

Administration of the Child Care Assistance Program

2024-2025 Wilkin County and Tribal Child Care Fund Plan

Administration of the Child Care Assistance Program

Background: Counties and tribes must submit a biennial Child Care Fund Plan to the commissioner. Child Care Assistance Program rules and laws allow counties and tribes to establish some local policies and procedures. These local policies and procedures, when included in this plan and approved by the commissioner, are considered county/tribal policy and are used to support agency decisions during appeals. The Department of Human Services (DHS) will review and approve County and Tribal Child Care Fund Plans. Counties and tribes will receive approval letters for their Child Care Fund Plans from the commissioner of DHS. This plan period begins on January 1, 2024.

Print Blank Form

IMPORTANT: If you are not able to complete this form online, click [Print Blank Form](#) to print the form and complete it by hand.

Minnesota Statute, section 119B.08, subdivision 3

Steps to complete the plan process:

Step One - Review the plan

Review this plan. Determine if there are changes compared to previous plans or if there are new policies or procedures. Involve other staff as needed.

Step Two - Draft the plan responses

Note these guidelines:

- Identify all optional county/tribal Child Care Assistance Program policies; see question X.A.
- Do not answer questions by stating that the reviewer should refer to a previous plan.
- Submit any agency-developed documents that have not been previously submitted and approved. Do not submit DHS and MEC² standardized documents. Refer to the DHS memo announcing this plan for a list of DHS created documents.
- Answer each question. Incomplete plans will be returned.

Step Three - Inform and involve stakeholders

DHS encourages counties and tribes to develop optional policies in coordination with local child care stakeholders. This may include: parents, child care providers, culturally specific service organizations, Child Care Aware agencies, interagency early intervention committees, and agencies involved in the provision of care and education to young children. Consult with other agency staff such as fraud investigators and income maintenance and employment services staff.

Step Four - Share the draft plan

Prior to submission, you must make copies of the proposed plan available to the public and allow sufficient time for public review and comment. See question II.D of this plan; describe methods used to make the plan available to the public, particularly to those members listed in II.D.

Step Five - Submit the plan by the deadline (Friday, September 15, 2023)

Amendments to plans

A county or tribe may amend their Child Care Fund Plan at any time. If approved by the commissioner, the amendment is effective on the date requested by the agency unless a different effective date is set by the commissioner. Plan amendments must be approved or denied by the commissioner within 60 days after receipt of the amendment request. The department reserves the right to direct a county or tribe to amend its Child Care Fund Plan if the plan is no longer in compliance with Minnesota Statutes, Minnesota Rules, or federal law.

Minnesota Rules, part 3400.0150, subpart 3

Amendments include changes in county/tribal contacts, county/tribal optional policies, new or revised forms and notices. Amendments can be sent in letter form or by email to the agency's child care assistance policy specialist.

Return completed plans by **Friday, September 15, 2023** to:

DHS.CCAP@state.mn.us

Administration of the Child Care Assistance Program

I. Child Care Assistance Program contacts

A. County or tribal agency

COUNTY OR TRIBE NAME Wilkin	GENERAL PHONE NUMBER 218-643-7161	EXTENSION	GENERAL FAX NUMBER 218-643-7175
AGENCY'S FULL NAME Wilkin County Family Service Agency		CCAP INTAKE PHONE NUMBER 218-512-1592	EXTENSION
MAIN OFFICE STREET ADDRESS 227 North 6th St	CITY Breckenridge	ZIP CODE 56520	
MAIN OFFICE MAILING ADDRESS (if different) PO Box 369	CITY Breckenridge	ZIP CODE 56520	

B. County or tribal branch office (if applicable)

BRANCH NAME	GENERAL PHONE NUMBER	EXTENSION	GENERAL FAX NUMBER	CCAP INTAKE PHONE NUMBER	EXTENSION
ADDRESS OF BRANCH OFFICE		CITY		ZIP CODE	

Add branch

C. Agency contact people

This contact information is required.

1. County or tribal director

FIRST NAME Becky	LAST NAME Tripp	
PHONE NUMBER 218-643-7161	EXTENSION	EMAIL ADDRESS BTripp@co.wilkin.mn.us
ADDRESS 227 North 6th Street, PO Box 369	CITY Breckenridge	ZIP CODE 56520

2. County or tribal CCAP administrative contact

Who is your lead contact for the Child Care Assistance Program? This contact will receive policy bulletins, memos, and other high level communications. You may have more than one administrative contact.

FIRST NAME Kelli	LAST NAME Rohrer	
TITLE Child Care Aware Manager	PHONE NUMBER 218-512-1580	EXTENSION
EMAIL ADDRESS kellir@caplp.org	SIR EMAIL ADDRESS x184013@cty.dhs.state.mn.us	

Add contact person

3. County or tribal client access contact

Who is your lead contact person who has contact with families receiving CCAP? You may have more than one client access contact.

FIRST NAME Cassie	LAST NAME Olson		
TITLE Child Care Connections Financial Specialist		PHONE NUMBER 218-512-1592	EXTENSION
EMAIL ADDRESS cassieo@caplp.org	SIR EMAIL ADDRESS x184543@cty.dhs.state.mn.us		

[Add contact person](#)

4. Management of waiting list contact

Who is your lead waiting list contact person? Only identify one waiting list contact.

FIRST NAME Kelli	LAST NAME Rohrer		
TITLE Child Care Aware Manager		PHONE NUMBER 218-512-1580	EXTENSION
EMAIL ADDRESS kellir@caplp.org	SIR EMAIL ADDRESS x184013@cty.dhs.state.mn.us		

5. Provider billing contact

Who is your lead billing contact person who is able to answer questions about billing and payments? Only identify one provider billing contact.

FIRST NAME Cassie	LAST NAME Olson		
TITLE Child Care Connections Financial Specialist		PHONE NUMBER 218-512-1592	EXTENSION
EMAIL ADDRESS cassieo@caplp.org	SIR EMAIL ADDRESS x184543@cty.dhs.state.mn.us		

6. Provider registration contact

Who is your lead provider registration contact person? Only identify one provider registration contact.

FIRST NAME Kelli	LAST NAME Rohrer		
TITLE Child Care Aware Manager		PHONE NUMBER 218-512-1580	EXTENSION
EMAIL ADDRESS kellir@caplp.org	SIR EMAIL ADDRESS x184013@cty.dhs.state.mn.us		

7. Legal nonlicensed provider monitoring contact

Who is the lead contact person in the agency who is able to answer questions about legal nonlicensed annual monitoring visits? Only provide one monitoring contact.

