name:

   Last  First  MI  Suffix

   Other names known by:     Maiden, married, aliases, etc.

2. Identifying and Contact Information:

   Date of Birth:          /     /            Home Phone: (        )

   Work Phone: (         )

   Cell Phone: (         )

   E-Mail Address:

   □ No E-Mail Address

3. Do you read English?  □ Yes.  □ No. If No, what languages do you read best?   ___________________.

4. Do you speak English?  □ Yes.  □ No. If No, what languages do you speak best?   ___________________.

5. Is the child care provided in your home?  □ Yes.  □ No.

6. Give your home address below

   Home Address:

   House Number  Street

   Address Line 2

   City  State  Zip

7. Mailing Address: Is your mailing address the same as your home address?  □ Yes.  □ No. If your mailing address is different from your home address please give your mailing address below.

   House Number  Street

   Address Line 2

   City  State  Zip

8. Provide information about your Child Care Subsidy case:

   Subsidy Paying County:

   Temporary Assistance No.:

   Subsidy Case Number:

   Parent’s CIN Number:

---

5 Caretaker means the child’s parent, legal guardian, caretaker relative or any other person with whom a child lives who has assumed responsibility for the day-to-day care and custody of the child.

6 The e-mail address if given may be used by the enrollment agency to contact you.

7 The temporary assistance number, subsidy case number and parent’s CIN (client identification number) are optional. If provided, they will be used to facilitate information sharing with the local social services district regarding your eligibility and payment for child care.
B. YOUR CHILD(REN) IN THE PROVIDER’S CARE

1. LIST YOUR CHILD(REN) THAT THE PROVIDER CARES FOR
   Add additional sheets if necessary.

A) Child’s Name: ___________________________  Date of Birth: / / (mm/dd/yyyy)
   Last   First
   Provider’s Relationship to Child: ___________________________
   Child’s CIN8: ___________________________

B) Child’s Name: ___________________________  Date of Birth: / / (mm/dd/yyyy)
   Last   First
   Provider’s Relationship to Child: ___________________________
   Child’s CIN: ___________________________

C) Child’s Name: ___________________________  Date of Birth: / / (mm/dd/yyyy)
   Last   First
   Provider’s Relationship to Child: ___________________________
   Child’s CIN: ___________________________

D) Child’s Name: ___________________________  Date of Birth: / / (mm/dd/yyyy)
   Last   First
   Provider’s Relationship to Child: ___________________________
   Child’s CIN: ___________________________

2. MY CHILD(REN)’S MEDICATION NEEDS

I understand that child care providers cannot administer medication to the child(ren) except as follows:

- Any child care provider may administer only over-the-counter topical ointments, insect repellent, and sunscreen with the parent’s permission.
- When the child care provider provides care in the child(ren)’s home, the provider may administer over-the-counter medicine and prescription medication with the permission of the parent and following physician’s instructions.
- When the child care provider is related to the child(ren)’s parent or stepparent within the 3rd degree of consanguinity (blood or marriage), the provider may administer over-the-counter medicine and prescription medication with the permission of the parent and following physician’s instructions. The child care provider must have one of the following relationships to be considered a relative within the 3rd degree.
  - the child’s grandparent,
  - the child’s great-grandparent,
  - the child’s great-great-grandparent,
  - the child’s aunt/uncle (and spouse),
  - the child’s first cousin (and spouse),
  - the child’s brother/sister
- When the child care provider is a licensed physician, physician’s assistant, registered nurse, or nurse practitioner, the provider can administer prescription and over-the-counter medication to subsidized child(ren) with the parent’s permission parent and following physician’s instructions.
- When the child care program is authorized by OCFS and following a Health Care Plan for the Administration of Medication, the medications administrant designated in the Health Care Plan for the Administration of Medication may administer over-the-counter medication and some prescription medication to subsidized child(ren) with the permission of the parent and following physician’s instructions.

---

8 Client Identification Number (CIN) is optional, if given, it will be used to facilitate information sharing with the local social services district regarding your eligibility and payment for child care.
I have read the “Provider’s Qualifications to Administer Medication” in Provider Section I, and “My Child(ren)’s Medication Needs”, above, and I understand the extent to which my child care provider is legally permitted to administer medication to my child(ren). My child care provider and I have agreed that:

☐ The parent will be responsible for the medication needs of the following child(ren):

______________________________________________________________________________.

☐ The provider will be responsible for the medication needs of the following child(ren):

______________________________________________________________________________.

3. MY CHILD(REN)’S MEALS AND SNACKS
For each child(ren) listed on the preceding page, either the parent or the provider must provide meals and snacks. Who will provide meals and snacks for your child(ren) while in care?

☐ The parent will be responsible for the meals and snacks for the following child(ren):

______________________________________________________________________________.

☐ The provider will be responsible for the meals and snacks for the following child(ren):

______________________________________________________________________________.

C. RELEVANT HISTORY OF PROVIDER AND PEOPLE AT THE CHILD CARE LOCATION
1. I understand the child care provider must tell me whether the following people, who may be in contact with my child(ren), have been the subject of an indicated report of child abuse or maltreatment:
   - the provider,
   - volunteers who are likely to have regular contact with child(ren) in care,
   - employees, and
   - if care is not provided in my home, persons living in the home age 18 years or older.

☐ Yes.
☐ No.

☐ I have specifically asked the provider if the provider, volunteers who are likely to have regular contact with child(ren) in care, employees, and if care is provided in the provider’s home, persons living in the home age 18 years or over, have been the subject of an indicated report of child abuse or maltreatment.

☐ The provider has informed me whether any indicated reports of child abuse or maltreatment exist, who was the subject of the report: the provider, employees, volunteers who are likely to have regular contact with child(ren) in care, and, if care is provided in the provider’s home, persons living in the home age 18 years or over.

☐ When an indication of child abuse or maltreatment exists, the provider has given me written information regarding such indication of child abuse or maltreatment. I understand I have the right to select another provider. I agree that I have carefully considered the information on child abuse and maltreatment indications that I have been given and I am selecting this provider.

☐ Yes.
☐ No.

D. PARENTAL ACKNOWLEDGEMENTS AND AGREEMENTS

1. PARENT RESPONSIBILITIES TO MONITOR QUALITY OF CARE
   ☑ I certify that I have selected this provider to care for my child(ren).
   ☑ I have reviewed each item on the Health and Safety Checklist and the Provider Behavioral Conditions Checklist with the provider, located in the Child Care Provider Section, and all information on the checklist is true and accurate.
   ☑ I understand it is my responsibility to monitor the quality of care my child(ren) receives from the child care provider.
   ☑ I understand that these agreements apply for as long as this provider is caring for my child(ren).

2. CHANGES TO ENROLLMENT INFORMATION
   ☑ I will notify the enrollment agency immediately if:
     - My address or phone number changes
     - I have any concerns about the health and safety of my child(ren) in the provider’s care.
3. **Eligibility and Payment Issues**

- I will immediately notify the local social services district and my provider if the hours that I need child care or other circumstances related to my need or eligibility for child care change.
- I agree to pay my family share (fee), if any, as directed by the local social services district.
- I understand a child care provider who is the child(ren)’s parent, stepparent, adoptive parent, legal guardian or other person legally responsible for that child(ren) or who lives in my same household and has a child(ren) in common with me cannot be paid.
- I understand that the provider must be accepted for enrollment with the enrollment agency before any payment can be made.
- I understand a provider is not eligible to provide child care if the provider, any volunteer who is likely to have regular contact with my child(ren), any employee, or, for family child care, any person 18 years or older who is living in the home where child care is provided:
  - Has been convicted of a crime against a child(ren) or
  - Is listed on the Sex Offender Registry.
- I understand that the provider may not be eligible to provide child care and that the local social services district may not be able to pay the provider when:
  - The provider has a history of termination of parental rights, or
  - The provider has a history of Article 10 (child protective) removal of a child(ren) by family court order, or
  - The provider had a license or registration to operate a child day care program denied, revoked and/or suspended, or
  - The provider, any volunteer who is likely to have regular contact with my child(ren), any employee, or, for family child care, any person 18 years or older who is living in the home where child care is provided, has been convicted of a crime.
- I understand that if the provider is denied enrollment or has his or her enrollment terminated, the provider will be considered ineligible to provide child care.
- The local social services district cannot pay the provider or issue payment for care given by a provider who cannot be enrolled or who is ineligible. If I choose to use an ineligible provider, I am responsible to pay for the child care myself. I understand I have the right to select another provider.

4. **Health and Safety Requirements**

- I understand that payment cannot be made until all items marked “No” on the Health and Safety Checklist and Provider Behavioral Conditions Checklist have been corrected.
- I understand that the provider must continue to meet all the basic health and safety requirements and behavioral conditions listed on the checklists.
  - The provider and I have inspected the home, completed the Health and Safety Checklist and the Provider Behavioral Conditions Checklists together.
  - All statements on the checklists are true and accurate.
  - The provider and I will notify and provide documentation to the enrollment agency when any item on the checklists has been corrected or changed.

5. **Parent Certification**

By signing this form I certify to the best of my knowledge that:

- I have reviewed the “Child Care Provider Section” of this form.
- I understand and agree to continue to meet all conditions stated above.
- I understand the decision to enroll my provider is based on the facts provided and attested to on the enrollment form. Providing false information or deliberately concealing information may result in an inaccurate determination of my provider’s eligibility to provide subsidized child care, and/or a denial or termination of enrollment. If my provider provides child care services while enrolled under false pretenses, or while he or she is an ineligible child care provider, the Local Social Services District may refuse to issue child care subsidy payments, terminate child care subsidy payments, take legal action against me or the child care provider.
- Under the penalty of perjury, I agree that to the best of my knowledge all statements made on this enrollment form and any attachments to it are true and accurate.

**Parent/Caretaker Signature**

**Date**

This enrollment form is a legal agreement. Make a copy of this form for your records. Return this form and its attachments to:
ENROLLMENT FORM FOR PROVIDER OF LEGALLY-EXEMPT GROUP CHILD CARE

Child Care providers who are not required by NYS law to be licensed or registered to operate a day care program use this form to enroll with a legally-exempt caregiver enrollment agency to provide subsidized child care.

Instructions: Please use black/blue pen.

- Provider/director: Complete the “Child Care Provider Section” of this form.
- Parent/caretaker: Complete the “Parent Information Section” of this form.
- The provider/director and parent/caretaker walk through and inspect the site, review both sections of the form, then sign and date where indicated.
- Submit the completed form to the enrollment agency serving the location where the child care is being provided.

I. CHILD CARE PROVIDER SECTION

A. CHILD CARE PROVIDER/DIRECTOR AND PROGRAM

1. Child Care Provider/Director Name:
   - Mr. □ Mrs. □ Ms.
   - Last □ First □ MI □ Suffix
   - Other names known by: Maiden, married, aliases, etc

2. Program Name and Federal Identification Number (Complete only if applicable):
   - DBA (Doing Business As):
   - Federal Identification No:
   - Legal Name:

3. Identifying and Contact Information:
   - Enrollment Number: (If Applicable)
   - Site Phone: ( ) □ Listed □ Unlisted
   - Date of Birth: / / (mm/dd/yyyy)
   - Home Phone: ( ) □ Listed □ Unlisted
   - Gender (M or F):
   - Cell Phone: ( ) Fax: ( )
   - Social Security No.:
   - E-Mail Address:
   - □ No E-Mail Address

4. Child Care Location: Give address where the child care is being provided.
   - Building Number
   - Street
   - Address Line 2
   - Apt.
   - Address Line 2
   - Floor
   - City
   - State
   - Zip
   - County

(For Enrollment Agency Use)
- Received Date __________
- Complete Date

(For Local District Use)
- Parent's Case No._______________________ Type: □WMS □ Local
- LSSD Office/Unit/Wkr. No. / /

1 The social security number or federal identification number is required when the local social services district issues child care subsidy payments directly to a child care provider/director. Failure to provide the social security or federal identification number may delay payment. Social security number or federal identification of the provider/director is optional when the local social services district issues child care subsidy checks to subsidy recipient (parent/caretaker). If the social security number or federal identification is provided, it may also be used by federal, State & local agencies for federal reporting, to prevent duplication of services and to prevent fraud.

