218-RICR-20-00-4

TITLE 218 – RHODE ISLAND DEPARTMENT OF HUMAN SERVICES

CHAPTER 20 – INDIVIDUAL AND FAMILY SUPPORT PROGRAMS

SUBCHAPTER 00 – N/A

PART 4 – Child Care Assistance Program Rules and Regulations

Table of Contents

4.1 General Provisions

4.1.1 Introduction

4.1.2 Authority and Purpose

4.2 Definitions

4.3 Eligibility and Authorization of Services

4.3.1 General Eligibility

4.3.2 Cooperation with the Office of Child Support Services

4.3.3 Consequences of Non-cooperation with OCSS

4.3.4 Good Cause for Refusing to Cooperate

4.3.5 When Cooperation Not in Best Interest

4.3.6 Corroborative Evidence of Good Cause

4.3.7 Good Cause Based Upon Emotional and Physical Harm

4.3.8 Referral to the Domestic Violence Advocate

4.3.9 Limitations and Exclusions of Eligibility

4.4 Applying for Child Care Assistance

4.4.1 Application

4.4.2 Application Processing

4.4.3 Reporting Requirements

4.4.4 Redetermination

4.4.5 Notice Requirements: Notice of Approval, Notice of Denial, Right to Appeal and Hearing

4.5 Criteria for Categorical Eligibility

4.5.1 General Requirements and Criteria

4.5.2 Limitations

4.5.3 Exceptions

4.5.4 Co-payments

4.6 Criteria for Income Eligibility

4.6.1 General Requirements and Criteria

4.6.2 Need for Services

4.6.3 Limitations

4.6.4 Exceptions

4.7 Short Term Special Approval

4.7.1 Criteria for Short Term Special Approval

4.7.2 Limitations

4.7.3 Notifications

4.8 Authorization of Child Care Services

4.8.1 Assessment and Scope of Authorized Child Care

4.8.2 Limitations of Authorized Child Care

4.9 Enrollment for CCAP Authorized Services

4.9.1 Responsibilities

4.10 Notices, Rights and Duties

4.10.1 Notices

4.10.2 Rights

4.10.3 Duties

4.11 Improper Payments

4.11.1 Underpayments

4.11.2 Overpayments

4.11.3 Types of Improper Payments

4.11.4 Administrative Penalties for Intentional Misrepresentations

4.12 Child Care Provider Guide

4.12.1 DHS CCAP Approved Child Care Providers

4.12.2 Central Provider Directory (CPD) Approved Providers

4.12.3 Central Provider Directory Application for Approval Process

4.12.4 Criminal Records Checks – Disqualifying Information

4.12.5 Determination/Maintenance of Provider Status

4.12.6 DHS-CCAP Approved Provider Agreement

4.12.7 CCAP Payments to Approved Providers

4.12.8 CCAP Payments

4.12.9 Periodic Provider Audits

4.12.10 Quality Rating and Improvement System

4.12.11 Participation

4.13 CCAP Maximum Weekly Reimbursement Rates

4.1 General Provisions

4.1.1 Introduction

A. The Rhode Island Department of Human Services (DHS) recognizes the importance of providing strong access to affordable, quality child care for all Rhode Island families. Access to affordable, quality child care services is critical to supporting Rhode Island children achieve developmental and academic outcomes for their long-term success.

1. The Starting RIght Child Care Assistance Program (CCAP), adopted in 1998, ensures access to affordable, developmentally appropriate, early childhood education and support services for young children and their families. The CCAPs focus is on three (3) crucial supports:

   a. Providing low to moderate-income families with the financial resources to find and afford quality child care for their children;

   b. Promoting a stable, regulated, well-qualified provider community; and

   c. Implementing quality initiatives to enhance the quality, supply and availability of child care in Rhode Island.

4.1.2 Authority and Purpose

A. R.I. Gen. Laws § 42-12-23 designates the Department of Human Services (DHS) as the principal agency of the State responsible for the planning and coordination of State involvement in the area of child care, including responsibility for State programs subsidizing child care services provided to families receiving benefits from the Rhode Island Works Program (RI Works) and to low to moderate-income eligible working families.

B. Accessible, affordable high quality child care benefits a strong Rhode Island economy by supporting today's workers and providing children, our future workforce, a strong foundation for learning. The Child Care Assistance Program (CCAP) maintains its efforts to transform the State's child care subsidy programs to fulfill the comprehensive goals of Starting RIght. Accordingly, the purpose of the Child Care Assistance Program is to:

1. Create an integrated system of child care assistance programs that ensures the seamless delivery of services to eligible children through age twelve (12) or through age eighteen (18) if disabled, or those children turning thirteen (13) during the twelve (12) month certification period;

2. Ensure families have access to high quality child care and can focus on their own work, training or education with confidence without worrying about the safety of their children;

3. Assist families in obtaining child care assistance by standardizing the CCAP eligibility requirements, streamlining enrollment and payment procedures, and expanding the range of child care providers approved to participate in the program;

4. Ensure that all children participating in the CCAP receive safe, developmentally appropriate, quality child care;

5. Facilitate the development of a network of child care facilities and skilled and stable care givers/providers/educators capable of delivering early education and enhanced child care services to support young children from income eligible families; and

6. Respond to the diverse needs of children and families by supporting the development of a diverse array of high quality and affordable program models and services.

4.2 Definitions

A. For the purposes of this Administrative Rule, the following definitions apply unless otherwise noted:

1. "Allowable child care expense" means the total cost of the CCAP authorized child care services paid by the DHS to an approved provider, after deducting the amount the family is required to pay the provider as its share of the cost (or family share) for authorized services.

2. "Applicant child(ren)" means the dependent child(ren) in the financial unit for whom the CCAP authorized child care services are being requested.

3. "Application date" means the date that a signed application for the CCAP is stamped as received by a DHS office or the date an application is submitted online.

4. "Approved child care provider" means an individual or program that:

   a. Has met the requirements established by the Department of Human Services to participate in the CCAP; and

   b. Entered into a signed and valid agreement with the DHS specifying the terms and conditions for enrolling eligible children and receiving payment for the CCAP allowable child care expenses.

5. "Appropriate child care" means child care, including infant, toddler, preschool, comprehensive early childhood education and school age, that is provided by a person or organization qualified, approved, and authorized by the State agency or agencies designated to make such determinations as set forth in this Part.

6. “Approved education and training program” means a training, apprenticeship, internship, on-the-job training, work experience, work immersion, or other job readiness/job attachment program that is:

   a. Funded by the Governor’s Workforce Board or State agencies that are part of the coordinated program system pursuant to R.I. Gen. Laws § 42-102-11;

   b. Twenty (20) hours per week or more; and

   c. No longer than one (1) year in duration.

7. “Authorized child care services” means the child care a CCAP eligible child is approved to use in a given time period based on the Department's assessment of the family's need for services. The CCAP authorized child care is categorized as full-time (FT), three-quarter time (3QT), half-time (HT), or quarter-time (QT).

8. “Basic education program” or “BEP” means the overarching set of Regulations for the Rhode Island public education system.

9. “Categorically eligible” means that eligibility for the CCAP has been conferred, by either State law or the DHS policy, based on receipt of, or participation in, a particular public benefit/program. Both RI Works cash assistance recipients and Teen and Family Development (TFD) program participants receiving RI Works cash assistance are categorically eligible for the CCAP if they have met all other general requirements and established a need for services.

10. “CCAP approved provider agreement” or “APA” means the agreement that all CCAP approved providers must sign with the DHS that establishes the respective responsibilities and obligations of both the Department and the provider.

11. “CCAP approved provider introductory training” means the introductory training session(s) about the CCAP, conducted by the Office of Child Care (OCC) and that approved providers must complete in order to receive the DHS reimbursement of allowable child care expenses.

12. “CCAP automated enrollment system” means the DHS system through which an approved provider shall enroll eligible children.

13. “Center-based child care program” means a facility operated on a regular basis which receives children, not of common parentage, and provides non-residential care in a location separate from the children's parents during the day. Rhode Island General Law (RIGL) requires center-based child care programs to obtain licensure through the Department of Human Services.

14. “Central provider directory” means the information source maintained by the Department about all the child care providers in the State that have met the requirements to be approved to participate in the CCAP and receive payment for authorized child care expenses.

15. “Certification period” means the actual period of time that an eligible child may obtain the CCAP authorized child care services. A certification period shall not be less than twelve (12) months in duration.

16. “Child Care Assistance Program” or “CCAP” means the program administered by the Rhode Island Department of Human Services that provides financial assistance for authorized child care services rendered to eligible children by approved child care providers. The CCAP consolidates the DHS child care subsidy programs for RI Works recipients, income eligible working families (formerly known as the Low Income Child Care Program), families where the parent(s) is participating in an approved education and training program, and teens participating in the Teen and Family Development Program (formerly known as Youth Services), and short term special approval child care.

17. “Child development associate credential” or “CDA” means a credential awarded by the Council for Professional Recognition to certain individuals working in child care settings who demonstrate proficiency in specific competency standards.

18. “Classroom assessment scoring system” or “CLASS” means an observational tool that measures the quality of teacher-child interactions.

19. “Comprehensive early childhood education” means a program for preschool aged children approved by RIDE, formerly known as Nursery School.

20. “Department of Children, Youth and Families” or “DCYF” means the Rhode Island State agency with statutory responsibility for investigating allegations of child abuse/neglect, as well as the licensing, monitoring and enforcement of Regulations in all foster homes, residential facilities, and for agencies who place children.

21. “Department of Human Services” or “DHS” or “Department” means the Rhode Island State agency that administers financial, medical, social and rehabilitation programs and services, and has the statutory responsibility to regulate and approve licensed and license exempt child care providers to participate in the DHS Child Care Assistance Program (CCAP) and receive payment for authorized child care expenses.

22. “Dependent child” means any child who is under the age of thirteen (13) years, or who turns thirteen (13) years during the twelve (12) month certification period, or who is under the age of nineteen (19) if they have a

documented disability and are of an acceptable degree of relationship for purposes of CCAP, is an eligible child.

23. "DHS CCAP established payment rate" means the maximum rate that the DHS CCAP will pay approved providers for authorized child care services in each rate category. This maximum rate is established based on the results of a triennial Market Rate Survey as defined in R.I. Gen. Laws § 40-6.2-1.1.

24. "DHS code of administrative rules and regulations" or "DHS Code" means the compendium of Rules and policies governing the programs administered by the Department. The DHS Code was formerly referred to as the DHS Policy Manual.

25. "Early childhood environment rating scale, revised" or "ECERS-R" means a research-based assessment tool that measures environmental indicators of quality in preschool classrooms with children ages two and one half to five (2.5 – 5) years of age.

26. "Eligible child" means a dependent child that meets the requirements to receive authorized child care services from a CCAP approved child care provider. A foster child who is eligible for child care services provided through the Rhode Island Department of Children, Youth and Families (DCYF) shall not be deemed an eligible child for the purposes of the CCAP.

27. "Environmental rating scale" or "ERS-R" means the assessment tools developed at the Frank Porter Graham Child Development Center of the University of North Carolina at Chapel Hill that measure environmental indicators of quality. They include the Infant Toddler Environment Rating Scale-Revised (ITERS-R) and the Early Childhood Environment Rating Scale-Revised (ECERS-R), as well as the School Age Care Environment Rating Scale (SACERS) for school age programs, and the Family Child Care Environment Rating Scale-Revised (FCCERS-R) for family child care homes.

28. "Excluded income" means certain money, goods or services that are not considered countable for the purposes of determining whether a family meets the requirements for the CCAP income eligibility. Excluded income includes, but is not limited to, the following:

    a. The value of U.S. Department of Agriculture donated foods;

    b. Any payment received under Title II of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970, 42 U.S.C. §§ 4601 – 4655;

c. The value of certain assistance provided to undergraduate students including: any grant or loan for an undergraduate student for educational purposes made or insured under any loan program administered by the U.S. Commissioner of Education (or the Rhode Island Board of Governors for Higher Education or the Rhode Island Higher Educational Assistance Authority);

d. Payments distributed per capita to, or held in trust for, members of any Indian tribe under Pub. Law 92-254, Pub. Law 93-134 or Pub. Law 94-540;

e. Any benefits received under Title VII, Nutrition Program for the Elderly, of the Older Americans Act of 1965, as amended (Pub. Law 116–131);

f. Payments for supportive services or reimbursement of out-of-pocket expenses made to individual volunteers serving as foster grandparents, senior health aides or senior companions, and to persons serving in the Service Corps of Retired Executives (SCORE) and Active Corps of Executives (ACE) and any other program under Title II and Title III of the Domestic Volunteer Service Act of 1973 (Pub. Law 93-113);

g. The value of supplemental food assistance received under the Child Nutrition Act of 1966, as amended, and the special food service program for children under the National School Fund Act, as amended, (Pub. Law 92-433 and Pub. Law 93-150);

h. Payments of Experimental Housing Allowance Program made under Annual Contributions Contracts entered into prior to January 1, 1975, under § 23 of the U.S. Housing Act of 1937, as amended (Pub. Law 75-412);

i. Receipts distributed to members of certain Indian tribes which are referred to in § 5 of Pub. Law 94-114 that became effective October 17, 1975;

j. Tax exempt portions of payments made pursuant to the Alaska Native Claims Settlement Act, Pub. Law 93-203;

k. Foster care payments made by the Rhode Island Department for Children, Youth and Families (when the child is not included in the assistance unit);

l. The value of food assistance benefits;

m. The value of government rent or housing subsidies;

n. Home energy assistance funded by the State or Federal government or from non-profit organizations;

o. Income from college work study programs;

p. The earned income of a dependent child who is included in the financial unit;

q. Stipends, earned income, and reimbursements paid through the Federal Workforce Investment Act and through the Workforce Innovations Opportunity Act (WIOA), Pub. Law 113-128;

r. In accordance with Pub. Law 100-485, the refund of taxes under the earned income tax credit (EITC), or the advance payment of the EITC;

s. Loans and grants, such as scholarships, obtained and used under conditions that preclude their use for current living costs;

t. Monies received under the Federal Social Security Persons Achieving Self-Sufficiency (PASS) program or the Income Related Work Expenses (IRWE) program;

u. The income of the parents with whom a teen parent(s) resides;

v. Section 8 Utility Payment;

w. Veterans Aid and Attendant Allowances;

x. Payments to volunteers under Americorps/VISTA (payments to volunteers under Americorps are not excluded); and

y. Rhode Island Works (RIW) cash assistance payments.

29. "Family child care home" means a licensed residence where the resident can provide child care for up to six (6) children, or up to eight (8) children with an approved assistant.

a. Family child care home shall not mean a private residence used for an informal cooperative arrangement among neighbors or relatives, or the occasional care of children with or without compensation.

b. R.I. Gen. Laws Chapter 42-12.5 requires family child care home providers to obtain a license from the DHS.

30. "Family child care environment rating scale-Revised" or "FCCERS-R" means a research-based assessment tool that measures environmental

indicators of quality in programs conducted in a provider's own home for children from infancy through school age.

31. "Family share" means the amount a family is expected to contribute in co-payments to the cost of child care services.

32. "Financial unit" means the dependent children, including both applicant and non-applicant child(ren), and the parent(s) and the legal spouse(s) of the parent(s) who live with them in the same household. The financial unit may also include applicant children that the DHS has determined, upon verification, to be a relative of acceptable degree to the parent(s) requesting the CCAP authorized services. The financial unit determines family size for the purposes of determining income.

33. "Fraud" means a false representation of the facts, including making false or misleading statements, failing to disclose pertinent information, or trying to hide wrongdoing by an individual(s) or an organization. The deception is intentional and usually results in a benefit to the individual and/or causes damage, harm, or loss to the State or others.

34. "Group family child care home" means a child care program located in the provider's home residence in which child care services may be offered at the same time for up to nine (9), but no more than twelve (12) children unrelated to the child care provider.

    a. R.I. Gen. Laws Chapter 42-12.5 requires group family child care home providers to obtain licensure from the DHS.

35. "Head Start Performance Standards" means the standards determined by the Administration for Children and Families (ACF) to define the services that Head Start and Early Head Start programs are required to provide to the children and families that they serve. The standards constitute the expectations and requirements that Head Start grantees must meet. These standards do not replace or override DHS Rules and Regulations.