FIRST NAME Shalyn	LAST NAME Reiff		
TITLE Wilkin County Health and Human Services Specialist		PHONE NUMBER 218-643-7161	EXTENSION
EMAIL ADDRESS sreiff@co.wilkin.mn.us	SIR EMAIL ADDRESS x184SMR@cty.dhs.state.mn.us		

D. Subcontracted services

Counties and tribes may contract with an agency to administer all or part of their Child Care Assistance Program.

Minnesota Rules, part
3400.0140, subpart 7

If you are planning any changes in the administration of your CCAP, tell your CCAP policy specialist immediately. This could involve subcontracting or mergers of counties. Failing to notify DHS may delay the changes that you are planning to make.

Does your county or tribe contract with an agency for any part of the administration of CCAP? Yes No

Do not include cooperative agreements with employment and training service providers that work with MFIP/DWP families to develop and approve the employment service plan.

If your county or tribe has a contract with another agency for administering CCAP, complete the following information:

Include a signed copy of the current contract when submitting this County and Tribal Child Care Fund Plan. If your agency renews a contract or enters into a new contract between January 1, 2024 and December 31, 2025, forward a signed copy of that contract to your CCAP policy specialist. DHS must retain copies of all signed contracts for audit purposes.

1. Subcontracted program functions

What CCAP administrative functions are subcontracted?

CAPLP (Lakes and Prairies Community Action) will administer all CCAP programs for county residents as well as provider registrations and payments, with the exception of LNL monitoring visits which will be done by the county child care licenser.

2. County or tribal worker responsible for administration of the subcontract/agreement between the county or tribal agency and the subcontracted agency.

Who in your agency is responsible for the contract?

FIRST NAME Becky	LAST NAME Tripp		
TITLE Health and Human Services Director		PHONE NUMBER 218-643-7161	EXTENSION
EMAIL ADDRESS BTripp@co.wilkin.mn.us	SIR EMAIL ADDRESS		

Add contact person

3. Administrative contact in subcontracted agency

Who is the primary contact for the Child Care Assistance Program at the subcontracted agency? This contact will receive policy bulletins, memos, and other high level communications. You may have more than one administrative contact.

NAME OF SUBCONTRACTED AGENCY CAPLP (Lakes and Prairies Community Action Partnership)			
FIRST NAME Kelli		LAST NAME Rohrer	
TITLE Child Care Aware Manager		PHONE NUMBER 218-512-1580	EXTENSION
EMAIL ADDRESS kellir@caplp.org			

[Add contact person](#)

4. Client access contact in subcontracted agency

Who is the lead person/s that has contact with families receiving CCAP at the subcontracted agency? You may have more than one client access contact.

NAME OF SUBCONTRACTED AGENCY CAPLP (Lakes and Prairies Community Action Partnership)			
FIRST NAME Cassie		LAST NAME Olson	
TITLE Child Care Connections Financial Specialist		PHONE NUMBER 218-512-1592	EXTENSION
EMAIL ADDRESS cassieo@caplp.org			

[Add contact person](#)

5. Provider billing contact in subcontracted agency

Who is the lead billing contact person in the subcontracted agency who is able to answer questions about billing and payments? Only provide one provider billing contact.

NAME OF SUBCONTRACTED AGENCY CAPLP (Lakes and Prairies Community Action Partnership)			
FIRST NAME Cassie		LAST NAME Olson	
TITLE Child Care Connections Financial Specialist		PHONE NUMBER 218-512-1592	EXTENSION
EMAIL ADDRESS cassieo@caplp.org			

6. Provider registration contact in the subcontracted agency

Who is the lead provider registration contact person in the subcontracted agency? Only provide one provider registration contact.

NAME OF SUBCONTRACTED AGENCY CAPLP (Lakes and Prairies Community Action Partnership)			
FIRST NAME Kelli		LAST NAME Rohrer	
TITLE Child Care Aware Manager		PHONE NUMBER 218-512-1580	EXTENSION
EMAIL ADDRESS kellir@caplp.org			

7. Legal nonlicensed provider monitoring contact

Who is the lead contact person in the subcontracted agency who is able to answer questions about legal nonlicensed annual monitoring visits? Only provide one monitoring contact.

NAME OF SUBCONTRACTED AGENCY			
FIRST NAME		LAST NAME	
TITLE		PHONE NUMBER	EXTENSION
EMAIL ADDRESS			

8. Intake phone number for subcontracted agency

Identify a CCAP intake phone number for the subcontracted agency. This number is posted on the DHS website.

PHONE NUMBER 218-512-1592

II. Collaboration and outreach

A. How do you share information about the Child Care Assistance Program so that individuals, child care providers, social service agencies, etc. are aware of child care assistance? ([Minnesota Rules, part 3400.0140, subpart 2](#))

Information on child care assistance is available through both the county website as well as the CAPLP website. CAPLP is also a part of the Child Care Aware of MN program. They make sure parents seeking information are informed about the program availability. Agency licenser makes subsidy information available to all licensed child care providers and encourage them to refer parents to the program. Information about the child care assistance program is also provided to employment and training agencies, as well as public health departments. Posters and brochures are also displayed.
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B. Agencies are required to work with other public and private community resources that provide services to families to maximize community resources for families with young children. These other resources include, but are not limited to, Child Care Aware, School Readiness, Early Learning Scholarships, Head Start, and Early Childhood Screening. List the community programs your agency works with. ([Minnesota Statute, section 119B.08, subdivision 3 \(1\)](#))

Child Care Aware, Early Learning Scholarships, Head Start, Early Child Initiatives, Child Care Associations, local schools and colleges.

C. How do you work with the community based programs and service providers identified above to maximize public and private community resources for families with young children? Include in this description the methods used to share information, responsibility, and accountability among these service and program providers as you work to foster collaboration among agencies and other community-based programs that provide flexible, family-focused services to families with young children and to facilitate transition into kindergarten.

Applications for clients are available at the county agencies as well as sent out to other community programs, when requested, such as child care centers and programs stated above. Information sheets are also posted at county sites as well as at Employment Services offices and various large county employers. We make yearly contact to agencies listed to inquire if materials are being displayed and if any additional information is needed regarding CCAP.

