

ALASKA PASS I CHILD CARE ASSISTANCE MANUAL

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900 GENERAL INFORMATION

900-1 PURPOSE OF THE MANUAL

This manual is a broadly written guide to the policy and procedures that apply to the administration of the Parents Achieving Self-Sufficiency (PASS) I child care program.

900-2 PRUDENT PERSON JUDGMENT

It is impossible to anticipate every issue that Division of Public Assistance (DPA) staff will encounter in working with families. DPA staff will, from time to time, encounter circumstances where the manual does not provide enough detail to make a decision regarding child care assistance. The Division expects staff to operate independently and to apply their prudent judgment to decisions they make in the course of their work. Staff should consult with the Child Care Coordinator in the Director's Office if they are unable to reach a decision on a particular point, or have questions about a particular situation. Questions from staff are important and will be responded to as quickly as possible.

When DPA staff exercise prudent judgment, they must document the decision made and the reasons for the decision with enough detail to allow another worker or reviewer to understand what was done and why.

900-3 CONFIDENTIALITY AND DISCLOSURE OF INFORMATION

Parents in the PASS I program must provide many intimate facts about their personal lives. In addition, parents are often under extreme financial and personal stresses which could make them particularly vulnerable to exploitation if their situation were known. They are, therefore, in particular need of the protection of privacy and confidentiality.

It is against the law to use or disclose information obtained from Temporary Assistance households to any person other than the applicant or recipient, with the following exceptions:

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- Persons directly involved in the administration and enforcement of the provisions of the Alaska Temporary Assistance Program
- Persons directly involved in other state or federally funded assistance programs including but not limited to: PASS II and PASS III and tribal organizations administering TANF or CCDF child care assistance programs.

900-4 CHILD CARE ASSISTANCE PROGRAM OVERVIEW

The Personal Responsibility and Work Opportunity Reconciliation Act of 1996 authorized the Child Care and Development Fund to assist recipients of Temporary Assistance, those transitioning from Temporary Assistance to work, and low income families to obtain child care so they can work or participate in training/education.

The Child Care and Development Fund brought together four federal child care subsidy programs and allowed states to design a comprehensive, integrated child care system.

The State of Alaska developed the PASS Programs to provide child care subsidies to eligible families.

- The PASS I program provides child care subsidies to families on Temporary Assistance who need child care to work or participate in approved work activities.
- The PASS II program provides child care subsidies for a twelve-month period to families whose Temporary Assistance cases close and who continue to need child care because of work or training. The PASS II program also provides subsidies to teen parents who are attending school or working on their GED.
- The PASS III program provides child care subsidies to low income families who are not eligible for PASS I or II and are working or in training.

The Division of Public Assistance administers the PASS I program. The PASS II and PASS III programs are administered by the Department of Education and Early Development (EED).

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900-5 CHILD CARE AND FAMILY SELF-SUFFICIENCY

The goal of the Alaska Temporary Assistance Program is to “Move Alaskans from welfare into jobs so they can support their families...”. Providing access to child care is a key component in efforts to move parents from welfare to work.

Many barriers can exist that make it difficult for families to achieve economic self-sufficiency. Case managers work with families to assist in removing those barriers and developing a plan for the transition to work. Activities are identified that will lead to self-sufficiency and a Family Self-Sufficiency Plan (FSSP) is developed.

Activities in the FSSP should be used as a guide in assessing the need for child care. FSSP activities must lead a family to self-sufficiency while taking into consideration the needs of the children. Activities or schedules may need to be adjusted to meet both long and short-term family requirements. The FSSP should never promote activities that in any way jeopardize the safety and well-being of the children.

900-6 CHILD CARE EXEMPTION FROM WORK ACTIVITY

A parent or caretaker relative of a child under the age of 6 may be exempt from the requirement to participate in work activities if child care is not available, appropriate, or affordable. This work exemption does not stop the Temporary Assistance 60-month time limit clock. It is the responsibility of DPA staff to inform parents of this exemption in the parent’s initial interview.

To determine if a parent is exempt from work activities due to lack of child care, the case worker would consider:

- What the parent has done to find child care;
- How many contacts the parent has made with providers;
- Whether the parent has been referred to and contacted a Child Care Resource and Referral agency (if there is one in your community); and
- If the parent has considered family and friends (informal care).

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The following definitions should be used when making this exemption determination.

1. Child care is considered **available** when:
 - It is located in the community where the family lives or works; and
 - The provider is willing to care for the participant's child(ren).
2. Child care is considered appropriate when:
 - The provider appears to have the ability to care for children of the same age and developmental level as the participant's children;
 - The provider's location is within 30 minutes travel time by public or private transportation from the participant's home or work site.
3. Child care is considered affordable when:
 - The family has sufficient income, or access to a child care subsidy program, to pay the cost.

In many locations there may be a shortage of established child care homes or centers. It then becomes incumbent on parents to be creative in seeking care for their children. Parents often solicit friends and relatives to care for their children. We refer to this child care as informal care. To qualify for the work exemption due to a lack of child care, parents must demonstrate their inability to find child care, including their inability to find suitable informal care. While DPA staff encourages parents to explore the use of informal care, they cannot require parents to use informal care that is not suitable. **Informal care is considered unsuitable** when it is not available, appropriate, or affordable as defined above.

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REFUSAL TO ACCEPT CHILD CARE SERVICES

A Temporary Assistance parent may not refuse appropriate, available, and affordable child care if such refusal prevents the parent from working or participating in activities which are included in the Family Self-Sufficiency Plan.

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If a parent fails to comply with their Family Self-Sufficiency Plan because they refused appropriate, available and affordable child care, Temporary Assistance Program penalties will apply unless the parent demonstrates good cause.

To apply a penalty, DPA staff must be able to document that:

- The applicant has been informed about the consequences of their refusal; and
- Appropriate and adequate services were offered to the parent, including referral to the local Child Care Resource and Referral agency (if available).

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910 PASS I ELIGIBILITY

910-1 ELIGIBLE FAMILIES

Families eligible to receive PASS I child care assistance must be:

- Temporary Assistance applicants who are working or assigned to a work activity before the eligibility determination is made; or
- Recipients of Temporary Assistance who are working or participating in activities that are included in the Family Self-Sufficiency Plan.

Families may also receive PASS I if the only adult is excluded because they are not a qualified alien or are receiving SSI/APA. Adults who are excluded from the Temporary Assistance case because of their alien status or receipt of SSI/APA must have pursued child care assistance from the PASS III program or the Division of Vocational Rehabilitation (if applicable) before being approved for PASS I.

Adults who are penalized, or who are participating in a Temporary Assistance case that is in suspended or “refuse cash” status, are eligible for PASS I child care assistance.

If a Temporary Assistance client is waiting to start employment or an approved work activity, and the child care arrangements would be lost during that wait period, child care may be approved for up to one month to guarantee the child care space.

Two-parent families are eligible if they meet the criteria above and:

- Both parents are in, or traveling to, work or training activities during the time child care is provided.
- Their combined total participation averages a minimum of 55 hours per week

In 2-parent families, if one parent is incapacitated and unable to care for the children, the family is eligible to receive PASS I assistance so that the second parent can work or participate in work activities.

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Families that do not include an adult (ANI or child-only cases) are not eligible to receive PASS I child care assistance except as noted above.

PASS I provides child care subsidies to families on Temporary Assistance who need this service so that the adults in the family can work or participate in approved work activities. PASS I does not pay for child care that is needed because of a medical condition of the adult that limits their ability to care for their children.

910-2 ELIGIBLE CHILDREN

Eligible children are:

- Dependent children who are included in the Temporary Assistance case; or
- Other children residing with the Temporary Assistance family for whom an adult member of the filing unit is the parent or is acting “in loco parentis.” “In loco parentis” means that a person is acting in place of a parent. The term describes someone who provides care and supervision like a parent but without the formalities of a legal adoption.

Note: In this manual, the term “parent” refers to a natural or adoptive parent and to caretakers who are acting “in loco parentis”.

In addition to the general conditions of eligibility described above, a child must be:

- Under age 13;
- Age 13 to 19 and physically or mentally unable to care for him/herself as verified by a physician or licensed psychologist. This verification must include the reason the child cannot care for him/herself, date of onset, and how long the need for child care is expected to last; or
- Age 13 to 18 and court supervision requires that the child be in the care of an adult, as verified by a court record. This verification must include the beginning and ending dates of the required supervision

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910-3 NATIVE FAMILY ASSISTANCE PROGRAM RECIPIENTS

DPA does not provide child care subsidies for families receiving or eligible to receive TANF payments from a Native Family Assistance Program. Families who receive or are eligible to receive temporary assistance payments from a Native Family Assistance program must work with that program to access child care assistance.

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920 CHILD CARE PROVIDERS

920-1 ELIGIBLE CHILD CARE PROVIDERS

To participate in the PASS I child care assistance program a provider must:

- Be 18 years of age;
- Meet the qualifications for Licensed or Approved care, or provide the documentation required by DPA for In-Home care; and
- Provide DPA with a copy of the Child Care Provider Rates and Responsibilities form within 30 days of the initial PASS I authorization in order to continue eligibility for child care authorizations and provider payments.

920-2 ELIGIBLE PROVIDER TYPES

There are several types of child care providers and programs available to families. Providers who are eligible to participate in the PASS I Child Care Assistance Program include the following:

- Licensed Child Care
- Military Regulated Care
- Legally Exempt Care (Approved, Relative, & In-Home)
- Tribal Approved or Certified Care

A. LICENSED CHILD CARE

Programs licensed by the Department of Education and Early Development, or the Municipality of Anchorage (MOA), include child care centers, preschools, group homes, and family child care homes. Child Care Licensing Specialists conduct initial on-site evaluations and inspections of licensed environments and revisit the program each year to monitor programs for compliance with care standards and regulations.

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The Department of Education and Early Development (EED), Child Care Licensing Office, is responsible for licensing child care homes and centers in Alaska. The Municipality of Anchorage (MOA) is responsible for licensing child care homes and centers for the Anchorage area.

The types of Licensed child care programs include:

- **Licensed Child Care Centers, or Preschools.**

A Licensed child care center, or preschool, is a child care facility where care is provided to 13 or more children.

- **Licensed Child Care Group Homes**

A Licensed child care group home is a child care facility, usually in an occupied residence, where care is provided for nine to 12 children, including the provider's own children.

- **Licensed Child Care Homes**

A Licensed child care home is a child care program, usually in an occupied residence where care is provided for no more than eight children under age 12, including the provider's own children.

To remain eligible for participation in the PASS I Child Care Assistance Program, a Licensed home or center must possess a current child care license issued by EED or the MOA.

Licensed homes or centers that offer 24-hour care must also possess a current child care license with a "specialization for nighttime care." If a child care home or center does not have a nighttime specialization; authorizations for 24-hour care should not be issued. The Child Care Licensing Office of EED, or the MOA, will have record of providers with nighttime specializations.

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B. MILITARY REGULATED CARE

Facilities regulated by the military include child care centers, group homes, and family child care homes on property managed by the military. They are regulated by the Department of Defense or the United States Coast Guard and have been inspected for compliance with a variety of health, safety, and program standards, and are monitored on a regular basis by a military agency.

C. LEGALLY EXEMPT CHILD CARE

Child care providers who are exempt from licensing are referred to as “Legally Exempt” providers.

Legally Exempt care consists of Approved (relative and unrelated providers) and In-Home care. The distinction between the types of legally exempt care is based on the relationship between the provider and the children in care, and where the care takes place. The three types of legally exempt care include:

1. Approved Providers

An Approved Provider furnishes child care services to children who may be related or unrelated to the provider. Care occurs in the provider’s private residence, with the Approved Provider being the sole caregiver.