36. "Homeless individuals" means individuals who:

    a. Lack a fixed, regular and adequate nighttime residence;

    b. Are sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason;

    c. Are living in motels, hotels, trailer parks, or camping grounds due to the lack of alternative accommodations; or

    d. Are living in emergency or transitional shelters; have a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human

beings; are living in cars, parks, public spaces, abandoned buildings, substandard housing, bus or train stations, or similar setting.

37. "Income" means any money, goods or services available to the financial unit used to calculate eligibility for the CCAP. For the purposes of the CCAP, countable income includes, but is not limited to, any of the following:

    a. Monetary compensation for services, including gross wages, salary, commissions, and any work-based fees, stipends, tips or bonuses;

    b. Adjusted gross income from self-employment;

    c. Social Security Benefits – Retirement, Survivors and Disability Insurance (RSDI);

    d. Supplemental Security Income (SSI);

    e. Dividends or interest on savings or bonds;

    f. Income from estates or trusts;

    g. Adjusted Gross Rental Income;

    h. Adjusted Gross Room and Board Income;

    i. Public assistance payments;

    j. Unemployment Compensation;

    k. Temporary Disability Insurance (TDI);

    l. Workers' Compensation;

    m. Government civilian employee or military retirement, Private pensions or annuities;

    n. Cash payouts for waiving employer sponsored health insurance;

    o. Adoption subsidies;

    p. Alimony;

    q. Child support payments;

    r. Regular contributions from persons not living in the household;

    s. Royalties;

t. Strike Benefits;

u. Trade Readjustment Allowance;

v. VA Compensation Payments, VA Educational Benefits, Spousal/Dependent Allowances and Military Allotments;

w. Payments to volunteers under Americorps (payments to volunteers under Americorps/VISTA are excluded);

x. Foster care payments made by the Rhode Island Department of Children, Youth and Families (when the child is included in the assistance unit);

y. In-Kind Assistance; and

z. Non-citizen Sponsor Income (includes income of the sponsor and sponsor's spouse), refer to the Rhode Island Works Rules and Regulations, Part 2 of this Subchapter, regarding Deeming provisions and Indigent Exceptions.

38. "Income eligible" means the CCAP eligibility is determined on the basis of income, for applicants not receiving RI Works cash assistance, within the limits prescribed in State law, contingent upon meeting certain general requirements and the need for services.

39. "Infant" means a child from at least one (1) week up to, and inclusive of, eighteen (18) months of age.

40. "Infant toddler environment rating scale-revised" or "ITERS-R" means a research-based assessment tool that measures environmental indicators of quality in preschool classrooms with children zero to two and one half (0 – 2.5) years of age.

41. "Initial eligibility date" or "Care start date" means the actual first date that the CCAP authorized child care services, rendered to an eligible child by an approved provider, can be paid by the DHS.

42. "Legal guardian" means judicially created relationship between the dependent child and caregiver which is intended to be permanent and self-sustaining as evidenced by the transfer to the caregiver of the following parental rights with respect to the child: protection, education, care and control of the person, custody of the person and decision-making.

43. "License exempt child care provider" means any relative of a family eligible for the CCAP rendering child care in the home of the child or the provider (not to exceed six (6) related children), who has been

successfully screened by the DHS and determined eligible to participate in the CCAP. License exempt providers are not required under applicable State laws (R.I. Gen. Laws §§ 42-72.1-4 *et seq.* and 42-12.5-4 *et seq.*) to obtain licensure from the Rhode Island Department of Human Services, but must meet the capacity requirements. License Exempt providers are only approved in the CCAP as long as they have a CCAP pending or eligible child in their care.

44. "Licensed child care facility" means any facility that provides child care, including a center-based program or family child care home, that is licensed by the Rhode Island Department of Human Services (DHS). The term includes facilities that have programs such as: Comprehensive Early Childhood Education Program, preschool, pre-kindergarten, Head Start, Early Head Start, child play school, before or after school care, or child development center and applies to the total child care operation, including the physical setting, administration, staff, equipment, program, and care of children.

45. "Non-applicant child" means any dependent child living in the household up to age eighteen (18), who is not included in the family's request for the CCAP authorized child care services.

46. "Non-temporary change in status" means a non-temporary change in employment or education and training status due to permanent loss of work or cessation of attendance at an approved education and training

47. "Office of child care" means the unit within the DHS responsible for administering the CCAP, approving child care providers participating in the program, and maintaining the CCAP Central Provider Directory.

48. "Office of Internal Audit Fraud Detection and Prevention Unit" or "OIA FDP" means the Rhode Island State agency with statutory responsibility for investigating and auditing the possible existence of any activity constituting fraud, waste, and/or abuse.

49. "One-parent home" means a family in which there is only one (1) parent living in the household with financial responsibility for the eligible child(ren).

50. "Parent" means any person in the household who is legally and financially responsible for the routine care of the applicant child(ren) including, but not limited to, providing income, resources or other forms of support.

    a. A person seeking the CCAP authorized services for a dependent child is considered to be a parent for the CCAP eligibility purposes if so deemed for any other Department of Human Services program(s).

b. The term parent is used broadly in this Rule to refer to biological, adoptive, or stepparents, as well as legal guardians or caretaker relatives of an acceptable degree as defined in Part 2 of this Subchapter, the Rhode Island Works Rules and Regulations.

51. "Pre-School age child" means a child from age three (3) up to entry into the first (1st) grade of a public or private elementary school program. A child who will reach age seven (7) on or after September 1st in a given school year shall not be considered a pre-school age child under any circumstances.

52. "Quality rating and improvement system" or "QRIS" means systemic approach to assess, improve, and communicate the level of quality in early and school-age care and education programs.

53. "Relationship, acceptable degree" means dependent child must be living with a relative of acceptable degree of relationship in a home maintained by such relative. The establishment of relationship is either biologically, through marriage, or through legal guardianship.

a. When the relative with whom the child lives is not the biological or adoptive parent, the term *in loco parentis* (in place of the parent) is used.

b. Spouses of any of the persons in the listed groups meet the relationship requirement and continue to meet it even after the marriage is terminated by death or divorce.

54. "Relative" means an individual at least eighteen (18) years old who is the grandparent, great-grandparent, aunt/uncle, or sibling not living in the home. As it pertains to licensed-exempt providers, the individual must be at least twenty-one (21) years old. The status of relative is established by blood, marriage or court decree.

55. "Rhode Island public institution of higher education" means Community College of Rhode Island, Rhode Island College, or University of Rhode Island.

56. "Rhode Island Works Program" or "RI Works" means the Rhode Island State program authorized by R.I. Gen. Laws Chapter 40-5.1 *et seq.*, that provides cash assistance and support to families who meet certain requirements. RI Works beneficiaries are categorically eligible for fully-subsidized CCAP services if they meet the requirements established in § 4.5 of this Part.

57. "School age care environment rating scale-revised" or "SACERS-R" means a research-based assessment tool that measures environmental

indicators of quality of group programs for children of school age, five (5) through twelve (12) years.

58. "School-age child" means a child through age twelve (12), or who turns thirteen (13) years during the eligibility period, enrolled in at least the first (1st) grade in a public or private school program. Certain children with special needs may be categorized as school age through the age of eighteen (18) and qualify for the CCAP child care services as detailed in § 4.3.1 of this Part.

59. "Short-term special approval" or "SSACC" means the continuation of the CCAP authorized services despite the temporary reduction in employment or RI Works employment plan participation as a result of a documented serious health condition or related circumstance in the family that creates an immediate need to continue the CCAP authorized child care services on a temporary basis, as provided in § 4.7 of this Part~~Rule~~.

60. "Successfully screened provider" means a provider that has no disqualifying information or evidence of criminal activity in background clearances and criminal record checks of the individual seeking the CCAP approved license exempt provider status or of any of the adults living in the provider's household. Child care providers who possess a valid DHS license to operate, and who are seeking the CCAP approved status, must be successfully screened in accordance with the R.I. Gen. Laws § 40-13.2-1 *et seq.*

61. "Summer camp" means a program serving eligible school age children during periods when school is out-of-session licensed by DHS and approved by DHS as a CCAP provider. Summer camps must meet applicable State laws and Regulations pertaining to child health and safety and any other applicable DHS requirements.

62. "Teen and Family Development" or "TFD" means a program, provided through local community agencies, that provides assistance to pregnant/parenting teens engaged in approved education and training programs. TFD participants may be RI Works participants, employed, attending high school/GED classes, or a combination. Participants enrolled in the Teen and Family Development program receive assistance with case management and supportive services to assist with increasing self-sufficiency through education and/or employment. This program was previously known as Youth Services.

63. "Temporary change in status" means a temporary change in the ongoing status of the child's parent as working or attending a job training or educational program shall include:

a. Any time-limited absence from work for an employed parent due to reasons such as the need to care for a family member or an illness;

b. Any interruption in work for a seasonal worker who is not working between regular industry work seasons;

c. Any student holiday or break for a parent participating in training or education;

d. Any reduction in work, training or education hours, as long as the parent is still working or attending training or education; or

e. Any other cessation of work or attendance at a training or education program that does not exceed three (3) months.

64. "Toddler" means a child over the age of eighteen (18) months, up to the age of three (3) years.

65. "Two-parent home" means a family in which the two (2) parents live in the same legal household as, and share financial responsibility for, the applicant's dependent child/children.

4.3 Eligibility and Authorization of Services

A. Families with incomes at or below ~~one hundred eighty~~two hundred percent (200~~180~~%) of the Federal poverty level (FPL) who meet the requirements for the Starting RIght Child Care Assistance Program (CCAP) are eligible to receive full or partial payment for child care expenses when delivered by a CCAP approved child care provider. There are three (3) avenues for qualifying for payment of child care expenses through the CCAP:

1. Categorical Eligibility – The Rhode Island Temporary Assistance for Needy Families (TANF) Program extends eligibility for the CCAP to Rhode Island Works Program (RI Works) cash assistance recipients, including Teen and Family Development Program participants, who meet the need for services as established in § 4.5 of this Part.

2. Income Eligibility – Working Rhode Island families, families where a parent(s) is participating in an approved education and training program, and TFD participants who are not RI Works cash recipients may be income eligible for the CCAP if they meet the requirements set forth in § 4.6 of this Part.

3. ~~Temporary Higher Education~~ CCAP for College Eligibility – ~~From~~ Beginning October 1, 2021 ~~through June 30, 2022,~~ CCAP may be approved for families where a parent(s) requires child care assistance that is necessary to enroll or maintain enrollment in a Rhode Island public institution of higher education if they meet the requirements set forth in §

4.6 of this Part. This avenue of eligibility ~~is~~ began on October 1, 2021 as a pilot program with an expenditure cap of two hundred thousand dollars ($200,000.00). ~~subject to available funding. Applicants meeting such requirements will only be approved up and until expenditures for this category reach two hundred thousand dollars ($200,000.00).~~

4.3.1 General Eligibility

A. For a child to be eligible to participate in the Child Care Assistance Program (CCAP), the family applying for the CCAP services shall meet the general requirements set forth in this Section as well as the specific requirements pertaining to either categorical or income eligibility. To be eligible for the CCAP the following requirements have been met:

1. Age of applicant child(ren)

   a. The child to receive the CCAP services shall be over one (1) week old and below the age of thirteen (13) years unless the following circumstances apply:

      (1) The child is thirteen (13) up through eighteen (18) years old and has a documented physical or mental disability which makes the child incapable of self-care;

      (2) The child is under age thirteen (13) and would be considered a dependent child for the purposes of Rhode Island Works except for the receipt of Supplemental Security Income, or foster care services under Title IV-E of the Social Security Act, 42 U.S.C. §§ 671 – 679b. This Rule applies only in those instances in which child care is necessary for a parent to accept or retain employment or to participate in a RI Works approved education or training program; or

      (3) The child turns thirteen (13) years during the certification period and remains eligible until redetermination.

2. Relationship

   The applicant child(ren) must live in the home of the parent requesting the CCAP services. The home need not be the child's full-time residence. The relationship between the adult applying for the CCAP services and each applicant child must meet the broad definition of parent as set forth in this Part.

3. Residency

As defined in the DHS General Provisions, Part 10-00-1 of this Title, the applicant parent(s) and any applicant children in the financial unit shall be residents of the State of Rhode Island.

4. Citizenship

   a. The applicant child shall be either a citizen of the United States or a qualified immigrant. There is no five (5) year waiting period for qualified immigrant children to be eligible for the CCAP. Qualified immigrants are:

      (1) Lawful permanent residents (LPRs);

      (2) Refugees, asylees, persons granted withholding of deportation/removal, conditional entry (in effect prior to April 1, 1980), or paroled into the U.S. for at least one (1) year;

      (3) Cuban/Haitian entrants;

      (4) Battered spouses and children, whose need for benefits has a substantial connection to the battery or cruelty (parent/child of such battered child/spouse are also "qualified"), with one (1) of the following:

         (AA) A pending or approved self-petition for an immigrant visa;

         (BB) An immigrant visa filed for a spouse or child by a U.S. citizen or LPR; or

         (CC) An application for cancellation of removal/suspension of deportation.

      (5) Victims of trafficking and their derivative beneficiaries who have obtained a T visa or whose application for a T visa sets forth a *prima facie* case.

   b. The adult applying for the CCAP for an eligible child shall not be required to provide proof of citizenship or immigration status.

   c. The Department utilizes the State Verification and Exchange System (SVES) to validate Social Security Numbers (SSNs) and verify an applicant/recipient's citizenship.

5. Need for Services

   a. RI Works participants or teen parents involved in the Teen and Family Development Program, must be in an approved education

and training activity or work plan activity as established in § 4.5 of this Part.

b. Income Eligible/Low-income Child Care: the parents of the applicant child(ren) shall be employed, or participating in an approved education and training program, and unavailable to provide routine care for the child(ren) in accordance with the provisions established § 4.6 of this Part.

c. Child Care for Training: Beginning October 1, 2013, the Department shall provide child care to Income Eligible/Low-income families with income below ~~one hundred eighty~~ two hundred percent (~~180~~200%) of the Federal poverty level who are involved in training, apprenticeship, internship, on-the-job training, work experience, work immersion, or other job readiness/job attachment programs sponsored or funded by the Human Resource Investment Council (Governor's Workforce Board) or State agencies that are part of the coordinated program system pursuant to R.I. Gen. Laws § 42-102-11.

6. Cooperation with the Office of Child Support Services

a. All families with an absent parent(s) are referred to the Office of Child Support Services.

b. As a condition of RI Works eligibility, the parent/caretaker relative of the assistance unit is required to cooperate in establishing parentage, and in establishing and/or enforcing child support and medical support orders for all children in the family, unless the parent/caretaker relative is found to have good cause for refusing to comply with these requirements. Additional requirements to cooperate with the Office of Child Support Services are detailed in § 4.3.2 of this Part.

c. As a condition of the CCAP eligibility, the parent/caretaker relative of the assistance unit is required to cooperate in establishing parentage, and in establishing and/or enforcing child support and medical support orders for any applicant child in the family, unless the parent/caretaker relative is found to have good cause for refusing to comply with these requirements. Additional requirements to cooperate with the Office of Child Support Services are detailed in § 4.3.2 of this Part.

4.3.2 Cooperation with the Office of Child Support Services

A. An applicant or recipient must cooperate with the agency for all children in the RI Works family unit and for any applicant child in the CCAP family unit (unless good cause for refusing to do so has been determined to exist) in:

1. Identifying and locating the parent of each child;

2. Establishing the parentage of any child born out of wedlock;

3. Obtaining support payments for the applicant or recipient and for all children; and

4. Obtaining any other payments or property due the applicant or recipient or the child(ren) of any absent parent.

B. In order for the applicant to be found cooperative in achieving the above objectives, the applicant must, at the request of the Office of Child Support Services:

1. Appear, as necessary, to provide verbal or written information or documentary evidence, known to, possessed by, or reasonably obtainable by her/him;

2. Appear as a witness at court or other hearings or proceedings, as necessary; and

3. Provide information, or attest to the lack of information, under penalty of perjury.

4.3.3 Consequences of Non-cooperation with OCSS

A. The failure of a parent/caretaker relative to cooperate with the Office of Child Support Services (OCSS) in establishing parentage or in establishing, modifying, or enforcing a medical and/or support order with respect to an applicant child, when the household does not qualify for good cause, results in the closure or denial of all the CCAP benefits for that child only.