D. Copies of the proposed plan must be made reasonably available to the public, including those interested in child care policies such as parents, child care providers, culturally specific service organizations, Child Care Aware of Minnesota agencies, interagency early intervention committees, potential collaborative partners and agencies involved in the provision of care and education to young children. **You must allow time for public review and comment prior to submitting this plan to DHS for approval.**

([Minnesota Statute, section 119B.08, subdivision 3 \(2\)](#)).

1. Describe your procedures and methods to make copies of the **draft plan** reasonably available to the public.

Wilkin County draft plan was posted on the County website from August 1, 2023 - August 31, 2023. Paper copy was available at the county office upon request.

2. When was your draft plan available for public review?

August 1, 2023

E. After your plan is approved by DHS, do you post your approved county/tribal plan on your website? Yes No

III. Eligibility

A. Education plans outside an Employment Plan

Prior to completing this section, please review [Minnesota Rules, part 3400.0040](#) and [Minnesota Statutes 119B.10 Subdivision 3](#) in their entirety to ensure your policies are in compliance. Identify agency developed documents used for education plan requests and notices used to communicate approval or denial in each response and list these in the agency developed document section X.B.

1. High school diploma/GED high school equivalency diploma

1a. Do you approve all high school and GED programs? Yes No

2. Remedial and basic skills courses (includes Adult Basic Education and English as a Second Language)

2a. Do you approve all remedial and basic skills courses? Yes No

3. Post-secondary programs

3a. Describe your criteria and procedures for approving a post-secondary program outside an Employment Plan that will lead to employment.

Students must complete an Employability Plan which outlines their course of study as well as expected completion date. This plan is signed by both the student as well and the student's advisor. The plan clearly states what the client's responsibilities are in order to have their education approved as an eligible activity. All initial plans will be approved if they have the approval of the post-secondary institution's advisor/counselor.

3b. Identify the factors that contribute to the above criteria (for example: the availability of jobs where family resides or intends to reside, wage data, job placement rates in field of study).

The post-secondary institution has approved the employability plan. The school's advisor/counselor is best qualified to determine if this is an appropriate plan.

4. Changes to education plans outside an Employment Plan

4a. Do you have a different approval policy if a participant requests a change to their education plan? Yes No

B. Basic Sliding Fee Waiting List management

1. Priorities for service

Have you established sub-priorities for the third priority Basic Sliding Fee Waiting List?

Yes No

2. When adding a family to your Basic Sliding Fee Waiting List, you must inform the family of the priority group determination, and the number of families on the waiting list or an estimated time that they will spend on the waiting list before reaching the top.

How do you notify a family they were placed on the waiting list?

- The family is sent [DHS-7883A \(You have been placed on the Child Care Assistance Program \(CCAP\) waiting list\)](#)
- The family is sent a notice developed by our agency (list this notice in section X.B Agency developed documents)

3. Six month review of Basic Sliding Fee Waiting List

CCAP Policy Manual,
Chapter 4.3.12.12

Minnesota Statute, section
119B.03, subdivision 2

3a. Statute requires that you review and update your waiting list at least every six months. How are families notified of this six month review?

- The family is sent [DHS-7883B \(Child Care Assistance Program \(CCAP\) waiting list update\)](#)
- The family is sent a notice developed by our agency (list this notice in section X.B Agency developed documents)

3b. Describe your agency's process for reviewing and updating the waiting list. If your agency does not currently have a waiting list, describe your process in the event your agency does start a waiting list.

The waiting list is reviewed on a monthly basis to determine if a six month review is needed. As BSF funds become available, families will be awarded based on their priority level and the date their original application was received.

3c. How are families notified they are removed from the waiting list for not responding to the six month review?

- Families are sent an additional notice
- Six month review letter includes notification they will be removed from the waiting list if they don't respond

4. Applications mailed to families on the Basic Sliding Fee Waiting List

Applications must be sent to families on the waiting list when there is funding available for Basic Sliding Fee.

4a. When do you remove the family from the waiting list?

- When the application is sent to the family. The notice sent with the application informs the family that their name has been removed from the waiting list.
- When you receive the completed application. If no application is received, the family is removed at the end of the time period allowed for returning the application. The notice sent with the application informs the family that their name will be removed from the waiting list if the application is not received by the deadline.

4b. How do you notify a family that their name was removed from the waiting list?

- The family is sent [DHS-7883C \(Child Care Assistance Program \(CCAP\) funds available\)](#)
- The family is sent a notice developed by our agency (list this notice in section X.B Agency developed documents)

5. Temporarily ineligible families on the Basic Sliding Fee Waiting List

When a family reaches the top of the waiting list and is temporarily ineligible, leave the family at the top of the waiting list for a period of time not to exceed 90 calendar days, according to priority group and serve the applicant who is next on the waiting list unless an alternative procedure is provided in the agency's plan.

Minnesota Rules, part 3400.0040, subpart 17

Minnesota Rules, part 3400.0065, subpart 3

Do you have an alternate procedure to the 90 day policy that extends the timeframe for a family who has reached the top of the waiting list and is temporarily ineligible?

- Yes
- No

C. Child care for school release days

1. How do case workers authorize care for school release days in your agency?

- Authorize actual hours needed and increase or decrease hours based on known school release days.
- Authorize the hours care is needed when there are no school release days.
- Authorize the highest number of hours care is needed with the provider.
- Other method.

CCAP Policy Manual, Chapter 9.1.3

How do you authorize child care for school release days?

Authorize hours needed when there are no school release dates. When additional hours are submitted, case workers determine if there were school release dates during the biweekly period and then determine if additional hours can be authorized based on the parents' activity(ies). Case workers then let billing workers know if additional hours can be approved.

2. How do you communicate scheduled and authorized hours to parents, providers and billing workers?

When Service Authorizations are approved, memos are sent to both the client and the provider indicating what days and times child care hours are authorized for each child. Billing workers are not told this information, instead they have case workers review any billing forms that are submitted that have more than the authorized hours indicated. The case worker then informs the billing worker if additional hours can be authorized based on case information.

D. Child care for families with flexible schedules

1. How do case workers authorize care for families with flexible schedules in your agency?

CCAP Policy Manual, Chapter 9.1.6

- Authorize the typical number of hours needed and when the schedule requires additional care, the provider bills for the additional care.
- Authorize the minimum number of hours care is needed and when the schedule requires additional care, the provider bills for the additional care. Payment is made by increasing the number of hours listed in the "total hours of care authorized" field on the billing window or by creating a new Service Authorization.
- Authorize the highest number of hours care is needed with the provider. The provider is expected to bill only for the time that care is needed.
- Other method.

