

STATE OF CONNECTICUT  
REGULATION  
OF

*IMPORTANT: Read Instructions on bottom of Certification Page before completing this form. Failure to comply with instructions may cause disapproval of proposed Regulations.*

NAME OF STATE AGENCY  
**DEPARTMENT OF SOCIAL SERVICES**

Concerning

SUBJECT MATTER OF REGULATION  
**CHILD CARE ASSISTANCE PROGRAM**

**Section 1. The Regulations of Connecticut State Agencies are amended by adding sections 17b-749-01 to 17b-749-23, inclusive, as follows:**

**Section 17b-749-01. Definitions as used in section 17b-749-01 to 17b-749-23 of the Regulations of Connecticut State Agencies, inclusive.**

- (1) "Actual charge" means the fee charged by the provider for all children attending the same program as determined in subsection (a) of section 17b-749-13 of the Regulations of Connecticut State Agencies;
- (2) "Accredited provider" means a child care provider whose program has earned national accreditation or who has completed approved course or degree work pursuant to subsection (d) of section 17b-749-13 of the Regulations of Connecticut State Agencies;
- (3) "Applicant" means the person with whom the child resides who is the child's parent as defined in subsection (32) of this section who submits the request for assistance to the Child Care Assistance Program;
- (4) "Application" means the form prescribed by the department used to apply for child care assistance;
- (5) "Assistance unit" means the group of individuals who live together whose circumstances are taken into consideration when determining eligibility or benefits for the Temporary Family Assistance (TFA) program pursuant to section 8500 of the Uniform Policy Manual;
- (6) "Attending high school" means enrollment in and regularly attending classes at a state day program accredited by the State Department of Education or the New England Association of Schools and Colleges, a general equivalency diploma program, or an adult education, technical high school or vocational secondary school program which shall lead to a high school level diploma or certificate;
- (7) "Cash assistance" means financial assistance provided by the department to families with dependent children under the Temporary Family Assistance program (TFA), including families assigned to the control group or who receive Diversion Program assistance pursuant to section 8500 of the Uniform Policy Manual;
- (8) "Certificate of payment" means the document issued by the CCAP administrator authorizing payment of CCAP assistance for a specific child to a specified child care provider;
- (9) "Child care" means the care and supervision of an eligible child for not more than twelve hours in a twenty-four hour day, excluding therapy, medical treatment and public or private school or academic programs;
- (10) "Child care assistance" means a subsidy for child care expenses authorized under the Child Care Assistance Program;
- (11) "Child Care Assistance Program (CCAP)" means the program that provides child care assistance in accordance with sections 17b-749-01 to 17b-749-23 of the Regulations of Connecticut State Agencies, inclusive;

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- (12) "Child care agreement" means the form prescribed by the department used to collect and document information concerning provider eligibility and the agreement between the parent and the provider for the provision of child care services;
- (13) "CCAP administrator" means the unit designated by the department or an organization acting under contract with the department and acting under its direction that is responsible for the day-to-day administration of the CCAP program;
- (14) "Child with special needs" means a child under the age of nineteen who meets the requirements of subsection (b) of section 17b-749-11 of the Regulations of Connecticut State Agencies;
- (15) "Commissioner" means the commissioner of the Department of Social Services or his designee;
- (16) "Countable income" means gross income less allowable deductions and excluded income;
- (17) "Department" means the Department of Social Services;
- (18) "Earned income" means compensation for personal services, including but not limited to wages, salaries, commissions, bonuses and earnings from self-employment or contractual agreements;
- (19) "Eligible child" means a child residing with the applicant who is under the age of thirteen or under the age of nineteen with special needs, who needs child care during the hours the parent is participating in employment or an approved employment services activity;
- (20) "Eligible provider" means a licensed child care provider or child care provider who is exempt from licensing that meets the requirements specified in section 17b-749-12 of the Regulations of Connecticut State Agencies;
- (21) "Employment services activity" means education, training, job search or other activity pursued by a parent receiving cash assistance which is designed to eliminate barriers to employment or increase earnings and which has been approved by the Department of Social Services, the state Department of Labor or the designee of either agency in accordance with the requirements of the TANF State Plan;
- (22) "Family" means the group of individuals who live together in the same household whose circumstances are taken into consideration when determining eligibility for the CCAP program pursuant to section 17b-749-03 of the Regulations of Connecticut State Agencies;
- (23) "Foster child" means a child placed in a foster home by the Connecticut Department of Children and Families for whom the parent receives foster care payments;
- (24) "Good cause means circumstances or events outside the control of the family, including but not limited to severe weather, illness or the death of an immediate family member, that reasonably prevent or delay the parent from complying with a CCAP program requirement or other good cause circumstances specified in sections 17b-749-02 to 17b-749-23 of the Regulations of Connecticut State Agencies, inclusive;