To be considered related to the provider, the child must be a great-niece, great-nephew, cousin, grandchild, great-grandchild, niece, nephew, or sibling.

Children in *Approved Provider* homes must:

- Not exceed a total of five children, including the provider’s own children;
- Be 12 years of age or younger, unless the child has a disability, or meets the criteria for special needs;
- Not include more than two children less than 30 months of age in the total number of five children;

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- Not exceed more than four children who are unrelated to the provider.

Licensing Requirement for *Approved Provider*

An Approved Provider must become a Licensed provider within 12 months after being Approved by the Local Administrator. Information about Approved providers who are applying for Licensure can be obtained by contacting the Local Administrator or the Child Care Licensing offices.

Failure to comply with the requirement to become a Licensed home within the 12 month period may make the Approved Provider ineligible for participation in the PASS I child care assistance program. The Local Administrator in the provider's community can be contacted for information about the status of an Approved Provider's compliance with the Licensing requirement (see section 920-7).

2. Approved Relative Providers

An Approved Relative Provider furnishes child care services only to eligible children who are their grand children, great-grandchildren, sibling, niece, or nephew ("related" children). The care occurs in the provider's home, and the Relative Provider is the sole caregiver.

Note: The definition of "relative" for Approved Relative care is more limited than that used for non-relative Approved care. Cousins, great nieces, and great nephews of the provider are not included in the definition of relative care.

Children in *Approved Relative Provider* homes must:

- Not exceed a total of five children, including the provider's own children;
- Be 12 years of age or younger, unless the child has a disability, or meets the criteria for special needs;

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- Not include more than two children less than 30 months of age in the total number of five children; and
- Be related to the Approved Relative provider.

License Exemption for Approved Relative Provider

To remain eligible for PASS I subsidies, the Approved Relative Provider is exempt from Licensure as long as the provider is only caring for children who meet the definition of “relative,” and the Approved Relative Provider renews their exempt status every two years with the Local Administrator (see section 920-7).

3. In-Home Providers

A parent may choose to bring a child care provider into the family home to care for their children. This type of care is called “In-Home” care.

An In-Home Provider:

- Must be at least 18 years of age;
- Cannot be a member of the family’s temporary assistance unit;
- May be related or unrelated to the children receiving care (see section 920-3); and
- May or may not reside in the home in which the provider performs care (see section 920-4).

In living arrangements where the parent and provider reside in the same household and the child care authorization is issued for In-Home care, the provider may not be issued additional In-Home care authorizations for children who do not live in the home. A provider who wishes to care for other children, in addition to the In-Home care authorization, must apply to become an Approved or Licensed provider.

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Licensed and Approved Exempt

In-Home providers are not required to become Licensed or Approved providers, and there is no requirement to renew the exempt In-Home care status.

Additional information about In-Home care is provided in sections 920-3, 920-4, and 920-8.

D. TRIBAL APPROVED OR CERTIFIED CARE

Tribal approved or certified child care are those facilities that possess a current certificate or other approval from the tribal entity whose child care provider standards meet or exceed the standards of the EED or the MOA.

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E. CHART OF ELIGIBLE PROVIDER TYPES

Following is a summary chart of the types of child care that are eligible for PASS I. The key below the chart provides codes for Provider Type and Provider Status used in the Child Care Program Maintenance (CCPM) screen of the Eligibility Information System (EIS).

Type of Program	Provider Type	Provider Status	Program Description
Licensed: Child Care Center or Preschool Program	C	L	Care for 13 or more children in a center or facility. Several providers on site. Must be Licensed by EED or MOA.
Licensed: Child Care Group Home	G	L	Care for 9 to 12 children in the provider's home, including the provider's children. Two providers on site. Must be Licensed by EED or MOA.
Licensed: Child Care Home	F	L	Care for up to 8 children less than 12 years of age in the provider's home; including the provider's own children. One provider on site. No limits placed on definition of "related" children. Must be Licensed by EED or MOA.
Legally Exempt Home: Approved Provider	F	R	Care for 5 or fewer children under the age of 12 years in the provider's home; including the provider's own children. One provider on site. Of the 5 children in care, no more than 4 can be unrelated to the provider. "Related" children must meet the definition for this type of care. Provider is first Approved then Licensed within one year by EED or MOA.
Legally Exempt Home: Approved Relative Provider	F	R	Care for 5 or fewer children under the age of 12 in the relative provider's home; including the provider's own children. All children in care must be related to the provider. Definition of "related" care is more limited than other care. One provider on site. Licensing is not required but must renew Approved Provider status every two years. Licensure is encouraged.
Legally Exempt Home: In-Home Care	H	R	Care for an unspecified number of children in the child's own home. Provider may be related or unrelated to the children in care. A member of the Temporary Assistance unit may not be the provider. Exempt from Licensed or Approved care requirements.
Tribal: Approval or Certification	Refer to Codes	C	Regulated and certified or approved by a Tribal Entity. Care meets or exceeds standards established by EED or MOA.
Military Regulated: Child Care Center	C	M	Regulated by the Department of Defense or the U.S. Coast Guard.
Military Regulated: Family Child Care Home	F	M	Regulated by the Department of Defense or the U.S. Coast Guard.

KEY for CCPM CODES: Provider Type codes: C=Center G=Group Home F=Child Care Home H=In-Home Care
Provider Status codes: L=Licensed M=Military Regulated R=Approved C=Certified

920-3 RELATIVES AS PROVIDERS

Grandparents or other relatives of a child can be paid to provide child care as long as the provider is not part of the Temporary Assistance unit of the child. The relatives may or may not live in the same household as the children in care.

Relative providers may be Licensed, Approved, or In-Home providers. Case managers will discuss with a parent if care is occurring in the relative's home or the children's home, and whether other children (related or unrelated) are also in the relative's care. Requests and authorizations should indicate Licensed, Approved, or In-Home care (see section 920-1 and 920-2).

Provider Codes must be applied correctly when entering relative child care information into the Child Care Program Authorization screen (CCPA) of the JASP system. The information below is provided to help clarify the application of relative codes:

R = A provider who is caring for relative children that meet the definitions of "related" care for Approved, or Approved Relative, homes (see section 920-2C).

N = A provider who is caring for relative children that fall outside the definition of "related" care for Approved, or Approved Relative, homes (see section 920-2C).

A child who is related to a provider in any way under Licensed or In-Home care is coded as "R" since limitations are not placed on the relative relationships between a provider and the children in care.

920-4 PARENTS AS PROVIDERS

Under no circumstances can a parent or stepparent be paid to provide care for his/her own children or stepchildren. A person who is included in the Temporary Assistance unit is also not eligible to receive PASS I subsidies for child care that is provided to other members of the assistance unit.

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An adult member (18 years or older) of the household who is not part of the Temporary Assistance unit can be authorized and paid for child care if the caregiver meets the requirements for either Licensed or Legally Exempt care. Legally exempt care includes Approved child care homes or In-Home care.

If a parent is an employee of a licensed child care group home or center where their child is enrolled and receives care, the child care facility can receive authorization for child care, even if the child is under the supervision of the parent.

920-5 TEMPORARY ASSISTANCE RECIPIENTS AS PROVIDERS

If a Temporary Assistance recipient chooses to provide child care as their work activity, an assessment should be made regarding their prospects for self-sufficiency. An assessment of the recipient's ability to meet Approved or Licensed provider requirements also needs to be conducted.

If the recipient-provider has children, their children must be counted in the total number of children in care. Therefore, a recipient's ability to become self-sufficient as a child care provider may need to be considered if the recipient-provider has several children less than 12 years of age.

The recipient-provider must show they are committed to providing child care as a business. Activities in the FSSP should reflect this commitment. Possible FSSP activities include:

- Contacting the regional Child Care Resource and Referral agency to find out about child care orientation and training opportunities available in the provider's area;
- Attending child care provider orientation and training, or participating in distance delivery training;
- Obtaining a Child Care License from EED or the MOA that will enable a provider to care for more than five children, and increase opportunities for self-sufficiency;

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- Participating in the Child Care Food Program that enhances nutrition for children in care, and/or the Child Care Grant program that provides additional funds to increase the quality of care; and
- Developing a business plan that evolves from consultation with the recipient's case manager and other community agencies or resources.

In addition, the reasons the recipient is choosing to provide child care should be considered. Individuals should not be encouraged to provide child care unless the recipient enjoys children and is committed to providing the best possible care. In Licensed and approved care, child care occurs in the home of the provider. Consequently, backgrounds of the provider and all household members who have access to children in care will need to be evaluated.

A Temporary Assistance recipient who provides child care in their own facility or home, or who performs In-Home care, is not eligible to receive PASS I assistance for themselves during the hours when the recipient is providing care to others.

920-6 **PRIMARY AND SECONDARY PROVIDERS**

Parents may need two child care providers to participate in certain work activities. If this is the case, one of the providers needs to be designated as the primary provider and the other as the secondary provider. The provider that cares for the children for the largest amount of time should be designated as the primary provider. This designation may affect the amount a secondary provider is paid (see section 940-2 and 950-8).

920-7 **PROVIDER APPLICATION AND DENIAL**

A. APPLICATION TO BECOME APPROVED OR LICENSED

To become an Approved or Licensed Provider, a person is required to complete and submit a provider application to the Local Administrator or the Child Care Licensing office in the provider's community. The Local Administrator distributes, accepts, and reviews all applications for Approved care. The Child Care Licensing office distributes, accepts, and reviews all applications for Licensed care.

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The basic application requirements for Approved and Licensed care are listed below.

Application for Approved care includes:

- Application for Approved Child Care Provider Status, submitted to the Local Administrator;
- Copy of an official photo identification of the provider;
- Completion of the Health and Safety Standards Requirements for Approved Providers form;
- Completion of the Child Care Provider Rates and Responsibilities form (DPA must also receive a copy of this form from the Local Administrator to initiate child care authorizations for PASS I care);
- Proof of a current Alaska business license coded for child care, or a copy of a business license application that is pending, along with proof of payment;
- Notarized Release of Information forms for the provider and all household members who are 16 years and older;
- Interested Persons Reports for the provider and all household members who are 18 years of age and older;
- An Emergency Evacuation Plan; and
- Tuberculin Clearance verifications for all persons in the home who are 16 years of age and older, within the past 12 months.

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Application for Licensed care includes the items below:

- Application for Licensed child care home, group home, or center, submitted to the Child Care Licensing office;
- Proof of a current Alaska business license, coded for childcare, or a copy of a business license application, along with proof of payment;
- Notarized Release of Information forms for the provider and all persons 16 years and older who have regular contact with children in care;
- Finger print check for the provider and all persons having regular contact with children in care;
- Interested Persons Reports for the provider and all persons 18 years or older who have regular contact with children in care;
- An Emergency Evacuation Plan for the child care home, group home, or center;
- Zoning approval by the local government entity prior to operating a child care home or center;
- Approval by local Fire Marshall prior to opening facility;
- Approval by the Child Care Licensing office prior to opening a child care home, group home, or center;
- Approval by the Department of Environmental Conservation for food service to children in center care;
- Parent handbook listing rates, fees, and program policies;
- Personnel policies for group homes or center care;
- Record of provider to child ratios for hours of operation;
- A nighttime specialization for 24-hour care;
- Tuberculin Clearance and other immunization verifications for the provider and all persons 16 years and older who have regular contact with children; and

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- Other application items may be required by child care licensing regulations.

The Local Administrator and the Child Care Licensing Office may also require applicants to attend a child care provider orientation and training session before Approved or Licensed care begins.