2. How do you communicate scheduled and authorized hours to parents, providers and billing workers?

When Service Authorizations are approved, memos are sent to both the client and the provider indicating the number of hours as well as the range of days and times child care hours are authorized for each child. Billing workers are not told this information, instead they have case workers review any billing forms that are submitted that have more than the authorized hours indicated. The case worker then informs the billing worker if additional hours can be authorized based on case information.

E. Authorizing care for clients with Employment Plans

Job counselors and CCAP workers must communicate child care needs for clients with Employment Plans.

Guidance is found in [CCAP Policy Manual, Chapter 9.1.5](#).

1. CCAP workers must obtain an activity schedule or the days and times that child care is needed. Who is responsible for obtaining the schedule information from the client?

- Job counselor provides schedule or days and times that child care is needed to CCAP worker.
- CCAP worker obtains schedule from client.
- Other method.

How do CCAP workers receive schedule information for Employment Plan activities?

CCAP worker obtains activity schedules from job counselors; however, if the job counselor does not have all the needed information it is then requested from the family by the CCAP worker.

2. How do you communicate required information between job counselors and CCAP workers (email, fax, case notes, verbal, DHS-7054, etc.)?

Communication between job counselor and CCAP worker is done through secure emails, phone calls and employment plans. The information that is discussed is then case noted for future reference.

F. Extending redetermination dates beyond 12 months

Redeterminations may be extended beyond 12 months for a family that has a caregiver under the age of twenty-one, who does not have a high school or general equivalency diploma (GED), and is a student in a school district or another similar program that provides or arranges child care, parenting, social services, career and employment supports and academic support to achieve high school graduation.

An agency may identify other reasons to extend redetermination dates beyond 12 months as an optional policy. For example, an agency may extend redetermination dates to balance out a workload. See [CCAP Policy Manual, Chapter 10.3](#) and [Minnesota Rules, part 3400.0180, subpart 1](#).

1. Does your agency extend redetermination dates beyond 12 months?

- Yes
- No

IV. Provider compliance policies

A. Reasons for closing a provider's registration

[Minnesota Statutes, section 119B.13, subdivision 6\(d\)](#) allows counties, tribes, and the Department of Human Services to refuse to issue a child care authorization, revoke an existing authorization for a provider, stop payment, or refuse to pay a bill under circumstances described in the seven clauses below. Counties and tribes must indicate which clauses they will include in their plan, and must apply the policies consistently to providers.

CCAP Policy Manual,
Chapter 9.3

CCAP Policy Manual,
Chapter 13

- An agency cannot implement these policies without establishing them in their plan.
- An agency must notify their child care assistance policy specialist at least 10 days prior to closing a provider's registration or taking any other action to enforce any of these policies, except clause 4 when notified by DHS.
- An agency that does not implement these policies may still pursue a fraud disqualification for a provider. These policies can be used in addition to, or in combination with, a fraud disqualification.

Does your agency plan to disqualify providers for reasons listed in Minnesota Statutes, section 119B.13, subdivision 6(d)? Yes No

Which clause(s) does your agency plan to implement? Check all that apply.

- Clause 1:** A provider admits to intentionally giving the agency materially false information on the provider's billing forms.
- Clause 2:** The agency finds a preponderance of evidence that the provider intentionally gave the agency materially false information on the provider's billing forms or attendance records.

If you checked Clause 2, your agency must also pursue, at minimum, a disqualification and establishment of an Intentional Program Violation (IPV) using the Administrative Disqualification (ADH) process described in Chapter 13 of the CCAP Policy Manual. The agency should consider pursuing a fraud determination through other means as described in section 13.9.3 in the CCAP Policy Manual. There also may be overpayments charged to the provider applied to time periods when Clause 2 occurred.

- Clause 3:** A provider is in violation of Child Care Assistance Program rules, until the agency determines the violations have been corrected.

What Child Care Assistance Program rules are you choosing to implement under this clause?

1. Failure to report that a child has been absent more than 7 consecutive days, if scheduled to be in care
2. Failure to report when a child stops attending care
3. Providing in-home care without DHS approval (LNL providers)
4. Failure to report any changes that would require a new background study (LNL providers)

How will your agency determine the provider has corrected the condition?

Provider will be required to sign and date agency developed affidavit attesting to their future compliance. The condition is considered corrected on the date the signed and dated affidavit is received by the CCAP agency. The provider is required to re-register for CCAP if the registration has closed. LNL providers who fail to report changes that would require a new background study are required to have the study completed.

Your agency may withhold payment for a period of up to three months beyond the time the condition has been corrected.

Will you apply a penalty period beyond when the condition is corrected? Yes No

How long will payment be withheld once the condition has been corrected (not to exceed three months)?

When implementing this clause, some agencies choose to issue a warning letter for the first occurrence, and some agencies choose to use escalating consequences.

For example:

First violation – written warning; second violation – one month; third violation – two months; any subsequent violation – three months.

First violation – one month; second violation – two months; third or subsequent violation – three months.

If your agency chooses to do a written warning, add the warning notice to Section X.B and submit with your plan for approval.

- | |
|--|
| <ol style="list-style-type: none">1. The first time a provider violates Clause 3, the agency will send the provider a written warning which explains the violation and possible future consequences2. The second time a provider violates Clause 3, the agency will close the provider's registration for 30 days |
|--|

Clause 4: A provider is operating after receipt of a licensing order of suspension, revocation, or decertification (this occurs when providers are appealing the revocation, suspension, or decertification).

NOTE: DHS Office of Inspector General (OIG) staff handle statewide implementation of clause 4 for licensed and certified child care centers. Counties and tribes may choose to implement this clause for licensed family child care providers registered within their agency.

If you choose to implement clause 4, DHS will send you a list once a month to inform you of licensed family child care providers in this category. You may act sooner if you learn of this licensing status through your licensors, etc. Contact your child care assistance policy specialist if you are planning to take action prior to receiving the monthly DHS listing.

What licensing statuses are subject to this clause?

Licensed family child care providers with a suspended license? Yes No

Licensed family child care providers with a revoked license? Yes No

Clause 5: A provider submits false attendance reports or refuses to provide documentation of the child's attendance upon request.

How will your agency determine the provider has corrected the condition?

- | |
|--|
| <p>Compliance will be determined when the provider does ALL of the following</p> <ol style="list-style-type: none">1. The provider supplies complete attendance records for the dates requested2. The provider signs the provider affidavit. <p>The condition is considered corrected on the date all of the above information is received by the CCAP agency.
The provider is required to re-register for CCAP if the registration has closed.</p> |
|--|

Your agency may withhold payment for a period of up to three months beyond the time the condition has been corrected.