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- (25) "Household" means all of the individuals who live together at the same address, including individuals not included in the CCAP family unit for eligibility purposes;
- (26) "Income" means the gross countable earned and unearned income;
- (27) "In loco parentis" means a person with whom the child lives who is responsible for the day-to-day care and custody of the child when the child's parent by blood, marriage, adoption or court order is not performing such duties;
- (28) "Issued" means the date a notice, payment or other correspondence is mailed, sent electronically or delivered in person by the department or the CCAP administrator;
- (29) "Licensed provider" means a day care center, group or family day care home licensed by the Department of Public Health to provide child day care services pursuant to section 19a-77 of the Connecticut General Statutes;
- (30) "Minor parent" means the child's natural parent by blood who is under the age of eighteen;
- (31) "Missing Information" means verification, forms, documentation or other information used in determining eligibility for the program, a provider, payment eligibility or the amount of assistance that is absent;
- (32) "Parent" means a person with whom the child resides who is either the child's parent by blood, marriage, adoption or a spouse or former spouse of such individuals, a legal guardian, a caretaker relative under the cash assistance program or other person standing in loco parentis;
- (33) "Provider" means the person, facility or program chosen by the parent(s) to provide child care;
- (34) "Relative" means a person of any of the degrees of kinship as specified in subdivision (b)(5) of section 19a-77 of the Connecticut General Statutes;
- (35) "Residing with" means living with on a regular basis, including taking meals together and sleeping in the same home;
- (36) "Self-employed" means working for pay either full or part-time where the individual is not considered an employee of another entity for purposes of reporting social security tax or unemployment compensation;
- (37) "School-based child care program" means a child care program operated by a public or private school pursuant to the requirements of subdivision (b)(1) and (b)(2) of section 19a-77 of the Connecticut General Statutes;
- (38) "State median income" means the state median income standards which are promulgated by the United States Department of Health and Human Services;
- (39) "Teenage parent" means a parent under the age of twenty;
- (40) "Unlicensed child care provider" means any provider operating legally in Connecticut that is exempt from licensing as a child day care services provider pursuant to subsection (b) of section 19a-77 of the Connecticut General Statutes;

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- (41) "Unearned income" means pensions, annuities, dividends, interest, rental income, lottery winnings, royalties, Social Security, supplemental security income, unemployment compensation, workers' compensation, alimony, child support, foster care payments, income from means tested programs and any other cash income that is not considered to be earned income;
- (42) "Verification" means documentation or other evidence sufficient to enable the department or CCAP administrator to determine the veracity of information pertinent to establishing eligibility for the program, a provider, payments or the amount of assistance;
- (43) "Victim of domestic violence" means a person who has been battered or subjected to extreme cruelty by physical acts that resulted in or were threatened to result in physical injury; sexual abuse; sexual activity involving a child in the home; being forced to participate in nonconsensual sexual acts or activities; mental abuse; or neglect or deprivation of medical care; and
- (44) "Working" means employment in one or more jobs as an employee of another individual, a partnership, corporation or self-employment, for which compensation is paid in the form of earned income.

**Sec. 17b-749-02. Rights and Responsibilities**

**(a) Rights of Parents and Providers**

- (1) Parents have the right to apply for assistance or withdraw an application, to request discontinuance or reapply for CCAP at any time.
- (2) Parents have the right to choose a child care provider who meets the requirements of section 17b-749-12 of the Regulations of Connecticut State Agencies.
- (3) Parents and providers have the right to be treated fairly without regard to race, color, religion, sex or sexual orientation, marital status, national origin, ancestry, age, political beliefs, or disability.
- (4) Parents and providers who speak Spanish have the right to request and receive forms and notices in Spanish. They also have the right to have the CCAP Administrator provide an interpreter when contacting the CCAP program. Other non-English speaking individuals or persons with limited-English proficiency have the right to request an interpreter provided by the CCAP administrator.
- (5) Individuals with vision or hearing impairments have the right to request auxiliary aids or other accommodations.
- (6) Parents and providers who are not satisfied with actions taken by the case worker shall have the right to speak to a supervisor, a grievance mediator or other individual not directly involved with the parent's case.
- (7) Parents have the right to an administrative hearing or an administrative disqualification hearing as set forth in sections 17b-749-21 and 17b-749-22 of the Regulations of Connecticut State Agencies.
- (8) Parents have the right to appeal to the U.S. Department of Health and Human Services Office of Civil Rights if they feel that the Department or the CCAP administrator has violated their civil rights.