2 The e-mail address, if given, may be used by the enrollment agency to contact you.
5. **Mailing Address**: Is your mailing address the same as the child care location address given above?

- [ ] Yes.
- [ ] No. If No, give address below.

<table>
<thead>
<tr>
<th>Building Number</th>
<th>Street</th>
<th>Apt.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Address Line 2</th>
<th>Floor</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip</th>
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</tbody>
</table>

6. Were you previously enrolled as a legally-exempt provider?

- [ ] Yes. Year enrolled: ________. County where you resided: ____________________________.
- [ ] No.

7. List below the Counties/Districts issuing subsidy payments for child care you provide.

Parent Name: _____________________________

<table>
<thead>
<tr>
<th>District</th>
<th>Local ID/Vendor Number, 3 if any:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Parent Name: _____________________________

<table>
<thead>
<tr>
<th>District</th>
<th>Local ID/Vendor Number, if any:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

8. Do you read English?  
  - [ ] Yes  
  - [ ] No. If No, what language do you read best? ____________________________.

9. Do you speak English?  
  - [ ] Yes  
  - [ ] No. If No, what language do you speak best? ____________________________.

10. Does any other program provide child care at the SAME location you intend to provide child care?

- [ ] Yes. Describe: ____________________________________________________________________
- [ ] No.

B. **Type of Legally-Exempt Child Care That You Provide**

*Indicate if your program is operated under the authority of another federal, State, or local government, or tribal agency in question 1 below, then indicate the type of care you provide in one of the following questions. Your answer to question 1 will determine whether you answer question 2 or question 3 within this subsection B.*

1. Are you legally operating under the auspices of another federal, State, or local government or a tribal agency?

- [ ] Yes. I am legally operating under the auspices of another federal, State, or local government, or a tribal agency and my program is described in question B.2.

  *Since you are operating under the auspices of another federal, State, tribal or government agency you will answer question B.2 and then are required to complete only the sections and questions listed immediately below.*

  - Provider Subsection A: All.
  - Provider Subsection B: Questions 1 and 2.
  - Provider Subsection C: Questions 2 and 3.
  - Provider Subsections F, G and H: All.
  - Parent Sections: ALL sections and questions.

- [ ] No. I am not operating under the auspices of another federal, State, or local government or a tribal agency AND I am not legally required to do such.

  *Since you are NOT required to operate under the auspices of another federal, State, tribal or government agency, please skip question B.2, but answer question B.3. You must then complete ALL remaining subsections and questions.*

  - Provider Subsection A: All.
  - Provider Subsection B: Questions 1 and 3.
  - Provider Subsection C, D, E, F, G and H: All.
  - Parent Sections: All.

---

3 Provider Vendor Number is an optional identifying number assigned and used by the local social services district to track the provider.

Provider Name: _____________________________  Enrollment Number: _____________________________
2. PROGRAMS OPERATING UNDER THE AUSPICES OF ANOTHER GOVERNMENT AGENCY:

Choose the statement which describes the government agency you operate under and your legally-exempt child care program. Check A, B, C, D, E, or F and answer related questions for that program.

☐ A) The program is operated in compliance with applicable Federal laws and regulations and is **located on federal property**.
   - Name of Federal agency where located: __________________________________________
   - The type of child care provided is: *(check all that apply)*
     - day care center
     - family day care home
     - other child care program: ___________________________________________________

☐ B) The program is operated in compliance with applicable Tribal laws and regulations and is **located on Tribal property**.
   - Name of Tribe: ___________________________________________________________
   - Name of Tribal Property where located:______________________________________
   - The type of child care provided is: *(check all that apply)*
     - day care center
     - family day care home
     - other child care program: ___________________________________________________

☐ C) The program operates under the auspices of the NYS Department of Education and

- Is operated by a public school district that is providing elementary or secondary education or both in accordance with the compulsory education requirements of NYS Education Law, **AND**
- The program(s) is (are) located on the same premises or campus where the elementary or secondary education is provided.

   - Name of school: ___________________________________________________________________.
   - Name of school district: _____________________________________________________________.
   - The type of child care provided is: *(check all that apply)*
     - nursery school programs providing services to children three years of age or older, for 3 hours or less per day, per child
     - pre-kindergarten programs for children three years of age or older
     - school-age child care programs conducted during non-school hours

☐ D) The program is my privately owned nursery school operating under the auspices of NYS Department of Education in accordance with Part 125 of its regulations,

- is voluntarily registered with the NYS Department of Education, and is
- providing services to children three years of age or older, for 3 hours or less per day, per child **AND**
  - **I HAVE ATTACHED** a copy of my current certificate of registration which is valid for up to 5 years.
  - Registration Number: ____________________. Date of Certificate of Registration: _______________

☐ E) The program, **located within New York City**, 

- Has filed appropriate notice with the New York City Department of Education on a form provided or approved by the NYC Department of Education, **AND**
- Is operated by a school recognized under the State Education law and which provides compulsory education for children, **AND**
- Is located within such school and has identical ownership, operation management and control as the school, **AND**
- Is a pre-kindergarten or kindergarten program of instruction for children no younger than 3 years of age through 5 years, **AND**
  - **I HAVE ATTACHED** a copy of my current Certificate of Filing from the NYC Department of Health AND Mental Hygiene (DOHMH).
  - Certificate of Filing Number: __________________________ Filing Date:______________________.

☐ F) The program is a **summer day camp operating under the jurisdiction of the Department of Health**. The program does NOT concurrently hold a current license or registration to operate a day care program issued by the New York State Office of Children and Family Services or by the New York City DOHMH for this site and program.

1) The summer day camp is operated under the jurisdiction of the: *(choose the appropriate authority)*

- **New York State Department of Health (NYSDOH)** in accordance with subpart 7-2 of the State Sanitary Code **OR**
- **New York City Department of Health and Mental Hygiene (NYCDOHMH)**.
2) Do you have a current year permit from the New York State Department of Health or the New York City DOHMH to operate as a legally-exempt summer day camp program?

   a) ☐ Yes. You must attach the permit. Check ☐ below to show you have met the requirement.
      □ I HAVE ATTACHED a copy of my current year permit from the NYS DOH or the NYC DOH.
      Permit number: ____________________. Expiration date: ________________.

   b) ☐ No. You cannot be fully enrolled until you submit the current year summer camp permit from DOH. To be conditionally enrolled prior to the issuance of the current year’s DOH summer camp permit, you must:
      • Attach proof that you have completed the application to DOH for a permit to operate a summer day camp, AND,
      • Have no outstanding compliance issues with the NYS DOH or NYC DOH, AND,
      • Agree to immediately notify the enrollment agency if you are denied a summer camp permit by the DOH or if you withdraw your request for a summer day camp permit, AND,
      • Agree to submit your current year’s DOH summer day camp permit to the enrollment agency as soon as it is issued so that your enrollment will change from conditional enrollment to full enrollment. Failure to submit the permit in a timely manner will result in a termination of enrollment.
      Check ☑ below to show item attached.
      □ I have ATTACHED proof of my application for the DOH permit. I submitted the camp permit application to DOH on (date): ____________________.

3) Provide date that summer day camp opened or is scheduled to open: ____________________.

3. PROGRAMS NOT OPERATING UNDER THE AUSPICES OF ANOTHER GOVERNMENT AGENCY:
Choose the statement which describes your legally-exempt child care program(s) that does not operate under the auspices of a federal, State, or local government, or a tribal agency. Check ☑ one type, A), B) or C) and answer any related questions.

   □ A) The program(s) is (are) operated by a private school or academy, (give name of private school or academy ____________________), 
      • which is providing elementary or secondary education or both, in accordance with the compulsory education requirements of the NYS Education Law, AND
      • The program(s) is (are) located on the same premises or campus where the elementary or secondary education is provided.
      The type of child care provided is: (check ☑ all that apply)
      □ A nursery school, for children 3 years of age or older, for three or less hours per day per child
      □ A pre-kindergarten, for children 3 years of age or older, for three or less hours per day per child
      □ A program for school-aged children conducted during non-school hours.

   □ B) The program(s) is not voluntarily registered with NYS Education Department and is (are) operated by a non-profit agency or organization or a private proprietary agency (give agency/organization name): ____________________, AND,
      The type of child care provided is: (check ☑ all that apply)
      □ A nursery school providing services to children for three or less hours per day per child.
      □ A program for pre-school aged children providing services to children for three or less hours per day per child.

   □ C) The program cares for not more than six school age children, is conducted during non-school hours and is not located in a residence.
C. OTHER QUALIFICATIONS & PROGRAM CHARACTERISTICS

1. Provider’s Qualifications to Administer Medication (Only applies to Legally-Exempt Group Child Care programs that are not under auspices of another government agency, as explained in Subsection IB).

<table>
<thead>
<tr>
<th>NYS Law restricts the right to administer medication other than over-the-counter topical ointments, sunscreen and topically applied insect repellent to specific medical professionals who are authorized by NYS to administer medication. Some individuals are exempt from this requirement based on their relationship to the child, family, or household and are “permitted” to administer medications including:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• The child’s parent/caretaker, step-parent, legal custodian, legal guardian, or member of the child’s household,</td>
</tr>
<tr>
<td>• Family members who are related within the 3rd degree of consanguinity to the child’s parent or step-parent. This includes the child’s grandparent, child’s great-grandparent, child’s great-great grandparent, child’s aunt/uncle (and spouse), child’s great aunt/uncle (and spouse), child’s first cousin (and spouse), and child’s brother/sister.</td>
</tr>
<tr>
<td>• Child care providers who are trained and authorized by the Office of Children and Family Services (OCFS), under a Health Care Plan for Administration of Medication, approved by a qualified health care consultant, and who are:</td>
</tr>
<tr>
<td>• Operating in compliance with the NYS regulation which includes receiving training on medication administration,</td>
</tr>
<tr>
<td>• Authorized by the child’s parent/caretaker, step-parent, legal guardian, or legal custodian to administer medication, <strong>AND</strong></td>
</tr>
<tr>
<td>• Administering medication to subsidized children in care.</td>
</tr>
</tbody>
</table>

To receive OCFS authorization to administer medication, a child care provider must be at least 18 years of age and literate in the language in which the parental permissions and health care provider’s instructions will be given. Any person who is not authorized by NYS Law or not exempt from this legal requirement, may only administer over-the-counter topical ointments, sunscreen and topical insect repellent. Examples of medication they MAY NOT ADMINISTER include, but are not limited to: Tylenol, Ritalin, insulin, antibiotics, and ear, eye or nose drops.

A) Are you, your employee, or your volunteer legally permitted to administer medication to the child(ren) in subsidized care? Check ☑ statements 1, 2 or 3. Provide all other information as it applies.

- ☐ 1) **Yes.** I am a NYS medical professional **authorized** by New York State Department of Education (NYSED) to administer medication. Therefore, I am allowed to administer medication to children in my care when the provider has appropriate permissions from the parent(s) and in accordance with the health care provider’s instructions.
  a) Profession (Check ☑ one):
    - [ ] Registered Nurse
    - [ ] Nurse Practitioner
    - [ ] Physician
    - [ ] Physician Assistant
  b) License number: ________________________________.
  c) [ ] I have attached a copy of the current NYS professional medical license.
  IF MULTIPLE MEDICAL PROFESSIONALS EXIST, PLEASE ATTACH LIST SEPARATELY.