1. When the parent/caretaker relative fails to cooperate with OCSS with regards to any child in the household, only that child is found ineligible for benefits.

2. The closure or denial of the CCAP benefits and the ineligibility of the applicant child(ren) in all subsequent CCAP applications, shall continue until the parent/caretaker relative who refused to comply with child support cooperation requirements consents to and cooperates with the agency in satisfying those requirements for that child.

3. Once the applicant has satisfied the requirements of cooperation with the Office of Child Support Services, the applicant may re-apply for the CCAP for the child that had been denied the CCAP benefits.

4. A pending letter will not be generated for any application filed by a client who is currently non-cooperative with OCSS.

4.3.4 Good Cause for Refusing to Cooperate

A. Every applicant is given an opportunity to claim good cause for refusing to cooperate.

B. Referral to the Domestic Violence Advocate

If good cause is claimed, the applicant is referred to the Domestic Violence Advocate who will conduct the Family Violence Option Assessment;

C. Refusal of Referral to Domestic Violence Advocate

If the applicant refuses the referral, s/he is advised that s/he must state the basis of the claim and present corroborative evidence within twenty (20) days of the claim;

D. Corroborative Evidence of Domestic Violence

1. The applicant must provide sufficient information to enable the investigation of the existence of the circumstance; or,

2. The applicant must provide sworn statements from individuals to support the claim.

E. Determination of Good Cause

1. A determination of good cause is based on the findings of the Domestic Violence Advocate; or,

    a. Evidence supplied which establishes the claim;

    b. An investigation by the agency of the circumstance which confirms the claim;

    c. A combination of evidence and investigation; or

    d. When the claim is one of anticipated physical harm without evidence, the investigation supports the credibility of the claimant.

2. The determination as to whether good cause does or does not exist should be made within thirty (30) days of the good cause claim unless the record documents that the agency needs additional time because the information required to verify the claim cannot be obtained within the time standard.

3. The DHS representative will obtain verification and/or conduct an investigation in order to make the determination.

4. If sufficient information to conduct an investigation is provided, an otherwise eligible applicant is provided assistance (or assistance is continued) pending the final determination on the good cause claim.

4.3.5 When Cooperation Not in Best Interest

A. Cooperation is determined to be against the best interest of the child(ren) if:

1. The applicant's cooperation is reasonably anticipated to result in physical or emotional harm to the child, mother, or other relative with whom the child is living (Physical or emotional harm must be determined to be of a genuine and serious nature).

    a. The mere belief that cooperation would result in harm is not sufficient basis for a finding of good cause. The emotional harm to the mother must be of such a serious nature that the capacity to care for the child adequately would be reduced.; or

2. It would be harmful to the child for whom support would be sought because the child was conceived as a result of incest or rape; or

3. Legal proceedings for adoption of the child are pending before a court of competent jurisdiction; or

4. The applicant is currently being assisted by a public or licensed private social agency to resolve the issue of whether to keep the child or release him/her for adoption and the discussions have not gone on for more than three (3) months; or

5. There is anticipated physical harm to the parent without corroborative evidence.

4.3.6 Corroborative Evidence of Good Cause

A. Corroborative evidence upon which a determination of good cause is based without further agency investigation is limited to documents similar to the following, which must be presented within twenty (20) days of the claim:

1. Birth certificates, medical, or law enforcement records which indicate that the child was conceived as a result of incest or rape.

2. Court documents or other records which indicate that legal proceedings for adoption are pending before a court of competent jurisdiction.

3. Court, medical, criminal, child protective services, social services, psychological, or law enforcement records which indicate that the putative or absent parent might inflict physical or emotional harm on the child or caretaker relative.

4. Medical records which indicate emotional health history and present emotional health status of the caretaker relative (parent or *loco parentis*) or the child for whom support is sought or, written statements from a mental health professional indicating a diagnosis or prognosis concerning the emotional health of the caretaker relative or the child for whom support is sought.

5. A written statement from a public or licensed private social agency that the applicant is being assisted by the agency to resolve the issue of whether to keep the child or release him/her for adoption, and the discussions have not gone on for more than three (3) months.

B. If the evidence is insufficient, the DHS agency representative will promptly notify the applicant that additional corroborative evidence is needed and specify the type of document needed.

C. When sufficient information to permit an investigation is given or when the claim is one of anticipated physical harm without corroborative evidence and the DHS representative considers the claim credible and corroborative evidence is not available, the DHS representative will conduct an investigation.

1. In conducting the investigation, the DHS representative will not contact the absent or putative parent unless such contact is determined to be necessary to establish the claim.

2. Prior to making any contact, the applicant or recipient will be notified in order to present additional evidence or information that the contact is unnecessary, or they can withdraw the application, or the good cause claim can be denied.

D. On the basis of the evidence or the results of the investigation, the DHS agency representative makes a decision on the applicant's good cause claim.

4.3.7 Good Cause Based Upon Emotional and Physical Harm

A. Physical harm and emotional harm, as defined, must be of a serious nature. It must be demonstrated to the DHS agency representative that there exists an emotional impairment that substantially affects the applicant's functioning for a finding of good cause for emotional harm to be made.

1. If a determination is based in whole or in part upon the anticipation of emotional harm to the child, parent, or other caretaker relative, consideration is given to the following:

a. The present emotional state of the applicant subject to emotional harm;

b. The emotional health history of the applicant; intensity and probable duration of the emotional upset;

c. Degree of cooperation to be required; and

d. The extent of the involvement of the child in parentage establishment or support enforcement activity to be undertaken.

B. The DHS agency representative can find good cause on the basis of anticipated physical harm without corroborative evidence if the agency considers the claim credible without corroborative evidence and if such corroborative evidence is not available.

1. The agency is required to investigate this type of claim and while it may not establish the good cause circumstance, it should establish the credibility of the claimant.

C. Good Cause Decision. If the DHS representative has made a determination that good cause exists, the case does not need to be referred to the Office of Child Support Services. The case will be sent to OCSS, at a later date, should the good cause exception be lifted due to new circumstances.

D. Review of Good Cause Finding. A review of the good cause decision must be made at each redetermination by the DHS agency representative. If it is determined that circumstances have changed such that good cause no longer exists, there must be enforcement of the cooperation requirements.

E. The failure of a parent/caretaker relative to comply with child support enforcement cooperation requirements without good cause results in the closure or denial of the case.

4.3.8 Referral to the Domestic Violence Advocate

A. If an applicant discloses a domestic violence situation to the DHS, the agency representative refers the applicant to the Domestic Violence Advocate who conducts the Family Violence Option Assessment.

1. If the applicant involved is a minor parent/pregnant minor, an immediate report at the time of disclosure must be made to the Department of Children, Youth and Families (DCYF) as well as referral made to the Domestic Violence Advocate for assessment.

2. If the applicant refuses referral to the Domestic Violence Advocate, eligibility for CCAP is not affected. However, if the applicant requests a good cause exception to cooperation with the child support enforcement requirement, that exception will not be granted unless the applicant can provide evidence to support the good cause exception as detailed in § 4.3.4 of this Part.

3. The Domestic Violence Advocate must review the suitability of any or all waivers at the end of the specified waiver period(s), or earlier if the applicant's circumstances change.

    a. The maximum time period for the granting of a waiver is six (6) months.

4.3.9 Limitations and Exclusions of Eligibility

A. Both categorical and income eligibility for the CCAP services are subject to the following limitations and exclusions:

1. One (1) CCAP Household per Applicant Child

    a. The CCAP services shall only be authorized for one (1) household per applicant child during any given certification period.

    b. In general, the CCAP household is the parent's home which serves as the principal place of residence of the applicant child (i.e. where the child lives the majority of the time). This Rule applies whenever an applicant child's parents live in separate households or have an acceptable need for services independently of, or in tandem with, one another.

    c. A household other than the child's principal place of residence may only be considered a CCAP household if:

        (1) The parent in the household where the child lives the majority of the time does not qualify, or have a need for the CCAP services; and

        (2) The parent in the household where the child lives less than a majority of the time applies and meets the requirements for the CCAP authorized services.

2. Shared Custody of the Child(ren)

    a. If the parents of an applicant child live in different households but share legal custody and physical possession of a child due to a court order/agreement, then neither parent's household may be the child's principal place of residence.

    b. When both parents apply separately for the same child, only one (1) household shall be considered a CCAP household when determining authorized services.

c. The Department shall request the documentation from the applicant parents required to make a factual determination as to which is the CCAP household.

3. Self-Employment as a Child Care Provider

a. Any parent whose income is derived solely from self-employment as a child care provider shall not be eligible for the CCAP authorized services.

b. A parent who is self employed as a child care provider on a part time basis may be eligible to receive the CCAP authorized services for an eligible child for a period of time while working in some other capacity or participating in a RI Works approved activity, if all requirements established in this Rule are met.

4.4 Applying for Child Care Assistance

4.4.1 Application

A. The application for the CCAP consists of the required application, verification of certain eligibility criteria, and the need for services. When information is known to the DHS from other DHS program sources, and meets the minimum verification requirements of each program, independent verification is not required and previous verified information is used in determining the CCAP eligibility. Families seeking eligibility for the CCAP shall apply to the DHS in accordance with the following:

1. Point of Application

a. Rhode Island Works (RI Works) recipients, including those who are Teen and Family Development (TFD) participants, parents participating in an approved education or training program, as well as families making the transition off cash assistance, may complete an application through the DHS-2 or on-line, or have child care added as an activity within their RI Works case.

b. Working families, families where the parent(s) is participating in an approved education and training program, and TFD participants not receiving income support through RI Works may apply online at www.dhs.ri.gov, or at www.healthyrhode.ri.gov, or may obtain a printable application at www.dhs.ri.gov, or through a local DHS office.

2. Application Packet

The completed application form signed by the applicant (in a two (2) parent home both parents must sign the application), along with the

documentation required to verify eligibility and the need for services must be submitted to the Department of Human Services to initiate a child care application.

4.4.2 Application Processing

A. The date a signed application is date stamped as received by the DHS office, or the date an application is submitted online, is the application date.

B. The application period is the period when eligibility for the CCAP is determined by the DHS staff.

1. The period begins on the application date and extends for thirty (30) days.

2. An application is considered incomplete until the DHS has all the information and documentation required to make an eligibility determination.

    a. Applications from homeless families shall be processed even when all documentation required to make an eligibility determination has not yet been provided.

    b. Homeless applicants have up to ninety (90) days to provide the documentation required to make an eligibility determination.

3. An application that remains incomplete on the last day of the application period shall be denied unless the DHS is responsible for the delay in processing the application.

4. Once an application is complete, every effort will be made to determine eligibility in the most expeditious manner possible.

C. If there is missing information or documentation required to determine eligibility, the Department notifies the family in writing one (1) or more of the following as appropriate:

1. A list of any missing information or documentation required to determine eligibility, the appropriate DHS location to send the information to, and a deadline for submitting any information requested;

2. The unique CCAP certificate number assigned to the family. This is the identification number that shall be used by approved child care providers when enrolling eligible children for the CCAP authorized child care services;

3. The names of the children in the family for whom child care assistance is being requested; and/or

4. A statement indicating that the applicant may request services from an approved child care provider pending final determination of eligibility by the DHS. The statement shall include a disclaimer indicating that:

   a. DHS shall only make payment for allowable child care expenses when rendered by a CCAP approved provider;

   b. An approved child care provider is not required to accept a child during the period when an application is pending. If a child is accepted, the provider must enroll the child either prior to or during the first (1st) week of care; and

   c. The DHS shall not guarantee payment for any child care expenses incurred while an application is pending.

      (1) A family requesting to enroll a child for services prior to the final determination of eligibility shall disclose to the approved child care provider that their application for child care assistance is pending and that no payment shall be made by DHS for any child care expenses if the application is denied.

D. Determining the Basis for Eligibility

1. Upon determining that the general requirements for the CCAP have been met representatives shall assess the scope of the CCAP services to be authorized on the basis of the criteria for categorical or income eligibility, as specified in §§ 4.5 and 4.6 of this Part.

2. The date the DHS determines to be the earliest date a family can begin receiving the CCAP authorized child care services is the initial eligibility, or care start date. This date may or may not be the same as the application date.

   a. The certification period for the CCAP authorized services shall begin on the initial eligibility date and shall continue for a period of no less than twelve (12) months.

   b. Any child care services utilized prior to the initial eligibility shall be deemed unauthorized and shall not be considered allowable child care expenses for the purposes of making the CCAP payments.

3. Applicants shall provide complete and accurate information and all documentation required for verification listed on the CCAP application. Submitting false or inaccurate information for the purposes of obtaining the CCAP eligibility shall result in denial of the application.

   a. Non-cooperation. Failure to provide the documentation required to verify any eligibility requirement, including the source of income or

need for services is acceptable grounds for a delay in the processing of an application. If such failure continues beyond the thirty (30) day application period, the application shall be deemed incomplete and denied on the basis of non-cooperation.

(1) Homeless applicants who are unable to provide proper documentation to verify any eligibility requirement shall not be considered non-cooperative.

b. The application is valid until eligibility is determined by the DHS within the prescribed application period of thirty (30) days unless the application is withdrawn voluntarily or the DHS is responsible for the delay in processing the application. After thirty (30) days, submission of a new application may be required.

(1) If the CCAP eligibility is denied, the application is invalid after the thirty (30) day appeal period expires.

(2) If the CCAP eligibility is approved, the application is presumed valid from the application date to the end date of the certification period unless there is a change in the family's status or circumstances that might in any way affect CCAP eligibility.

E. Members of the Military Reserve

1. When determining the CCAP eligibility for members of the Military Reserve who are called to active duty during a time of conflict, the Department shall freeze the family composition and the family income as it was in the month prior to the month of leaving for active duty.

2. If the child(ren) of the deployed individual were found to be eligible in the prior month, the Department shall maintain eligibility for the family during the twelve (12) month certification period.

3. This shall continue until the deployed individual is officially discharged from active duty (R.I. Gen. Laws § 40-5.2-20).

4.4.3 Reporting Requirements

A. Applicant and recipient parents shall report to the DHS any changes in the information or documentation included in, or submitted in conjunction with, the CCAP application related to the general requirements in § 4.3 of this Part or criteria for categorical (§ 4.5 of this Part) or income eligibility (§ 4.6 of this Part) within ten (10) days from the date the change occurs.

1. The duty to report begins on the application date and remains in effect while the application is valid.

2. Failure to report changes in a timely manner may be grounds for denying eligibility to an applicant or discontinuing authorized services for the CCAP beneficiaries.

B. Families are required to report the following:

1. Changes to income, during the twelve (12) month certification period, if the income exceeds eighty-five percent (85%) of the State Median Income (SMI).

2. A non-temporary cessation of work, training or education.

3. Any change in address.

C. Families have the option to report any changes in income if it would reduce the family's co-payment or increase the family's subsidy.

4.4.4 Redetermination

A. The eligibility period for the CCAP shall be no less than twelve (12) months. The CCAP benefits shall be re-determined through the recertification process prior to the end of the twelve (12) month period.

B. The DHS shall notify families of the eligibility redetermination date by sending the renewal form no later than the first (1st) day of the last month of the eligibility period. The renewal form shall indicate the date the form is due back to the DHS.

C. Families must submit the completed and signed form to the DHS by the renewal due date in order for the CCAP authorized services to continue without interruption.

4.4.5 Notice Requirements: Notice of Approval, Notice of Denial, Right to Appeal and Hearing

Applicants for the CCAP shall receive timely and adequate notice of the DHS eligibility determinations and the right to appeal. The DHS shall also provide timely and adequate notice of any adverse decisions terminating or reducing benefits.