Will you apply a penalty period beyond when the condition is corrected? Yes No

How long will payment be withheld once the condition has been corrected (not to exceed three months)?

When implementing this clause, some agencies choose to issue a warning letter for the first occurrence, and some agencies choose to use escalating consequences.

For example:

First violation – written warning; second violation – one month; third violation – two months; any subsequent violation – three months.

First violation – one month; second violation – two months; third or subsequent violation – three months.

If your agency chooses to do a written warning, add the warning notice to Section X.B and submit with your plan for approval.

1. The first time a provider violates Clause 5, the agency will send the provider a written warning which explains the violation and possible future consequences
2. The second time a provider violates Clause 5, the agency will close the provider's registration for 30 days beyond when the condition is corrected. After serving the penalty period, the provider is required to re-register for CCAP.
3. For any subsequent violations under Clause 5, the agency will close the provider's registration for 60 days beyond when the condition has been corrected. After serving the penalty period, the provider is required to re-register for CCAP.

Clause 6: A provider gives false child care price information.

Clause 7: A provider fails to report decreases in a child's attendance. A provider must report to the county on the billing form when a child's attendance in child care falls to less than half of the child's authorized hours or days for a four-week period.

How will your agency determine the provider has corrected the condition?

Provider will be required to sign and date agency developed affidavit attesting to their future compliance. The condition is considered corrected on the date the signed and dated affidavit is received by the CCAP agency. The provider is required to re-register for CCAP if the registration has closed.

Your agency may withhold payment for a period of up to three months beyond the time the condition has been corrected.

Will you apply a penalty period beyond when the condition is corrected? Yes No

How long will payment be withheld once the condition has been corrected (not to exceed three months)?

When implementing this clause, some agencies choose to issue a warning letter for the first occurrence, and some agencies choose to use escalating consequences.

For example:

First violation – written warning; second violation – one month; third violation – two months; any subsequent violation – three months.

First violation – one month; second violation – two months; third or subsequent violation – three months.

If your agency chooses to do a written warning, add the warning notice to Section X.B and submit with your plan for approval.

1. The first time a provider violates Clause 7, the agency will send the provider a written warning which explains the violation and possible future consequences
2. The second time a provider violates Clause 7, the agency will close the provider's registration for 30 days beyond when the condition is corrected. After serving the penalty period, the provider is required to re-register for CCAP.
3. For any subsequent violations under Clause 7, the agency will close the provider's registration for 60 days beyond when the condition has been corrected. After serving the penalty period, the provider is required to re-register for CCAP.

V. Unsafe care

A. Unsafe care

An agency may deny authorization as a child care provider or rescind authorization of any provider when the agency knows or has reason to believe that the provider is unsafe or that the circumstances of the chosen child care arrangement are unsafe. See [Minnesota Statute, section 119B.125, subdivision 4](#). When a provider's authorization is rescinded due to unsafe care, the agency must close the provider's registration with a 15 calendar day notice.

NOTE: The Consolidated Appropriations Act of 2018 (Public Law 115-141) prohibits states from expending federal CCDF funds on providers where a serious injury or death occurred due to substantiated health or safety violations.

1. Conditions of unsafe care

1a. Identify any additional conditions of unsafe care your agency applies to providers. NOTE: when substantiated maltreatment occurred in a legal nonlicensed care setting related to an incident where a child died or was seriously injured, the child care setting is considered unsafe care. A serious injury is one that required treatment by a physician.

Our agency does not apply additional conditions.

1b. Do these conditions apply to all provider types? If no, explain which criteria apply to which provider types.

N/A

2. Imminent risk

Some unsafe care conditions present an imminent risk for children in care. When there is an imminent risk of harm to the health, safety or rights of a child in care with a legal nonlicensed provider, certified license exempt center or a provider licensed by an entity other than the state of Minnesota, child care authorization must be terminated immediately. Agencies do not give the provider 15 calendar days notice. See [Minnesota Rules 3400.0185, subpart 13, clause D](#).

2a. Of the unsafe care conditions listed in V.A.1, what conditions does your agency recognize as imminent risk? These conditions would result in immediate termination of child care.

1. Weapons and/or ammunition are stored in an area that could be accessed by children
2. No smoke detectors located in the home
3. Any form of corporal punishment is being used
4. Smoking allowed in home while children are present

2b. Of the conditions listed in V.A.2a, do these conditions apply to legal nonlicensed providers, certified license exempt centers and providers licensed by an entity other than the state of Minnesota?

Yes No

VI. Policies applicable to legal nonlicensed providers

A. Annual monitoring and training

Any legal nonlicensed provider with an open Service Authorization for a child who is not related to them must complete Supervising for Safety training within 90 days of the authorization start date and have an annual monitoring visit within 12 months of the authorization start date.

See [CCAP Policy Manual Chapter 11.9](#) and Minnesota Rules, part [3400.0020, subpart 37a](#) and [3400.0120, subparts 6 and 9](#).

1. How does your agency track legal nonlicensed providers who have an open Service Authorization for unrelated children? Note: To assist agencies, DHS sends a list of legal nonlicensed providers that have open Service Authorizations with unrelated children. Agencies must also take steps to track all providers who need training or an annual monitoring visit.

- All legal nonlicensed providers are tracked on a spreadsheet. Spreadsheet includes date that unrelated child Service Authorization began, due date for Supervising for Safety training, and due date of annual monitoring visit. Spreadsheet is checked every month to determine if training or an annual monitoring visit is due.
- Other _____

2. What are your agency's internal processes and procedures for completing annual monitoring visits?

- Agency contacts the provider at least 30 days prior to the date the annual monitoring visit is due. Agency schedules a time to visit. Agency visits the provider and reviews the [Legal Nonlicensed Provider Monitoring Checklist \(DHS-7867\)](#) with the provider. Agency updates provider record in MEC² with the visit date. Agency submits the [Monitoring Visit Summary \(DHS-7867A\)](#) to DHS.
- Other _____

Note: See [CCAP Policy Manual 11.9.18](#) for the process that agencies must follow when a provider does not demonstrate full compliance with the health and safety policies at the monitoring visit.

3. If a legal nonlicensed provider's registration closes due to not showing compliance with an annual monitoring visit, under what conditions can they receive CCAP payments in the future? See [Minnesota Rules, part 3400.0120, subpart 9](#).