- ☐ 2) **Yes.** I have a Health Care Plan for the Administration of Medication (OCFS-LDSS-7000) approved within the past 2 years. Therefore the qualified medications administrant named below is authorized by OCFS to administer medication to subsidized children in my care according to the health care provider’s instructions when there are appropriate permissions from the parent.
  a) Plan approval date: ________________________________.
     [ ] I have attached a copy of the **first page AND the approval page** of my Health Care Plan for the Administration of Medication (OCFS-LDSS-7000).
  b) Name of the qualified Medications Administrant: ________________________________.
  c) Health Care Consultant (HCC) name: ________________________________.
  d) Health Care Consultant Profession (Check ☑ one):
    - [ ] Registered Nurse
    - [ ] Nurse Practitioner
    - [ ] Physician
    - [ ] Physician Assistant
  e) License Number: ________________________________.

- ☐ 3) **No.** None of the above permissions apply to me. I am not authorized by OCFS or NYSED. I understand I **cannot administer** medication to child(ren) in care, **except**: over-the-counter topical ointments, sunscreen, and topically applied insect repellent.
3a) Are you interested in seeking OCFS authorization to administer medication to the child(ren) in subsidized care?

☐ Yes. I want to learn how to start the process. Please send me the OCFS-LDSS-7007 Obtaining Authorization to Administer Medication to the Child(ren) in Legally-Exempt Care.

☐ No. I will not be seeking authorization to administer medication at this time.

B) I agree I will administer medication in compliance with NYS Law and only to the extent, indicated by my choice above, that I am permitted by NYS Law to do so.

☐ Yes. ☐ No.

C) If I have employees or volunteers, I will make sure that each of my employees and volunteers administers medication in compliance with NYS Law and only to the extent permitted by NYS Law.

☐ Yes. ☐ No.

2. Program’s Hours of Operation

(Check ☑ all that apply)

☐ Full Year
☐ School Year
☐ Summer Only (June-September)

3. Do you charge parents receiving subsidy the same amount you charge for non-subsidy child(ren) of the same age and similar care?

☐ A) Yes.

☐ B) No. If No, check ☑ statement 1 or 2 below.

☐ 1) I charge parents receiving subsidy less than I charge other parents.

☐ 2) I charge parents receiving subsidy more than I charge other parents.

D. HEALTH AND SAFETY CHECKLIST

(Only Applies to Groups That Are Not Under Auspices of Another Government Agency As Explained in Subsection I B)

The provider/director and the parent/caretaker complete this section together.

I meet and agree to continue to meet the basic health and safety requirements listed below.

Check ☑ an answer for each item below:

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>The provider/director meets the following basic health and safety requirements before caring for children:</td>
</tr>
<tr>
<td>☐</td>
<td>1. The provider and all children have two separate &amp; remote ways to leave the building in an emergency.</td>
</tr>
<tr>
<td>☐</td>
<td>2. The rooms for the child(ren) at the program site are well-heated, well-lighted and well-ventilated.</td>
</tr>
<tr>
<td>☐</td>
<td>3. The program site is free of unsafe areas (such as swimming pools, open drainage ditches, wells, holes, wood or coal burning stoves, fireplaces, and gas space heaters). If there are unsafe areas, sturdy barriers are in place around those areas that keep children from getting to them.</td>
</tr>
<tr>
<td>☐</td>
<td>4. If child care is provided above the first floor, there are barriers or locks on the windows so the child(ren) cannot fall out.</td>
</tr>
<tr>
<td>☐</td>
<td>5. The water supply at the program site is safe. There are working toilets and there is hot and cold running water all the time.</td>
</tr>
<tr>
<td>☐</td>
<td>6. I, all employees, and volunteers who are likely to have regular contact with the child(ren) are physically, emotionally and mentally able to provide child care.</td>
</tr>
<tr>
<td>☐</td>
<td>7. I, all employees, and volunteers who are likely to have regular contact with the child(ren) are free from any communicable diseases that pose a risk to the health and safety of the child(ren) in care. If I, any employee, or volunteer who is likely to have regular contact with the child(ren) has a communicable disease, I must have a statement from such person’s health care provider that indicates that the presence of a communicable disease does not pose a risk to the health and safety of the child(ren) in care.</td>
</tr>
</tbody>
</table>

☐ I have ATTACHED a doctor’s statement, if I, any employee, or volunteer who is likely to have regular contact with the child(ren) has a communicable disease and that such disease does not pose a risk to the health and safety of the child(ren) in care.
<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>The provider/director meets the following basic health and safety requirements before caring for children:</th>
</tr>
</thead>
</table>
|     | 8. | The program site is free of any dangerous or unsafe conditions that could hurt the child(ren). This includes but is not limited to:  
|     |     | • Knives and other sharp objects are out of the reach of the child(ren).  
|     |     | • Small rugs, runners, and electrical cords are held in place so the child(ren) won’t trip.  
|     |     | • Electrical cords do not run under furniture or rugs and are out of the reach of the small child(ren).  
|     |     | • Extension cords are not overloaded.  
|     |     | • Any guns and other firearms are unloaded and stored in a locked drawer or cabinet and the key is kept in a safe place. Ammunition is locked separately.  
|     |     | • Cords to window blinds and shades are out of the reach of the child(ren).  
|     |     | • Hot liquids are out of the reach of the child(ren).  
|     |     | • Small items that the child(ren) could choke on are out of the child(ren)’s reach.  
|     |     | • Carbon monoxide detectors are installed where the child(ren) that I provide care for sleep or nap and on each story of the program site where a carbon monoxide source is located. |
|     | 9. | All matches, lighters, medicines/drugs, cleaning materials, detergents, aerosol spray cans and other poisonous or toxic materials are stored in their original containers. Care is taken so that they do not come in contact with the child(ren), where food is prepared, or otherwise may be a danger to the child(ren). I store all of these potentially unsafe materials in an inaccessible area safely away from the child(ren). |
|     | 10. | The caregiver will give the child(ren) meals and snacks according to what the parent/caretaker and I have agreed. |
|     | 11. | The caregiver will refrigerate milk, formula and perishable food that goes bad if left out. |
|     | 12. | The caregiver will not heat formula, breast milk and other food items for infants in a microwave oven. |
|     | 13. | The caregiver will always allow the custodial parent/caretaker or caretaker to have unlimited access to his/her child(ren) in care, to the program site while the child(ren) is in care, and to any written records concerning the child(ren). |
|     | 14. | The caregiver will hold fire/evacuation drills monthly with the child(ren) during hours that the child(ren) are in care so that the child(ren) and I will know what to do in the case of an emergency. |
|     | 15. | The caregiver has a working telephone OR can get to one very quickly in an emergency. Emergency telephone numbers for the fire department, local or State police or sheriff's department, poison control center and ambulance service are posted near the phone and are easy to see. |
|     | 16. | I will use protective caps, covers or permanently installed safety devices on all electrical outlets that the child(ren) could reach when I am caring for the child(ren) under 5 years old. |
|     | 17. | Paint and plaster are in good repair so that there is no danger of the child(ren) putting paint or plaster chips in their mouths or of it getting into food. |
|     | 18. | I have at least one operating smoke detector on each floor of the program site. I will check regularly to make sure all detectors work. |
|     | 19. | I have a portable first aid kit at the program site that is easy to get to in an emergency and my first aid supplies are kept in a clean container or cabinet away from the child(ren). It is stocked to treat common childhood injuries and problems. I will always replace things in the first aid kit as soon as possible after something has been used or is too old to be used. |
|     | 20. | I have RECEIVED from the child(ren)’s parent/caretaker:  
|     |     | • signed proof from a doctor or other health care provider that: the child(ren) has received all of the immunizations appropriate for the child(ren)’s age; OR  
|     |     | • proof that one or more of the immunizations would harm the child(ren)’s health; OR  
|     |     | • a statement saying that the child(ren) has not been immunized due to the parent/caretaker's religious beliefs. |
|     | 21. | The stairs, railings, porches and balconies are in good repair. |
E. PROVIDER/PROGRAM BEHAVIORAL CONDITIONS

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>The provider/director meets the following basic health and safety requirements before caring for children:</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐</td>
<td>☐</td>
<td>1. I understand and agree that I will never use physical punishment or let others use physical punishment while child(ren) are in their care. Physical punishment means doing things directly to the child(ren)'s body to punish them, such as: • Spanking, biting, slapping, shaking, twisting, or squeezing; • Making the child(ren) do physical exercises beyond what is normal; • Forcing the child(ren) to stay still for long periods of time; • Making the child(ren) stay in positions that hurt the child(ren) or are bizarre; • Bathing the child(ren) in unusually hot or cold water; and • Forcing child(ren) to eat or have in the child(ren)'s mouth soap, foods, hot spices or foreign substances.</td>
</tr>
<tr>
<td>☐</td>
<td>☐</td>
<td>2. I understand and agree that I will never use or be under the influence of alcohol or drugs while the child(ren) are in care and will make sure that the child(ren) being cared for do not have contact with people using drugs or alcohol.</td>
</tr>
<tr>
<td>☐</td>
<td>☐</td>
<td>3. I understand and agree that I will not smoke or allow smoking in indoor areas or other enclosed areas, such as cars or other vehicles, when the child(ren) are present.</td>
</tr>
<tr>
<td>☐</td>
<td>☐</td>
<td>4. I understand and agree that I will never leave the child(ren) alone or unsupervised.</td>
</tr>
</tbody>
</table>

F. RELEVANT HISTORY

1. PROVIDER HISTORY

A) PROVIDER/DIRECTOR TERMINATION OF PARENTAL RIGHTS

I certify and attest that (Check one):
☐ I have never had my parental rights terminated under Social Services Law 384-b or equivalent legal authority.
☐ I have had my parental rights terminated under Social Services Law 384-b or equivalent legal authority.
☐ I have ATTACHED the OCFS-LDSS-4917, History of Court-Ordered Removal Of A Child And/or Termination of Parental Rights.

B) PROVIDER/DIRECTOR COURT ORDERED ARTICLE 10 REMOVAL

I certify and attest that (Check one):
☐ I have never had a child removed from my care by court order in a proceeding under Article 10 (child protective) of the Family Court Act.
☐ I have had a child removed from my care by court order in a proceeding under Article 10 (child protective) of the Family Court Act.
☐ I have ATTACHED the OCFS-LDSS-4917, History of Court-Ordered Removal Of A Child And/or Termination of Parental Rights.

C) PROVIDER/DIRECTOR DAY CARE ENFORCEMENT

A child “day care” program includes licensed or registered day care centers, family day care homes, group family day care homes, small day care centers and/or school age child care programs.

1) I certify and attest that (Check one):
☐ I have had an application for a license or registration to operate a child day care program denied.
☐ I have not had an application for a license or registration to operate a child day care program denied.

2) I certify and attest that (Check one):
☐ I have had a license or registration to operate a child day care program revoked or suspended.
☐ I have not had a license or registration to operate a child day care program revoked or suspended.

3) If you have been denied a license or registration to operate a child day care program, OR if you have had a license or registration to operate a child day care program revoked or suspended, complete the following:

Name and location of the child day care program(s) for which this action occurred:

☐ I have ATTACHED the OCFS-LDSS-4916, History of Day Care Enforcement and Parental Acknowledgement.

---

4 If you need a copy of this form, please contact your local social services district or your legally-exempt child care provider enrollment agency.

Provider Name: _____________________________  Enrollment Number: _____________________________
2. PROVIDER, EMPLOYEES AND VOLUNTEERS

The provider/director must ask each employee and each volunteer who is likely to have regular contact with the child(ren) in care

- If they have been convicted of a crime.
- if they have been the subject of an indicated report of child abuse or maltreatment.

A) PERSONS HELPING TO CARE FOR CHILDREN IN MY CARE

Does your program have any employees, volunteers, and/or others who may help care for or be in contact with the children?

☐ Yes. If yes, answer both questions below.

1) Did you ask each employee and each volunteer who is likely to have regular contact with the child(ren) in care, if they have been convicted of a crime?

☐ Yes.
☐ No.

2) Did you ask each employee and volunteer who may be helping to care for or who have regular contact with the child(ren) if they have been the subject of an indicated report of child abuse or maltreatment?

☐ Yes.
☐ No.