B. OBTAINING A CHILD CARE APPLICATION

Persons interested in becoming a child care provider will need to determine the type of care they wish to provide, then obtain the appropriate application packet and submit it to the proper agency.

To obtain an application for Approved care:

- Contact the nearest Local Administrator in the provider's community;
- Contact the Child Care Assistance Office of the Department of Education and Early Development, in Anchorage; or
- Download and print the Approved provider application from the Internet web site for the Department of Education and Early Development. The application must be filled out by hand and mailed back to the address indicated on the application:
<http://www.eed.state.ak.us/EarlyDev/approved.html>

To obtain an application for Licensed care:

- Contact the nearest Child Care Licensing office and request an application for a Licensed home, group home, or center care; or
- Contact the Child Care Licensing Office of the Department of Education and Early Development, in Anchorage.

Note: The applications for licensed care are not posted on the Department of Education and Early Development web site.

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C. DENIAL OF PROVIDER APPLICATIONS

If the Local Administrator or the Child Care Licensing Specialist denies an application for Approved or Licensed care, the provider is notified of the denial by letter and given an opportunity to appeal the denial within 15 days.

D. PROVIDER APPEALS

The appeal process available to individuals whose Approved or Licensed provider application is denied may involve one or both of the following levels of review:

- **Administrative Review**

The administrative review is the first level of review when a Local Administrator denies an application for Approved care. When the Local Administrator issues a denial, providers can submit an appeal, requesting that EED review the decision through the administrative review. This review process will reverse or uphold the denial of the Local Administrator. The provider is notified in writing about the outcome of the administrative review. DPA also receives a copy of the letter.

- **Administrative Hearing**

Administrative hearings are the highest level of review provided to the public by state agencies. The department of law appoints a Hearing Officer when a provider files an appeal to request an administrative hearing on the denial of their Approved or Licensed provider application.

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E. RESPONSE TO DENIAL OF PROVIDER APPLICATIONS

1. DPA Notified when provider applications are denied

DPA receives copies of denial letters issued to providers when their Approved or Licensed application is denied, or reexamined by the administrative review or administrative hearing process. DPA field offices will search the EIS and JASP system to determine if the providers are currently authorized for PASS I care. If so, the DPA offices must devise a communication system that ensures case managers are informed of provider application denials and approvals. These determinations will affect PASS I authorizations.

If PASS I authorizations have been issued to providers whose applications have been denied, case managers must contact PASS I parents to inform them of the denial and the provider's right to appeal the denial within 15 days. Case managers will stop authorizations after the 15th day to a provider who has been denied and has not appealed.

DPA offices must contact providers whose applications were denied to inform the provider that PASS I authorizations will stop immediately, *unless the provider has filed an appeal* on the denial of their application.

2. Care can be authorized when a provider appeals a denial

If a provider chooses to appeal the denial of their application, DPA must have confirmation of the provider's appeal in order to issue authorizations after the 15th day. Appeals can be confirmed by documentation from the provider, the Local Administrator, or the Child Care Assistance or Child Care Licensing offices of EED.

If a provider's appeal can be confirmed DPA will file the confirmation the provider's file and immediately contact case managers regarding the appeal.

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Case managers will contact parents to inform them of their provider's denial and intent to appeal. Case managers may continue to issue PASS I authorizations for 15 days beyond the date of denial, or longer, if the provider has submitted an appeal to the Local Administrator. Parents who receive this information from their case manager may prefer to secure the services of a new provider. If so, case managers will issue new requests or new authorizations.

3. **“Imminent or Substantial Harm to Children” stops PASS I authorization and eligibility**

When denial is based on “imminent or substantial harm to children,” a provider becomes ineligible to participate in the PASS I program, *even if the provider files an appeal. Authorizations cannot be issued.* DPA does not want children to remain in care when the Local Administrator or EED determine that children are at serious risk for harm because of a provider or household member's background. The denial letter is inserted into the provider's file.

DPA offices will immediately contact case managers and inform them of “imminent or substantial harm to children,” and flag the JASP system with, “*DO NOT USE PROVIDER.”

In the comments section of the screen add, “harm to children”. DPA offices will also contact the provider to notify them of their ineligibility for PASS I care.

Case managers will immediately contact parents, counsel them to remove children from the provider's care, and issue separate authorizations to help the parent find new care.

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4. When a provider does not file an appeal to a Denial

DPA will contact a provider upon receiving notice of their application denial. If a provider indicates that an appeal will not be filed, or if the provider is unable to meet the 15-day appeal period, the provider becomes ineligible to participate in the PASS I program. Ineligibility for PASS I will be effective on the denial date issued by the Local Administrator (for Approved care), or the Child Care Licensing office (for Licensed care). The DPA office will inform the provider of their ineligibility for PASS I care.

Documentation of the provider's decision should be filed in the provider's file and the JASP system should be flagged with **"*DO NOT USE"** next to the provider name. The date of denial, and the agency issuing the denial is entered into the maintenance screen in the comment section.

DPA offices must immediately contact case managers to inform them of a provider's decision not to appeal a denial. Case managers will not issue authorizations to the provider that extends past the date of denial. Authorizations, which extend past the deadline, will need to be canceled.

Case managers will contact parents immediately to inform them of their provider's ineligibility for PASS I care and discuss new care. Parents will be issued new authorizations to support them in locating a new provider.

5. When application denials are reversed by Administrative Review or Hearing

When denials are reversed through either the Administrative Review or Administrative Hearing process, DPA will receive a copy of the letter that is sent to the provider and includes the decision to reverse. A reversal means that a provider will be granted Approved or Licensed care status and is eligible to continue participation in the PASS I program. The copy of the letter is placed in the provider file.

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DPA will contact case managers and inform them of the reversal decision. Case managers will continue to issue authorizations to the provider, and will also contact parents to inform and assure them that authorizations to their provider will continue.

6. Providers are paid until effective date of a Denial

DPA will pay a provider for all care furnished to a PASS I family while the provider was eligible to participate in the PASS I program and during the appeal period. Ineligible providers will be contacted by DPA to confirm that authorizations for PASS I care will no longer be issued to the provider.

The Local Administrator, or the Child Care Assistance or Child Care Licensing offices can be contacted for information about a provider's ineligibility for PASS programs.

7. Ineligible providers must be "flagged" in JASP

Flag the JASP system to prevent authorizations from being issued to ineligible providers. To flag JASP, do the following:

1. Access the Child Care Provider Maintenance Screen (CCPM) in the JASP system;
2. Enter "*DO NOT USE" next to the provider's name; and
3. Include the date of denial, and the agency issuing the denial, in the comments section of the CCPM screen in JASP.

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REQUIREMENTS FOR IN-HOME CARE

A. PROVIDER QUALIFICATION

In-Home providers must be 18 years of age, willing to conduct child care in the children's home, and not be a member of the temporary assistance unit.

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B. PROVIDER DOCUMENTATION

Providers must submit the following items to DPA:

- Child Care Provider Rates and Responsibilities;
- Photo identification verifying the identity of the provider;
- Proof the provider holds, or has applied for, a current Alaska state business license.

The provider must submit these items within 30 days of the effective date of the initial child care authorization. If an In-Home provider does not complete and submit the items above within the 30-day grace period, additional child care authorizations cannot be issued to the provider.

Depending on when a provider receives an authorization for PASS I care, the grace period may actually extend beyond 30 days. When this happens, providers must submit the provider forms and I.D. to DPA prior to the end of the month following the first month care was authorized. This will allow adequate time for case managers to authorize care for the following month of care.

It is not necessary to forward a copy of the Child Care Rates and Responsibilities form to the Local Administrator for In-Home care under PASS I.

Other Approved or Licensed care requirements cannot be applied to In-Home care. In addition, children receiving care but that do not reside in the home, are not part of In-Home care.

C. PROVIDER FILE

DPA will maintain files for In-Home care providers. Provider files will contain the following forms and documentation:

- Child Care Provider Rates and Responsibilities form,
- Copy of Provider's official Photo Identification,
- Copy of current state business license,
- Requests for PASS I Child Care,

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- Authorizations for PASS I Child Care,
- PASS I Child Care Billing Reports paid by DPA,
- Manual Authorization requests, and
- Verification of a provider's ineligibility for PASS I program.

D. AUTHORIZATIONS FOR IN-HOME CARE

Case managers are not required to issue authorizations to an In-Home provider if they have reservations about the character of the provider, the ability of a parent to evaluate the In-Home provider, or the safety and well being of children receiving In-Home care.

Unlike PASS II policy for In-Home care, an Interested Persons Report (IPR) is not a requirement for In-Home providers under the PASS I program. Case managers may consider contacting the Local Administrator or the Child Care Licensing office to see if an In-Home provider has been denied for Approved or Licensed care. If so, the reasons may be useful information to the case manager considering In-Home care.

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E. COMPARISON OF PASS I AND PASS II IN-HOME CARE

PASS I and PASS II / III Child Care Assistance programs have different policies and procedures for In-Home care. The information in the chart below is a comparison of DPA (PASS I) and EED (PASS II) policy for In-Home care.

Policy	PASS I	PASS II
Care of Children Occurs in:	Child's Home	Child's Home
Provider is Considered:	Self-Employed	Employee of Parent
Authorizations Issued to:	Provider	Parent
Child Care Payment issued to:	Provider	Parent
Payment % to Provider:	100%	Established by Parent
Provider Paperwork From:	Provider	Parent (employer)
Application Grace Period:	30 days	None
Provider IPR* Requirement:	No	Yes
Tax Forms Filed by:	Provider	Parent (employer)
Provider Files Maintained by:	DPA	Parent (employer)

** Interested Persons Report*

Case managers and DPA field office staff will only apply PASS I policy when authorizing In-Home care for a Temporary Assistance family. PASS II and III policy is not applicable to families receiving PASS I subsidies. Information about the differences between PASS I and PASS II care will be useful to case managers, parents, and provider's.

920-9 COMPLAINTS AGAINST PROVIDERS

Complaints or concerns against providers should be handled as follows:

- Approved providers: forward information to the Local Administrator in the provider's community, or to the Education and Early Development, Child Care Assistance office in Anchorage.
- Licensed providers: forward information to the Education and Early Development, Child Care Licensing office in Anchorage.
- Approved or Licensed providers in Anchorage: forward information to the Municipality of Anchorage, Child and Adult Care office.
- Military regulated providers: refer information to the local Department of Defense or the U.S. Coast Guard office responsible for oversight of military regulated child care programs.
- Any provider that is causing or allowing child abuse or neglect to occur: immediately contact the Division of Family and Youth Services office in the provider's community.

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930 PASS I ADMINISTRATION

930-1 RESPONSIBILITIES FOR ADMINISTERING PASS I

Administration of the PASS I Child Care Assistance Program (CCAP) is carried out by various DPA employees or contracted service providers. To ensure that PASS I policies are consistent statewide, the Administration of the PASS I program by DPA field office staff and case managers must include:

- Reviewing and understanding the PASS I Child Care Assistance Manual;
- Authorizing PASS I child care according to the guidelines in this manual;

A. CASE MANAGER RESPONSIBILITIES

- Determining the need for child care;
- Asking parents if their child has special needs and requires care accommodations;
- Getting the mandatory PASS I Parent Responsibilities form signed and filed in the case file;
- Working with parents to develop back-up child care arrangements;
- Monitoring the 30-day grace period allowed for a new PASS I provider before issuing additional authorizations;
- Contacting a parent when the provider billing report indicates that the parent's use of care exceeds the amount authorized;
- Making work exemption determinations due to lack of available, appropriate, and affordable child care;
- Maintaining a system that provides checks and balances between child care payments and a parent's activities or self sufficiency plan;

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- Notifying DPA field office staff when a parent stops using their provider for any reason that will affect authorization;
- Notifying a parent when their provider has been denied for Approved or Licensed provider status;
- Issuing new authorizations for care when a parent must find a new provider;
- Contacting the Local Administrator to find out if a provider has appealed the denial of their application before issuing more authorizations for care; and
- Immediately discontinuing authorization to a provider whose application was denied on the grounds of “imminent or substantial harm to children.”