- Only if the provider is licensed
- The provider must show compliance with:
 - Written documentation if there were factors during the initial visit that can be demonstrated by submitting written documentation, such as proof of purchase for items required to ensure safety of children in care AND/OR
 - Another monitoring visit if there were factors during the initial visit that cannot be demonstrated by submitting written documentation.

Is there a limit on the number of re-inspections? Yes No

Provide any additional information about your agency's process.

If the provider fails a 2nd monitoring visit, they cannot schedule another visit for at least another 6 months.

- Other _____

B. Complaints and incidents

1. Records of substantiated parental complaints

Within 24 hours of receiving a complaint concerning the health or safety of children under the care of a legal nonlicensed (LNL) provider, an agency must relay the complaint to the agency's child protection agency, county public health agency, local law enforcement, and/or other agencies with jurisdiction to investigate complaints.

Information regarding substantiated complaints must be released following applicable data privacy laws. See [Minnesota Statutes Chapter 13](#). When a report is substantiated, see [Minnesota Rules, part 3400.0140, subpart 6](#), for record retention and provider payment policies.

When complaints are substantiated how do you:

1a. Maintain these records?

Copies of any written complaints are kept in the individual's provider file. An excel document is also used to track all complaints. Excel document contains the following information: provider ID, provider name, date of parental complaint, specific complaint, action taken (if needed) and follow-up (if needed)

1b. Make this information available to the public when requested?

Upon request, information shall be released to the public as authorized under MN Statute.

2. Aggregate reporting of incidents

At least quarterly, agencies must report to the Minnesota Department of Human Services the aggregate number of deaths, serious injuries, and substantiated maltreatment incidents for children under the care of legal nonlicensed (LNL) providers. See Minnesota Rules, part 3400.0140, subpart 14.

How will you record and maintain accurate counts of incidents that occur in legal nonlicensed settings registered by your agency?

An excel document is used to track all incidents that occur. Excel document contains the following information: provider ID, provider name, date of incident, how incident was reported/determined, type of incident and type of maltreatment or injury.

VII. Higher rates for providers serving certain populations

Higher rates, above the standard maximum rates, can be paid to providers if approved by the commissioner of DHS (up to the provider's charge).

Minnesota Statute,
section 119B.13,
subdivision 3

Minnesota Rules,
part 3400.0130,
subpart 3 and 3b

CCAP Policy
Manual,
Chapter 9.54

A. Higher rates for providers caring for children in at-risk populations

You may choose to pay higher rates for providers caring for children in at-risk populations defined in your County and Tribal Child Care Fund Plan. Children in an at-risk population means environmental or familial factors exist that may create barriers to a child's optimal achievement such as a federal or state disaster, limited English proficiency in a family, history of abuse or neglect, a determination that the children are at risk of abuse or neglect, family violence, homelessness, age of the mother, level of maternal education, mental illness, development disability, parental chemical dependency or history of other substance use.

1. Do you pay a higher rate for at-risk populations? Yes No

If this information changes, including additional population groups identified by your agency, new facilities, or a proposed change in rates paid, DHS must approve the change. Submit a request to amend your plan. This information will be used during case audits.

B. Higher rates for care of sick children

You may choose to pay higher rates for the care of sick children. Higher rates for care of sick children apply to rates paid above the standard maximum rates to a provider that cares for sick children. You must have DHS approval for these rates to be paid.

Minnesota Rules, part 3400.0110, subpart 8

1. Do you pay a higher rate for care of sick children?

Yes No

VIII. Payment policies

A. Provider registration renewal

How often do you renew a provider's registration?

Yearly Every two years Other

Minnesota Statute, section 119B.125, subdivision 1

B. Payment to two providers when a child is sick

When a child is sick and being cared for by a second provider, do you pay both the regular provider that charges an absent day and the second provider that is caring for the child?

Yes No

Minnesota Statutes, section 3400.0110, subpart 8

Note: If the rate paid for care of sick children exceeds maximum rates, the "rates for care of sick children" must be included in section VII.B. Higher rates for care of sick children.

C. Submission of invoices

If a provider receives an authorization of care and a billing form for an eligible family, the provider must submit the billing form to the agency within 60 days of the last date of service on the billing form. If the provider shows good cause for the delay you may pay bills submitted after 60 days. Note: Good cause includes agency error and applies for one full year from the last date of service on the billing form.

Minnesota Statute, section 119B.13, subdivision 6

1. What criteria other than agency error is included in your definition of good cause for submitting and paying a billing form after 60 days?

Good cause for delay of bill submission will be reviewed on a case by case basis for vouchers received after 60 days. Factors taken into consideration for good cause would be county delay, request for further verification, system problems, client unavailable, unforeseeable emergencies on the part of the county/provider/or household, or other extenuating circumstances.

2. Does your agency have any providers using MEC² PRO? Yes No

2a. Child care assistance agencies can decide which providers are granted access to submit bills using MEC² PRO. How do you decide which providers are granted access?

All registered providers are allowed access.

2b. When would you deny or revoke MEC² PRO access to any of these providers?

Access will be revoked if a parent or a provider indicates that the billing form being submitted is/was not reviewed with the parent prior to submission.

3. When is a provider signature not needed on a billing form?

Billing forms submitted through MEC² PRO.

4. Do you require the parent signature on the billing form? Yes No

4a. When is a parent signature not needed on a paper billing form?

care has ended with the provider before voucher has been submitted and the provider has made several attempts to contact the family to sign the vouchers with no success.

D. Underpayments

If you have underpaid according to Child Care Assistance Program policies, do you make corrective payments?

Yes No

If yes, under what conditions do you make corrective payments? You may apply criteria such as a dollar amount or how far back the situation occurred.

An underpayment will be issued if it is due to agency error or it is determined by a state audit that an underpayment needs to be issued. Underpayments will be issued if discovered within one year of the error. The amount of the underpayment will be determined for the time period going back one year from the date that the error is corrected. If an underpayment is the result of a failure to report then an underpayment is not issued.

E. Provider rates

Does your agency enter provider rates on MEC²? Yes No

F. Absent day policy

The Child Care Assistance Program limits the number of paid absent days for licensed child care providers and certified license-exempt centers. Payment may exceed absent day limit at the request of the provider and with the approval of the county or tribe, if at least one parent in the family:

Minnesota Statute,
section 119B.13,
subdivision 7

- Is under the age of 21; and
- Does not have a high school or general equivalency diploma; and
- Is a student in a school district or another similar program that provides or arranges for child care, parenting support, social services, career and employment supports, and academic support to achieve high school graduation.