4.5 Criteria for Categorical Eligibility

4.5.1 General Requirements and Criteria

A. RI Works recipients who fulfill the general requirements stated in § 4.3 of this Part, shall meet the following criteria to be eligible for the CCAP:

1. The CCAP authorized services shall only be approved for RI Works recipients who have an acceptable need for services related to fulfilling program requirements.

   a. The following shall constitute an acceptable need for services for RI Works eligible families:

      (1) The parent(s) or caretaker relative shall have an approved, signed and current employment plan on file and shall need the CCAP authorized child care services during periods of time when engaged in one (1) or more of the component activities required to comply with that plan.

      (2) RI Works families receiving the CCAP services shall meet the employment plan component activity requirements outlined in the Rhode Island Works Rules and Regulations, § 2.11 of this Subchapter. Such component activities include those specified therein, as well as any combination of education and work-related activities contained in an approved employment plan.

      (3) In a two (2) parent home, both parents shall have a signed and approved current employment plan as specified in the Rhode Island Works Program Rules and Regulations, § 2.11 of this Subchapter.

   b. To have an acceptable need for services, TFD participants who are RI Works cash assistance recipients shall meet the following program-specific criteria:

      (1) TFD parents shall be under twenty (20) years of age and not yet in possession of a high school diploma or equivalency.

      (2) The parent shall be actively working with the TFD Visiting Program and participating in an approved education activity, as specified in a current RI Works Employment Plan. The applicant child must be living with the TFD participant and the need for child care services must be directly related to working, obtaining a high school education or otherwise participating in activities required by the TFD program.

      (3) A teen parent who is under age sixteen (16) may not obtain authorized CCAP child care services on their own, unless documentation of emancipation exists or circumstances exist that the inclusion of the parent or legal guardian would present an obstacle to securing child care. The CCAP child care services extended to a teen parent under the age of sixteen (16) shall be authorized under a parent or legal

guardian of the teen parent and may also include that teen parent as a child care recipient.

4.5.2 Limitations

A. Child care services shall not be authorized for an otherwise categorically eligible family under the following circumstances:

1. In a one (1) parent home, the parent has failed to complete or comply with an RI Works employment plan;

2. One (1) of the parents in a two (2) parent home does not have an approved employment plan;

3. One (1) of the parents in a two (2) parent home is statutorily barred from receiving RI Works and is not working;

4. The parent of the eligible child is a self-employed child care provider and is requesting the CCAP payment for care provided to the child during the hours when employed in that capacity. This limitation shall not apply if the parent is an employee of a child care provider;

5. A parent of the eligible child is providing the child care, irrespective of whether the parent lives in the same legal residence as the eligible child(ren);

6. A person living in the same legal residence of the eligible child(ren) is providing the child care; or

7. There is a full family sanction in place, refer to the RI Works Rules and Regulations, Part 2 of this Subchapter.

4.5.3 Exceptions

A. The following exceptions apply to the general and program-specific criteria for categorical eligibility:

1. RI Works recipients whose RI Works cash assistance is scheduled to close, and who are requesting child care assistance due to employment, will have their CCAP eligibility determined using income eligibility rules if the RI Works case closes prior to the application for child care assistance.

2. The CCAP services may be authorized if one (1) of the parents in a two (2) parent home does not have an approved employment plan when the family provides written verification from a licensed health care practitioner, program or facility, qualified to make such a determination, indicating that the parent without an approved employment plan cannot provide appropriate, routine care of the child due to a neurophysiological,

psychological or emotional disorder, physical impairment, or serious health condition.

a. Requests for an exception shall be made on forms approved by the Department and submitted along with the required medical documentation.

b. Any health information requested or obtained for the purposes of this Section shall be subject to the privacy protections established in State law and the Health Insurance Portability and Accountability Act of 1996 (HIPAA), Pub. Law 104–191.

4.5.4 Co-payments

A. The CCAP co-payments are applied to recipients of RI Works as follows:

1. RI Works recipients who receive Child Care Assistance as a supportive service are provided assistance at a co-payment of zero ($0.00).

2. *Loco-parentis* applicants receiving RI Works cash assistance on behalf of the child, but who are not included in the RI Works payment, are assessed a co-payment amount based upon the Family Cost Sharing Requirement.

B. Homeless families applying for the CCAP shall have a co-payment of zero ($0.00).

4.6 Criteria for Income Eligibility

4.6.1 General Requirements and Criteria

A. Working families and families where a parent(s) is participating in an approved education or training program, as well as TFD participants not receiving RI Works cash assistance who meet the general requirements in § 4.3 of this Part and the following criteria may be CCAP income eligible:

1. Financial Determination

a. The countable income of the financial unit shall be at or below ~~one hundred eighty~~two hundred percent (200~~180~~%) of the Federal poverty level (FPL), based on family size.

(1) Transitional Child Care allows families currently eligible for child care to continue to receive child care after their income exceeds ~~one hundred eighty~~two hundred percent (200~~180~~%) of the Federal poverty level (FPL), as long as income remains below ~~two hundred twenty-five~~three hundred percent (~~225~~300%) FPL.

(2) When income rises above ~~two hundred twenty-five~~three hundred percent (~~225~~300%) of the FPL the family is no longer eligible.

(3) New child care assistance applicants with income over ~~one hundred eighty~~two hundred percent (~~180~~200%) of the FPL will not be eligible for Transitional Child Care.

(4) Eligibility for Transitional Child Care will be determined at normal recertification times.

(5) Families found eligible will be continued on Transitional Child Care until they reach ~~two hundred twenty-five~~three hundred percent (~~225~~300%) of the FPL.

(AA) If approved for Transitional Child Care and income later falls below ~~one hundred eighty~~two hundred percent (~~180~~200%) of the FPL, eligibility for Transitional Child Care ends and an application for Child Care Assistance under the regular CCAP can occur.

(BB) Families are eligible to resume Transitional Child Care if their income were to again rise above ~~one hundred eighty~~two hundred percent (~~180~~200%) of the FPL.

b. The income of self-employed families shall be calculated as outlined in the Rhode Island Works Program Rules and Regulations, § 2.15.4 of this Subchapter.

c. In the process of determining eligibility for the CCAP, prospective budgeting is used. Eligibility is established based on the knowledge and reasonable expectation of what income and circumstances will exist in the month for which a payment is authorized.

(1) Weekly income for these cases is converted to a monthly amount using the 4.3333 weeks per month conversion method.

(2) The projected estimate of income is valid for the following periods:

(AA) Between the initial determination of eligibility and redetermination;

(BB) Between redeterminations; and

(CC) Following a change in income or circumstances which is reported by the recipient or discovered by the Department.

B. Treatment of Resources

1. A determination of eligibility requires a review of the family's liquid resources.

a. The review, for both initial eligibility and redeterminations, will be limited to the parents' statements unless the stated resources are close to limit or there is other reason to require verification.

b. The request for verification shall be at the discretion of the DHS representative if the information given is inconsistent or questionable from information known to the Department.

c. The value of liquid resources must be counted toward the one million dollar ($1,000,000.00) liquid resource limit. If the combined value of the child's or the family's liquid resources exceeds the one million dollar ($1,000,000.00) liquid resource limit, the family is ineligible and the application is denied or eligibility for assistance is discontinued.

2. Liquid resources are defined as any interest(s) in property in the form of cash or other financial instruments or accounts that are readily convertible to cash or cash equivalents.

a. These include, but are not limited to cash, bank, credit union or other financial institution savings, checking and money market accounts, certificates of deposit or other time deposits, stocks, bonds, mutual funds, and other similar financial instruments or accounts.

b. These do not include educational savings accounts, plans, or programs; retirement accounts, plans, or programs; or accounts held jointly with another adult, not including a spouse, living outside the same household but only to the extent the applicant/recipient family documents the funds are from sources owned by the other adult living outside the household, plus the proportionate share of any interest, dividend, or capital gains thereon.

3. Bank accounts are liquid resources and, as such, must be verified for the CCAP households, both at initial certification and at recertification. The same procedures employed at certification are used at recertification.

4. The applicant/recipient's statement is acceptable for verification of resources unless the household is near the resource maximum limit, or

the information given is inconsistent or questionable from information known to the Department. The same procedures employed at certification are used at recertification.

5. In order to be countable in the determination of the CCAP eligibility, a resource must be available to the individual. The individual must be able to use the resource to provide food, shelter, clothing, or convert it into a form in which it can be used to meet needs:

    a. A resource is considered to be available both when actually available, and when the applicant has the legal ability to make such sum available for support and maintenance;

    b. Resources are not available when a legal impediment exists which precludes the applicant from making the resource available for support, maintenance or child care payments; and

    c. Applicants/recipients are required, as a condition of eligibility, to cooperate with the Department in making resources available.

6. Countable liquid resources are determined as of the First Moment of the Month (FOM).

    a. The determination is based on the liquid resources the individuals own, their value, and whether or not they are excluded as of the first moment of the month.

    b. The FOM rule establishes a point in time at which to value liquid resources; and

    c. If countable liquid resources exceed the limit as of the first moment of a month, the recipient is not eligible for that month, unless the liquid resources are reduced by expenditure on certain allowable expenses. Expenses that may be used to reduce liquid resources, to attain or retain eligibility, in the CCAP are:

        (1) Any and all expenses related to payment for education or child care for members of the family unit;

        (2) Contributions to educational savings accounts, plans or programs owned by any member of the family unit; and

        (3) Contributions to retirement accounts, plans or programs owned by any member of the family unit.

7. Whenever the applicant is a joint account holder who has unrestricted access to the funds in the account, all of the funds in the account are

presumed to be the resources of the applicant. The applicant is offered the opportunity to submit evidence in rebuttal as described below.

a. A successful rebuttal results in finding that the funds (or a portion of the funds) in the joint account are not owned by the applicant and, therefore, are not the resources of the applicant.

b. In order for a household member to demonstrate a lack of ownership, or only partial ownership of a resource, two (2) of the following sources of documentation must be presented as evidence:

   (1) Documents showing the origin of the resource;

   (2) Documentation through Federal or State tax records as to which of the joint account holders declares the tax on the interest credited to the account as income;

   (3) Records of who makes deposits and withdrawals and, if appropriate, of how withdrawn funds are spent. The person claiming a lack of ownership (or accessibility) should not have made any withdrawals;

   (4) A notarized affidavit that details a written or oral agreement made between the parties listed on the resource or by someone who established or contributed to the resource, with respect to the ownership of the funds in the resource;

   (5) When the household member states that s/he does not own a bank account but is listed as a co-holder solely as a convenience to the other co-holder to conduct bank transactions on his/her behalf, evidence of the age, relationship, physical or mental condition, or place of residence of the co-holder must be provided; or

   (6) A signed, notarized statement from the household member and from either other individual(s) listed in the joint account, or the person who established or contributed to the account, stating that the applicant or recipient had no knowledge of the existence of the account.

c. A document or piece of evidence submitted to verify a particular fact does not count as more than one (1) verification under the above Subsections. However, a document, piece of evidence or a statement may address more than one (1) fact needed for verification.

d. If a household member cannot demonstrate that s/he is not the owner of the account through the submission of two (2) of the above listed documents, the rebuttal must be denied.

C. Family Cost Sharing Requirement

1. Eligible families with countable income above one hundred percent (100%) of the FPL shall pay a share of the expense for the child care services.

a. The family shall be assessed for a share of the cost for authorized services (formerly referred to as co-payment) based on a percentage of the gross countable income for families at each level.

b. The family share and income guidelines are set in accordance with the CCAP Cost-Sharing Payment Rate Table.

c. The income levels and percentage range of family shares are as follows:

LEVEL	FEDERAL POVERTY LEVEL	AMOUNT
Level 0	Less than or equal to 100%	No Family Share
Level 1	Above 100% up to and including 125%	2% of Countable Gross Income
Level 2	Above 125% up to and including 150%	5% of Countable Gross Income
Level 3	Above 150% up to and including ~~180~~200%	7% of Countable Gross Income
Level 4	Above ~~180~~200% up to and including ~~225~~300%	7% of Countable Gross Income

d. Income levels zero through three (0-3) are co-share amounts for on-going or new applicants. Income level four (4) is the co-share amounts for CCAP participants receiving Transitional Child Care.

e. 2022 CCAP Eligibility and Cost-Sharing levels by Gross Income Adjusted for Family Size~~.~~:

FAMILY SIZE

Level	Standard Federal Poverty Level	% Gross Countable Income Applied as Co-payment	2	3	4	5	6	7	8
0	<100%	0	18,310	23,030	27,750	32,470	37,190	41,910	46,630
1	>100% - 125%	2%	22,888	28,788	34,688	40,588	46,488	52,388	58,288
2	>125% - 150%	5%	27,465	34,545	41,625	48,705	55,785	62,865	69,945
3	>150% - ~~180~~200%	7%	~~32,958~~ 36,620	~~41,454~~ 46,060	~~49,950~~ 55,500	~~58,446~~ 64,940	~~66,942~~ 74,380	~~75,438~~ 83,820	~~83,934~~ 93,260
4	>200~~180~~ % - ~~225~~300%	7%	~~41,198~~ 54,930	~~51,818~~ 69,090	~~62,438~~ 83,250	~~73,058~~ 97,410	~~83,678~~ 111,570	~~94,298~~ 125,730	~~104,918~~ 139,890

FAMILY SIZE									
Level	Standard Federal Poverty Level	% Gross Countable Income Applied as Co-Payment	9	10	11	12	13	14	15
0	<100%	0	51,350	56,070	60,790	65,510	70,230	74,950	79,670
1	>100 - 125%	2%	64,188	70,088	75,988	81,888	87,788	93,688	99,588
2	>125 - 150%	5%	77,025	84,105	91,185	98,265	105,345	112,425	119,505

3	>150 - 200~~225~~%	7%	~~92,430~~ 102,700	~~100,926~~ 112,140	~~109,422~~ 121,580	~~117,918~~ 131,020	~~126,414~~ 140,460	~~134,910~~ 149,900	~~143,406~~ 159,340
4	>~~180~~ 200 - ~~225~~300%	7%	~~115,538~~ 154,050	~~126,158~~ 168,210	~~136,778~~ 182,370	~~147,398~~ 196,530	~~158,018~~ 210,690	~~168,638~~ 224,850	~~179,258~~ 239,010

2. The family share shall be determined without regard to the number of eligible children who are enrolled or the total of services utilized.

   a. The family share shall be assigned to the first (1st) or youngest eligible child enrolled in care, that is, the eligible child who receives authorized services paid at the highest rate.

   b. The family share shall only be distributed among providers when the total amount of the family share assigned exceeds the rate paid for the first (1st), or youngest, eligible child enrolled.

3. A family's share of the cost for child care services approved for the CCAP payment shall be recalculated any time that the family reports a change and submits supporting documentation, or at recertification. The DHS shall recalculate the family's share of the cost for the CCAP authorized services during the certification period and will adjust the family share only if the family submits documentation that would result in the lowering of the family share amount.

4. The Notice of Approval for child care assistance shall indicate whether a family is required to pay a share of the cost for authorized child services based on countable income.

   a. The Approval Notice shall indicate to the family the exact amount of their family share and the calculations used to determine that amount.

   b. The family shall also be informed of the amount of their family share and which provider(s) to pay in the Confirmation of Enrollment letter.

4.6.2 Need for Services

A. To be authorized for income-based CCAP child care services, the parent(s) shall have an acceptable need for services related to employment, or an approved educational or training program.

1. General Criteria: Income Eligible

a. For there to be an acceptable need for services in a two (2) parent home, each parent shall be employed a minimum of an average of twenty (20) hours per week in a month and require the CCAP child care services in order to work in accordance with the section below, entitled, Limitations.

(1) The twenty (20) hours per week minimum requirement cannot be met by combining the working hours of both parents, but must be met individually by each working parent.

(2) In addition, the parents shall each earn, per hour, an average of the greater of either the State or Federal minimum wage.

b. For there to be an acceptable need for services in a one (1) parent home, the parent living in the household shall be employed a minimum of an average of twenty (20) hours per week in a month, earn per hour an average of the greater of either the State or Federal minimum wage, and require the CCAP child care services in order to work.

2. Program-Specific Criteria: Non RI Works cash assistance TFD Participants

a. To obtain the CCAP authorized services, non-RI Works teens applying for income eligibility shall meet the applicable general criteria as well as the following program-specific criteria:

(1) The applicant parent shall be a TFD participant, under twenty (20) years of age, and without a high school degree or its equivalent; and

(2) The applicant TFD parent shall be employed, attending school or participating in education related activities, or engaged in some combination thereof for a minimum of twenty (20) hour per week, on average, in a month.

b. The CCAP child care services for TFD participants who meet these requirements will be authorized for a period of up to twelve (12) months.