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- (9) Parents receiving TFA cash assistance are informed of the availability of exemptions from mandatory participation in employment services activities if appropriate child care is not available, affordable or cannot be accessed.
- (10) Parents who state that they or their children have been victims of domestic violence or who state that they are at risk of further domestic violence shall be informed of the available community services that assist victims of domestic violence and how to voluntarily and confidentially access these services.

**(b) Responsibilities of Parents and Providers**

- (1) Parents and providers shall be responsible for supplying all requested forms, information and verification needed to determine eligibility and calculate the amount of benefits within fifteen days of the date the information was initially requested or by the date specified by the department.
- (2) Parents shall permit the department to verify information independently whenever necessary to determine eligibility or calculate the amount of benefits.
- (3) Parents shall report changes in household circumstances and child care arrangements within ten days of the date of the change, including but not limited to the following circumstances:
  - (A) residency;
  - (B) address;
  - (C) household composition;
  - (D) citizenship or non-citizen status;
  - (E) countable income of a family member;
  - (F) employment status, including a change in employers, income, work schedule or work hours;
  - (G) any change in the child care arrangements, including changes in providers or the location where care is given, a change in the relationship of the provider to the child, cost, or the need for child care;
  - (H) employment service activities, including changes in schedule or the hours of participation; and
  - (I) high school attendance.
- (4) Parents shall not be required to report changes in a child's age provided the child's date of birth has been accurately reported.
- (5) Parents shall report changes in household circumstances or child care arrangements in writing, by phone or in person directly to the CCAP administrator within ten days of the date of the change. Changes that are not reported timely may result in ineligibility, the loss of benefits or in an overpayment pursuant to the requirements of sections 17b-749-02 through 17b-749-23, inclusive.
- (6) To be eligible for CCAP, parents and providers shall cooperate in taking any actions necessary to establish eligibility or payment level. Parents and providers shall also cooperate with the department's fraud investigation and quality control divisions by completing any required forms, responding to scheduled interview appointments and by making requested records or information available. Parents and providers who do not cooperate may be determined to be ineligible for CCAP until they cooperate.

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- (7) Providers shall submit invoices to the CCAP administrator that accurately report information about attendance and the cost of care.
- (8) Providers shall report changes in the child care arrangements, including but not limited to changes in the hours of care, actual charges, changes in programs due to a change in the age group of the child, the location where care is given and any changes in licensing or accreditation status pursuant to subdivision (b)(5) of section 17b-749-12 of the Regulations of Connecticut State Agencies.

**(c) Responsibilities of the CCAP Administrator**

- (1) The CCAP administrator shall assure that the rights of parents and providers are upheld in accordance with the requirements of this section.
- (2) The CCAP administrator shall give parents the opportunity to file an application at any time.
- (3) The CCAP administrator shall take timely action within the time frames established in sections 17b-749-1 through 17b-749-23 of the Regulations of Connecticut State Agencies, inclusive, to process applications, redeterminations and changes in household circumstances and child care arrangements and to determine the impact on eligibility or benefits.
- (4) The CCAP administrator shall give parents and providers written notice of actions they are required to take to establish program or payment eligibility.
- (5) The CCAP administrator shall provide parents and providers with written notice of any decisions that affect eligibility or benefits.
- (6) The CCAP administrator shall provide parents or their legal representatives with reasonable access to case record information, including computer information that is part of the parents case record, subject to the limitations established in subsection (d) of this section. Parents shall submit a written statement granting their legal representative access to case record information. The information shall be made available within a reasonable period of time following submission of the written request at a location mutually agreed to by both parties, unless the information can only be accessed at a specific location. If an administrative hearing has been scheduled, the information shall be made available prior to the hearing.
- (7) The CCAP administrator shall inform parents of their rights and of any benefits that may be available to them under the CCAP program.