Do you have any registered child care providers that meet these requirements? Yes No

IX. Program integrity

A. Agency case management reviews can be used to determine causes of errors and identify specific policies needing review.

1. Do you conduct case management reviews of CCAP? Yes No

2. Do you conduct case management reviews of CCAP providers? Yes No

X. Other information

A. Additional agency optional policies

Do you have any other policies that apply to the Child Care Assistance Program which are not specifically required by state or federal rule or law? ([Minnesota Rules, part 3400.0140, subpart 1](#)) ([Minnesota Rules, part 3400.0150, subpart 2](#))

No

B. Agency developed documents

- All agency developed forms and notices used for the Child Care Assistance Program must reflect current policy and be approved by DHS.
- Counties and tribes must use documents developed by DHS for administration of child care assistance.
- Agency developed documents must not duplicate or replace DHS documents.
- Local agencies may create supplemental documents subject to DHS approval.
- Documents must be written using plain language standards and meet other communication guidelines.
- Review forms, notices and documents at least every two years to ensure they reflect current child care assistance policy and laws.

Document inventory for your agency

Use this table to list all agency developed forms, notices, and documents your agency uses to administer child care assistance. List all documents in the table. Submit any new and revised forms, notices or written documents that have not been previously approved.

Only new and/or revised forms, notices, or written documents that have not been previously approved must be submitted with this plan for DHS approval.

Note: Refer to the DHS memo announcing this plan for a list of DHS created documents required for the Child Care Assistance Program. Do not list or submit DHS created documents.

Name of agency developed document	Document reflects current CCAP policy	Status of current document	
Employability Plan (L&P - CCAP 01A)	<input checked="" type="checkbox"/> Agency assures compliance	<input checked="" type="checkbox"/> DHS previously approved - no changes <input type="checkbox"/> DHS previously approved - revised and needs DHS approval <input type="checkbox"/> New document - needs DHS approval	<input checked="" type="checkbox"/>
Employability Plan Approval Letter (L&P-CCAP 01B)	<input checked="" type="checkbox"/> Agency assures compliance	<input checked="" type="checkbox"/> DHS previously approved - no changes <input type="checkbox"/> DHS previously approved - revised and needs DHS approval <input type="checkbox"/> New document - needs DHS approval	<input checked="" type="checkbox"/>
Employability Plan Denial Letter (L&P-CCAP 01C)	<input checked="" type="checkbox"/> Agency assures compliance	<input checked="" type="checkbox"/> DHS previously approved - no changes <input type="checkbox"/> DHS previously approved - revised and needs DHS approval <input type="checkbox"/> New document - needs DHS approval	<input checked="" type="checkbox"/>
CCAP Application Cover Letter (L&P-CCAP 07)	<input checked="" type="checkbox"/> Agency assures compliance	<input checked="" type="checkbox"/> DHS previously approved - no changes <input type="checkbox"/> DHS previously approved - revised and needs DHS approval <input type="checkbox"/> New document - needs DHS approval	<input checked="" type="checkbox"/>
CCAP Application request letter (L&P-CCAP 08)	<input checked="" type="checkbox"/> Agency assures compliance	<input checked="" type="checkbox"/> DHS previously approved - no changes <input type="checkbox"/> DHS previously approved - revised and needs DHS approval <input type="checkbox"/> New document - needs DHS approval	<input checked="" type="checkbox"/>
CCAP change reported request letter (L&P-CCAP 09)	<input checked="" type="checkbox"/> Agency assures compliance	<input checked="" type="checkbox"/> DHS previously approved - no changes <input type="checkbox"/> DHS previously approved - revised and needs DHS approval <input type="checkbox"/> New document - needs DHS approval	<input checked="" type="checkbox"/>
CCAP General Information request letter (L&P-CCAP 10)	<input checked="" type="checkbox"/> Agency assures compliance	<input checked="" type="checkbox"/> DHS previously approved - no changes <input type="checkbox"/> DHS previously approved - revised and needs DHS approval <input type="checkbox"/> New document - needs DHS approval	<input checked="" type="checkbox"/>
Licensed Provider Registration Cover Letter (L&P-CCAP 11)	<input checked="" type="checkbox"/> Agency assures compliance	<input checked="" type="checkbox"/> DHS previously approved - no changes <input type="checkbox"/> DHS previously approved - revised and needs DHS approval <input type="checkbox"/> New document - needs DHS approval	<input checked="" type="checkbox"/>
Licensed and License Exempt Provider Renewal Cover Letter (L&P-CCAP 12)	<input checked="" type="checkbox"/> Agency assures compliance	<input checked="" type="checkbox"/> DHS previously approved - no changes <input type="checkbox"/> DHS previously approved - revised and needs DHS approval <input type="checkbox"/> New document - needs DHS approval	<input checked="" type="checkbox"/>