3. Program-Specific Criteria for Child Care for Training

a. Beginning October 1, 2013, the Department shall provide child care to income eligible/low-income families with income below ~~one hundred eighty~~two hundred percent (~~180~~200%) of the Federal poverty level who are involved in training, apprenticeship,

internship, on-the-job training, work experience, work immersion, or other job readiness/job attachment programs sponsored or funded by the Human Resource Investment Council (Governor's Workforce Board) or State agencies that are part of the coordinated program system pursuant to R.I. Gen. Laws § 42-102-11.

b. To obtain the CCAP authorized services, such applicants applying for income eligibility shall meet the applicable general criteria as well as the following program-specific criteria:

(1) The applicant parent shall be a participant in an approved training, apprenticeship, internship, on-the-job training, work experience, work immersion, or other job readiness/job attachment programs sponsored or funded by the Human Resource Investment Council (Governor's Workforce Board) or State agencies that are part of the coordinated program, and require the CCAP child care services in order to take part in the job readiness/job attachment activities; or

(2) The applicant parent shall be participating in approved education or training activities for a minimum of twenty (20) hours per week, on average, in a month. The CCAP child care services for participants who meet this requirement may be authorized for a period of no less than twelve (12) months.

c. For there to be an acceptable need for services in a two (2) parent home, one (1) or both parents shall be participating in approved education or training activities, or employed for an average of twenty (20) hours per week in a month and require the CCAP child care services in order to participate in the activity.

(1) In addition, any parent with earned income outside of the approved education and training program shall earn, per hour, an average of the greater of either the State or Federal minimum wage.

d. For there to be an acceptable need for services in a one (1) parent home, the parent living in the household shall be participating in approved education or training activities for a minimum of an average of twenty (20) hours per week in a month.

4. Program-Specific Criteria for Child Care for College

a. Beginning October 1, 2021, the Department shall provide child care to Income Eligible/Low-income families with income below ~~one hundred eighty~~two hundred percent (200~~180~~%) of the Federal

poverty level who are enrolled in a Rhode Island public institution of higher education.

b. To obtain CCAP authorized services, such applicants applying for income eligibility shall meet the applicable general criteria as well as the following program-specific criteria:

(1) The applicant parent shall be enrolled in a Rhode Island public institution of higher education for a minimum of seven (7) credit hours in the semester of application.

(2) Per the New England Association of Schools and Colleges (NEASC) accreditation requires that faculty assign two (2) hours of outside work for every one (1) hour spent in the classroom. Therefore, a student taking seven (7) credit hours is participating in twenty-one (21) hours of school activity and meeting the weekly activity requirements a minimum of twenty (20) hours per week, on average, in a month. CCAP child care services for participants who meet this requirement may be authorized for a period of no less than twelve (12) months.

c. For there to be an acceptable need for services in a two (2) parent home, one (1) parent shall be participating in approved education or training activities, or employed for an average of twenty (20) hours per week in a month in order for the household to be approved for child care services for the other parent to attend college.

(1) In addition, any parent with earned income outside of the approved education and training program shall earn, per hour, an average of the greater of either the State or Federal minimum wage.

d. For there to be an acceptable need for services in a one (1) parent home, the parent living in the household shall be enrolled in college for a minimum of seven (7) credit hours to meet an average of twenty (20) hours per week in a month.

4.6.3 Limitations

A. The need for child care services shall be related to the periods of time in which no parent is available to provide care for the child as a result of employment or education or training. The CCAP child care services shall not be authorized for an otherwise income eligible child under the following circumstances:

1. A parent of the eligible child is self-employed as a child care provider, and is requesting payment for care provided to the child during the hours they

are employed in that capacity. This limitation shall not apply if the parent is an employee of a child care provider;

2. A parent is providing the child care, irrespective of whether the parent lives in the same household as the eligible child(ren);

3. A person living in the same legal residence of the eligible child(ren) is providing the child care;

4. The applicant parent's sole source of income is derived from rental and/or room and board income, and the need for services is based on activities related to obtaining or collecting that income;

5. The applicant parent's need for services is based in part or in whole on time spent working as a volunteer, or in any similar capacity in which no wages are earned, paid, or expected. Unpaid work of this kind also shall not count toward the minimum number of work hours required for the CCAP income eligibility; or,

6. Such activities shall not be considered employment for the purposes of this Section and, as such, shall not count toward the minimum number of hours of work required to establish a need for the CCAP authorized child care services.

4.6.4 Exceptions

A. In certain circumstances, families unable to meet the need for services requirements may qualify for an exception that allows authorization of the CCAP services. The exceptions are as follows:

1. Parents with Disabilities

a. Employed parents determined to have disabilities may be exempt from meeting the minimum number of hours of work and the minimum wage requirements required to establish a need for services set forth in this Subsection.

b. An exemption shall not be granted until an assessment by an appropriate entity or provider of the parent's condition is complete, a final determination of disability is made, and the documentation verifying the parent's disability is submitted to the DHS.

c. Notice of the decision shall be provided to the parent requesting the exemption.

2. Temporary Change in Status

a. A temporary change in the ongoing status of the child's parent as working or attending a job training or educational program shall include:

(1) Any time-limited absence from work for an employed parent due to the need to care for a family member or an illness;

(2) Any interruption in work for a seasonal worker who is not working between regular industry work seasons;

(3) Any student holiday or break for a parent participating in training or education;

(4) Any reduction in work, training or education hours, as long as the parent is still working or attending training or education; or

(5) Any other cessation of work or attendance at a training or education program that does not exceed three (3) months.

b. A temporary change in status is considered to be within the parameters of employment, approved education or training and will not adversely affect the ability to utilize the CCAP authorized care.

3. Non-Temporary Change in Status

a. A parent(s) who experiences a non-temporary change in employment, education or training status due to loss of work or cessation of attendance at an approved education or training program shall continue to receive the CCAP services for three (3) months for each loss or cessation in order for the parent(s) to resume work or attendance in an approved education or training program.

b. The three (3) month grace period shall be applied as follows:

(1) The grace period will be applied when there is less than three (3) months of the existing twelve (12) month certification period when the loss of employment, education, or training status occurs and will extend the twelve (12) month certification period with the same level of coverage.

(2) At the end of the grace period, a parent(s) engaged in qualifying employment or an approved education or training program shall be assessed for a new twelve (12) month certification period according to Income Eligibility guidelines.

(3) The three (3) month grace period will not be extended if there has been no entry into employment, or into an approved education or training program.

4.7 Short Term Special Approval

4.7.1 Criteria for Short Term Special Approval

A. In a limited range of circumstances, families who are not eligible for the CCAP based on categorical or income eligibility criteria related to employment plan or work requirements may be approved for Short Term Special Approval (SSACC) Child Care Assistance.

1. SSACC may be approved for instances when there is documented evidence indicating that either the child (child-based SSACC) or the parent (parent-based SSACC) has a serious health condition that constitutes a temporary "special" need for services based on the inability of the parent to provide the necessary level or kind of child care.

2. When applying for SSACC services, the available countable income of the financial unit shall be used in determining an applicant's eligibility.

3. Determinations of requests for child-based SSACC shall be made, on a case-by-case basis.

4. The criteria for approval of SSACC for income and categorically eligible CCAP families differ, as specified below:

a. SSACC Criteria for Income Eligible Families.

(1) When the requirements of this Subsection have been met, SSACC may be approved for otherwise income eligible families who no longer meet the need for services requirement established in § 4.8.1 of this Part due to a change in the employment status of the parent(s).

(2) As such, requests for SSACC shall only be considered for income eligible families who have been receiving authorized CCAP services and have lost or are in jeopardy of losing them because of the change in the need for services.

b. For approval of child-based SSACC in an income eligible family, there must be documented evidence that, although the parent's employment no longer meets the need for services requirement, the continuation of authorized CCAP services is necessary for the health and wellbeing of the eligible child.

(1) In the case of a TFD family, it is understood that school attendance can replace the work hours needed for eligibility. The determination of whether a continuation of the CCAP authorized care is warranted, and as such constitutes a special need for services, shall be based on a CEDARR (Comprehensive Evaluation, Diagnosis, Assessment, Referral and Re-evaluation) of the eligible child. Accordingly, child-based SSACC for an income eligible family shall only be approved when:

(AA) There is a special need for services based on a CEDARR finding that the discontinuation of the CCAP services will have a direct adverse effect on the eligible child's health and well-being and all other income eligibility requirements have been met.

c. For approval of parent-based SSACC in an income eligible family, there must be documented evidence from a qualified health care provider or practitioner that the health condition of the parent prohibits both employment and the routine child care activities necessary to maintain the health and safety of the child.

(1) The special need for services is the result of a change in the parent's health status that temporarily prevents the parent from meeting the work requirements in § 4.6 of this Part.

(2) A parent hospitalized as a result of an acute illness or condition, or bedridden while recovering from an illness or condition for a limited period may receive partial or full payment of child care expenses until able to resume employment subject to the general restrictions of this Subsection.

d. SSACC may be approved for categorically eligible families who have not met their RI Works employment plan requirements or who do not have a signed employment plan when the condition or health of the child or parent constitutes a special need for services.

(1) For approval of child-based SSACC for categorically eligible families, the special need for services must be established by either:

(AA) Documented evidence from a physician, qualified licensed health practitioner, program, facility or responsible government authority, that the child has a serious health condition that is not currently being treated or accommodated either because access to

an appropriate program that meets the child's special needs has been denied or delayed, or is unavailable. Payment of child care expenses shall be provided under such circumstances while permanent placement in an appropriate program for the child is being arranged or located; or

(BB) A CEDARR finding that the continuation of the CCAP authorized services is necessary for the health and wellbeing of the eligible child.

(2) For approval of parent-based SSACC for categorically eligible families, documented evidence must be provided from a qualified licensed health care practitioner, program, facility or responsible government authority indicating:

(AA) The disorder or impairment of the parent poses a serious barrier to appropriate child care/rearing. Payment for the CCAP authorized child care may be made while the parent is participating in an appropriate remediation or rehabilitation protocol, such as substance abuse treatment, parenting skills training, therapy or counseling, that will lead to the alleviation of the need for services. In such cases, the DHS may require the applicant to provide documentation of a family assessment, conducted by a qualified provider, when evaluating the need for SSACC services. However, in no instance shall the DHS authorization of SSACC for a categorically eligible child include, or otherwise be based upon, an assessment of whether the parent can successfully complete the remediation/rehabilitation protocol; or

(BB) The health condition of the parent both prohibits employment or participation in a RI Works employment plan and routine child care activities necessary to maintain the health and safety of the child. A parent hospitalized as a result of an acute illness or condition, or bedridden while recovering from an illness or condition for a limited period, may be eligible to receive partial or full payment of child care expenses until able to resume employment, subject to the general restrictions of this Subsection.

4.7.2 Limitations

A. The scope of SSACC shall be limited as follows:

1. SSACC shall not be authorized for more than full-time in any twenty-four (24) hour period.

2. SSACC authorized services shall be approved, upon initial request, for up to three (3) months, and may only be approved for an additional three (3) months period in any twelve (12) month period, if the family provides documentation to the DHS indicating that:

   a. The parent's condition will improve during the additional time to the extent necessary for the parent to return to work or participate in their RI Works employment plan, once the extension is over; or

   b. The child's permanent placement in a long-term treatment or special needs program cannot be arranged without additional time.

3. In no case shall child-based SSACC serve as an adjunct to or a substitute for services, administered by other government agencies or their designees that provide long-term treatment or otherwise address the special needs of a child. Similarly, authorization of parent-based SSACC is not based on an assessment of whether the successful remediation/rehabilitation can be achieved and shall not be portrayed as such for any purpose. Accordingly, authorization of SSACC under the requirements set forth in this section shall not be construed to or in any way mitigate, or otherwise address, the underlying cause (e.g., impairment, serious health condition, etc.) creating the need for services.

4.7.3 Notifications

A. Notices, Rights, and Responsibilities

Families applying for SSACC are afforded the same right to timely and adequate notice, to appeal the DHS decisions and to be informed of application and enrollment status applicable to all other CCAP applicants/beneficiaries set forth in § 4.1 of this Part. Except as the special need for services requirements for the SSACC established in this Section apply, the responsibilities of the DHS, approved providers, and the families of an eligible child related to application, enrollment and payment of allowable child care expenses shall also be the same as those specified for the CCAP.

4.8 Authorization of Child Care Services

4.8.1 Assessment and Scope of Authorized Child Care

A. Upon determining that a family is either categorically or income eligible for the CCAP, the agency representative shall make an assessment of the scope of authorized child care required to meet a family's need for services.

1. The authorization for the CCAP child care services is based on an assessment of the following factors related to the need for services:

    a. The number of hours each day per week that the parent(s) of an eligible child is employed, in an approved education or training program or engaged in a RI Works or TFD approved activity that requires child care services.

    b. Up to one (1) hour per day of child care may be added to the daily total to cover travel time from the child care location to place of employment/approved activity and return. Additional travel time may be allowed if there is a documented need, related directly to meeting work or employment plan commitments.

    c. In cases where the parent is requesting the CCAP services under either §§ 4.5 or 4.6 of this Part, the allowable child care expense is based on the total number of hours reported on the work or training schedule provided in the CCAP application.

2. Upon completing the assessment of a family's need for services, the agency representative determines the scope of child care services appropriate for each eligible child in the family. Child care services are then authorized as follows:

    a. Full-time (FT) child care, for thirty (30) or more hours per week;

    b. Three-quarter time (3QT) child care from twenty (20) up to twenty-nine (29) hours per week.

    c. Half-time (HT) child care, from ten (10) up to nineteen (19) hours per week; and

    d. Quarter time (QT) child care, for less than ten (10) hours per week.

4.8.2 Limitations of Authorized Child Care

A. Authorized child care shall be utilized within the following parameters:

1. The Department authorizes the CCAP child care for a specific period of time that begins on the initial eligibility date and continues for no less than twelve (12) months.

2. The CCAP authorized child care corresponds to, and is generally expected to be utilized during, the hours when a family has a need for services as defined in § 4.8.1 of this Part.

3. An eligible child may receive the CCAP authorized services from multiple providers if necessary for a family to meet a need for services due to split

shifts or non-traditional employment schedules, but only in instances in which the hours of authorized child care rendered by each provider do not overlap.

a. In no case, shall the DHS pay more than one (1) provider for the same hours of child care services authorized for a particular eligible child.

4. The CCAP services shall not be authorized for school age children during hours when school is in session, which are defined as from 9:30 A.M. to 1:30 P.M.

5. Payment for the CCAP authorized services shall only be made when rendered by child care providers approved by the DHS who meet the requirements of § 4.12 of this Part.

6. Care shall not be authorized for eligible school age children age thirteen (13) and over unless a child has a documented disability that requires the child to have adult supervision.

7. An eligible child, enrolled with an approved provider, shall not be absent for more than five (5) days per month of authorized child care, unless granted a good cause exemption by the DHS as a result of a serious health condition or unusual family circumstance.

a. Parents shall make requests for good cause exemptions, in writing, to the DHS.

b. Timely notice, including a statement of appeal rights, shall be sent to the family by the DHS explaining the basis for granting or denying the request for an exemption to the five (5) days per month limit on absences from authorized the CCAP child care.

(1) Once the five (5) days per month limit has been reached, no payment shall be made for periods of authorized child care in which the eligible child is not in attendance unless a good cause exemption has been granted.

(2) The Department reserves the right to consider repeated extended absences of an eligible child when making recertifications of the CCAP eligibility.

c. Attendance policies may be adjusted in times of public health emergency, weather events, and/or when funding is available to the DHS for this purpose.

4.9 Enrollment for CCAP Authorized Services

4.9.1 Responsibilities

A. Through the enrollment process, the family of an eligible child and the CCAP approved child care provider of choice make the arrangements necessary for the delivery of the CCAP authorized services, in accordance with the requirements established by the Department for payment of allowable child care expenses.