Providing parents with information about:

- The types of PASS I eligible child care programs they can use;
- The rules governing PASS I assistance;
- Community resources that can help parents find care, including the local Child Care Resource & Referral agency, if appropriate;
- The parent’s responsibility to pay the balance of child care costs if the parent chooses a provider with rates higher than the state rates and no other care is available in the parent’s community;
- The exemption from work activities due to lack of available, appropriate, and affordable child care;
- Help and services available through the Child Care Resource and Referral agency for children with special needs, including assistance in finding and paying for child care;
- Availability of PASS II child care assistance for parents when an adult family member is employed at the time the Temporary Assistance case closes;

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- Their potential for eligibility for PASS II assistance beginning the month following their case closure and for up to 12 months afterwards; and
- PASS III child assistance for employed parents whose income may be too high for PASS II, but may still qualify the parent for child care assistance.

B. DPA FIELD STAFF RESPONSIBILITIES

- Coordinating an effective child care request and authorization delivery system between DPA offices and case management service providers;
- Answering questions and discussing PASS I child care issues with providers;
- Providing child care providers with information and billing forms;
- Getting the Child Care Provider Rates and Responsibilities form completed, signed and filed in the provider file;
- Notifying the case manager to clarify or complete information on the PASS I request form before authorizing care;
- Notifying the case manager when supplemental subsidies and authorizations begin and end for a child with special needs;
- Notifying the provider if a parent's PASS I authorization will stop or change prior to the end of the current authorization;
- Verifying PASS I child care payments within 10 days after receipt of the provider billing report so providers will receive timely payments;
- Notifying the case manager when a provider's billing exceeds authorized care;
- Entering and maintaining current provider information in the JASP system;

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- Maintaining child care provider files that contain the provider rates and responsibilities form, child care requests and authorizations, manual authorization requests, provider billing reports, documentation for In-Home care, and provider denial or appeal information;
- Monitoring address changes reported by the provider to DPA in person, by phone, or in writing, and ensuring that changes are forwarded to the Director's Office where adjustments are made in the AKSAS system so providers receive payment;
- Contacting a provider to verify the total number of children in care when the JASP system displays an "Alert" for more than five PASS I authorizations issued to any provider;
- Notifying case managers when DPA believes the number of children in care under PASS authorization exceeds five in Approved homes, or eight for Licensed homes;
- Reporting Approved or Licensed providers with too many children in care to the Local Administrator, or the Child Care Licensing or Child Care Assistance Office;
- Ensuring that the DPA field office has an effective and consistent communication process in place for notifying case managers about providers whose applications have been denied;
- Notifying case managers when the Local Administrator, EED, or the MOA denies a provider's application for Approved or Licensed status;
- Contacting the Local Administrator or Child Care Licensing office to find out if a provider has filed an appeal to the denial of their Approved or Licensed care application before authorizing care;
- Ensuring that all case managers receive notification of any provider that is denied or closed by the Local Administrator or Child Care Licensing on the grounds of "imminent or substantial harm to children"; and

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- Ensuring the Eligibility Technician sends a timely W150 notice (the "PASS II Child Care Referral" letter) to both the parent and the Local Administrator as soon as a Temporary Assistance case closes with earnings, so a parent can apply for PASS II assistance at the Local Administrator office. W150 notices that are not sent timely will reduce the number of months the parent would have benefited from PASS II subsidies in the 12 month period limit.

930-2 CHILD CARE COUNSELING AND GUIDANCE

Choosing child care is an important decision. Safe, nurturing, and reliable child care can improve a parent's chances of success in the world of work. Child care that is unreliable, or with which the child or parent is not comfortable, can cause parents to be absent from work or unproductive when they are at work.

Parents are free to choose the type of child care provider they feel best meets the needs of their family and their schedule. They should be given sufficient information about the various types of child care providers to help them make an informed choice.

To provide guidance and assist parents searching for appropriate child care, DPA staff and contracted case managers should become familiar with the differences between home and center based programs, and the types of care now available (see section 920-1).

Case managers and DPA staff can also improve their knowledge of child care programs, types of care, and common child care issues through contacts with the regional Child Care Resource and Referral agencies. A better understanding of the types of child care will help DPA staff and case managers to provide better guidance and counseling to parents.

At all times, parents should be encouraged to choose a child care provider based on the *quality* and *appropriateness* of the program rather than the convenience of the location or the cost.

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930-3 CHILD CARE PLANNING

A parent should be encouraged to develop a primary and secondary (back-up) plan for child care so that the parent's work activity schedule is not disrupted or interrupted when their primary provider is unable to provide care (i.e., provider closure due to holidays, vacation, illness or an emergency situation). Parents should be encouraged to obtain information about child care programs in their community that accept children on a "drop in" basis, and should be assured that child care costs will be covered when and if the parent needs to use a secondary provider.

930-4 CHILD CARE RESOURCE AND REFERRAL AGENCIES

Child Care Resource and referral agencies (R&Rs) are regional agencies located in Anchorage, Fairbanks, and Juneau that serve both urban and rural communities in Alaska (see addendum B). The R&R offices provide a multitude of resources and benefits to parents, providers, and community agencies. DPA staff and case managers are encouraged to contact and interact with the R&Rs as they work with parents searching for child care.

Parents can be encouraged to use the various services offered to them by the R&Rs. A PASS I parent can obtain a list of child care providers, at no cost, which gives information about child care vacancies, days and hours of care, child care costs, meals and transportation services, children's activities, non-traditional hours, and more.

In addition to referrals, R&R staff will counsel parents about the types of child care programs and providers available in a community. They will assist a parent in selecting quality child care programs or help parents to locate a provider or program that will serve a child with special needs. The R&R also offers a variety of handouts, books, videos, and parent checklists to use as parent's talk with providers and visit child care homes and centers.

Child care providers are also encouraged to use the programs and services offered by the R&R. When a provider acquires the Approved or Licensed status, their program information is entered into the child care referral services data base. The referral system helps connect parents who need care with providers who have vacancies.

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Approved and Licensed providers may participate in regular child care and career development-training sessions offered through the R&Rs. The training sessions are offered to providers in both rural and urban communities to help them meet their annual training requirements and to improve the quality of care.

R&R agencies also offer providers access to child care grants that provide programs with additional funding to improve the quality of care for young children. The Child Care Food Program is aimed at improving the well being and nutritional status of low-income children by providers who serve nutritious meals to infants, toddlers, and preschoolers. A provider receives a set reimbursement for each meal served to each child in care. Additional food money allows the provider to purchase higher quality foods. The Child Care Grant is a second incentive based grant that is offered to providers so they will enroll children from low-income families into their care programs. The grant provides better access to better care for low-income children through a reimbursement rate given to the provider for each full-time equivalent child in care, each month. The reimbursement money must be used in ways that improve the quality of the child care program. To remain eligible for this grant, a provider must agree to enroll a specific number of low-income families in their care program for the duration of their participation in the grant.

Orientation sessions for new child care providers are conducted regularly to educate and prepare providers for Approved or Licensed child care regulations, quality care, operating a child care business, etc. R&Rs provide on-site technical assistance to providers, connect providers with other community resources, and assist providers in resolving parent, child or business operations problems.

DPA Staff and Contracted Services Providers are encouraged to contact the R&R to learn about the types of care and programs available to parents who will need child care. The R&R agencies are a good source for parent handouts and materials about quality care. Parents who are Temporary Assistance recipients and who may be interested in becoming Approved or Licensed child care providers should be referred to the R&R for information, forms, training, and support.

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Case managers and DPA staff can also contact the R&R for information about the availability of care in a particular community and when verification of unavailable child care is needed to aid in determining work exemptions.

Case managers should direct parents with child care or provider complaints to the R&R for assistance in resolving or reporting problems, or to find new child care.

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940 CHILD CARE RATES

940-1 RATE SCHEDULE

The subsidy rate paid to child care providers through the PASS I child care assistance program is determined by:

- Current local market rates;
- Geographic area in which the care is provided;
- Age of the child;
- Type of child care program and child care schedule; and
- Special needs of a child.

A. CURRENT LOCAL MARKET RATES

The statewide Market Rate Survey, conducted approximately every two years by EED, determines the local child care rates paid to providers participating in the PASS programs.

B. GEOGRAPHIC AREA

The subsidy rates are adjusted geographically and differ from region to region. When determining the subsidy rate the provider should be paid, the region where the child is in care is the reimbursement rate used for payment.

Example:

If a Juneau parent attends school in Anchorage and needs child care in Anchorage, the Anchorage subsidy rate is used to determine the child care subsidy amount.

C. AGE OF THE CHILD

Subsidy rates also differ depending on the age of the child. There are four age rate categories:

- **Infant:** from age 0 (newborn) through 18 months;
- **Toddler:** from age 19 months through 36 months;

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- **Child:** from 37 months through 6 years; and
- **School age child:** from 7 years through 12 years, or until the child is 19 years of age if it can be verified that the child is developmentally disabled, or until the child is 18 years of age if court supervision requires the child be in the care of an adult (see section 910-2).

When determining the age category of the child, the age of the child at the beginning of the month determines the category for payment.

Example:

If an infant turns 18 months during May, the infant rate (under 18 months) is paid for May and the toddler rate (over 18 months) in June.

D. TYPE OF CHILD CARE PROGRAM AND CHILD CARE SCHEDULE

Subsidy rates also differ depending on whether the care is provided in a child care center or a child care home, and whether the child is in care full-time or part-time.

- Part-time care is five (5) hours or less of care in a 24-hour period.
- Full-time care is more than five (5) but not more than ten (10) hours of care in a 24-hour period.

Example:

Suzy's mother drops her off at the child care center at 7:30 AM and picks her up at 12:30 PM. This is five hours of care and is considered part-time.

Johnny's mother drops him off at the child care center at 7:30 AM and picks him up at 12:45 PM. This is more than five hours of care (five hours and 15 minutes) and is considered full-time.

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940-1 Continued

Although providers can determine their monthly and standard rates (i.e., only a monthly, daily, or hourly rate, etc.), the PASS I program will only reimburse the provider for the monthly rates listed on the current Child Care Assistance Program Rate Schedule (see section 960-2).

If a parent chooses to use a provider whose rates are higher than the monthly rates on the Child Care Assistance Program Rate Schedule, the parent is responsible for paying the remainder of the monthly child care costs once the state subsidy is applied, *unless* child care is so limited or cost inaccessible in the community where care occurs that the additional costs would place a financial burden on a parent complying with Temporary Assistance requirements. If child care is limited or cost inaccessible for a parent, case managers may request or authorize care that exceeds the monthly subsidy rate.

E. SPECIAL NEEDS OF THE CHILD

Care for children with special needs can be reimbursed at a higher rate than a child in the same age category who does not require special care. The monthly reimbursement rate for special care is determined by the nearest Child Care Resource and Referral agency and is generally the standard monthly rate, plus a percentage increase for the age category. The percent increase is based on the level of care accommodations the child needs. (See section 940-4)

940-2 MAXIMUM STATE PAYMENT

The maximum amount that the state will pay for a child's care in a month is provided in the state's *Child Care Assistance Rate Schedule* (see addendum G). On the rate schedule, the payment maximum is referred to as the, "Area Maximum Monthly Subsidy."