Name of agency developed document	Document reflects current CCAP policy	Status of current document	
Licensed Exempt Provider Registration Cover Letter (L&P-CCAP 29)	<input checked="" type="checkbox"/> Agency assures compliance	<input checked="" type="checkbox"/> DHS previously approved - no changes <input type="checkbox"/> DHS previously approved - revised and needs DHS approval <input type="checkbox"/> New document - needs DHS approval	x
Meet Your CCAP Team (L&P-CCAP 30)	<input checked="" type="checkbox"/> Agency assures compliance	<input checked="" type="checkbox"/> DHS previously approved - no changes <input type="checkbox"/> DHS previously approved - revised and needs DHS approval <input type="checkbox"/> New document - needs DHS approval	x
Request for Employee Absence Information (L&P-CCAP 31)	<input checked="" type="checkbox"/> Agency assures compliance	<input checked="" type="checkbox"/> DHS previously approved - no changes <input type="checkbox"/> DHS previously approved - revised and needs DHS approval <input type="checkbox"/> New document - needs DHS approval	x
LNL Registration Cover Letter (L&P-CCAP 33)	<input checked="" type="checkbox"/> Agency assures compliance	<input checked="" type="checkbox"/> DHS previously approved - no changes <input type="checkbox"/> DHS previously approved - revised and needs DHS approval <input type="checkbox"/> New document - needs DHS approval	x
LNL Renewal Cover Letter (L&P-CCAP 34)	<input checked="" type="checkbox"/> Agency assures compliance	<input checked="" type="checkbox"/> DHS previously approved - no changes <input type="checkbox"/> DHS previously approved - revised and needs DHS approval <input type="checkbox"/> New document - needs DHS approval	x
Application approval cover letter (L&P-CCAP 35)	<input checked="" type="checkbox"/> Agency assures compliance	<input checked="" type="checkbox"/> DHS previously approved - no changes <input type="checkbox"/> DHS previously approved - revised and needs DHS approval <input type="checkbox"/> New document - needs DHS approval	x
Redetermination approval cover letter (L&P-CCAP 36)	<input checked="" type="checkbox"/> Agency assures compliance	<input checked="" type="checkbox"/> DHS previously approved - no changes <input type="checkbox"/> DHS previously approved - revised and needs DHS approval <input type="checkbox"/> New document - needs DHS approval	x
Notice of Child Care Assistance Program Policies (L&P-CCAP 37)	<input checked="" type="checkbox"/> Agency assures compliance	<input checked="" type="checkbox"/> DHS previously approved - no changes <input type="checkbox"/> DHS previously approved - revised and needs DHS approval <input type="checkbox"/> New document - needs DHS approval	x
Provider warning - First Out-of-Compliance Offense (L&P-CCAP 38)	<input checked="" type="checkbox"/> Agency assures compliance	<input checked="" type="checkbox"/> DHS previously approved - no changes <input type="checkbox"/> DHS previously approved - revised and needs DHS approval <input type="checkbox"/> New document - needs DHS approval	x
Provider Compliance Affidavit - Clause 3 (L&P-CCAP 39)	<input checked="" type="checkbox"/> Agency assures compliance	<input checked="" type="checkbox"/> DHS previously approved - no changes <input type="checkbox"/> DHS previously approved - revised and needs DHS approval <input type="checkbox"/> New document - needs DHS approval	x
Provider Compliance Affidavit - Clause 5 (L&P-CCAP 40)	<input checked="" type="checkbox"/> Agency assures compliance	<input checked="" type="checkbox"/> DHS previously approved - no changes <input type="checkbox"/> DHS previously approved - revised and needs DHS approval <input type="checkbox"/> New document - needs DHS approval	x
Provider Compliance Affidavit - Clause 7 (L&P-CCAP 41)	<input checked="" type="checkbox"/> Agency assures compliance	<input checked="" type="checkbox"/> DHS previously approved - no changes <input type="checkbox"/> DHS previously approved - revised and needs DHS approval <input type="checkbox"/> New document - needs DHS approval	x

Add form

XI. County and tribal assurances

Check the designated boxes below to assure compliance.

A. The county or tribe is informing parents about the following as required under [Minnesota Rules, part 3400.0035, subpart 1 and subpart 2.](#)

- The documentation necessary to confirm eligibility for CCAP
- Waiting list information
- Application procedures
- The family's responsibility to report changes that affect their eligibility.

County or tribe assures compliance

In addition, the agency uses the following:

["Parent Acknowledgement When Choosing a Legal Nonlicensed Provider"](#) (DHS-5367) assures compliance with the following:

- Families rights and responsibilities when choosing a provider

["Do You Need Help Paying for Child Care?"](#) (DHS-3551) assures compliance with the following:

- Federal and state child and dependent care tax credits
- Minnesota working family credits
- Federal and earned income credits
- Other programs and services for families with young children and families
- Child Care Aware services
- Child Care Assistance Program eligibility requirements
- Family copayment fees based on family size and income
- Information about how to choose a provider
- Availability of special needs rates
- The family's responsibility for paying provider charges that exceed the maximum child care payment in addition to the family copayment fee

County or tribe assures compliance and uses DHS-5367 and DHS-3551

B. The agency is distributing the following information to registered legal nonlicensed providers as required by:

[Minnesota Rules, part 3400.0120, subpart 2.](#)

Use of ["Health and Safety Resource List for Parents and Legal Nonlicensed Providers"](#) (DHS-5192A) assures compliance with the following:

- Child immunization requirements
- Child nutrition
- Child protection reporting responsibilities
- Health and safety information required by federal law
- Child development information
- Referral to Child Care Aware; and
- Resources and training options to meet federal and/or state-required health and safety topics

County or tribe assures compliance by use of DHS-5192A

C. Child Care Assistance Program (CCAP) Tasks and Timeframes

The county or tribe must perform tasks and meet timeframes required to administer the Child Care Assistance Program. These tasks include, but are not limited to:

- Assessing CCAP eligibility
- Registering child care providers
- Processing payments

These tasks and timeframes are required under the Child Care and Development Fund (CCDF), 98.11(a)(3) Administration under Contracts and Agreements, Minnesota Statutes 119B, Minnesota Rules 3400, CCAP Policy Manual, and MEC² User Guide.

County or tribe assures compliance

D. Child Care Assistance Program (CCAP) Funding

DHS releases a forecast twice each fiscal year (November and February) which includes the overall budget for the Child Care Assistance Program, including all child care subprograms and administrative dollars. The county or tribe is reimbursed administrative dollars as outlined in Minnesota Statutes 119B.15. In addition to receiving the Basic Sliding Fee allocation, the county or tribe contributes a fixed local match equal to that county's/tribe's calendar year 1996 contribution, as outlined in Minnesota Statutes 119B.11, Subd. 1.

The county or tribe is provided a calendar year Basic Sliding Fee allocation, published at least annually and based on the formula outlined in Minnesota Statutes 119B.03, Subd. 6. When there is not sufficient funding to serve all eligible non-MFIP families, the county or tribe manages the Basic Sliding Fee waiting list according to the priorities outlined in Minnesota Statutes 119B.03, Subd. 4.

County or tribe assures compliance

E. Child Care Assistance Program (CCAP) Reporting

[Minnesota Rules part 3400.0140, subpart 14](#)

The county or tribe is required to submit timely reports to the Department of Human Services. The reports include, but are not limited to:

- Basic Sliding Fee waiting list
- Override monitoring
- Basic Sliding Fee adjustments

County or tribe assures compliance

F. Limited English Proficiency Plan

[Minnesota Rules part 3400.0150, subpart 2](#)

The county or tribe has completed a Limited English Proficiency Plan, describing how it serves families with limited English Proficiency

County or tribe assures compliance

G. Child Care Assistance Program (CCAP) Case Reviews

The county or tribe ensures access to all needed documents for cases selected for case reviewed performed by the Department of Human Services. The county or tribe ensure certification and submission of all required documents for the case review will be made by the Director or their delegate.

County or tribe assures compliance

SUBMIT BY EMAIL