B) CRIMINAL HISTORY

Have you, your employee, or your volunteer ever been convicted of a crime in New York State or any other place?

☐ Yes. Give the name(s) of person(s) convicted: ________________________________________.

☐ I have ATTACHED the OCFS-LDSS-49153, History of Criminal Convictions And Parental Acknowledgement.

☐ No.

C) INDICATED REPORTS OF CHILD ABUSE OR MALTREATMENT

I have informed the parent/caretaker whether I, my employees, volunteers, and/or others who may help care for or be in contact with the children have been the subject of any indicated reports of child abuse or maltreatment. When an indication of child abuse or maltreatment exists, I have given the parent/caretaker, in writing, true and accurate information, including:

- a description of the incident(s), AND
- the date of the indication(s), AND
- any other relevant information regarding the indication(s).

☐ Yes.
☐ No.

G. PROVIDER AGREEMENTS AND CERTIFICATIONS

1. SUBMITTING UPDATES AND CHANGES OF ENROLLMENT INFORMATION

☒ I will immediately request and submit a new enrollment form to the enrollment agency if I start providing child care at a child care location different from the one given on this form.

☒ I will inform the enrollment agency immediately if there are changes in any information provided on the enrollment form or changes to the attachments.

2. INFORMATION SHARING

☒ I understand the enrollment agency and the local social services district will exchange information regarding my child care programs enrollment status.

3. ELIGIBILITY AND PAYMENT

☒ I understand that I may not be eligible to provide child care AND that the local social services district may not be able to pay me when:

- I have a history of Article 10 (child protective) removal of a child by family court order, or
- I have a history of termination of parental rights, or
- I have a history of denial, revocation and/or suspension of a license or registration to operate a child day care program.

☒ I understand I am not eligible to provide child care if I, any volunteer who is likely to have regular contact with the child(ren), or any employee has been convicted of a crime against a child(ren).

☒ I understand that I may not be eligible to provide child care or receive payment if I, any volunteer who is likely to have regular contact with the child(ren), any employee, or any such other person listed in part C of this section, age 18 years or older has been convicted of a crime.
I understand that if the enrollment agency determines I cannot be enrolled, then the local social services district cannot issue payment for care I have provided. I will not be paid by the local social service district for any child care that I provide to a child(ren) receiving a child care subsidy, while I am deemed an ineligible provider by the enrollment agency. The parent/caretaker has the right and responsibility to decide whether he/she wants to use me. If the parent/caretaker chooses to use me when I cannot be enrolled, the parent/caretaker is responsible to pay me for the child care.

I understand that I must be enrolled with the enrollment agency before any payment can be made.

I understand that I cannot be paid as a legally-exempt child care provider if I am the child(ren)’s parent, stepparent, adoptive parent, legal guardian or other person legally responsible for the child(ren) or if I live in the same household and have a child(ren) in common with the parent.

I agree to provide accurate attendance records as required by the local social services district.

I agree to collect the family share (fee) if instructed to do so by the local social services district. I will immediately notify the local social services district if the parent/caretaker fails to pay the required family share.

I understand that I cannot be enrolled until all items marked, "No" on the Health and Safety Checklist have been corrected

4. Other Agreements

I understand and agree to allow representatives of the enrollment agency, the local social services district and the State of New York access to the premises where subsidized child care is provided to confirm that information on my enrollment form and/or on attendance forms is true and accurate and that child care services are being provided as listed on these forms. I understand that if I do not allow such access, then I will be considered an ineligible provider, my enrollment will be terminated and I will not be paid by the local social services district.

I understand that if I am denied enrollment that I may request that the enrollment agency review any extenuating circumstances to determine if an exception could be made to allow me to provide child care. If I request an exception, I will provide all documents or references required by the enrollment agency.

I understand and agree to meet all of the conditions stated on this form for as long as I am providing child care. I understand that I am required to inform the enrollment agency and the parent/caretaker if there is a change in the information stated on the enrollment form.

H. Provider Certification

By signing this form I certify to the best of my knowledge that:

- I understand and agree to continue to meet all conditions stated above.
- I have reviewed the “Parent Information Section” of this form.
- I understand the decision to enroll me is based on the facts provided and attested to on the enrollment form. Providing false information or deliberately concealing information may result in an inaccurate determination of my eligibility to provide subsidized child care, and/or a denial or termination of enrollment. If I provide child care services while enrolled under false pretenses, or while I am an ineligible child care provider, the Local Social Services District may refuse to issue child care subsidy payments, terminate child care subsidy payments, take legal action against me or the parent/caretaker and I may be required to repay any money I receive for such services.
- Under the penalty of perjury, I agree that to the best of my knowledge all statements made on this enrollment form and any attachments to it are true and accurate.
II. PARENT INFORMATION SECTION

The parent/caretaker receiving or applying for child care subsidy must complete this section AND review the “Child Care Provider” Section.

A. PARENT/CARETAKER INFORMATION

1. Parent/Caretaker’s Name:
   - Last
   - First
   - MI
   - Suffix
   - Other names known by: Maiden, married, aliases, etc

2. Identifying and Contact Information:
   - Date of Birth: / / (mm/dd/yyyy)
   - Home Phone: ( ) Listed Unlisted
   - Work Phone: ( )
   - Cell Phone: ( )
   - E-Mail Address: No E-Mail Address

3. Do you read English? Yes No. If No, what languages do you read best? ___________________.

4. Do you speak English? Yes No. If No, what languages do you speak best? ___________________.

5. Home Address: Is your home address the same as your mailing address? Yes No. If no, give mailing address below.
   - House Number
   - Street
   - Address Line 2
   - Apt.
   - Floor
   - City
   - State
   - Zip
   - County/Borough

6. Mailing Address:
   - House Number
   - Street
   - Address Line 2
   - Apt.
   - Floor
   - City
   - State
   - Zip
   - County/Borough

7. Your Child Care Subsidy Case:
   - Subsidy Paying County:
   - Temporary Assistance No.:
   - Subsidy Case Number:
   - Parent’s CIN Number:

8. Child Care Provider’s Name:
   - Last
   - First
   - MI
   - Suffix

__________________________

5 Caretaker means the child’s parent, legal guardian, caretaker relative or any other person with whom a child lives and who has assumed responsibility for the day-to-day care and custody of the child.
6 The e-mail address if given may be used by the enrollment agency to contact you.
7 The Temporary Assistance Number, Subsidy Case Number and Parent’s CIN (Client Identification Number) are optional. If given, they will be used to facilitate information sharing with the local social services district regarding your eligibility and payment for child care.
B. CHILD(REN) IN THE PROVIDER’S CARE

1. MY CHILD(REN) THAT THE PROVIDER CARES FOR.

A) Child’s Name: ____________________________
    Last ____________________ First ____________________
    District CIN ____________________ Date of Birth: / / (mm/dd/yyyy)

B) Child’s Name: ____________________________
    Last ____________________ First ____________________
    District CIN ____________________ Date of Birth: / / (mm/dd/yyyy)

C) Child’s Name: ____________________________
    Last ____________________ First ____________________
    District CIN ____________________ Date of Birth: / / (mm/dd/yyyy)

D) Child’s Name: ____________________________
    Last ____________________ First ____________________
    District CIN ____________________ Date of Birth: / / (mm/dd/yyyy)

2. MY CHILD(REN)’S MEDICATION NEEDS

I am responsible for deciding how my children’s medication needs will be met. I understand that child care providers cannot administer medication to the child(ren) in my care, except as follows:

- Any child care provider may administer only over-the-counter topical ointments, insect repellent, and sunscreen, with the parent’s permission.
- When the child care provider is a licensed physician, physician’s assistant, registered nurse, or nurse practitioner, the provider can administer prescription and over-the-counter medication to the subsidized child(ren) with the parent’s permission.
- When the child care program is authorized by OCFS and following a Health Care Plan for the Administration of Medication, the medications administrant designated in the Health Care Plan for the Administration of Medication may administer over-the-counter medication and some prescription medication to subsidized child(ren) with the permission of the parent and following physician’s instructions.
- OCFS does not “authorize” legally-exempt group programs operating under the auspices of a federal, State or local government or tribal agency to administer medications. Such programs must follow the regulations set forth by the federal, State or local government or tribal agency that the program is operating under.

I have read section above regarding the extent to which a child care provider can administer medication. I have read the Provider’s Qualifications to Administer Medication in Section I subsection C and I understand whether he or she is legally permitted to administer medication to my child(ren). My child care provider and I have discussed who will administer medication to my child(ren) while the child(ren) is in the provider’s care and we have agreed that:

- I will be responsible for the medication needs of the following children: ____________________________________________.
- The provider will be responsible for the medication needs of the following children: ____________________________________________.

3. MY CHILD(REN)’S MEALS AND SNACKS

For each child(ren) listed on the preceding page, either the parent or the provider must provide meals and snacks. Who will provide meals and snacks for your child(ren) while in care?

- I will be responsible for the meals and snacks for the following child(ren): ____________________________________________.
- The provider will be responsible for the meals and snacks for the following child(ren): ____________________________________________.
C. RELEVANT HISTORY OF THE PROVIDER AND PEOPLE AT THE CHILD CARE LOCATION

1. I understand the child care provider must tell me whether the following people, who may be in contact with my child(ren), have been the subject of an indicated report of child abuse or maltreatment:
   - the provider,
   - volunteers who are likely to have regular contact with child(ren) in care,
   - employees, and
   - if care is not provided in my home, persons living in the home age 18 years or older.

☐ Yes.
☐ No.

• I have specifically asked the provider if the provider, volunteers who are likely to have regular contact with child(ren) in care and/or employees, have been the subject of an indicated report of child abuse or maltreatment.

• The provider has informed me whether any indicated reports of child abuse or maltreatment exist, which name as subject of the report: the provider, employees and/or volunteers who are likely to have regular contact with child(ren) in care.

• When an indication of child abuse or maltreatment exists, the provider has given me written information regarding such indication of child abuse or maltreatment. I understand I have the right to select another provider. I agree that I have carefully considered the information on child abuse and maltreatment indications that I have been given and I am selecting this provider.

☐ Yes.
☐ No.

D. PARENTAL ACKNOWLEDGEMENTS & CERTIFICATIONS

1. PARENT RESPONSIBILITIES TO MONITOR QUALITY OF CARE

☐ I certify that I have selected this provider/program to care for my child(ren).

☐ I have reviewed each item on the Health and Safety Checklist and the Provider/Director Behavioral Conditions Checklist with the provider, located in the Child Care Provider Section, and all information on the checklists is true and accurate.

☐ I understand it is my responsibility to monitor the quality of care my child(ren) receives from the child care provider.

☐ I understand that these agreements apply for as long as this provider is caring for my child(ren).

2. CHANGES TO ENROLLMENT INFORMATION

☐ I will notify the enrollment agency immediately if:
   - My address or phone number changes
   - I have any concerns about the health and safety of my child(ren) in the provider’s care.

3. ELIGIBILITY AND PAYMENT ISSUES

☐ I will immediately notify the local social services district and my provider if the hours that I need child care or other circumstances related to my need or eligibility for child care change.

☐ I agree to pay my family share (fee), if any, as directed by the local social services district.

☐ I understand that the provider must be accepted for enrollment with the Enrollment Agency before any payment can be made.

☐ I understand a provider may not be eligible to provide child care if the provider, any volunteer who is likely to have regular contact with my child(ren) or any employee has been convicted of a crime.

☐ I understand a provider is not eligible to provide child care if the provider is listed on the Sex Offender Registry.

☐ I understand a provider is not eligible to provide child care if the provider, any volunteer who is likely to have regular contact with my child(ren) or any employee has been convicted of a crime against a child(ren), or a violent or other serious crime.
I understand that my provider may not be eligible to provide child care and that the local social services district may not be able to pay the provider when the provider has a history of:

- Termination of parental rights, or
- Article 10 (child protective) removal of a child(ren) by family court order, or
- Denial, revocation and/or suspension of a license or registration to operate a child day care program.