1. The child care provider is required to transmit the pertinent information about these arrangements to the DHS using the CCAP automated enrollment system.

a. All CCAP approved providers shall have access to the CCAP automated enrollment system and are required to enroll all eligible children through that system as a condition of receiving payment for the CCAP authorized child care services.

B. DHS Responsibilities

1. The DHS shall issue each family applying for child care assistance a CCAP certificate number, to serve as a unique identifier for the purpose of enrolling an eligible child for authorized services and establishing a basis for payment to a CCAP approved provider.

a. Once the enrollment process has been completed, a letter shall be sent from the Department to both the family and provider that confirms enrollment of the child(ren) and indicates the assignment of the family's share of the cost for authorized services, if any.

b. The DHS shall initiate the process for authorizing payment to a provider for allowable child care expenses upon receipt of the notification that an eligible child has been enrolled. The DHS reserves the right to deny payment for services to providers who fail to enroll eligible children within the first week that an eligible, or potentially eligible, child begins care with that provider.

c. The DHS shall pay for child care service provided while an application is pending for homeless families, up to the first ninety (90) days, even if the application for the CCAP is ultimately denied for lack of verification or eligibility.

C. Responsibilities of the Family

To initiate the process of enrolling an eligible child for the CCAP authorized child care services, the family of the child shall contact a CCAP approved provider and present the Certificate of Approval for the CCAP services or its CCAP certificate number.

D. Enrollment During the Pending Period

1. As indicated in § 4.4.2 of this Part, some approved child care providers may be willing to enroll a child, using the CCAP certificate number, while the application is still pending and before the final determination of eligibility.

    a. The certificate number may first be issued to the family in the pending letter, which acknowledges that the application has been received and is pending further review.

    b. In RI Works cases, if no pending letter is sent and the application is approved, the certificate number is issued to the family in the Notice of Approval. In such instances, the following conditions apply:

        (1) If the application for the CCAP services is subsequently denied by the Department, no payment shall be made for any child care services rendered during the period when the application was pending and before the final determination of eligibility.

        (2) If a family does not give their DHS certificate number to a provider, the provider may hold the family liable for payment for any child care services used.

2. The family of the child shall present the CCAP certificate number to an approved provider when arranging authorized child care services.

3. The family shall also provide any information required for the CCAP web or telephone enrollment requested by the provider.

4. Enrollment with Multiple CCAP Approved Providers

    a. A family choosing to enroll a child for authorized services with multiple providers shall advise each provider accordingly when making arrangements for child care and shall not enroll a child at more than one (1) provider during overlapping hours.

    b. The CCAP automated enrollment system prevents enrollment of, and payment for, services to an eligible child during overlapping hours.

    c. No more than one (1) provider shall be authorized to provide full time services to an eligible child for a specific period of care.

5. The family of an eligible child may choose to change approved child care providers at any time while authorized for the CCAP child care services.

a. However, the DHS is permitted to make payment to only one (1) approved provider for a particular hour or set period of the CCAP authorized child care once the week begins.

b. Accordingly, families are best served when changes in providers are arranged to take effect at the start of the week (Sunday).

c. To the extent time and circumstances allow, notification of the change should be made by the parent to any providers involved.

(1) In general, however, to change approved child care providers a family is required to present the CCAP certificate number to the new provider of choice and make the arrangements necessary for authorized child care services.

(2) Enrollment information sent to the DHS by the new approved provider through the CCAP automated enrollment system shall automatically disenroll the eligible child from, and thereafter prohibit payment for, child care services rendered by the child's previous care provider.

d. Families may change approved providers at any time during the CCAP eligibility period.

6. A family may choose to enroll an eligible child for services in excess of the CCAP period authorized.

a. No CCAP payment shall be made for any unauthorized hours of child care even with an approved provider.

E. Responsibilities of CCAP Approved Providers.

1. It shall be the responsibility of the CCAP approved provider selected by the family of an eligible child to officially enroll a child for authorized services before or during the first (1st) week that the CCAP authorized services are provided.

a. A provider may enroll the child of a homeless family prior to receipt of the immunization record and/or completion of other health and safety requirements.

b. A provider shall dis-enroll the child of a homeless family if the requirement to provide the immunization record and/or the completion of other health and safety requirements have not been met by day ninety (90) of the enrollment.

2. Only child care providers who have been approved and entered into a signed and valid DHS-Approved Provider Agreement, have access to the DHS CCAP automated enrollment system.

    a. Both the DHS approval and access to the CCAP automated enrollment system are necessary preconditions for provider participation in the CCAP. (See § 4.12 of this Part for requirements for approval.)

3. The approved child care provider shall use the CCAP certificate number issued by the DHS acknowledging receipt of the application, as specified in § 4.4.2 of this Part, when enrolling a child whose eligibility for authorized services is pending.

    a. The enrollment process is not completed unless and until the CCAP eligibility has been approved. Any provider that has not been approved by the DHS shall not initiate enrollment of a child for the purposes of seeking the CCAP payment, irrespective of whether a final determination of eligibility has been made.

    b. If the application for the CCAP services is subsequently approved, payment for any CCAP authorized services rendered while the application is pending shall be made by the DHS to the approved provider as long as the child was appropriately enrolled.

    c. Upon receipt of payment from the DHS, the approved provider shall refund the family for any allowable child care expenses paid by the family during the period in which the application was pending.

        (1) The approved provider may apply a refund due to the family to future cost-sharing obligations of the family, if the eligible child's family expressly requests, in writing, the refund be applied to future costs.

4. The approved provider shall enroll a child using the DHS CCAP automated enrollment system.

5. The approved provider shall dis-enroll a child immediately upon receiving notice that an eligible child shall not be using services any longer, for any reason.

    a. A provider shall not receive continued payment for a child not in their care even if the parent failed to notify said provider of the child's disenrollment.

6. The CCAP approved child care providers shall monitor enrollment patterns to ensure that the number of children receiving services at any one time remains within the provider's authorized maximum capacity, that is, the

total number of children in a provider's care both the CCAP eligible and non-CCAP eligible children.

a. The Rhode Island DHS establishes the maximum capacity for all State-regulated child care centers and family child care homes in the applicable standards for licensure. The CCAP approved providers subject to the DHS Regulations shall not be permitted to enroll an eligible child through the DHS CCAP automated enrollment system when at full capacity.

b. Approved license exempt providers, though not directly regulated by the DHS, are prohibited by the State from caring for any unrelated children or for more than six (6) children related to the provider at any one (1) time without obtaining licensure as a family child care home.

(1) The children of the license exempt provider who are under six (6) years of age count toward the maximum limit of six (6) related children.

(2) The DHS shall not make payment for an eligible child once the maximum number of children allowed for a license exempt provider has been reached.

c. Approved child care providers cannot retroactively enroll an eligible child. Approved providers must enroll both eligible and pending children before or during the first (1st) week that care is delivered if the DHS payment is anticipated.7. The CCAP approved providers shall not charge families any additional fees beyond the determined family share amount.

4.10 Notices, Rights and Duties

4.10.1 Notices

A. To ensure that the Child Care Assistance program (CCAP) is administered in an equitable, effective and efficient manner, the following requirements have been established:

1. Applicants for the Child Care Assistance Program shall receive timely and adequate notice from the DHS of eligibility determinations. The Department shall also provide timely and adequate notice of any adverse decisions that terminate or reduce benefits.

a. Notice of Approval. Upon determining that an applicant meets the general requirements for the CCAP in § 4.3 of this Part and the criteria for either categorical (§ 4.5 of this Part) or income (§ 4.6 of this Part) eligibility, Notice of Approval shall be sent by the DHS

informing the family of the eligibility start and end dates and the scope of services authorized.

(1) The notice shall also indicate whether an income eligible family is required to pay a share of the cost for the CCAP authorized services and the amount of the family share.

(2) In addition, the Notice of Approval shall state that any eligible children in the family shall only be enrolled for the CCAP authorized child care services by a CCAP approved provider, who has a signed and valid DHS-CCAP Approved Provider Agreement and is listed, accordingly, in the Central Provider Directory (CPD).

(3) Notices of Approval are also sent when there are additional children in the family approved for the CCAP.

b. Notice of Adverse Actions. The DHS shall send timely and adequate notice of any decisions that adversely affect a family's CCAP eligibility or the scope of authorized services.

(1) All notices of adverse action shall contain:

(AA) Acknowledgment of a client's request for withdrawal of an application, or discontinuance of benefits, if applicable;

(BB) The reason for the proposed adverse action and citation of the applicable rule herein;

(CC) A statement indicating that the family may discuss the pending adverse action with the appropriate agency representative and, if further review is deemed necessary, schedule an Adjustment Conference to the discuss the action further with the designated supervisor; and

(DD) Explanation of the family's right to request a hearing within thirty (30) days of the date of the notice. Notices in this category include those indicating denial or discontinuation of the CCAP eligibility or change in the CCAP authorized services.

(2) The Notice of Denial shall be sent by the DHS to a family when a Department representative determines that a case, or an applicant in a case, is ineligible for the CCAP.

(3) The Notice of Eligibility Discontinuation shall be sent when a decision made by the Department results in the discontinuance of the CCAP eligibility for a particular child or for the family as a whole.

4.10.2 Rights

A. Applicants for, and beneficiaries of, the Child Care Assistance Program have the right to appeal and request a hearing during the determination of eligibility, and during the receipt of benefits.

1. In conjunction with notices informing applicants/beneficiaries of initial eligibility determinations, adverse actions, and recertifications, the DHS shall inform the family of the right to appeal and request a hearing.

a. The Notice of Approval shall include information pertaining to the right to appeal the eligibility date, the amount or type of authorized services, the family's cost-sharing obligations, and any other matters related to the scope of the CCAP benefits approved.

b. Notice of adverse actions shall include information pertaining to the right to appeal the DHS decision (e.g., denial, discontinuation, change in authorized services), the scope of its impact, and the basis on which the decision was made.

4.10.3 Duties

A. The DHS has a duty to provide the following information:

1. Confirmation of Enrollment

a. Upon receiving notification of enrollment of an eligible child from an approved provider, the DHS shall send a client written confirmation of an eligible child's enrollment for authorized services by the provider.

b. The Confirmation of Enrollment shall specify the approved provider who enrolled the eligible child and, as such, who shall receive payment, if any is required, from the DHS for the CCAP authorized child care services. Any cost-sharing obligations for an income eligible family shall also be specified in the Approval Notice and the Confirmation of Enrollment.

2. When information provided to the DHS in conjunction with the duty to report in § 4.4.3 of this Part requires a change in the CCAP authorized services, the following apply:

a. If the resulting change in the CCAP authorized services does not adversely affect the family, implementation will begin, in most circumstances, on the first (1st) Sunday following the date the report was made to the DHS; or

b. If the resulting change in the CCAP services has an adverse impact on the family, notice of the change shall be provided by the DHS to the family at least ten (10) days prior to the implementation date.

4.11 Improper Payments

4.11.1 Underpayments

A. If the household was eligible to receive child care assistance benefits but received a benefit that was less than that which they were entitled, or the failure to issue a benefit for a benefit month in which the household was eligible for such a benefit constitutes an underpayment.

1. The agency representative corrects the underpayment as soon as possible, but not later than thirty (30) days after discovery of the underpayment, to a current recipient or one who would be a current recipient had the error causing the underpayment not occurred.

2. In cases involving an underpayment and an overpayment in the same month, the agency representative must factor in both in determining what the correct payment should have been. If an underpayment still exists, it is promptly corrected.

3. For purposes of determining eligibility and the amount of assistance, a retroactive corrective payment is not considered income, nor is it considered a resource in the month received or in the following month.

4.11.2 Overpayments

A. An overpayment occurs when the child care benefit amount paid exceeds the benefit that would have been issued if the payment were calculated correctly based on accurate information that was reported, verified, and acted on in a timely manner.

1. If the agency representative discovers that the household failed to report a change as required by § 4.10 of this Part, and as a result, received child care benefits to which it was not entitled a referral for improper payment is made.

a. If the agency representative determines the improper payment to be caused by the agency or unintentionally caused by the household, the case is referred to the Claims Collections and

Recovery Unit (CCRU) for the recovery of the improper payment in accordance with § 4.11 of this Part.

b. If the improper payment is thought to be intentional, the agency representative refers an improper payment claim to the Office of Internal Audits.

2. The Office of Internal Audits establishes whether the improper payment was agency caused, household caused, or fraud and, if the improper payment is deemed fraudulent, OIA refers the case to the Claims Collections and Recovery Unit (CCRU) for recovery of the improper payment in accordance with § 4.11 of this Part.

4.11.3 Types of Improper Payments

A. Improper payments may be applied to recipients and/or providers. The cause of each improper payment shall be classified as agency, recipient, or provider caused. Improper payments shall be further classified as unintentional errors or fraud.

1. A recipient improper payment occurs when the child care benefit paid exceeds the benefit that would have been issued if the payment were calculated correctly based on accurate information that was reported, verified, and acted on in a timely manner.

2. A provider based improper payment occurs when a provider receives a duplicate benefit or receives payments for services not rendered.

B. An improper payment shall be classified as an agency error if the error was caused solely by actions taken by the Department or Department staff.

1. Agency errors shall include, but not be limited to the following types of errors:

a. Errors caused by delays in processing applications or taking prompt action on changes that were reported timely;

b. Errors in determining eligibility, the benefit amount or the payment authorization period; data entry errors; and

c. Errors caused by the incorrect application of State Regulations, policy or procedures.

2. Improper payments that are not due to agency error shall be classified as recipient or provider caused. The error shall be classified as both recipient and provider caused if the recipient and the provider both had knowledge and actively participated in the action that caused the improper payment to occur.

a. Improper payments caused by the recipient shall include, but not be limited to, errors caused by reporting false or inaccurate information, and/or delays in reporting changes in household income, resources, circumstances or provider arrangements.

b. Improper payments caused by the provider shall include, but not be limited to, the following types of errors:

(1) Inaccurate reporting of information concerning licensing status, age or other provider eligibility requirements;

(2) Inaccurate reporting of the provider's relationship to the child or the location at which care is given;

(3) Inaccurate reporting of household circumstances;

(4) Committing an illegal act, such as cashing a replacement check after falsely claiming that the original check was lost, stolen or destroyed;

(5) Inaccurate reporting of actual charges, attendance or dates of service; and

(6) Any other false claim for services provided.

3. Either a DHS agency representative, CCRU or OIA FDP shall make a preliminary determination of whether the improper payment was intentional or an unintentional error pursuant to guidelines below.

a. Improper payments shall be classified as intentional if the recipient or provider knowingly withheld or provided false information on matters affecting eligibility, benefits or a claim for services. If a question of fraud exists, the case will be referred by the CCRU or DHS representative to the Office of Internal Audits (OIA) who will investigate the improper payment and, at their discretion, may direct these cases to the State Police and/or to the Office of the Attorney General of Rhode Island for criminal action.

b. An improper payment shall be considered unintentional household error under the following circumstances:

(1) There was clearly no intent to commit fraud or to obtain benefits or payments under false pretenses;

(2) The applicant/recipient or provider did not purposefully withhold or provide erroneous information;

(3) Illness, a family emergency, or any other good-cause reason exists for not reporting information timely or accurately; or

(4) The error was due to a delay in taking action as the result of an administrative hearing request.

4. Procedures for Recovery:

a. Enable a repayment in full settlement (a lump-sum repayment);

b. Enable a repayment agreement between the recipient and CCRU or between the child care provider and the DHS Financial Management Unit.; or

c. Enable a repayment agreement between the CCRU and the child care recipient, using the "Notice of Child Care Overpayment." When a child care improper payment is to be recovered from the recipient, the recipient shall be given notice of that determination using the "Notice of Child Care Overpayment." The notice shall include an explanation of the improper payment determination, including the following:

(1) The amount and period of the improper payment;

(2) The reasons for the improper payment;

(3) The Regulations supporting the improper payment determination;

(4) An explanation of the available methods of repayment;

(5) The recipient's right to appeal; and

(6) A telephone number to call for information about free legal services.