The maximum state payment rates listed on the rate schedule establish the upper limits for PASS I subsidy payments issued to providers, *unless* there are exceptional situations in which overtime or 24 hour care may be needed to allow a parent to participate in an important self-sufficiency activity.

940-2 Continued

A. EXCEPTIONS TO MAXIMUM STATE PAYMENT

In situations where PASS I payment would exceed the monthly maximum state payment due to exceptional situations or opportunities afforded a parent, case managers should discuss the need to exceed the maximum state payment **rate with a supervisor prior to** requesting or **authorizing** PASS I child care.

To determine if the maximum state payment rate should be exceeded, consideration should be given to the status of the current work activity of the parent (i.e. whether it is a job or a volunteer placement, etc.), the potential for enhancing work opportunities by paying the additional subsidy amount, and whether the situation is temporary.

The maximum state payment may also exceed the monthly payment limit when multiple authorizations are issued to more than one provider for a single family (see section 950-8).

B. PROCESSING REQUESTS THAT EXCEED MAXIMUM STATE PAYMENT

Manual Payment Request forms must be used to process child care payments that exceed the monthly maximum subsidy (see section 950-2).

940-3 ANNUAL CHILD REGISTRATION FEES

Annual child registration fees of up to \$50.00 per child may be paid upon enrollment to a *Licensed* child care home or child care center that holds a current Child Care License issued, by EED or the Municipality of Anchorage.

The annual registration payment to the provider or program is payable again on the anniversary date of the child's enrollment with the same provider.

If the parent changes child care providers and the new provider charges a registration fee, the fee can also be paid to the new provider. If the parent has a secondary licensed provider who charges a registration fee, the fee can also be paid to that provider, and is payable again on the anniversary date of the child's enrollment.

940-4 SPECIAL NEEDS CHILD CARE

Parents of children with special needs can qualify for a higher child care subsidy payment if they feel their child needs special accommodations during care. Parents are not required to seek out specialized care in order to be eligible for PASS I assistance.

A child must first qualify for the special needs subsidy in order for provider payments to increase. Case managers will indicate on the child care request form when a child requires specialized care and refer parents who have children with special needs to the regional Child Care Resource and Referral (R&R) agency. Parents must contact the R&R before their child can qualify for a special needs subsidy rate.

An Inclusive Child Care Specialist with the R&R will review the child's special needs with the parent and the child care provider, request documentation of the special needs by a professional, and do an objective evaluation of the increased need for care. If the parent has not found a caregiver, the R&R specialist will work with the parent to try and find a provider.

The R&R specialist then determines the special needs subsidy amount and sends a "Supplement Authorization" form to DPA that indicates the subsidy payment percentage over and above the regular child care rate for a child of the same age.

When DPA receives the supplemental authorization notice from the R&R, the case manager must be notified of the child's eligibility for the special needs supplemental subsidy. Child care authorizations will reflect the higher subsidy rate once the special needs care has been authorized by the R&R to assure proper payment to the provider.

Until DPA receives notice of the Supplement Authorization from the R&R specialist, the case manager will issue child care authorizations at the regular monthly subsidy rates for children with special needs.

Once the Supplement Authorization is received by DPA, child care payments are issued at the rate noted, and according to the effective date on the authorization. Retroactive payments are allowable for special needs care.

940-4

Continued

Providers who agree to provide specialized care for a child with special needs will be required to participate in training or support activities in order to continue receiving the higher monthly subsidy rate. The R&R specialist will oversee training requirements for the provider, complete all evaluations and forms, and monitor both the parent and provider participation in the special needs subsidy program.

If the provider or the parent are unable to participate or follow through with the subsidy requirements, the R&R specialist will issue an “Authorization to STOP PAYMENT of the Special Needs Supplement” and forward it to the DPA office. The case manager must be notified if the special needs subsidy is discontinued to the family so regular rates are used when authorizing child care if the child continues to need care.

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950 CHILD CARE AUTHORIZATIONS

950-1 AUTHORIZATIONS FOR PASS I CHILD CARE

Child care authorizations will be issued to child care providers before care begins and will indicate the maximum amount of care for each child subsidized by DPA.

Issuing authorizations before care begins helps to reduce provider payment problems, retain providers needed by PASS I families, and enables providers to coordinate their care schedules for families in advance.

The authorization is an assurance to both the parent and provider that child care will be paid for the days and hours listed on the authorization, according to the current Child Care Assistance Rate Schedule for the named children, during the period specified on the authorization.

Child care should only be authorized for the period during which the parent is engaged in activities included in the Family Self-Sufficiency Plan, and may include travel and/or sleep time (refer to section 950-10).

DPA, or its designee, will process an authorization in the JASP system when a request for PASS I care is received from a case manager. The amount of care that is authorized is based on the parent's schedule of approved work or training activities, combined with their child care needs.

Once an authorization is processed in the JASP system, a copy is generated for the provider by printing a copy of the Child Care Payment Authorization (CCPA) screen in the Jobs Automated System Payment (JASP) screen. The printed copy of the authorization is mailed to the provider unless a provider indicates that they will pick up the authorization from the DPA field office.

Occasionally, authorizations need to be amended. If so, complete a Request for Manual Authorization form for adjustments to authorizations and provider payments. Back up for the authorization adjustment must be attached to the form (See section 950-3).

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950-2 REQUEST FOR PASS I CHILD CARE

In some locations, case managers use the Request for PASS I Child Care form to initiate completion of the child care authorization. The case manager, according to the instructions that accompany the form, completes the request form.

The case manager signs the request form and forwards it to the appropriate DPA field office for entry into the JASP system. When the authorization for care is entered into JASP, a copy is printed and the authorization is mailed to or picked by the provider.

Other case managers have direct access to the EIS and JASP systems, giving them the ability to bypass the child care request process. This access enables these case managers to issue the child care authorization without completing a request form. When the authorization process is complete, a copy of the authorization is also printed and given to the provider.

Whenever a parent changes providers, or when the work or training schedule of the parent change from the original request, a new child care request form must be completed by the case manager and forwarded to DPA for authorization. Changes to authorizations are not to be done by phone. Requests are issued for either "Enrollment" or "Attendance" based care.

DPA will not alter the requests for care issued by a case manager during the authorization process. Case managers should be contacted whenever there are questions about or problems associated with care requests. A case manager may decide to resubmit a child care request after being alerted to problems or concerns.

Presentation of the request form, by the parent to a provider, may help a parent to secure a child care slot until the PASS I authorization is generated by DPA and sent to the provider. However, the request form is not an official authorization or agreement for payment

950-3 MANUAL REQUESTS FOR AUTHORIZATION

Manual authorizations for child care are issued only when the authorization cannot be processed in the JASP system.

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Manual authorizations are completed on the Request for Manual Authorization form (06-3823) in the following circumstances:

- A child is determined eligible for a special needs subsidy (see section 940-4), or is over the age of twelve and is not receiving SSI (see section 910-2);
- A child care authorization needs to be amended;
- A child is living with a Temporary Assistance family but is not included in the assistance unit, and an adult member of the filing unit is acting “in loco parentis” for the child (section 910-2);
- Child care costs exceed the maximum state payment rate because extended or 24-hour care is needed (see section 940-2 and 950-11);
- A child is part of an assistance unit in which the Primary Individual (PI) is a mandatory filing unit member but is excluded due to receiving SSI or APA (see section 910-1);
or
- The child is part of an assistance unit in which the PI is an ineligible alien, but needs child care in order to pursue self-sufficiency activities (see section 910-1).

All requests for manual authorization will clearly indicate the reason for the payment or payment adjustment, and must include the signature of the person submitting the manual request.

Approval of requests for manual authorization must be reviewed and approved by DPA before authorization or payment may occur. Send manual authorization request forms with the back up to the attention of the Child Care Program Coordinator, in the Director’s office.

950-4 EFFECTIVE DATES ON AUTHORIZATIONS

Authorizations for PASS I child care are:

- In effect only for the dates specified on the authorization;
- Generally issued one month at a time, but can be issued for up to three months if the parent is in a stable activity;
- Retroactive, in limited cases;
- Able to begin and end on any day of the month; and
- Allowed overlapping dates with the effective dates on a different authorization for situations that require payment to a primary and secondary provider, in order to safeguard a parent's work or training opportunities.

950-5 ENROLLMENT AUTHORIZATION

An enrollment authorization is an assurance to both the parent and the provider that child care will be paid by the state at the specified rate and for the period of time on the authorization, whether the child is in attendance or not.

Many child care programs have fixed expenses, which do not fluctuate based on a child's attendance. They often charge parents on a monthly basis only. In these cases, enrollment authorizations are critical to a parent's ability to secure needed child care.

Enrollment authorizations must be issued when the parent has been participating in a regular work activity, five days a week on a consistent basis. Enrollment authorizations should also be used for parents who are expected to participate in a regular work activity, five days a week. The authorization can be for full-time or part-time care.

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950-5 Continued

Enrollment authorizations should not be issued for partial months, for schedules that are less than five days per week, for people participating in work search, for sporadic schedules, for people whose participation in work activities has been unreliable, or for hourly care.

950-6 ATTENDANCE AUTHORIZATION

An attendance authorization is an assurance to both the parent and the provider that child care will be paid by the state, according to the rate schedule, for the days and hours indicated on the authorization.

An attendance authorization does not include payment for absences.

An attendance authorization should be used for:

- A partial month;
- When the parent has an erratic schedule of approved activities;
- When the child care schedule requires less than five days of care per week;
- When the daily schedule of care is 2 hours or less;
- When the parent has been unreliable in fulfilling their work activities; or
- When the parent is participating in work search activities.

Attendance authorizations should specify the care being authorized by type, such as, full-time, part-time, or hourly. If the parent's schedule is variable or unpredictable, an estimated number of units can be used, and variables can be noted on the authorization to clarify the extent of coverage being authorized. If the daily care schedule is less than 2 hours per day, authorize care at the hourly rate.

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950-6 Continued

If a family needs full-time child care for the month, the authorization should be an enrollment authorization. However, there may be times when an attendance authorization is issued for full-time care, e.g., when the parent has been unreliable in participating in assigned activities. In this case the state will pay the monthly enrollment rate for a full month of care, or the daily attendance rate, whichever is lower.

950-7 SCHOOL AGE CARE

For a child enrolled in a private or public school, care is not authorized for the hours during which the child is in school. Children who are not enrolled in school may be covered up to the age of 7 without regard to school hours. If a child is not enrolled in school after reaching age 7, coverage is not authorized for the hours that public school is in session.

When a school-age child has a part-time authorization, but is authorized for full-time care during school holidays and school in-services, the additional amount of subsidy for a full-time day is the difference between a full-time and part-time daily attendance rate.

950-8 MULTIPLE AUTHORIZATIONS

Multiple child care authorizations can be issued when parents need to use more than one child care provider. Parents may need more than one provider if:

- Their work activity hours extend beyond normal child care hours;
- The child care provider cannot provide care due to illness or facility closure; or
- The child is ill and cannot be cared for at their regular child care facility or cannot attend school.

950-8 Continued

Typically, the authorized care should not overlap. However, if care cannot be provided due to a facility closure or illness AND an enrollment authorization has been issued to a primary provider, payment for care may overlap. In all cases, the maximum monthly payment amount cannot be exceeded. The primary provider should be authorized their maximum rate; the secondary provider's amount cannot exceed the difference between the primary provider's payment and the state maximum.

950-9 TEMPORARY FACILITY CLOSURES

Providers should give a two-week notice to parents of any planned closures of their child care facility. Parents are responsible for locating alternate care and can be issued an authorization for payment of that care. In limited cases, authorizations for the same period of time may result.