I understand that if the provider is denied enrollment or has his or her enrollment terminated, the provider will be considered ineligible to provide child care. The local social services district cannot pay the provider or issue payment for care given by a provider who cannot be enrolled or who is ineligible.

- If I choose to use an ineligible provider, I am responsible to pay for the child care myself.
- I understand I have the right to select another provider.

4. Health and Safety Requirements

I understand that for group child care programs not operating under the auspices of another federal, State, or local government or tribal agency that:

- Payment cannot be made until all items marked “No” on the Health and Safety Checklist have been corrected.
- The provider must continue to meet all the basic health and safety requirements listed on the checklist.
  - The provider and I have inspected the program site and completed the Health and Safety checklist together.
  - All statements on the Health and Safety checklist are true and accurate.
  - The provider and I will notify and provide documentation to the enrollment agency when any item on the checklist has been corrected or changed.

5. Parent Certification

By signing this form I certify to the best of my knowledge that:

- I have reviewed the “child care provider” section of this form.
- I understand and agree to continue to meet all conditions stated above.
- I understand the decision to enroll my provider is based on the facts provided and attested to on the enrollment form. Providing false information or deliberately concealing information may result in an inaccurate determination of my provider’s eligibility to provide subsidized child care, and/or a denial or termination of enrollment. If my provider provides child care services while enrolled under false pretenses, or while he or she is an ineligible child care provider, the Local Social Services District may refuse to issue child care subsidy payments, terminate child care subsidy payments, take legal action against me or the child care provider.
- Under the penalty of perjury, I agree that to the best of my knowledge all statements made on this enrollment form and any attachments to it are true and accurate.

PARENT/CARETAKER SIGNATURE __________________________ DATE ________________

This enrollment form is a legal agreement. Make a copy of this form for your records. Return this form and its attachments to:
I. NEW YORK STATE ENROLLMENT REQUIREMENT FOR LOCAL CHILD WELFARE DATABASE CHECK

The district conducted a search of its local database on _____ / _____ / _____ and the results follow.

1. The child care provider (choose one) ☐ was found / ☐ was NOT found in a search of the local child welfare database to be the respondent in court-ordered removal and/or placement of a child under Family Court Act Article 10.

2. The child care provider was (choose one) ☐ was found / ☐ was NOT found in a search of the local child welfare database to have his or her parental rights terminated under Social Services Law (SSL) 384-b.

II. OCFS APPROVED ADDITIONAL LOCAL STANDARD (IF APPLICABLE)

The results of the additional standard(s) are as follows (Give a brief description of each OCFS-approved local requirement, the name of the person it is applicable to and ☑ whether the requirement is met or not met):

<table>
<thead>
<tr>
<th>DESCRIPTION</th>
<th>APPLICABLE TO (NAME)</th>
<th>RESULT</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td></td>
<td>☑ MET</td>
</tr>
<tr>
<td>2.</td>
<td></td>
<td>☑ NOT MET</td>
</tr>
<tr>
<td>3.</td>
<td></td>
<td>☑ MET</td>
</tr>
<tr>
<td>4.</td>
<td></td>
<td>☑ NOT MET</td>
</tr>
</tbody>
</table>

III. REVIEW OF EXTENUATING CIRCUMSTANCES DETERMINATION

A review of extenuating circumstances has been completed and the district has:

☐ GRANTED an exception to the presumption against enrollment, because the provider has demonstrated that enrollment will not jeopardize the health, safety or welfare of children in the provider’s care. The provider may be considered for enrollment.

☐ DENIED an exception to the presumption against enrollment. The provider cannot be considered for enrollment.

IV. LOCAL DISTRICT DECISIONS REGARDING LEGALLY-EXEMPT CHILD CARE PROVIDER

☐ The district has rejected this legally-exempt child care provider for this child/family only.

Parent Name: ____________________________, per the Codes, Rules and Regulations of New York, (NYCRR) Title 18,

☐ 415.1(i), the child care provider is not eligible to provide care for this child/family because he/she is an adult member of this family’s Child Care Services Unit and is not a sibling to the child(ren).

☐ 415.1(g)(6 and 7) and 415.4(c)(1)(i), the funding source cannot be used for legally-exempt child care.

☐ 415.4(c)(1)(ii), the district believes it would be contrary to the health, safety or welfare of the child to receive child care services from the provider and the district has the authority to disapprove the service.

☐ The child care provider’s eligibility to care for ALL subsidized children was suspended on: _____ / _____ / ____. The provider may obtain an explanation by contacting: (district staff) __________________________ at (phone) __________________________.

☐ The child care provider’s suspension of eligibility ended on (date): _____ / _____ / ____. The provider is DISQUALIFIED from receiving payment under the child care subsidy program for child care services provided for a period of five years, per 18 NYCRR 415.4 (h)(2)(i).

Disqualification Start Date: _____ / _____ / _____ Disqualification End Date: _____ / _____ / _____

☐ The district has reason to believe the child care provider is/was in violation of 18 NYCRR, 415.1(h)(1), by caring for more children than allowed from (dates _____ / _____ / _____ to _____ / _____ / _____.

V. COMPLAINT REGARDING LEGALLY-EXEMPT CHILD CARE PROVIDER

☐ The district has reason to believe the child care provider is/was in violation of 18 NYCRR, 415.1(h)(1), by caring for more children than allowed from (dates _____ / _____ / _____ to _____ / _____ / _____.

<table>
<thead>
<tr>
<th>DISCV. START DATE</th>
<th>DISCV. END DATE</th>
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</table>
☐ 415.4(c)(iv) by denying a parent access to his/her child, the premises, or written records concerning the child.

☐ 415.6(e)(2), by charging a subsidy parent an amount greater than that charged to a non-subsidy parent for similar child care services.

☐ Other, please identify regulation: ____________________________________________

☐ Supportive documentation is attached.

<table>
<thead>
<tr>
<th>☐ VI. CHILD CARE SUBSIDY CASE INFORMATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parent Name:</td>
</tr>
<tr>
<td>☐ The child care subsidy is: ☐ Approved. ☐ Disapproved. ☐ Closed.</td>
</tr>
<tr>
<td>☐ The parent is: ☐ Not using this provider. ☐ Using this provider.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>SIGNATURE</th>
<th>DATE</th>
<th>PHONE</th>
</tr>
</thead>
</table>
(Model) NON-DISCLOSURE AGREEMENT for District and Contractor

between

the ____________________ County Department of Social Services (DEPARTMENT) and __________________________________________________(CONTRACTOR)

THIS AGREEMENT is between DEPARTMENT, having its principal place of business at ________________________, New York ______, and CONTRACTOR, having its principal place of business at ________________________________.

WITNESSETH

WHEREAS, CONTRACTOR is under engagement by DEPARTMENT to __________________________________________________________________; and

WHEREAS, it is in the interests of all parties that discussions and information or data exchanged be carried on in a controlled environment, and that confidential or proprietary information or data (all hereinafter referred to just as “confidential information”) developed by the parties, or accessed from other sources by virtue of DEPARTMENT having access to such sources, or the ability to arrange access to such sources for CONTRACTOR or CONTRACTOR’s employees or agents, be protected from further disclosure unless DEPARTMENT approves of its release, and that any confidential information be protected from disclosure to third parties, other than on a need-to-know basis;

NOW, THEREFORE, for and in consideration of the engagement of CONTRACTOR to perform services for DEPARTMENT, CONTRACTOR agrees to the following:

I. All information or data (oral, visual or written, including electronic) of which CONTRACTOR and/or its employees or agents become aware as a result of CONTRACTOR’s engagement with DEPARTMENT shall be deemed to be confidential information. Notwithstanding the foregoing, information or data which falls into any of the following categories shall not be considered confidential information:

a. information or data that is previously rightfully known to the receiving party without restriction on disclosure;

b. information or data that becomes, from no act or failure to act on the part of the receiving party, generally known in the relevant industry or is in the public domain; and

c. information or data that is independently developed by CONTRACTOR and/or its employees or agents without use of confidential information of DEPARTMENT or any State or governmental agency.

II. Except as specifically permitted in this Non-Disclosure Agreement or by DEPARTMENT, CONTRACTOR and/or its employees or agents shall not, at any time, in any fashion, form, or manner, either directly, indirectly or accidentally, divulge, disclose, communicate or use, either prior to, during or subsequent to any engagement, any confidential information or methods of
accessing information or data received, obtained, acquired, directly, indirectly or accidentally, or
developed in association with any engagement unless necessary to effectuate the purposes of
the engagement.

III. CONTRACTOR agrees that any confidential information received from DEPARTMENT, or
accessed from other sources by virtue of DEPARTMENT having access to such sources, or the
ability to arrange access to such sources for CONTRACTOR or CONTRACTOR’s employees
or agents, shall be provided only to those designated staff of DEPARTMENT and
CONTRACTOR on a pre-approved and need-to-know basis, and that it shall be provided to only
those of its employees or agents who have signed a non-disclosure agreement provided or
approved by DEPARTMENT. CONTRACTOR agrees that when access to such information or
data also results in access to confidential information beyond that which is necessary for the
purpose for which access was granted, it will access only the information or data needed for
the purpose for which access was given. CONTRACTOR shall take all reasonable steps to
inform such employees or agents of their non-disclosure responsibilities with respect to
CONTRACTOR’s engagement by DEPARTMENT. When such employees or agents no longer
have a need for access to such confidential information, whether because of termination of
employment, reassignment of job duties or otherwise, CONTRACTOR shall ensure that the
access of such employees or agents to such confidential information is terminated, unless access
is needed for other engagements for which CONTRACTOR, and such employees or agents,
have been granted access and have signed Non-Disclosure Agreements.

IV. CONTRACTOR acknowledges and agrees that it, and its employees, subcontractors or
agents, are bound by applicable Federal and State laws governing confidentiality and/or
privacy of information, which may include but which are not limited to:

a. Section 372 of the Social Services Law;
b. Parts 357.3 and 423.7 of Title 18 of the NYCRR; Section 114 of the Domestic
   Relations Law, Sections 373-a and 409-f of the Social Services Law; Section
   168.7 of Title 9 of the NYCRR; and Section 501-c of the Executive Law;
c. Section 460-e of the Social Services Law; and
   d. Section 444 of the Social Services Law; and
   e. Section 422 of the Social Services Law and section 432.7 of Title 18 of the
      NYCRR; and
   f. Sections 465.1 and 466.2 of Title 18 of the NYCRR;
g. Section 164.7 of Title 9 of the NYCRR and Section 2782 of the Public Health
   Law;
h. Section 431.7 of Title 18 of the NYCRR; and
   i. Section 459-g of the Social Services Law and Section 452.10 of Title 18 of the
      NYCRR;
j. Section 462.9 of Title 18 of the NYCRR;
k. Section 473-e of the Social Services Law and Section 457.16 of Title 18 of the
      NYCRR; Section 361.38 of Title 34 of the CFR; and
   l. Section 136 of the Social Services Law.
V. CONTRACTOR agrees to immediately notify DEPARTMENT of any request for information or data concerning or related to DEPARTMENT business that does not come from an individual involved in the project.

VI. CONTRACTOR agrees not to issue any press releases, give or make any presentations, or give to any print, electronic or other news media information regarding its engagement without the advance approval of DEPARTMENT.

VII. CONTRACTOR agrees that all confidential information in its possession as a result of the engagement is at all times the sole property of DEPARTMENT, and that CONTRACTOR will turn over to DEPARTMENT all reports, notes, memoranda, notebooks, drawings, and other information or data developed, received, compiled by or delivered to CONTRACTOR and/or its employees or agents relating to any engagement for services, regardless of the source of said information or data, upon termination of any engagement. CONTRACTOR agrees to return or, with the consent of DEPARTMENT, destroy all confidential information at the conclusion of the engagement or at an earlier date set forth by DEPARTMENT. Destruction includes the complete purging of all confidential information from all computers and back-up media storage, in a manner that meets media disposal standards promulgated by the New York State Office of Cyber Security. CONTRACTOR shall certify in writing that it has complied with the obligations set forth in this section.