5. Consequences for failure to repay

a. Failure of the child care provider to repay a child care improper payment made by the DHS CCAP and not subject to adjustment by the Department's Financial Office because of provider error, provider fraud, or agency error, shall result in the termination/revocation of the "DHS-CCAP Approved Provider Agreement" and disenrollment from the CPD.

(1) Revocation of the CCAP approved provider status shall continue until further notification.

(2) An appeal may be taken from the denial in accordance with policy.

b. When a licensed child care provider has pled guilty to, has been determined to have committed fraud, or has been convicted of fraud, the OIA shall notify the DHS Child Care and the DHS Licensing Unit in writing of any findings of fraud. Notification is to be made by the Hearing Officer if fraud is found in a hearing, or to be made by the CCRU Unit, if found by the CCRU Unit.

c. The DHS shall retain any improper payment it recovers and shall use the funds for the provision of child care services.

d. Improper payments that are recovered shall be reported to the Agency Director and the Program Administrator.

e. Failure of the child care recipient or provider to repay may result in further legal action, and/or loss of benefits.

4.11.4 Administrative Penalties for Intentional Program Violation and/or Fraud

A. Improper payments shall be classified as Intentional Program Violation (IPV) and/or fraud if the applicant/recipient or provider knowingly withheld or provided false information on matters affecting eligibility, benefits or a claim for services. If a question of fraud exists, the case will be referred by the DHS Representative or the CCRU to the Office of Internal Audits (OIA) as outlined in § 10-00-1.6 of this Title.

1. In accordance with a signed Memorandum of Understanding between the Rhode Island Department of Human Services and the Office of Internal Audits authorizing the investigation of CCAP fraud, the OIA will perform a full investigation, gather all necessary documentation to support the claim, and reach a determination about the improper payment of either a household or provider.

2. Any person, recipient or provider, who wishes to contest the determination made by the OIA shall be entitled to a hearing as outlined in § 10-00-1.6 of this Title. Those individuals determined to have committed an IPV and/or fraud will be subject to the following consequences:

a. First (1st) offense – disqualification from the CCAP program for a period of three (3) months;

b. Second (2nd) offense – disqualification from the CCAP program for a period of six (6) months; and

c. Third (3rd) and any subsequent offense – disqualification from the CCAP program for a period of twelve (12) months.

B. When OIA determines an IPV, of a recipient or provider, meets the criteria for a criminal investigation, and the case is referred to the State Police and/or to the Office of the Attorney General of Rhode Island no hearing will be held.

1. Those individuals found guilty of fraud in a court of law will be subject to the following consequences, in addition any sentence deemed appropriate by the Court:

a. First (1st) offense – disqualification from the CCAP program for a period of three (3) months;

b. Second (2nd) offense – disqualification from the CCAP program for a period of six (6) months; and

c. Third (3rd) and any subsequent offense – disqualification from the CCAP program for a period of twelve (12) months.

C. Claims for improper payments will also be referred to the CCRU for collection and recoupment.

4.12 Child Care Provider Guide

4.12.1 DHS CCAP Approved Child Care Providers

A. The Department of Human Services shall make payment only for the CCAP authorized child care services when rendered by the DHS CCAP approved child care providers.

1. To obtain approval, child care providers shall meet the minimum requirements set forth in this § 4.12 of this Part, including entering into an agreement with the DHS that fulfills the requirements set forth in this Part.

2. A list of providers that have obtained the DHS approved status is maintained on-line and can be accessed through dhs.ri.gov.

3. A provider may begin to provide authorized services to the CCAP eligible children during the week that an application for the CCAP approval has been submitted to the OCC. However, the DHS shall only make payment for such services when, and on the condition that, the provider is granted CCAP approved status, completes the introductory trainings and enrollment, and complies with reporting activities specified in this Rule.

4. The DHS shall discontinue payments when a provider exceeds the number of allowable children in its care or has evidence of provider non-compliance with the current approved Provider Agreement (APA), and/or the DHS licensing Regulations (Chapter 70 of this Title).

4.12.2 Central Provider Directory (CPD) Approved Providers

A. The CCAP Central Provider Directory (CPD) standardizes the process for approving child care providers to participate in the CCAP and provide a central source of information about, and for, the CCAP approved providers.

1. The process for gaining entry to the CPD, and attaining the CCAP approved status, varies depending on type of child care provider.

B. In general, entry into the CPD shall be limited to the following categories of child care providers:

1. DHS Licensed Child Care Providers

a. Child care providers regulated by, and operating in accordance with, the standards established by the DHS appropriate to the child care setting.

(1) Providers in this category include licensed center-based child care programs, group family child care homes, family child care homes and school-age programs.

(2) Also included are summer camp programs licensed by DHS and approved by DHS as a CCAP provider. Summer camps, by definition, may not operate for more than twelve (12) weeks per year.

2. Comprehensive Early Childhood Education Programs

Programs licensed by the DHS, approved by the Rhode Island Department of Education (RIDE) to operate half (1/2) day pre-school programs and approved by the DHS as meeting the CCAP program requirements.

C. For the purposes of the CCAP, "approved" means the child care provider has met the requirement to enroll eligible children through the DHS CCAP automated enrollment system, has received payment for allowable child care expenses, has participated in certain DHS programs, and has actively engaged in the State's QRIS and BrightStars.

1. Although these requirements reflect the minimum standards for safe and healthful child care, the CCAP approved status is not, and shall in no way be construed as, related to the quality of services rendered by the child care provider.

2. The DHS will not pay providers for services rendered prior to the week that the CPD receives their application to be a CCAP approved provider.

4.12.3 Central Provider Directory Application for Approval Process

A. Child care providers who fall into the categories defined in § 4.12.2 of this Part, may apply for entry into the CPD.

1. In the event that the family of an eligible child selects a child care provider that is not listed as approved in the CPD, the provider must contact the Office of Child Care, to request the appropriate application forms and related information about obtaining the CCAP approved provider status.

2. All child care providers seeking access to the CPD and the CCAP approved status shall meet the following general requirements:

a. Applications shall be made on forms approved by the Department and shall be submitted for review to the Office of Child Care.

b. All CCAP approved child care providers shall sign a CCAP Approved Provider Agreement (APA) that establishes the respective responsibilities and obligations of both the Department and the provider as well as the grounds for discontinuation of approved status. No payment shall be made for allowable child care expenses until the Department receives the original APA, signed and dated by the child care provider and notarized or witnessed by a member of the staff of the OCC. Providers shall agree to the terms and conditions set by DHS for:

(1) Completing the APA;

(2) Enrolling eligible children;

(3) Complying with maximum capacity limits;

(4) Transmitting documentation of authorized services rendered;

(5) Establishing the DHS authorized payment rate for services provided to CCAP eligible children enrolled in care as well as the payment method and interval;

(6) Ensuring the safety and well-being of children in their care; and

(7) Filing timely reports to DHS about changes in enrollment, licensure, capacity or any other such matters as deemed necessary to maintain the CPD and authorize payment for services.

c. Providers, and any substitute providers, shall be successfully screened through a background clearance and criminal record check.

(1) For Group Family Child Care, Family Child Care, and License Exempt providers, all members of the provider's household, at the time approved status is initially requested, and at two (2) year intervals thereafter must submit to the background clearance.

(2) The screening process entails a background clearance performed by DCYF through the Rhode Island Children's Information System (RICHIST), and a comprehensive criminal record check conducted by the Rhode Island Attorney General's Office.

d. To be successfully screened, the following criteria shall be met:

(1) DCYF/RICHIST clearances

(AA) There shall be no disqualifying information, and no record of substantiated involvement in an investigation that may result in disqualification, as defined in the DHS program Regulations for Licensure (Chapter 70 of this Title).

(BB) Clearance of Agency Activity through the DCYF/RICHIST background clearance of Licensed Child Care Center providers and employees; Family and Group Family Child Care Home provider, employees, and members of the provider's household who are eighteen (18) years of age or older (R.I. Gen. Laws § 40-13.2-3.1).

(CC) Any changes in the composition of the household must be reported immediately. Background checks on the new household member shall be conducted anytime there is a change in the composition of the approved provider's household.

(2) Criminal Records Check

(AA) There shall be no evidence of criminal activity in the comprehensive background check of the provider and, for Family Child Care, Group Family Child Care and License Exempt providers, members of the provider's household.

(BB) For the purposes of this Section, evidence of criminal activity is defined as a conviction or plea of *nolo contendere* in any criminal matter or the fact that the individual has outstanding or pending charges related

to any types of criminal activity detailed in the DHS Policy.

(3) The Office of Child Care reserves the discretion to deny approval of an application in circumstances when the evidence in the record of a member of the household indicates a pattern of behavior that poses a risk to the safety and/or well-being of the eligible children to receive care.

(AA) Such a determination shall only be made subsequent to a comprehensive review of the information provided through the clearances and background checks required in this Section, as well as any related official documents pertaining to the criminal record of the applicant or household member that may become available.

e. Providers shall be U.S. citizens or submit documentation of a legal immigration status that includes the appropriate authorization to work in the child care field, or a related industry.

(1) The DHS is prohibited from making payment to, and therefore will not approve, non-citizen providers who do not have proof of such authorization.

f. Meet any category specific requirements set forth in this Section.

B. Category Specific Access Requirements

1. In addition to the general access requirements, child care providers approved by and operating under the jurisdiction of the DHS, shall meet the following category specific requirements in accordance with R.I. Gen. Laws §§ 40-5.2-5 and 40-5.2-20:

a. Provide documentation of a valid State of Rhode Island license to operate, deemed by the DHS to be in good-standing, and meet any additional requirements specified by the DHS.

(1) Individuals operating, or employed by, child care centers and family homes regulated by the DHS are subject to screening including both a background clearance and criminal records checks as part of the process of obtaining and maintaining licensure. Accordingly, a valid license in good standing is considered evidence of successful screening for the purposes of this Section.

(2) If a provider's license lapses, is revoked, or otherwise becomes invalid, the DHS shall initiate appropriate action to discontinue approved provider status.

(3) A provider whose approved status is discontinued must submit a new application to be considered for reinstatement as a CCAP approved provider.

2. For continued approved provider status, all licensed providers shall maintain a minimum of designation of One (1) Star in the Quality Rating Improvement System. Maintenance of a program's Star level designation includes the completion and submission of a Quality Improvement Plan to ensure compliance with the Quality Rating and Improvement System criteria outlined in § 4.12.10 of this Part.

3. To be eligible for the CCAP approval, a license exempt provider shall be a relative of an eligible child for the CCAP who has been requested to provide child care services to a CCAP pending or eligible dependent child and shall have submitted a completed and signed CCAP application packet which includes the following:

a. A signed Health and Safety Certification Form in which the provider attests to being free of any physical, mental and/or emotional condition(s) with the potential to endanger children or impede the ability to care for children.

b. Proof of completion of the Approved CCAP Health & Safety Training Module.

c. If an applicant is receiving disability related income and/or supportive health care services or has been hospitalized for a chronic condition for one (1) day or more in the last year, a treating physician must submit either medical documentation or a signed letter, indicating that the applicant is capable of providing safe and appropriate care for children.

d. A W-9 Form (Request for Taxpayer Identification Number and Certification) completed and signed by the provider.

e. Proof that the applicant is at least twenty-one (21) years old as verified by a birth certificate or other legal document that contains an applicant's date of birth.

f. A valid Social Security Number and proof that the applicant is a United States citizen or a non-citizen who is lawfully entitled to reside and work in the United States.

g. Proof of the applicant's Rhode Island residency and of a stable address. A post office box is not an acceptable form of proof of Rhode Island residency, though it may serve as an applicant's official mailing address.

(1) As used in this Section, a stable address means that the applicant intends to maintain one (1) principle place of residence once approved for the CCAP. For the purposes of the CCAP, a stable address is necessary to ensure prompt enrollment of eligible children, timely payment for authorized services and to protect the safety and security of the child care environment.

(2) A signed and dated lease or rental agreement in which the applicant, or the parent or spouse of the applicant, is a legally responsible party shall be considered acceptable proof of a stable address. A person who lives in a residence as a boarder is not considered to have a stable address and, as such, does not meet the requirements of this Section.

(3) At least ten (10) days prior to the actual date of a planned move, an approved license exempt provider must submit to the Office of Child Care (OCC), the information necessary to verify the address of, and the intent to maintain, a new principal place of residence. The provider shall also report any changes in household composition that occur in tandem with, or as a result of, the change in residence.

(4) An approved provider who makes more than two (2) changes in the principal place of residence during the two (2) year period of CCAP status is not considered to have a stable address. Accordingly, CCAP status of such providers is subject to review by the Office of Child Care and possible discontinuation of approved provider status.

h. Proof that there is a working telephone accessible at all times at the applicant's residence as verified through a current phone bill. A cell phone number is acceptable, provided that documentation is provided showing that the phone is attached to the provider and the provider's residence;

i. Proof of a valid, working email address;

j. Information on the applicant, and all members of the applicant household who are age eighteen (18) or older, including Social Security Numbers and dates of birth; and

k. A CCAP Parent-Provider Enrollment Agreement for each CCAP assisted child the provider intends to care for signed by a parent who has submitted an application for child care assistance from the DHS and is currently pending or eligible for such assistance from the CCAP; and

l. A self-declaration specifying how many children (both the CCAP assisted and non-CCAP assisted) will be rendered services. License exempt providers are limited to caring for six (6) children if an acceptable degree of relationship to the provider can be proven. The provider's children under six (6) years of age shall be included in the maximum number of six (6) related children.

(1) Legal documentation must be submitted to the Office of Child Care verifying that the provider has a relationship of acceptable degree to the eligible child(ren). For the purposes of the CCAP, a relationship of acceptable degree is an eligible child's aunt, uncle, grandparent, great grandparent, great aunt, great uncle, or adult sibling age twenty-one (21) or older.

(2) The Office of Child Care (OCC) shall accept as verification of the provider's relationship the legal documents specified in Part 2 of this Subchapter, the Rhode Island Works Rules and Regulations. Information about the required legal documentation shall be made available to the provider by the OCSS upon request.

4.12.4 Criminal Records Checks – Disqualifying Information

A. The arrest and conviction or arrest pending disposition for one (1) of the criminal offenses listed below, or for any offense which involves elements of proof that are substantially similar to the offenses listed below, disqualifies an individual from serving in a child caring capacity in a program or service operated by or for the DHS and/or requiring licensure by the DHS or residing in a household wherein such a program or service is provided or from owning or operating any such program subject to a statewide or nationwide criminal background check in accordance with Federal and/or State law or the DHS Rule.

1. For purposes of this protocol, "conviction" means a judgment of conviction entered by a court subsequent to a finding of guilty.

a. Further, any case where a defendant has entered a plea of *nolo contendere* and has received a sentence that includes a fine and/or a period of incarceration shall constitute a conviction.

b. In addition, any instance where the defendant has entered a plea of *nolo contendere* and has received a sentence of only probation

shall constitute a conviction while the probationary period is pending.

B. Level One (1) Offenses

If an individual is disqualified for the arrest and/or conviction for any of the following offenses, that individual shall have a right to appeal for the purpose of demonstrating that he/she has not been arrested and/or convicted for such an offense.

1. Felony Child Abuse or Neglect
2. Felony Domestic Violence
3. Felony committed against a child
4. First (1st) Degree Child Molestation
5. Second (2nd) Degree Child Molestation
6. Child Pornography
7. Circulation of obscene publications and shows
8. Sale or exhibition to minor of indecent publications, pictures or articles
9. Child nudity in publication
10. Transportation for Indecent purposes
11. Harboring
12. Prostitution
13. Pandering
14. Deriving support or maintenance from prostitution
15. Felony Drug Offense committed less than five (5) years ago
16. Felony involving violence
17. Murder
18. Manslaughter
19. Rape
20. First (1st) Degree Sexual Assault

21. Second (2nd) Degree Sexual Assault

22. Kidnapping

23. Car-jacking

24. First (1st) Degree Arson

25. Second (2nd) Degree Arson

26. Mayhem

27. Felony Assault committed less than five (5) years ago

28. Felony Battery committed less than five (5) years ago

C. Level Two (2) Offenses: If an individual is disqualified for the arrest and/or conviction for any of the following offenses, that individual shall have a right to appeal for the purpose of demonstrating his/her long standing record of excellence in child care:

1. Felony Assault committed over five (5) years ago

2. Felony Battery committed over five (5) years ago

3. Felony Drug Offense committed over five (5) years ago

4. Robbery

5. Breaking and Entering

6. Burglary

7. Illegal Possession of a Firearm

8. Misdemeanor Domestic Assault

9. Third (3rd) Degree Sexual Assault

D. If an individual is disqualified for the arrest and/or conviction for any of the following offenses, when the offense does not involve a child, that individual shall have a right to appeal for the purpose of demonstrating his/her long standing record of excellence in child care:

1. Transportation for Indecent purposes

2. Harboring

3. Prostitution

4. Pandering

5. Deriving support or maintenance from prostitution

6. Circulation of obscene publications and shows

4.12.5 Determination/Maintenance of Provider Status

A. The Office of Child Care shall review a child care provider's application, complete the screening process, where appropriate, and make a determination of the CPDs provider status in no more than thirty (30) days from the date the appropriate signed application form and any required documentation are date-stamped as received by the DHS.