Example:

A child attends a center where child care is charged on an enrollment basis. The center closes two days for cleaning and staff training. The center does not reduce their fee for the month in which it closes. We can pay the full-time enrollment fee plus two days attendance at another facility. This should only be approved when the full-time provider has given sufficient notice of their closure and enrollment fee policy.

If a provider does not give two-week's notice of a planned closure, an enrollment authorization should revert to an attendance authorization for that provider.

Alternate care can be authorized and paid when a facility closes unexpectedly due to illness of the provider or unanticipated situations. The parent must be advised they need to request an authorization for that care as soon as possible.

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950-10 SLEEP/TRAVEL TIME

DPA staff can authorize child care for either sleep or travel or travel time as follows:

- Up to 8 hours before or after the parent works a night shift, if the sleep time is necessary for the client to participate in an approved work activity. Night shift is defined as employment requiring a minimum of 6 work/travel hours between and includes the hours of 8:00pm and 6:00am.12:00am (midnight) to 4:00am
- Travel time required for participation in an approved work activity up to a maximum travel time of one-half hour before and one-half hour after the work or training day. If the travel time exceeds this time limit, DPA staff may approve additional time. However, justification must be documented.

950-11 OVERTIME

If a parent needs more than 10 hours of care in a day, child care can be authorized as attendance and paid at the daily rate plus the hourly rate for the hours over 10.

If a parent needs more than five days of full time care per week, authorize either a full time *enrollment* plus daily attendance for the days over five per week, OR issue an *attendance* authorization for the total number of days of care needed during the month.

The maximum state payment amount may be exceeded in some situations (see section 940-2).

950-12 TWENTY-FOUR HOUR CARE

When a parent provides documentation that work or a training activity, or travel away from home, is required for continued participation in an approved work activity, DPA staff can authorize 24-hour care for the required period of time.

950-12

Continued

In unusual cases where 24-hour care is warranted and the child care payment guidelines would prohibit the client from being able to pursue an important self-sufficiency activity, the case worker should discuss the situation with a supervisor to determine if 24-hour care is appropriate. If so, a manual authorization is issued for the amount exceeding the maximum state payment (see section 940-2).

Both single and two-parent families can use 24-hour care. However, if a two-parent family uses 24-hour care both parents must be unavailable to care for the children during the time 24-hour care is authorized. Parents are unavailable because of involvement in approved work or training activities.

An authorization for 24-hour care can only be issued to a provider who holds a current Child Care License with a Night-time Specialization, issued by the local Child Care Licensing Office, or the MOA. Authorizations cannot be issued to Legally Exempt homes or programs (Approved or In-Home care) for 24-hour care. To locate a licensed program that is eligible to provide 24-hour care, contact the Child Care Licensing Office in the provider's community.

Use the following guidelines for authorizing 24-hour care:

A. 24-HOUR ENROLLMENT AUTHORIZATIONS

If one provider is authorized to provide 24-hour care for a family, authorize a full time monthly enrollment plus a part time daily attendance for each day of 24-hour care.

If two providers are authorized to provide 24-hour care, authorize the primary provider for full time monthly enrollment and authorize the secondary provider for part time monthly enrollment.

B. 24-HOUR ATTENDANCE AUTHORIZATIONS

If one provider is authorized to provide 24-hour care, authorize a full time attendance day plus a part time attendance day for each day of 24-hour care.

If two providers are authorized to provide 24-hour care, authorize the primary provider for full time attendance days and authorize the secondary provider for part time attendance days.

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950-13 JURY DUTY

Child care can be authorized for jury duty if the client is currently involved in an approved work activity. The client must show verification of jury duty attendance, and must continue participation in the approved work activity when not on jury duty.

950-14 SITUATIONS PROHIBITING PASS I AUTHORIZATION

Authorizations for PASS I care are prohibited when:

- A caregiver has not submitted their provider application for Approved or Licensed care to the Local Administrator or Child Care Licensing office within the mandatory 30-day grace period;
- An In-Home provider has not submitted mandatory documentation to DPA within the 30-day grace period;
- A Temporary Assistance case is closed, unless a working parent has applied and is waiting for PASS II assistance through the Local Administrator. Authorization of PASS I child care during the PASS I to PASS II transitional period is limited to 30 days.
- Another parent in the family home is not working or participating in approved training activities;
- When a parent is not in compliance with their work, or Family Self-Sufficiency training activities;
- Care for the child(ren) is needed because the parent has a medical condition, injury, or pregnancy, which prevents the parent from engaging in work or training activities;
- A parent is using unauthorized child care;
- An In-Home provider is also caring for children that are not authorized for In-home care;
- A PASS I provider is caring for too many children (not just PASS I, but also PASS II or self-paying);

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- A provider or program has been closed down because of “imminent or substantial harm to children” (see section 920-7E);
- DPA receives notification from the Local Administrator, the MOA, or the Child Care Assistance or Child Care Licensing office that a program is permanently or temporarily closed for health and safety reasons;
- A caregiver chooses not to appeal the denial of their Approved or Licensed provider application (see section 920-7 C-E);
- A caregiver does not meet the 15-day deadline for filing an appeal to the denial of their Approved or Licensed provider application;
- The denial of a provider application is “stayed” (upheld) after an Administrative Review or Hearing;
- A child care program bills DPA for PASS I subsidies at a higher monthly rate than other parents using the same program (See section 960-2).

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960 PAYMENT PROCEDURES

960-1 PASS I CHILD CARE BILLING REPORT

To receive PASS I child care subsidy payments, a provider must complete, sign, and submit a PASS I Child Care Billing Report to DPA for authorized child care that was performed by the provider during the billing month.

Child care providers are encouraged to submit billing reports to DPA by the 5th day of the month following the month in which care was performed. If reports are submitted to DPA by this date, delays in provider payments are minimized. The entire PASS I payment process takes from 14 to 23 days once the provider billing is received by DPA.

Providers will bill DPA according to the child care rates published in their Child Care Provider Rates and Responsibilities form submitted to DPA prior to a provider's authorization for PASS I care (see section 960-2). PASS I pays a provider the monthly state reimbursement rate or the provider's rate, whichever is lower. DPA will not pay providers for billing reports that are more than 90 days past the month in which care was authorized.

When DPA receives a provider billing report, a date is stamped on the report to acknowledge receipt of the bill. The billing report is reviewed for accuracy and consistency against the child care authorization issued by the case manager. Payments to providers are issued according to the child care authorization for the specified number of days and hours for each child in PASS I care (see section 960-3). Only charges that occur within the scope of the authorization agreement and that are included on the billing report will be paid.

Discrepancies between authorizations and provider billings must be discussed with the case manager prior to verifying (confirming) the provider billing in the JASP system. DPA field staff will contact case managers, who in turn will contact the parent to discuss discrepancies between the provider billing and the child care authorization. Case managers will then contact DPA if adjustments to the authorization and provider payment must occur. DPA field office staff will not reduce payments to providers unless case managers have first been notified. Discrepancies are corrected by issuing revised child care requests or authorizations.

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Once the review of the provider billing is completed and the information on the billing is determined to be accurate and supports the authorization, DPA will verify the billing within 10 days of the date stamped on the billing report. Following this procedure will help to ensure that provider billings and payments are processed in a timely manner.

Note: Verification of a provider billing is when DPA enters the billing information into the Eligibility Information System (see EIS Procedure 1999-2) to initiate the payment process. Billing requests in the EIS system interface with the Alaska State Accounting System (AKSAS) to generate payments to providers three times each week. Payments are mailed to all providers from the Division of Finance in Juneau, requiring several days to reach some communities.

If a provider is concerned about a billing report or payment, use the provider's vendor number to conduct a search in the JASP system. DPA field office staff may also contact the Child Care Coordinator in the Director's office for assistance, when necessary.

960-2 CHILD CARE PROVIDER RATES AND RESPONSIBILITIES FORM (AGREEMENT)

DPA requires all providers to complete a Child Care Provider Rates and Responsibilities form to participate in the PASS I program. This form constitutes an agreement between the provider and DPA, and must be completed and signed by the provider and submitted to DPA within 30 days of the provider's first authorization for PASS I care if authorizations are to continue to be issued to the provider.

The Provider Rates and Responsibilities agreement also requires child care providers to attach a copy of their personnel and program policies to the agreement so that DPA and the Local Administrator can refer to information about monthly rates, fees, reduced rates, or employee discounts for various child care centers, preschool programs, group homes, or home based care (refer to page one of the provider agreement). This information is important in assuring that PASS I over payments do not occur and that PASS I parents and parent-employees are not subjected to payment discrimination.

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A. INCREASES IN PROVIDER RATES

Payments to child care providers and programs are based on the information contained in the most current copy of the Child Care Provider Rates and Responsibilities form on file with the local DPA office.

A provider may increase or decrease their monthly child care rates at any time, but payments to a provider will only be issued according to the rates listed in the current agreement with DPA for the current billing month. An increase in rates requires that a provider submit a revised Provider Rates and Responsibilities form to DPA. The revised agreement must be submitted to DPA at least 30 days before billing at the higher rate. Payment at the higher rate cannot be issued to a provider until DPA has received the revised agreement (refer to page two of the agreement).

If a provider fails to provide the written 30-day advance notice, neither DPA nor PASS I parents are obligated to pay the higher child care rates. Failure to provide sufficient notice means that DPA will pay the provider at the lower rate for the current billing month.

Advance notice of rate increases is also important to low-income parents who may be paying a portion of the monthly child care costs from their limited monthly income. With adequate notice, a parent will have enough time to locate a new provider if they are unable to pay additional child care expenses.

The DPA field offices will also instruct providers to forward revised Child Care Provider Rates and Responsibilities forms to the appropriate Local Administrator, or to the MOA if the provider is A decrease in monthly child care rates will not require a provider to submit a written 30-day advance notice to DPA because the state automatically issues payment at the lowest monthly rate. In spite of the decrease, providers are still required to complete and submit a revised Child Care Provider Rates and Responsibilities form to DPA when they lower their monthly rates.

The DPA field offices will instruct providers to forward revised rates and responsibilities forms to the appropriate Local Administrator, or the Municipality of Anchorage if the provider conducts care in the city of Anchorage, for PASS II and PASS III.

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B. DECREASES IN PROVIDER RATES

A decrease in monthly child care rates will not require a provider to submit a written 30-day advance notice to DPA because the state automatically issues payment at the lowest monthly rate.

Decreases in rates still require providers to complete and submit a revised Child Care Provider Rates and Responsibilities form to DPA when they lower their monthly rates.

C. REDUCED OR DISCOUNTED CHILD CARE RATES

To ensure that PASS I payments accurately reflect reduced or discounted rates charged to PASS I parent-employees of child care group homes, preschools, or centers, case managers will discuss employee benefits and child care discounts with parents employed by these child care programs. If reduced rates and employee discounts will lower the monthly subsidy payment, case managers must indicate the reduced rates for PASS I care on the child care request form so DPA will issue authorizations and payments that reflect the reduced or discounted rates.

DPA field offices will also help to ensure that PASS I payments reflect reduced or discounted employee rates by ensuring that personnel or program policies that describe child care rates are attached to the Child Care Provider Rates and Responsibilities form upon receipt by DPA. Field office staff will review the policies to determine if discounted rates are offered and check this information against child care request forms. Lastly, DPA field offices can help to reduce overpayments to providers by establishing a process to inform case managers of child care programs who employ parents whose children are eligible for PASS I child care assistance subsidies.