VIII. CONTRACTOR and/or its employees or agents shall not attach or load any additional hardware or software to DEPARTMENT or State equipment unless authorized by DEPARTMENT, and will use only those access rights and will access only those systems, directories, information or data authorized for its/his/her use by DEPARTMENT. All requests for access must be communicated to DEPARTMENT’s Systems Administrator, and to the appropriate State agency’s Information Security Officer or his/her designee.

IX. CONTRACTOR agrees to take no actions which intrude upon, disrupt or deny services to DEPARTMENT, unless prior authorized and in such a manner as directed by DEPARTMENT’s Systems Administrator or his/her designee.

X. In addition to the consent of DEPARTMENT required in paragraph VIII and IX, the prior written consent of the applicable New York State agency’s Information Security Officer or his/her designee shall be required for such actions taken with respect to any statewide system or database.

XI. CONTRACTOR agrees to transmit confidential information, including client data, to DEPARTMENT only through the use of secure methods as designated by DEPARTMENT for such purposes.

XII. CONTRACTOR agrees:
   a. to use the confidential information furnished under this Agreement only for the purposes described in the engagement and herein; and
b. to retain such confidential information only so long as may be necessary to effectuate the purposes of the engagement.

XIII. CONTRACTOR agrees to store confidential information received in secure, locked containers. Where data is stored on a computer or other electronic media, CONTRACTOR must have an appropriate computer security policy that protects confidential information from unauthorized disclosure. The computer security policy must include provisions that address the physical security of computer resources; equipment security to protect equipment from theft and unauthorized use; software and data security; and access control. Any access to the stored data, wherever or however stored, must be limited to personnel who have an official business need, and who have signed a Non-Disclosure Agreement substantially similar to that signed by CONTRACTOR’s other employees or agents who have access to the stored data. Responsibility for computer security must be assigned to a specific individual or organization, and the assignment must be documented.

XIV. CONTRACTOR agrees that if it and/or its employees or agents breaches or threatens to breach this Agreement, in addition to having any engagement terminated, DEPARTMENT shall have all equitable and legal rights (including the right to obtain injunctive relief) to prevent such breach and/or to be fully compensated (including reasonable attorneys’ fees) for losses or damages resulting from such breach. CONTRACTOR acknowledges that compensation for damages may not be sufficient and that injunctive relief to prevent or limit any breach of confidentiality may be the only viable remedy to fully protect the confidential information as defined in this Agreement. CONTRACTOR further understands and agrees that the terms of this Non-Disclosure Agreement shall survive any term of the engagement, and CONTRACTOR will abide by the terms of this Non-Disclosure Agreement in perpetuity.

XV. CONTRACTOR shall indemnify and hold harmless DEPARTMENT and the applicable State Agency as well as the State of New York from any and all claims, suits, damages, and costs of any kind including attorney fees, and causes of action arising out of or in any way related to the terms of CONTRACTOR’s engagement, including but not limited to unauthorized disclosure of any confidential information received hereunder.

XVI. CONTRACTOR agrees that it shall not assign or subcontract its obligations under this Agreement.

IN WITNESS WHEREOF, CONTRACTOR has signed this Non-Disclosure Agreement as of the date set forth below.

By: _________________________________
Title: _________________________
Date: ___________________________

STATE OF_______________________)           ) SS:
COUNTY OF _____________________)
On this ____day of__________, 201___, before me personally came _________________________, to me known, who, being duly sworn by me, did depose and say that (s)he resides at ________________________________, that (s)he is the ___________________ (the President, principal or other officer or director or attorney-in-fact duly appointed) of __________________, the business or organization described in and which executed the above instrument; and that (s)he signed her/his name thereto by authority of the governing body of said business or organization.

_____________________________________

Notary Public
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(Model) NON-DISCLOSURE AGREEMENT for District to use with Contractor's Employee, Subcontractor or Agent

This Agreement is executed by and between the _________________ County Department of Social Services (DEPARTMENT), having its principal place of business at ___________________, New York, and [INSERT NAME OF THE INDIVIDUAL] (hereinafter referred to as either “I,” “me” or “INDIVIDUAL”), as an employee, subcontractor or agent of ___________________________(CONTRACTOR). [INSERT NAME OF THE CONTRACTOR]

I am an employee, subcontractor or agent of [INSERT NAME OF CONTRACTOR], which is under engagement by DEPARTMENT, pursuant to ________________________________ [REFERENCE THE AGREEMENT] (hereinafter referred to as “Engagement”), to _______________________________________________________________. [DESCRIBE THE ENGAGEMENT]

I understand that as part of performing the duties outlined in and associated with the Engagement, I may have access to, see or hear confidential or proprietary information or data (all hereinafter referred to just as “confidential information”). All information or data (oral, visual or written, including electronic) of which I become aware as a result of the Engagement shall be deemed to be confidential information.

I understand and agree that the use of confidential information obtained in the performance of my duties shall be limited to purposes directly connected with such duties, unless otherwise provided in writing by DEPARTMENT. When access to such information or data also results in access to confidential or proprietary information or data beyond that which is necessary for the purpose for which access was granted, I agree to access only the information or data needed for the purpose for which access was given.

When I no longer require access to confidential information, whether because of termination of employment, reassignment of job duties or otherwise, I agree that I will not access or attempt to access any of DEPARTMENT’s confidential information, or any confidential information in State systems or other sources to which I have been given access as a result of the Engagement, and will turn over to CONTRACTOR all reports, notes, memoranda, notebooks, drawings, and other information or data developed, received, compiled by or delivered to me relating to the
Engagement, regardless of the source of the said information or data. I will certify in writing that I have complied with the obligations set forth in this section.

I understand that the law forbids disclosing such information, in whole or part, to anyone unless specifically directed to do so by DEPARTMENT. I agree that I will not disclose it unless I am specifically directed to do so by CONTRACTOR or DEPARTMENT. I further understand that if I am unsure as to what information is confidential, I will immediately consult with CONTRACTOR and/or DEPARTMENT program managers involved with the Engagement prior to any such disclosure.

I will safeguard, and will not disclose to unauthorized parties, any user name and/or password that may be issued to me in furtherance of my access to the confidential information unless authorized by DEPARTMENT. I understand that my access to the confidential data may be revoked at any time if my responsibilities change, or for any other reason at the discretion and direction of CONTRACTOR or DEPARTMENT.

I will comply with all applicable Federal and State laws and regulations and with all applicable policies and procedures as set by the State of New York and DEPARTMENT, including, but not limited to, the confidentiality provisions of Section 372 of the New York State Social Services Law.

I will promptly report, to DEPARTMENT and CONTRACTOR, activities by any individual or entity that I suspect may compromise the availability, integrity, security or privacy of the confidential information. I will immediately notify CONTRACTOR of any request for information or data concerning or related to DEPARTMENT business that does not come from an individual involved in the project.

I agree not to attach or load any additional hardware or software to DEPARTMENT or State equipment unless authorized by DEPARTMENT, and that I will use only those access rights and will access only those systems, directories, information or data authorized for my use by DEPARTMENT.

I agree not to take any actions which intrude upon, disrupt or deny services to DEPARTMENT, unless prior authorized and in such a manner as directed by DEPARTMENT’s Systems Administrator or his/her designee.
I agree to store confidential information received in secure, locked containers or, where data is stored on a computer or other electronic media, in accordance with CONTRACTOR’s computer security policy that protects confidential information from unauthorized disclosure.

I agree not to issue any press releases, give or make any presentations, or give to any print, electronic or other news media information regarding my employment by, or my relationship with, CONTRACTOR with respect to the Engagement with DEPARTMENT, without the advance approval of DEPARTMENT.

I understand and agree that the terms of this Confidentiality and Non-Disclosure Agreement shall continue even when I am no longer an employee, subcontractor or agent of CONTRACTOR, and that I will abide by the terms of this Confidentiality and Non-Disclosure Agreement in perpetuity.

I understand that failure to comply with these requirements may result in disciplinary action, termination and/or criminal prosecution, as well as any other penalties provided by law.

This Agreement shall be governed by the laws of the State of New York, unless otherwise required by the Federal Supremacy Clause.

__________________________________________
INDIVIDUAL’s printed name

__________________________________________
INDIVIDUAL’s signature

__________________________________________
Entity of which INDIVIDUAL is an employee, subcontractor or agent  [INSERT NAME OF CONTRACTOR]

__________________________
Date
This page left intentionally blank.
This form must be completed by any child care provider who is under 18 years of age.

<table>
<thead>
<tr>
<th>PROVIDER NAME:</th>
<th>DATE OF BIRTH:</th>
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</table>

1) I agree to the following conditions:
   - I am at least 14 years old.
   - I do not and will not provide child care during the hours I am required to be in school.
   - I understand additional restrictions may apply to me based on the type of care I provide, and they are listed below.

2) The type of care I provide is:
   - [ ] A.) I provide In-Home Child Care. I provide care in the home of the children. I provide care
     ONLY for children who live in the home where the care is provided. Working papers are not required. However, if at any time I begin to provide Family Child Care I must follow the requirements listed below.
   - OR
   - [ ] B.) I provide Family Child Care. I provide care in a residence and I provide care for at least one child who does NOT live in that residence.
     1) I am required to have working papers.
        - [ ] I have attached a copy of my working papers (Required for all minors providing family child care).
     2) The Family Child Care is provided in the following residence:
        - [ ] a. In my home. My parent/caretaker has signed below.
        - [ ] b. In a home other than the home of the children and other than my home.
          The adult in charge of the residence has signed below.
     3) The hours I work are restricted based on my age and whether I am enrolled in school.
        - [ ] a. I am 14 or 15 years old and enrolled in school.
          While school is in session, I do not provide care between the hours of 7:00 PM and 7:00 AM; and I work no more than 3 hours on any school day; no more than 8 hours on a Saturday, Sunday or holiday; and, no more than 18 hours per week;
          AND
          When school is not in session (during school vacations), I do not provide care between the hours of 9:00 PM and 7:00 AM; and, I work no more than 8 hours per day and 40 hours per week.
        - [ ] b. I am 16 or 17 years old and enrolled in school.
          While school is in session, I do not provide care between the hours of 10:00 PM to 6 AM. However, with the written consent of my parent and a certificate of good academic standing from my school, I may work additional hours from 10:00 PM up to midnight. I work no more than 4 hours on any school day, except Friday; no more than 8 hours a day on Friday, Saturday, Sunday and holidays; and, no more than 28 hours per week,
          AND
          When school is not in session (during school vacations), I do not provide care between midnight and 6:00 AM; and, I work no more than 8 hours per day and 48 hours per week.
        - [ ] c. I am 16 or 17 years old and I am not enrolled in school. I can work full time throughout the year. I do not provide care between midnight and 6:00 AM; and, I work no more than 8 hours per day and 48 hours per week.

By signing this form I agree that all of the above statements are true and accurate.

<table>
<thead>
<tr>
<th>PROVIDER SIGNATURE:</th>
<th>DATE:</th>
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</table>

<table>
<thead>
<tr>
<th>SIGNATURE OF PARENT/CARETAKER OF MINOR PROVIDER OR ADULT IN CHARGE OF THE HOME:</th>
<th>DATE:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>PRINT NAME OF PARENT/CARETAKER OF MINOR OR ADULT IN CHARGE OF THE HOME:</th>
<th>DATE:</th>
</tr>
</thead>
</table>
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EMPLOYMENT OF MINORS, INFORMATION

All minors may not work during the hours when they are required to attend school. The limitations on the working hours of minors depend upon age, the type of work, and whether the minor is enrolled in school. New York State has one of the most stringent child labor laws in the country, which limits the number of hours that minors under 18 year of age may work when school is in session. It requires that 16 and 17 year-olds may not work past 10 p.m. on the night before a school day without written permission from a parent and a certificate of satisfactory academic standing from their school.