1. Upon determining that a child care provider has met the general and category specific requirements and signed the CCAP Approved Provider Agreement (APA), the DHS shall provide notification in writing of approved status to the provider.

a. Upon completing the Approved Provider Introductory Training, the provider gains access to the CCAP automated enrollment system.

2. Applicants who do not meet the general and category specific requirements shall be denied the CCAP approved status.

a. The Department shall send written notice to the child care provider indicating the reasons for denial and providing information on how to request a hearing and appeal the decision.

b. Any provider who has been denied on two (2) occasions must wait a period of twelve (12) months before re-applying to be a CCAP approved child care provider.

3. The DHS shall not make payment for allowable child care services rendered during the period while the application for approved status is pending.

However, if approved status is granted, the provider will be reimbursed for such services at the DHS Authorized Payment Rate, but only after an Approved Provider Agreement has been signed and the Approved Provider Introductory Training has been completed.

B. The Department shall reserve the right to remove a child care provider from the CPD and discontinue approved status in the CCAP upon obtaining evidence that the provider has not met one (1) or more of the criteria outlined in these Rules.

1. Notice of Discontinuation of the CCAP approved status shall be sent to the provider and include the reasons for the discontinuation and information on how to appeal the DHS decision.

2. The DHS shall also notify the families of any eligible children affected by discontinuation of the provider's approved status.

3. License exempt providers shall be automatically discontinued at one (1) year during which no CCAP payments were made.

C. Renewal

1. License Exempt Providers are approved for CCAP for two (2) years as long as they continue to provide child care for a CCAP pending or eligible child.

    a. After this period of time, a provider must be re-approved and present appropriate documentation to the OCC to remain active.

2. Licensed Providers are listed in the CPD for two (2) years

    a. After this period of time, a provider must be re-approved and present appropriate documentation to the OCC to remain active.

3. Notice shall be sent to approved providers indicating the dates and requirements for renewal of CCAP status at least thirty (30) days prior to the end date of their period of approval.

4.12.6 DHS-CCAP Approved Provider Agreement

A. All CCAP approved child care providers shall sign an agreement with the DHS that establishes the respective responsibilities and obligations of both the Department and the provider and the grounds for discontinuation of approval as specified in this Section.

1. The signature on the agreement with the DHS shall be witnessed by a member of the staff of the OCC or notarized.

2. No payment shall be made for allowable child care expenses until the Department receives an original copy of the DHS-CCAP Approved Provider Agreement, signed and dated by the child care provider.

3. Terms and Conditions for Payment

    a. The Department shall determine the DHS Authorized Payment Rate for each eligible child enrolled.

b. The Department shall also determine the method that approved providers shall use to request and receive payment for allowable child care expenses.

4. In certain circumstances, the Department may determine that an approved provider is no longer qualified to provide authorized CCAP services and, as a result, approved status shall be discontinued. In such cases, the Department shall cease payment for any CCAP services rendered by the provider, and access to the DHS CCAP automated enrollment system will be denied.

a. The Department reserves the right to discontinue the DHS approved CCAP status for providers for any of the following reasons:

(1) Upon obtaining evidence that the DHS Child Care Licensing Unit suspends and/or terminates the license of a child care provider with whom the DHS has a provider agreement.

(AA) License Status placed on hold by the DHS

Unless otherwise instructed, DHS will allow the provider to retain current enrollments and send a notice to the provider that no further enrollments are to take place after the date of the notice putting the license on hold. The DHS retains the right to discontinue the DHS Approved Provider status if the provider's license remains on hold beyond sixty (60) days.

(BB) License suspended and/or Revoked

The provider must cease all operations and all the DHS children are dis-enrolled using the effective date immediately following the decision to place the license on suspension. Notices are sent to the parents and the provider.

(2) Failing to meet the terms and conditions established in the DHS-CCAP Approved Provider Agreement;

(3) A provider engaging in fraudulent or other unlawful acts: in obtaining or seeking to obtain the CCAP approved status; in providing or receiving payment for the CCAP; in utilizing the CCAP automated enrollment system shall be ineligible to participate in the program:

(AA) For a period of three (3) months for the first (1st) discontinuance;

(BB) For a period of six (6) months for the second (2nd) discontinuance; and

(CC) Permanently for the third (3rd) discontinuance.

(4) Knowingly providing false information to obtain benefits from any DHS program or any other federally funded program; in not reporting the CCAP income when applying for a Federally funded program; or in committing tax fraud;

(5) Failing to maintain the DHS licensure or otherwise failing to comply with the DHS Regulations or the standards and Regulations established by another Federal or State government entity applicable to the setting in which the child care is provided;

(6) Failing to protect the confidentiality of information related to the CCAP beneficiaries;

(7) Endangering, or failing to ensure, the health or safety of any child in the provider's care;

(8) Failing to report criminal convictions or the imposition of civil penalties.

(AA) An approved provider shall report to the DHS any criminal conviction or civil penalties imposed for such acts on: the provider, an employee of the provider engaged directly in the provision of child care; or, if a family child care, group family child care, or license exempt provider, an adult member of the provider's household.

(BB) Failure to make such reports within ten (10) days from the date the conviction/penalty is imposed shall be grounds for discontinuation of approved status;

(9) Failing to report any changes in their provider status, living arrangements, addition of new household members, or other vital information to the OCC within ten (10) days prior to the change;

(10) Caring for more children than allowed under this Rule or applicable State laws and Regulations;

(11) Caring for a child who lives in the same household as the provider;

(12) Failing to attend the CCAP Approved Provider Introductory Training;

(13) For license exempt providers, failing to complete the Approved CCAP Health & Safety Training Module.

(14) Refusing or failing to cooperate with the DHS personnel conducting audits, reviews, or evaluations related to the proper and efficient operation of the CCAP or compliance with the Rules set forth herein or terms and conditions of the provider agreement;

(15) For license exempt providers, ceasing to provide child care services to the CCAP pending or eligible children for a period of one (1) year; or

(16) Refusing or failing to maintain a QRIS Quality Rating of One (1) Star or higher.

b. The Department reserves the right to offer a CCAP approved provider subject to discontinuation the opportunity to take corrective action prior to the effective date of discontinuation of approved provider status and termination of the provider agreement.

(1) In such cases, the OCC shall send a notice to the approved provider that shall clearly state the type of corrective action required, the date it is to be completed, and the method for evaluating whether the deficiency has been corrected.

(2) Corrective actions shall be permitted in only those cases in which the Department determines that the health, safety and welfare of eligible children and the fundamental purposes of the CCAP will not be jeopardized while the remedy is being implemented.

(3) The DHS reserves the right to adhere to a permanent discontinuation of the CCAP approval for situations when the terms of a DHS corrective action plan have not been met.

5. Approved providers and the families of eligible children shall be notified at the time of application that, as CPD providers and the CCAP beneficiaries, certain personal information may be accessed on the DHS website by Department personnel, approved providers and contracted agents of the DHS.

a. A confidentiality statement shall be signed by both providers and parents, prior to participating in the CCAP, indicating that they are aware of, and understand, the limits on confidentiality associated with the methods the DHS employs to gather and disseminate information through the CCAP automated enrollment system and the purposes for such information, as well as how that information will be accessed and used.

b. The DHS shall utilize the most advanced technological methods available to ensure the confidentiality of information contained in the CPD and through web enrollment pertaining to the CCAP beneficiaries and approved providers.

4.12.7 CCAP Payments to Approved Providers

A. To ensure that payment for the CCAP authorized child care expenses is made in the timeliest and most efficient manner possible, the Department has established requirements related to attendance and the payment of allowable child care expenses for the CCAP authorized child care services.

B. Payment shall only be made for the CCAP authorized child care services during periods in which the approved provider is open or available to provide services.

1. To determine the allowable child care expense, certain information related to attendance is required by the DHS, as follows:

a. Billing Invoices and Attendance Reports. An approved provider shall:

(1) Submit accurate billing invoices to the DHS, indicating the days and/or hours of attendance for each eligible child, in the manner and for the time periods prescribed in the DHS-CCAP Approved Provider Agreement; and

(2) Maintain daily attendance records on-site, signed by the parent, for each eligible child, for a minimum of three (3) years.

C. When a child is enrolled with a licensed provider, the DHS shall make payment for up to five (5) days per month of the CCAP authorized child care services during which an eligible child is absent and the parent authorizes payment.

1. Documentation of the parent's authorization must be attached to the attendance report for the period in which the absence occurred.

2. No payment shall be made for periods of the CCAP authorized services when the eligible child is not in attendance once the five (5) days per month limit has been reached, without the approval of the Department.

3. Attendance policies may be adjusted in times of public health emergency, weather events, and/or when funding is available to the DHS for this purpose.

    a. Providers must submit attendance for all children, including those who have been absent.

D. Presence of the Provider at the Care Site

1. During periods when eligible children are receiving services, the provider or an approved substitute caregiver must be present at all times.

2. For license exempt providers, the approved substitute caregiver must be listed on the provider's current application for the CCAP Approval.

3. For licensed providers, substitute caregivers must be approved by the DHS. In no case should the approved provider listed on the application be absent for more than three (3) hours in any one (1) week period, without prior approval of the Department.

E. If a provider has other employment, the total hours the provider is permitted to work and maintain CPD status, is fifteen (15) hours in a twenty-four (24) hour period.

1. The fifteen (15) hour work limit applies to all forms of employment combined, including the hours spent providing the CCAP services as well as while working at any other job(s) or traveling to and from other employment.

F. For the CCAP payment to be made, an eligible child enrolled with an approved licensed provider shall attend at least some portion of their CCAP authorized enrollment each week, with the exception of the five (5) days per month allowed absence described in § 4.12.7(C) of this Part.

1. Further, if a child attends for significantly fewer hours than for the authorized hours for more than two (2) weeks, the provider has the duty to update the child's enrollment utilizing the CCAP enrollment website.

2. License exempt providers receive the DHS payment only for services rendered. No payment is made to license exempt providers when an eligible child is not receiving care.

4.12.8 CCAP Payments

A. When making payment for allowable child care expenses, the DHS Authorized Payment Rate for Providers shall apply. The process for determining the DHS authorized payment rate is as follows:

1. Licensed Approved Providers

    a. The DHS authorized payment rate shall be the CCAP Established Schedule of Maximum Weekly Rates.

B. Payment of allowable child care expenses for CCAP authorized services shall be made at the CCAP Established Schedule of Maximum Weekly Rates, in accordance with the requirements of R.I. Gen. Laws § 40-6.2-1.1.

C. Billing Periods

1. An approved provider shall request payment for allowable child care expenses in the twelve (12) month period that begins on the date the authorized services were rendered.

2. In no case shall the DHS make payment for any child care services rendered more than sixty (60) days prior to the date the approved provider requests payment.

D. Restrictions and Limitations

1. There shall be no more than one (1) CCAP approved provider eligible to receive payment from the DHS for allowable child care expenses rendered at a specific site or location at any one (1) time.

    a. In the case of license exempt child care providers, no more than one (1) person living in the household where the CCAP child care services are provided shall be permitted to obtain or retain active approved status at any one (1) time.

2. Approved providers shall not be paid for child care services rendered to children who live in their households.

4.12.9 Periodic Provider Audits

A. DHS reserves the right to conduct periodic audits of provider records and investigations of provider operations relevant to provider approval, rate reporting, billing invoices, attendance records, and accepting payments from CCAP.

1. At the time an audit or investigation is conducted, a designated representative of the Department will review attendance and payment records of all children currently enrolled and receiving child care services and all children enrolled and receiving services during the two (2) years prior to the audit or visit.

4.12.10 Quality Rating and Improvement System

A. Authority

Rhode Island's Quality Rating and Improvement System (QRIS) is established and administered under the authority of the State and Federal laws, promulgated in accordance with 45 C.F.R. Part 98 and R.I. Gen. Laws §§ 42-12-23 and 42-12-23.1. Participation in the QRIS is required by any child care provider who wishes to be a DHS CCAP Approved Provider.

B. Administration

The DHS administers the Quality Rating and Improvement System and partners with public and private agencies that receive funding for the implementation of the QRIS, including collecting and validating information, conducting standardized observations, assigning quality ratings, and providing quality improvement services.

C. Quality Rating and Improvement System Requirements

1. The Quality Rating and Improvement System is designed to set standards of excellence for early care and education programs and school-age child care serving children from birth through age twelve (12), to assess and communicate the level of quality in these programs, to provide a pathway to help programs continually improve, and to serve as a bridge to align all State-level early childhood programs under one (1) common vision of quality.

2. The Quality Rating and Improvement System consists of five (5) Star level ratings that can be earned by licensed early care and education programs and school-age child care programs.

    a. The Quality Rating and Improvement System uses the DHS licensing standards as the foundational Star level for community-based programs, Basic Educational Program (BEP) Standards as the foundational Star level for school-based programs, and has four (4) Star ratings above these licensing standards.

3. The Quality Rating and Improvement System Standards (Health Safety and Nutrition; Enrollment and Staffing; Staff Qualifications and Ongoing Professional Development; Administration; Early Learning and Development; and Family Engagement) each have indicators that must be achieved to earn and maintain a Star rating.

4. The Quality Rating and Improvement System standards are organized as building blocks. In order to reach a higher Star level, programs must meet all of the standards at that level and in all of the lower levels.

4.12.11 Participation

A. Eligible Programs

All early care and education programs and school age child care programs as licensed under R.I. Gen. Laws § 42-12.5-4 *et seq.* and approved under R.I. Gen. Laws Chapter 16-48 *et seq.*, including without limitation child care centers, family child care homes, group family child care homes, school-age child care programs and preschools, but excluding child placement agencies, are eligible to participate in the Quality Rating and Improvement System.

B. Entry into the Quality Rating and Improvement System is required for all CCAP Approved Providers and must be maintained to continue to qualify as a DHS CCAP Approved Provider.

1. Child care programs/providers complete an application to participate in the Quality Rating and Improvement System (QRIS), indicating their desired Star rating on the application.

2. Once the complete application has been submitted and reviewed, QRIS staff may conduct one (1) or more unannounced site visits prior to awarding a program their initial Star rating.

3. Programs then need to maintain that rating by:

a. Continuing to meet the criteria as set out in the Quality Rating and Improvement System Standards;

b. Completing and submitting a Quality Improvement Plan within three (3) months of receiving their initial Star rating; and

c. Completing and submitting an annual report each year.

4.13 CCAP Maximum Weekly Reimbursement Rates

A. Weekly reimbursement is paid according to the provider type, enrolled hours and age of the child receiving care. A copy of the CCAP Established Schedule of Weekly Rates may be viewed at www.dhs.ri.gov.

B. The categories for time authorized and enrolled and for the child's age are as follows:

1. Time Authorized and Enrolled

a. Full time: Thirty (30) hours or more per week

b. Three Quarter Time: Twenty to twenty-nine (20 – 29) hours per week

c. Half time: Ten to nineteen (10 – 19) hours per week

d. Quarter Time: Zero to nine (0 – 9) hours per week

2. Child's Age Category

   a. Infant/Toddler: One (1) week up to three (3) years of age

   b. Preschool: Three (3) years up to first (1st) grade entry (this includes ALL Kindergarten children)

   c. School Age: First (1st) grade up to thirteen (13) years of age.