960-2 Continued

D. RATES AND PAYMENT DISCRIMINATION

The Child Care Provider Rates and Responsibilities agreement prohibits a child care program from treating PASS I subsidized parents or parent-employees differently from other parents or employees working or participating in a child care program (see page two of the rates and responsibilities form). PASS I parents whose children are in care cannot be charged a higher rate for child care than a parent not on child care assistance. PASS I parents who are eligible to receive a discounted rate for child care will not be charged the full rate while other parents are charged the reduced rate. PASS I clients employed by programs that offer employee discounts will not be charged full monthly rates while other employee are charged the employee discount rate.

DPA staff and case managers who identify child care programs with discriminatory policies or billing practices affecting PASS I parents, will contact the provider directly and request that an adjusted billing form with reduced or discounted rates be reissued to DPA. Child care providers or programs that discriminate will be instructed to submit a revised Child Care Provider Rates and Responsibilities agreement so that policy and rates accurately reflect current charges for care.

Note: The revised rates and responsibilities form must also be submitted to the Local Administrator, or to the MOA if the provider conducts care in the city of Anchorage.

960-3 **PAYMENT AND PARENT NON-COMPLIANCE**

If child care has been authorized by DPA, a provider will be paid for the authorized care, even though the PASS I parent may not have used the authorized time or may not have participated in their assigned activities.

DPA staff will contact case managers about those parents whose child care authorizations and provider billing reports indicate over use, under use, or unauthorized use of PASS I care.

ALASKA PASS I CHILD CARE ASSISTANCE MANUAL

960-3 Continued

Once the case manager receives this information from DPA, it is the responsibility of the case manager to contact the parent to discuss child care discrepancies. The case manager should refer to the Temporary Assistance Manual to evaluate whether a penalty should be applied to the client's case.

Case managers may monitor a parent's use of care by changing enrollment authorizations to attendance-based authorizations. Both the parent and the provider will be notified about changes to previous child care authorizations.

960-4 OVER AND UNDER PAYMENTS TO PROVIDERS

If a PASS I overpayment or an underpayment is made to a child care provider, DPA staff need to contact the provider to make them aware of the payment error.

Overpayments should be deducted from the next PASS I child care payment. Underpayments should be added to the provider's next monthly payment, with notations entered into the JASP system and the provider file.

If the provider is no longer providing PASS I care, the subsidy amount owed to the provider will be directly mailed to the provider in the form of a warrant to the last address on file with DPA.

960-5 MANUAL PAYMENTS

While child care payments can be made manually, they should *only be requested when it is not possible to make the payment changes in the JASP system*. Circumstances that are appropriate for manual payments are listed in section 950-3. Because manual payments are not recorded in or tracked through the JASP system, the number of payment adjustments issued by DPA field offices or case managers should be limited to the circumstances that depend on manual payment adjustments.

Manual payment requests will not result in faster payments to child care providers.

ALASKA PASS I CHILD CARE ASSISTANCE MANUAL

970 FORMS

970-1 CHILD CARE REQUEST FORM

The *Child Care Request* form (Form 06-3823) is used to request a child care authorization when the authorization is issued by someone other than the case worker. The client's case worker or case manager must sign this form.

970-2 CHILD CARE BILLING REPORT

Child care providers must complete and submit a *Child Care Billing Report* as an invoice for payment. The state financial system requires retention of all invoices for 4 years. These reports/invoices must be accessible and retrievable for payment research and audit purposes during that time. See Section 960-1 for further discussion of the billing report.

970-3 PROVIDER AGREEMENT AND RATE SHEET

All child care providers must complete and submit a *Provider Agreement and Rate Sheet* to DPA prior to receiving a PASS I child care payment. This form is kept in the DPA files, with a copy given to the provider. Information from the form is used to establish the provider as a vendor in the JASP and AKSAS systems and to inform the DPA office of the provider's rate information. In addition, if the provider's rates are lower than those paid by the state, DPA will pay the lower of the two. When provider rates are lower than the state's, they must be manually entered on the *Child Care Provider Maintenance (CCPM)* screen.

970-4 PARENT RESPONSIBILITIES FORM

The *Parent Responsibilities* form is a mandatory form to be signed by all parents receiving PASS I child care assistance. By signing the form, parents acknowledge their responsibilities while participating in the child care assistance program. Case workers are responsible for reviewing these forms with parents, getting them signed, and keeping the original in the case file.

ALASKA PASS I CHILD CARE ASSISTANCE MANUAL

970-5 **OPTIONAL CHILD CARE PROVIDER FORMS**

Licensed child care providers are required to maintain emergency child records and provider policies for parents. Registered providers are not. DPA has developed two optional forms, the *Emergency Child Record* and the *Caregiver/Parent Agreement* for use by registered providers. The *Emergency Child Record* was developed for safety reasons and to give providers contact information for the family. The *Caregiver/Parent Agreement* outlines provider policies and helps to establish the ground rules of the provider/parent/child relationship. Providers who clearly define their policies find they have fewer problems and misunderstandings with parents about the care they provide than providers without policies.

DPA offices should encourage the use of these forms and have them readily available for registered providers.

970-6 **FORMS RETENTION**

Guidelines for the retention and disposal of child care forms follow:

- Child Care Request Form – keep as needed but not longer than a year. Shred for disposal.
- Child Care Billing Report – keep in a retrievable system for 4 years. Shred for disposal.
- Financial Transaction Register – keep in a retrievable system by month and year for 4 years. Shred for disposal.
- Parent Responsibilities Form – follow case file retention and disposal guidelines.
- Provider Agreement and Rate Sheet – keep for 4 years. Shred for disposal.

ALASKA PASS I CHILD CARE ASSISTANCE MANUAL

980 CHILD CARE TRANSITIONS

980-1 TERMINATION OF CHILD CARE AGREEMENT

An authorization agreement's end date is notice to both the parent and the provider that unless a new authorization is issued and accepted, child care will not be paid beyond the end date.

However, if either a parent or a provider wishes to end their relationship at any time prior to the end date of the authorization, two week written notice is required. The exceptions to this policy are:

- The parent and the provider mutually agree in writing to waive the notice;
- The parent has made a report of abuse or neglect against the provider and the parent removes the child from care. The report must have been filed with the agency responsible for receiving the report (see section 920-8).

If a parent has an enrollment authorization, and leaves the provider after giving the required notice, the care is billed and paid on an attendance basis.

A. REQUIRED NOTICE NOT GIVEN

1. Parent Does Not Give Notice

If a parent has an enrollment authorization and leaves the provider without giving the required notice, the care is billed and paid on an enrollment basis.

2. Provider Does Not Give Notice

If a provider discontinues service and fails to give notice, the provider can only bill and be paid for the days/hours for which care was actually provided.

ALASKA PASS I CHILD CARE ASSISTANCE MANUAL

980-1 Continued

B. PARENT BECOMES PROGRAM INELIGIBLE

If a parent becomes ineligible for PASS I because they are no longer eligible for Temporary Assistance, DPA is responsible for notifying the parent **and** the provider of the change.

Providers must be informed of the effective date of the change to the authorization. If an enrollment authorization has been issued to the provider and DPA does not inform the provider of the change, the care is billed and paid on an enrollment basis.

980-2 PASS II CHILD CARE ASSISTANCE

PASS II child care assistance is available to families whose Temporary Assistance case closes, an adult in the family is employed, and the family continues to need child care because of work or training. PASS II is available for 12 months after the Temporary Assistance case closes. Parents may access this assistance at any time during the 12-month period. PASS II eligibility ends when the 12-month period expires.

Send the PASS II Child Care Referral notice (W150) when a family's Temporary Assistance case closes and there is an adult in the family who is employed. This notice should be sent to the family at the same time the case closure notice is sent, regardless of whether the family received PASS I child care. A copy of the W150 must also be sent to the Local Administrator. The period of PASS II eligibility indicated on the W150 begins the month following the case closure, regardless of when the notice is sent.

ALASKA PASS I CHILD CARE ASSISTANCE MANUAL

980-2 Continued

The W150 notice informs the parent that since their Temporary Assistance case closed, they are no longer eligible for PASS I child care assistance. The notice also tells them that additional child care assistance is available to them through the PASS II Child Care Assistance Program but that they must contact the Local Administrator to apply. It is important that parents understand their responsibility to contact the Local Administrator as soon as possible so that there will not be an interruption in their child care assistance.

A case worker may authorize child care assistance through PASS I for the month after a family's case closes due to employment, if this is necessary for the employed individual to retain their job and make the transition to PASS II.

Note: Unlike PASS I, PASS II subsidies are based on the family's income. Some families may not actually receive a PASS II subsidy because they have too much income. This could be due to relatively high wages or because EED policy differs from DPA policy in counting income.

980-3 PASS III CHILD CARE ASSISTANCE

Parents who were receiving PASS II child care assistance and whose 12-month period has expired can move to PASS III child care assistance. The move from PASS II to PASS III is a program change that may not be apparent to parents. However, if PASS III has wait lists, parents transitioning from PASS II may be put on the wait list.

Low-income parents who never received PASS I or PASS II child care assistance may still be eligible for PASS III if they meet income guidelines and are either working, training, or attending school.

ALASKA PASS I CHILD CARE ASSISTANCE MANUAL

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ALASKA PASS I CHILD CARE ASSISTANCE MANUAL

ADDENDUM A - DEFINITIONS

Attendance	The time a child is actually present at a child care facility
Attendance Authorization	An authorization to pay for actual time a child is in care while the parent(s) is engaged in an approved or eligible activity, and where the rate for subsidy is an attendance rate
Attendance rate	A Daily, part time daily, or hourly rate for actual time in care
Authorization	A document issued by a Division of Public Assistance office or a Child Care Assistance Program Local Administrator, which specifies the units and period of time for which a child care subsidy will be paid to a provider, on behalf of the parent(s), for care rendered while the parent(s) is engaged in an eligible activity
Child	A child age 37 months through 6 years, or until the child is age 19 if the child is verified as being developmentally disabled/special needs, or until the child is age 18 if court supervision requires the child be in the care of an adult
Child Care	The paid care, supervision, and guidance of a child or children unaccompanied by a parent or guardian, on a regular basis
Child Care Programs	State and federally funded subsidy programs administered Assistance by the Division of Public Assistance and the Child Care Program Office, which include PASS I, PASS II, and PASS III
Developmental Disability	A disability under which a person is incapable of self-care, and which is attributable to one or more mental or physical impairments that is severe, chronic, and lifelong, as determined by a physician or licensed or certified psychologist.
Enrollment Authorization	An authorization to pay for care for a child who is in regular and consistent care for a particular period of time, whether the child is in attendance or not
Enrollment Rate	A monthly child care payment rate based on a regularly scheduled number of units a child is expected to be in care for a month

ALASKA PASS I CHILD CARE ASSISTANCE MANUAL

Full Time	More than five hours but not more than ten hours of care in a day
Guardian	A legal guardian or an individual in an acknowledged surrogate parental relationship that includes the physical custody of and financial responsibility for the child
Hourly Care	Child care scheduled for 2 hours or less per day
Infant	A child who is newborn through age 18 months
Legally Exempt Care	PASS I eligible child care that is exempt from Licensed care regulations but required to follow some child and provider health and safety standards. Exempt care includes Approved Providers, Approved Relative Providers, and In-Home care.
Licensed Care	A provider who has obtained a state Child Care License issued by the Department of Education and Early Development, or a license from a municipality to whom the Department of Education and Early Development has delegated licensing authority, or the military.
Loco Parentis	A person acting in place of a parent, such as a foster parent, guardian, relative, or friend, who provides care and supervision like a parent but without the formalities of legal guardianship or adoption
Night Shift	Employment requiring a minimum of 6 work/travel hours between the hours of 8:00pm and 6:00am.
Parent	A natural or adoptive parent or a caretaker who is acting “in loco parentis”
Part Time	Up to and including five, but not more than five, hours of care in a day
Provider	An individual or organization that provides child care and charges for its services as a business, or an individual employed by such a facility
Provider Rate	A published fee charged by a provider for child care services for a specified unit of time
Registration Fee	A Licensed provider’s one-time or annual charge to parents whose children are enrolled in the licensed child care home, group home, preschool, or center.
Related	Any of the following relationships by blood, marriage, or adoption: great-grandparent, grandparent, step-grandparent, brother, sister, step-sibling, first cousin, uncle, aunt, great aunt, great uncle, niece, or nephew.