In addition to the limitations on the number of hours minors may work in a day or a week, the law prohibits them from working before or after certain hours, depending on their age and occupation.

1. School Attendance
Full-time school is compulsory for minors under 16 years old. A community can require minors who are not employed to attend school until they reach age 17 or graduate. High school graduates, regardless of age, are not required to continue attending school. However, they must provide an employer with a Full-time Employment Certificate until they reach their 18th birthday. Minors may not work during the hours when they are required to attend school.

The school attendance requirement applies to all minors providing legally-exempt child care, including babysitters.

2. Minimum Age For Employment
- Minors not yet 14 may not be employed at any time, neither after school nor during vacation.
- Minors 14 and 15 years old may work after school hours and during school vacations.
- Minors 16 and 17 years of age, who are enrolled in school, may work after school hours and during school vacations.
- Minors 16 and 17 years of age, if not enrolled in school, may work full time throughout the year.

The minimum age requirement applies to all minors providing legally-exempt child care, including babysitters.

3. Department of Labor Exceptions for “Babysitters”
The Office of Children and Family Services (OCFS) regulations allow for minors age 14 years of age or older, who meet the requirements set forth in Article 4 of the New York State (NYS) Labor Law (LL) for the employment of minors, to become enrolled informal child care providers. NYS LL specifies types of employment, including babysitting, which are exempt from the requirements for employment of minors pertaining to employment certificates/permits and work hours. Babysitting conducted by a minor is defined in New York State Labor Law, Article 4, section 131 “staying with and at the home of a younger child or children with or without the presence at such home of such child’s or children’s parents or guardians.” OCFS recognizes that legally-exempt “in-home” child care providers defined in 18 NYCRR § 415 are babysitters. Minors providing legally-exempt family child care are not babysitters.

4. Hours of Work-Vary by Age

A. Minors age 14-15
When school is in session, generally from September to June, minors 14 and 15 years-old may not work in any occupation except farm labor and selling or distributing newspapers for:

- more than 3 hours on any school day,
- more than 8 hours on a Saturday, Sunday or holiday,
- more than 18 hours in any week, and
- more than 6 days in any week.

Note: Babysitters are not subject to the above limits on hourly, daily and weekly employment.
However, if a 14 or 15 year-old minor is employed as part of any type of supervised work study or work experience program that is approved by the Commissioner of Education, they may work 3 hours on a school day and 23 hours a week, instead of 3 hours a day and 18 hours a week.

**NIGHT RESTRICTIONS FOR MINORS AGE 14-15**

Minors under 16 may not work between 7 p.m. and 7 a.m. in most jobs, after Labor Day to June 20th and between 9 p.m. and 7 a.m. from June 21st to Labor Day.

**B. Minors age 16-17 Enrolled in School**

When school is in session, minors 16 and 17 years-old enrolled in a day school, other than a part-time or continuation school, may not work in any occupation (except farm work and selling or distributing newspapers):

- more than 4 hours on any day preceding a school day (M, T, W, Th.),
- more than 8 hours on Friday, Saturday, Sunday, or Holiday,
- more than 28 hours in any week,
- more than 6 days in any week.

*Note: Babysitters are not subject to the above limits on hourly, daily and weekly employment.*

However, students enrolled in a cooperative work experience program approved by the Department of Education may be employed up to a maximum of 6 hours on a day preceding a school day other than a Sunday or a holiday if these hours are in conjunction with the program. Any hours worked in such program shall be included when calculating the number of hours worked for the 4 hour maximum.

When school is not in session, and during vacations (school must be closed for the entire calendar week), minors under 18 generally may not work more than 8 hours a day, 6 days a week; minors 14 and 15 may not work more than 40 hours a week and 16 and 17 year-olds may not work more than 48 hours a week.

When a minor is employed in two or more establishments in the same day or week, the total time of employment may not exceed the daily or weekly allowance for a single establishment.

**NIGHT RESTRICTIONS FOR MINORS AGE 16-17**

Minors 16 and 17 years old may not work between midnight and 6 a.m. when school is not in session (vacation). They may work after 10 p.m. up to midnight during the school year only with the written consent of a parent and a certificate of good academic standing from their school. Parental Consent Forms may be obtained by an employer from the Division of Labor Standards office in your area. The Certificate of Satisfactory Academic Standing is issued by the school the minor attends.

**C. Minors age 16-17 Not Enrolled in School**

Minors 16 and 17 years old that are not enrolled in a daytime school when school is in session may not work in any occupation (except farm work and selling or distributing newspapers):

- more than 8 hours a day
- more than 6 days per week
- more than 48 hours total per week

**NIGHT RESTRICTIONS FOR MINORS AGE 16-17 NOT ENROLLED IN SCHOOL**

Minors 16 and 17 years old may not work between midnight and 6 a.m.
5. Employment Certificates and Permits-
An employment certificate or permit is required for minors under 18 before they may begin work. High school graduates, minors who work for their parents, and minors who do industrial homework are included in this group.

Exception: Babysitters are not required to have an employment certificate or permit.

A. Types of Employment Certificates and Permits
- A Student Non-factory Employment Certificate (AT-18, blue paper)-
  Is issued to a minor 14 or 15 years old for permitted work in any trade, business, or service, but not for work in a factory workroom or for work involving use of dangerous materials or chemical processes.

- A Student General Employment Certificate (AT-19, green paper)-
  Is issued to a minor 16 or 17 years old who is enrolled in school. It is valid for work in a factory or any other trade, business, or service, but not valid for hazardous employment such as operating certain power-driven machines, construction work, or for work as a helper on a motor vehicle.

- A Full-Time Employment Certificate (AT-20, salmon paper)-
  Is issued to a minor 16 or 17 years old who is not enrolled in school, or is leaving school for full-time employment. It is valid for work in a factory or any other trade, business, or service but not valid for hazardous employment such as operating certain power-driven machines, construction work, or for work as a helper on a motor vehicle.

B. Obtaining Employment Certificates and Permits
Minors can obtain employment certificates or permits from the school they attend or from the superintendent of schools in that area. The paperwork required includes:

- Written permission from a parent to work. (There are exceptions for minors considered to be emancipated by school authorities. An emancipated minor does not need their parents’ permission to work. All other requirements pertaining to minors such as hours of employment, do apply).

- Proof of age, either a birth certificate or some other document at least two years old that satisfies the officer issuing the certificate.

- A certificate of physical fitness to assure that the young person is in sound health and that the work will not impair his/her physical condition. School medical doctors or physicians designated by the Department of Health give physical examinations. Otherwise minors may obtain a certificate of physical fitness from their own doctor. Minors from neighboring states who seek work in New York can use a certificate issued by a physician in their home state. Physicians who find that a youth age 14 to 18 is not physically fit for some occupations but may engage safely in other types of work, can issue a certificate of limited physical fitness.

For youths to obtain a full-time employment certificate, their parent or guardian must appear in person before the school authorities to give consent. (High school graduates can use written consent.) In addition, youths must provide proof of age, a certificate of physical fitness, and a schooling record. In New York City and Buffalo, a 16-year-old minor who is leaving school must have a pledge of employment signed by the prospective employer that shows the number of work-hours per day, days per week, and the nature of work to be done.

Note: This excerpt of the rules governing the employment of minors has been taken from the New York State Department of Labor’s Web site and New York State Labor Law.
This page left intentionally blank.
This form must be completed whenever legally-exempt in-home care is provided.

1. Parent Certification
I understand that I can choose who will provide child care for my child.

I understand that if I choose someone to come into my home to provide child care, that I am the sole employer of this person.

I understand that as the employer, I am responsible for paying minimum wage and benefits to my employee and I may have other responsibilities to my employee.

I understand that it is my obligation to find out what I am responsible for as an employer and make sure I am doing what is required of me as an employer, including but not limited to paying all applicable Federal and State employment taxes required to be paid by me as an employer.

I understand that any child care benefit for which I am eligible may only cover a portion of my child care costs.

I understand that I am responsible for any child care costs that my child care benefit does not cover.

PARENT/CARETAKER SIGNATURE: ___________________________ DATE: __________

PARENT/CARETAKER SIGNATURE: ___________________________ 

2. In-Home Provider Certification
I have been hired by ___________________________ to provide child care in

(NAME OF PARENT/CARETAKER) home. My work schedule and wages are determined by

(NAME OF PARENT/CARETAKER), who is my employer. I understand that as my employer, it is

(NAME OF PARENT/CARETAKER) 's responsibility to pay my wages, benefits, and all applicable
Federal and State employment taxes required to be paid by my employer.

I understand and acknowledge that I am not an employee of ___________________________

County Department of Social Services. I further understand that child care payments that I receive directly or indirectly for providing child care will not make me an employee of that county.

By signing this form, the parent and provider agree to all of the requirements listed above. No payment will be made unless the parent and the provider sign this form.

PROVIDER SIGNATURE: ___________________________ DATE: __________

PROVIDER NAME (PRINT): ___________________________
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Dear Parent/Caretaker,

When you choose to use an in-home child care provider, you are regarded as an employer and therefore you must meet the requirements for each of the following. Minimum wage and other benefit levels are subject to change. You must check with the New York State Department of Labor to make sure that you meet all of the current requirements.

1. **Minimum Wage Requirement**
   When you have someone care for your child(ren) in your home, you must pay your in-home child care provider no less than minimum wage. The New York State minimum wage was $7.25 per hour as of August 2010. It is your responsibility to keep informed of the current minimum wage and you may do so by contacting the New York State Department of Labor. Any increase in the federal minimum wage above the state rate will result in an increase to the state's minimum wage. For more information, contact the New York State Department of Labor or visit their website at [http://www.labor.ny.gov/](http://www.labor.ny.gov/)

2. **Social Security Taxes (FICA)**
   You, as the employer of an in-home child care provider, are responsible for reporting and paying FICA each calendar quarter. FICA does not apply to wages that you pay your own children under 21 years of age. As an employer, you must withhold a percentage of the in-home child care provider's earnings and you must also contribute a matching amount for FICA which includes a portion for Social Security and a portion for Medicare. You may get help determining the appropriate amounts that need to be withheld by contacting the Internal Revenue Service. For more information on FICA rate, forms, filing procedures, and general assistance, contact the Internal Revenue Service at 1-800-829-1040.

3. **Federal Unemployment Tax (FUTA)**
   As an employer, you are required to make FUTA payments if you pay your in-home child care provider in cash wages in any calendar quarter. You should contact the Internal Revenue Service for the dollar amount of cash wages which require FUTA payments. This tax must be paid by you as the employer and cannot be deducted from your in-home child care provider's wages. You must file a Form 940 or Form 940-EZ at the end of the year. For more information on the FUTA rate, forms, filing procedures and general assistance, you may contact the nearest Internal Revenue Service (IRS) office.
4. **NYS Unemployment Insurance**
If you pay your in-home child care provider a total of $500 or more in a calendar quarter, then you are required to pay New York State unemployment insurance (UI) taxes. The wages need not to be paid to any one employee to make you liable to pay UI taxes. If you have paid cash wages of at least $500 in total to one or more in-home child care providers in a calendar quarter, you are required to pay the tax. For information on how to register and for computation of your UI tax rate as an employer, contact the New York State Department of Labor, Unemployment Insurance Division, W.A. Harriman Campus, Building 12, Albany, New York, 12240 or visit their website at [http://www.labor.ny.gov/](http://www.labor.ny.gov/)

5. **New York State Workers’ Compensation**
When your in-home child care provider works 40 or more hours per week, you are responsible for providing Workers’ Compensation Insurance and Disability Benefit Insurance coverage. This requirement does not apply to your own children who are under the age of 21. You may not charge any part of the cost of this insurance to your in-home child care provider. This insurance may be purchased from any private company licensed to write such coverage in New York State or from the State Insurance Fund, a State agency. For more information, contact the Worker’s Compensation Board at 1-877-632-4996.