ALASKA PASS I CHILD CARE ASSISTANCE MANUAL

School Age Child	A child age 7 through age 12	
State Subsidy Rate	Different rate that are published in the Child Care Assistance Program Rate Schedule that are used to determine child care subsidy payments to providers. Established by the Department of Education and Early Development every two years, or more when needed, from a biennial market rate survey.	
Statewide Maximum Payment Rate	The highest subsidy rate the state will pay per month; also called the state maximum, and listed on the Child Care Assistance Program Rate Schedule as the Area Maximum Monthly Rate.	
Subsidy	State and federal funded payments for child care on behalf of eligible parents	
Toddler	A child age 19 months through 36 months	
Unit	A fixed duration of child care time during a day in relation to a rate, such as an hourly, part time daily, full time daily, part time monthly, or full time monthly.	

ALASKA PASS I CHILD CARE ASSISTANCE MANUAL

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ADDENDUM B

State of Alaska
Education and Early Development ~ Division of Early Development
Child Care Office

Resource and Referral Grantees

Northern Alaska C.A.R.E.S.	Gara Bridwell, Executive Director Play N Learn	bridwellpnl@gci.net cares@gci.net www.alaskacares.org	1908 Old Pioneer Way Fairbanks, AK 99709	(907) 479-0900 (Gara) (907) 479-9035 (FAX) (907) 479-2214 (R&R line) (866) 878-2273 (Toll Free) (907) 479-2486 (FAX) (907) 479-0919 (TTY)
Northern Alaska C.A.R.E.S.	Cheryl Keepers, Fairbanks North Star Borough	ckeeper@co.fairbanks.ak.us	PO Box 71267 Fairbanks, AK 99707	(907) 459-1287 (Cheryl) (907) 459-1280 (FAX)
South Central Alaska Child Care Connection	Cynthia Hull, Executive Director	clhull@pobox.alaska.net info@childcareconnection.org www.childcareconnection.org	PO Box 240008 3350 Commercial Drive Anchorage, AK 99501	(907) 563-2910 (Cynthia) (907) 563-2996 (Referrals) (907) 563 1966 (Main) (800) 278-3723 (Toll Free) (907) 563-1959 (FAX)
Southeast Alaska NAEYC-SEA	Joy Lyon, Executive Director	Joy Lyon, Executive Director	PO Box 22870 ZIP 99802 3100 Channel Dr. Ste. 21 Juneau, AK 99801	(907) 789-1235 (Local) (888) 785-1235 (Toll Free) (907) 789-1231 (Referrals) (907) 789-1238 (FAX)

ADDENDUM B

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ADDENDUM C

Local Administrators listed by Community:

For the most current list of Local Administrators: www.eed.state.ak.us/EarlyDev/ccsubsidy.html

Anchorage Grantee: Municipality of Anchorage P.O. Box 196650 Anchorage, AK 99519-6550 LA: Dianne Alger Telephone: (907) 343-6700 E-mail: algerdm@ci.anchorage.ak.us	Bethel Grantee: Bethel Community Services P.O. Box 2188 Bethel, AK 99559 LA: Janet Westlake Telephone: (907) 543-5440 E-mail: janet_westlake@bcs-alaska.org
Cordova Grantee: Cordova Family Resource Center P.O. Box 863 Cordova, AK 99574 LA: Nicole Songer Telephone: (907) 424-5674 E-mail: cfrc@ctcak.net	Craig Grantee: City of Craig P.O. Box 447 Craig, AK 99921 LA: Barbara Moots Telephone: (907) 826-2327 E-mail: ccacraig@aptalaska.net
Fairbanks Grantee: FNSB P.O. Box 71267 Fairbanks, AK 99707 LA: Cheryl Keepers Telephone: (907) 459-1474 E-mail: ckeepers@co.fairbanks.ak.us	Haines, Skagway, Yakutat: City of Haines P.O. Box 332 Haines, AK 99827 LA: Sheri Loomis Telephone: (907) 766-2854 E-mail: loomis@aptalaska.net
Homer Grantee: South Peninsula Women's Services 3776 Lake Street, Suite 100 Homer, AK 99603 LA: Sheryl Vitale Telephone: (907) 235-7712 E-mail: ccahomer@acsalaska.net	Juneau Grantee: Catholic Community Service 419 Sixth Street, CCS Wing Juneau, AK 99801 LA: Pam Nelson Telephone: (907) 463-6124 E-mail: pam.nelson@ccsjuneau.org
Kenai Grantee: Women's Resource & Crisis Center 11127 Frontage Road, Suite 204 Kenai, AK 99611 LA: Renee S. Lipps Telephone: (907) 283-4707 E-mail: kenaiccap.wrcc@alaska.net	Ketchikan Grantee: Ketchikan Gateway Borough 344 Front Street Ketchikan, AK 99901 LA: Evelyn Johnson Telephone: (907) 228-6636 E-mail: ccaktch@borough.ketchikan.ak.us
Kodiak Grantee: Kodiak Island Borough 710 Mill Bay Road Kodiak, AK 99615 LA: Marylynn McFarland Telephone: (907) 486-9375 E-mail: mmcfarland@kib.co.kodiak.ak.us	Kotzebue Grantee: Maniilaq Children's House P.O. Box 256 Kotzebue, AK 99752 LA: Bernice Foster Telephone: (907) 442-3157 E-mail: bfoster@maniilaq.org

ADDENDUM C

<p>Mat-Su Grantee: Alaska Family Resource Center, Inc 403 South Alaska Street Palmer, AK 99645 LA: Dorene Eckman Telephone: (907) 745-6098 E-mail: dorene_eckman@akfrc.org</p>	<p>Metlakatla Grantee: Metlakatla Indian Community P.O. Box 8 Metlakatla, AK 99926 LA: Mae Williams Telephone: (907) 886-5872 E-mail: ccamtlk@aptalaska.net</p>
<p>Nome Grantee: Nome Community Center, Inc. P.O. Box 98 Nome, AK 99762 LA: Peggy Darling Telephone: (907) 443-5259 E-mail: nccdir@nook.net</p>	<p>Petersburg Grantee: City of Petersburg P.O. Box 481 Petersburg, AK 99833 LA: Lu Bertagnoli Telephone: (907) 772-3414 E-mail: lubertag@alaska.net</p>
<p>Seward Grantee: Seaview Community Services P.O. Box 1045 Seward, AK 99664 LA: Carol Freeman Telephone: (907) 224-2952 E-mail: cfreeman@seaviewseward.org</p>	<p>Sitka Grantee: City & Borough of Sitka 403 Lincoln Street, Suite 24 Sitka, AK 99835 LA: Margaret Swanson Telephone: (907) 747-6955 E-mail: ccasitka@gci.net</p>
<p>Valdez & Glennallen Grantee: City of Valdez P.O. Box 2231 Valdez, AK 99686 LA: Don Jacobs Telephone: (907) 835-5599 E-mail: vdzdaycare@ak.net</p>	<p>Wrangell Grantee: City of Wrangell P.O. Box 2359 Wrangell, AK 99929 Child Care Assistance Program, Diane Ivy-Dahlin Telephone: (907) 874-2260 or cell (907) 209-2114 E-mail: wccap@aptalaska.net..</p>

ADDENDUM D

**ALASKA
Family Day Care Home Program Sponsors
May 2002**

Sponsor	Area Served	# of Homes
Julie Edwards <i>ALASKA FAMILY CHILD CARE FOOD PROGRAM</i> 2221 E. Northern Lights, Suite 201 Anchorage, AK 99508 Phone: 274-2237 Fax: 274-2238 E-mail: afccfp@gci.net	Greater Anchorage Area	115
Jacquie Wingfield <i>COALITION CHILD CARE FOOD PROGRAM</i> P.O. Box 202414 Anchorage, AK 99520 Phone: 272-9131 Fax: 337-9599 E-mail: jlw@alaska.net	Greater Anchorage Area	100
Mitzie Jewitt <i>EIELSON AFB FAMILY CHILD CARE FOOD PROGRAM</i> 354 SVS/SVYD 3112 Broadway Ave. Unit 6B Eielson AFB, AK 99702 Phone: 377-3636 Fax: 377-3634 E-mail: mitzie.jewitt@eielson.af.mil cheryl.bunce@eielson.af.mil	Eielson Air Force Base	30
Susan Long <i>ELMENDORF CHILD DEVELOPMENT PROGRAM</i> 3SVS/SVYD Bldg. 6-920-12th Street Elmendorf AFB, AK 99506 Phone: 552-8162 Fax: 8499 E-mail: henrym@elmendorf.af.mil	Elemendorf AFB	42
Mary Cotter <i>FAIRBANKS DAY CARE FOOD PROGRAM</i> P.O. Box 81690 Fairbanks, AK 99708 Phone: 451-7229 Fax: 451-7229 E-mail: fdfcp@mosquitnet.com	Fairbanks, Delta Junction, North Pole, Healy	95
Lachel Edison United States Army, Alaska (USARAK) <i>CHILD DEVELOPMENT SERVICES</i> APVR-RCA-CFD (USDA) 1 Headquarters Loop #6600 Ft. Richardson, AK 99505-6600 Phone: 384-0501 Fax: 384-7482 E-mail: gracie.zamarron@richardson.army.mil	Ft. Richardson	22
Kathleen Jones-Graves <i>FORT WAINWRIGHT FAMILY CHILD CARE</i> P.O. Box 35045 Fort Wainwright, AK 99703 Phone: 353-7395 Fax: 353-9056 E-mail: kathleen.jones-graves@wainwright.army.mil	Ft. Wainwright	32

ADDENDUM D

Sponsor	Area Served	# of Homes
Jeanette Browning <i>KENAI WOMENS RESOURCE CENTER</i> 11127 Frontage Road, #204 Kenai, AK 99611 Phone: 283-4707 Fax: 283-4681 E-mail: ccfp@alaska.com	Kenai, Soldotna, Seward, Sterling, Kasilof, Nikiski	30
Letitia Raub <i>KODIAK WOMENS RESOURCE CENTER</i> P.O. Box 2122 Kodiak, AK 99615 Phone: 486-6171 Fax: 486-4264	Kodiak	22
Sue Linzmeier <i>NAEYC-SEA CHILD CARE FOOD PROGRAM</i> P.O. Box 22870 Juneau, AK 99802 Phone: 789-1235 Fax: 789-1238 E-mail: suey@gci.net	All of Southeast Alaska	103
Sheryl Vitale <i>SOUTH PENINSULA WOMENS SERVICES</i> 3776 Lake Street Homer, AK 99603 Phone: 235-7712 Fax: 235-2733 E-mail: ccahomer@ptialaska.net	Homer Area	20
Shannon Schmelzer <i>ALASKA FAMILY RESOURCE CENTER</i> 899 W. Commercial Dr. Wasilla, AK 99645 Phone: 376-4080 Fax: 373-0640 E-mail: shannon_schmeizer@akfrc.org	Mat-Su Borough	41