You may request that the local social services district add the cost of these benefits to the rate charged by your in-home child care provider in order to calculate the full cost of your child care. You will need to inform the Local Social Services District how much your in-home child care provider charges you and how much additional you are paying to cover the costs of the benefits. The Local Social Services District may then be able to include all or some portion of these benefits in your child care subsidy, if the total amount is below the applicable market rate. The Local Social Services District cannot pay more than the child care market rate. You are responsible for paying your in-home child care provider the difference between the total cost of care and what the Local Social Services District can pay.
LEGALLY EXEMPT CHILD CARE PROVIDER TRAINING RECORD FORM

Complete and return this form to the Enrollment Agency.

Child Care providers who have completed 10 or more hours of training in the areas listed below may be eligible to receive an enhanced reimbursement rate once verified by the Enrollment Agency.

- Principles of childhood development: focusing on the developmental stages of the age groups for which your program provides care;
- Child care program development;
- Nutrition and health needs of infants and children, which may include the administration of medication;
- Shaken baby syndrome: Education and information on the identification, diagnosis and prevention.
- Child abuse and maltreatment: Identification and prevention;
- Child abuse and maltreatment: Statutes and regulations;
- Safety and security procedures;
- Business record maintenance and management; or
- Statutes and regulations pertaining to child day care.

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<th>PROVIDER NAME:</th>
<th>ENROLLMENT ID NUMBER:</th>
<th>SOCIAL SECURITY NUMBER:</th>
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Please list any child care training you have taken within the past 12 months, and attach documentation, such as a training certificate.

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| Name of Child Care Provider:                        |
| Name of Individual with Criminal Conviction:       |
| Specify Crime(s) Name and Penal Law/Code:           |
| Disposition Date(s) and Penalties Imposed:          |
| Description(s):                                    |

Other Relevant Information:

I attest the above information is a true and accurate summary.

**SIGNATURE OF PERSON WITH CRIMINAL HISTORY** - if not the provider ___________ D E T A:

**PROVIDER SIGNATURE** ___________ D E T A:

**PARENT ATTESTATION**

- I understand that the provider I have selected, or, other person named above who may be on the premises of the child care program, has a criminal history described above. I may request that the Enrollment Agency consider this provider for enrollment.

- I understand that I have the right to select another provider. If I need help locating another provider, I can request such help from the local child care resource and referral agency and/or the local district. I hereby waive this right and, by signing this form, I am stating that I choose to have this provider care for my child.

**PARENT/CARETAKER SIGNATURE:** ___________ **DATE:** ___________

**PRINT PARENT/CARETAKER NAME:**
Applies to Child Care Provider only.

1. Name of Child Care Provider: 

2. Name of Day Care Program having enforcement action: 

3. Location: 

4. Type(s) of Enforcement Action (Check all that apply): □ Denied □ Revoked □ Suspended

5. Dates of Enforcement Actions:
   - Describe what led to the denial, revocation or suspension of your license/registration to operate a child day care program:
   - Explain the underlying reasons why this occurred:

6. Other Relevant Information:

I attest the above information is a true and accurate summary.

PROVIDER SIGNATURE: 
DATE: 

PARENT ATTESTATION

☐ I understand that the provider I have selected named above, has a history of daycare enforcement described above. I may request that the Enrollment Agency consider this provider for enrollment.

☐ I understand that I have the right to select another provider. If I need help locating another provider, I can request such help from the local child care resource and referral agency and/or the local district. I hereby waive this right and, by signing this form, I am stating that I choose to have this provider care for my child.

PARENT/CARETAKER SIGNATURE: 
DATE: 

PRINT PARENT/CARETAKER NAME: 
DATE:
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### History of Termination of Parental Rights and/or Court-Ordered Article 10 Removal of a Child and Parental Acknowledgment

18 NYCRR 415.4 (F)(8)(II)(A)(2)

Applicable to Child Care Provider only.

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<th>DATE(S) OF REMOVAL/TERMINATION:</th>
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<th>NAMES OF CHILDREN INVOLVED:</th>
<th>COUNTY AND STATE:</th>
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#### TYPE OF COURT INVOLVEMENT (Check all that apply):

- [ ] A) Judicial Termination of Parental Rights Under Social Services Law 384-b
  - [ ] 1) Legal Reason for Judicial Termination of Parental Rights:
    - [ ] a) Permanent Neglect;  [ ] b) Mental Retardation;  [ ] c) Severe or Repeated Abuse;
    - [ ] d) Other,

- [ ] B) Court-Ordered Removal of a Child under Family Court Act Article 10 (Child Protective)
  - [ ] 1) Judicial Finding:
    - [ ] a) Neglect;  [ ] b) Abuse;  [ ] c) Severe or Repeated Abuse;  [ ] d) No Finding,
  - [ ] 2) If no judicial finding, give reason:
    - [ ] a) Article 10 Petition never filed with court;  [ ] b) Article 10 Petition withdrawn;
    - [ ] c) Case was dismissed  [ ] d) Other,

- Describe the situation(s) that led to the termination of parental rights and/or the removal of children

- Explain the reasons underlying the termination of parental rights and/or the removal of children

Attach additional pages if necessary.

I attest the above information is a true and accurate summary.

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#### Parent Attestation

- [ ] I understand that the provider named above has a history of termination of parental rights and/or a child protective removal of a child, described above. I may request that the Enrollment Agency consider this provider for enrollment. I understand that I have the right to select another provider. If I need help locating another provider, I can request such help from the local child care resource and referral agency and/or the local district.

- [ ] I hereby waive this right and, by signing this form, I am stating that I choose to have this provider care for my child.

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03-OCFS-LCM-17

Legally-Exempt In-Home Child Care Providers as Employers

The purpose of 03-OCFS-LCM-17, In-Home Child Care Providers As Employers, is to inform local social services districts of a ruling by a Territorial Office of the United States Internal Revenue Service (IRS) that may have widespread employment tax ramifications for local departments of social services.
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Local Commissioners Memorandum

| Transmittal: | O3-OCFS-LCM-17 |
| To: | Local District Commissioners, Directors of Services, Child Care Unit Supervisors, TANF Directors |
| Issuing Division/Office: | Development and Prevention Services |
| Date: | October 24, 2003 |
| Subject: | Legally-Exempt In-Home Child Care Providers as Employees |
| Contact Person(s): | Anne Ball (518) 474-3775 or Anne.Ball@dfa.state.ny.us |
| Attachments: | A: Agreement for Legally-Exempt In-Home Child Care |
| Attachment Available On – | Yes |

I. Purpose

The purpose of this transmittal is to inform local social services districts of a recent ruling by a Territorial Office of the United States Internal Revenue Service (IRS) that may have widespread employment tax ramifications for local departments of social services. The IRS decision held that a specific local social services district in New York State was responsible for payment of all applicable employment taxes related to one specific legally-exempt in-home child care provider in the district. The IRS considered the local social services district to be that specific provider’s third-party employer.

Although the Office of Children and Family Services (OCFS) disagrees with the ruling of the IRS Territorial Office in this matter, we are revising the enrollment process for legally-exempt in-home providers in an effort to strengthen the position of all local social services districts that these providers are not district employees. We have developed a model agreement that sets forth the relationship between the legally-exempt in-home provider and the child’s caretaker. It also includes a statement indicating that the provider acknowledges that he or she is not an employee of the district. The agreement must be signed by both parties. Districts must immediately incorporate the attached agreement as part of the enrollment process for legally-exempt in-home child care providers. Districts may also wish to consider a change in the manner in which child care subsidy checks are issued for legally-exempt in-home child care providers. Districts that are issuing checks to the legally-exempt in-home providers on behalf of the parents may want to change their method of payment by issuing the checks to the parents only. This will reinforce the fact that only the parents are responsible for paying the providers.
II. Background on the IRS decision

A legally-exempt in-home provider, selected by a family receiving a child care subsidy from a local social services district, requested a ruling from a Territorial Office of the IRS regarding the provider’s employment status as it related to federal employment tax liability. The IRS held that the local social services district controlled the payment of wages to the provider and, therefore, the district was liable for the related employment taxes on the provider’s income. Subsequently, the district requested a reconsideration of the ruling from the IRS and the IRS reaffirmed its decision.

After being made aware of the IRS’s decision in this case, OCFS reached out to other states for their experiences regarding this issue. The State of Michigan informed OCFS that it had a similar issue with an IRS ruling. Michigan formerly issued two-party checks in the names of the parents and the providers. Michigan had to change its method of payment and issue the subsidy payments only to the parents to satisfy the IRS and be released from the requirement to pay employer taxes.

III. Program Implications

In addition to the enrollment form provided in 01-OCFS-LCM-11, the form provided in this LCM as Attachment A, Agreement for Legally-Exempt In-Home Child Care, must be used in all circumstances when a parent has hired a legally-exempt in-home provider. The form provides an acknowledgement by the parent that he/she is the provider’s employer. The form also has the provider acknowledge that the parent is his/her employer. Districts must require providers of legally-exempt in-home care currently enrolled with their districts and the parents using such care to sign and return the Agreement. Districts that fail to do so are at greater risk of being considered by the IRS to be the employers of the providers.

While districts continue to have the authority under 18 NYCRR Part 415.5(f)(1) and (2) to issue checks in the parent’s name or in the provider’s name on behalf of the parent, OCFS recommends that districts consider issuing checks only in the parent’s name when a legally-exempt in-home provider provides care. If the method of payment is changed, a Notice of Intent to Change Child Care Benefits (LDSS-4781) must be issued to the recipient. A notice of change in the method of payment where such change does not result in the discontinuance, suspension, reduction or termination of child care services or does not force the recipient to make changes in child care arrangements does not have to be sent ten days in advance of the change. Districts can make such a change and send notification to the parent at the same time.

We hope that these two changes provide a greater level of protection for districts. However, judging by the differences in rulings in Michigan and New York, there does not appear to be any consistency among the IRS territorial offices in determining policy in this area. Therefore, at this time, districts should not assume that either of the above actions is guaranteed to protect against an adverse ruling by the IRS.

Larry G. Brown s/s

Larry G. Brown
Deputy Commissioner
Division of Development & Prevention Services
Attachment A

Agreement for Legally-Exempt In-Home Child Care

A. Parent Certification:

I understand that I can choose who will provide child care for my child.

I understand that if I choose someone to come into my home to provide child care, that I am the sole employer of this person.

I understand that as the employer, I am responsible for paying minimum wage and benefits to my employee and I may have other responsibilities to my employee.

I understand that it is my obligation to find out what I am responsible for as an employer and make sure I am doing what is required of me as an employer, included but not limited to paying all applicable Federal and State employment taxes required to be paid by me as an employer.

I understand that any child care benefit for which I am eligible may only cover a portion of my child care costs.

I understand that I am responsible for any child care costs that my child care benefit does not cover.

B. In-Home Provider Certification:

I have been hired by _____________ to provide child care in _____________ home. My work schedule and wages are determined by _____________, who is my employer.

I understand that as my employer, it is _____________ responsibility to pay my wages, benefits, and all applicable Federal and State employment taxes required to be paid by my employer.

I understand and acknowledge that I am not an employee of _____________ County Department of Social Services. I further understand that child care payments that I receive directly or indirectly for providing child care will not make me an employee of that county.

By signing this form, the parent and provider agree to all of the requirements listed above. No payment will be made unless the parent and the provider sign this form.

Parent or Caretaker Name (print)_____________________________________________________

Parent or Caretaker Signature ____________________________________________

Date:__________________

Provider Name (print)________________________________________________________________

Provider Signature_________________________________________________________________

Date:__________________
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Local District Highlights,  
*Guide to Enrollment of Legally-Exempt Child Care Providers*

The purpose of this document is to highlight sections in the *Guide to Enrollment 2015* that are relevant to LDSS responsibilities in the enrollment of Legally-Exempt Child Care Providers.
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Guide to Enrollment of Legally-Exempt Child Care Providers

Local District Highlights

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