**(d) Safeguarding Information**

- (1) Generally, information about the family shall not be disclosed by the department except when disclosure is authorized by law, including but not limited to the following reasons:
  - (A) when directly connected with the administration of CCAP or other programs administered by the department or the administration of other state or federally assisted programs that are needs based;
  - (B) for purposes related to performing quality assurance audits or fraud investigations;
  - (C) when necessary to determine the suitability of child care arrangements.
- (2) By making application, parents and families shall grant the CCAP administrator permission to share information with the child care provider to the extent necessary to determine eligibility, the level of benefits or to notify the provider of information concerning eligibility or payments. Personal family information not relevant to such determinations shall not be disclosed and not be shared with the provider. Providers for whom a current child care agreement form is on file with the CCAP administrator may contact the administrator to determine the status of an application.

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- (3) Information about the provider may be shared with the parent if the information is considered public information, or as needed to determine payment eligibility or to inform the parent of the reason the provider does not meet the eligibility requirements. By enrolling in the CCAP program, providers shall grant the CCAP administrator permission to share information concerning compliance with the program health and safety standards with the parent, including the results of criminal and child abuse or neglect background checks.
- (4) Application information may be disclosed to a landlord, employer or other third party only to the extent necessary to obtain specified information or verification from such parties.
- (5) Information is disclosed to any authorized representative of the Commissioner of the Department of Administrative Services (DAS), the Commissioner of the Department of Public Safety (DPS), the Office of the Chief State's Attorney, local police departments, the Office of Attorney General, or the Judicial Department, Support Enforcement Division for the purpose of collection of overpayments, investigating fraud, collection of child support or the location of absent parents or for any other purpose for which disclosure of such information is permitted by law.
- (6) Information is disclosed to any authorized representative of the Commissioner of Mental Health and Addiction Services necessary for the implementation and operation of the basic needs supplement program or for the management of and payment for behavioral health services for applicants and recipients of general assistance.
- (7) Information is released to any authorized representative of the Commissioner of the Department of Labor or to his official designee when required for the administration of the Unemployment Compensation or employment services programs or activities.
- (8) Information is released to any authorized representative of the Commissioner of the Department of Children and Families concerning a child's health, safety or welfare if the same is determined to be in imminent danger as determined by the Department of Children and Families or the Department of Social Services. Notwithstanding a request for information, the department notifies the commissioner of the Department of Children and Families or his official designee if there is reason to believe that any child under the age of eighteen is being subjected to physical or mental abuse or neglect while in the care of a parent or child care provider.
- (9) The current address of an applicant or recipient of benefits is disclosed to federal, state, or local law enforcement officers under the following conditions:
  - (A) if such officer provides the department with a name of such applicant or recipient of benefits; and
  - (B) if the family member is fleeing to avoid prosecution, or custody or confinement after conviction; and
  - (C) the law enforcement officer provides the family member's name and indicates that the conditions listed above in (A) and (B) exist and verifies that the location or apprehension of the recipient is within his or her official duties.

**Sec. 17b-749-03. Individuals Included in the Family**

- (a) CCAP program and payment eligibility shall be determined based on the circumstances of the individuals who reside together in the same household. Parents who state that they are not living together, but maintain separate residences in the same building or adjacent apartments shall be considered to be residing together if they routinely sleep in the same home, take meals together and continue to function as a family unit. Evidence of separation of financial responsibilities and the pursuit or payment of child support from the non-custodial parent shall be considered when making this determination.

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- (b) A person who is temporarily absent from the household shall be considered to be a family member if the person intends to return to the home, does not establish a permanent residence elsewhere and the absence is not expected to continue for more than ninety consecutive days. A minor dependent shall be considered to be a family member if the parent retains custody or primary responsibility for the child during the absence. A minor dependent who is temporarily absent while attending school outside the home shall be considered to be a family member if the parent maintains living quarters for the child and the child is expected to return to the home following completion of the school activity. Other temporary absences of a household member shall not affect the determination of the composition of the family, as long as the person is absent for not more than ninety consecutive days.
- (c) If the child's parents are separated and have joint custody of the child, the child shall be considered living with the parent with whom the child resides at least fifty percent of the time. If the child lives with each parent for an equal amount of time, the parents shall be required to reach an agreement concerning which parent shall apply for CCAP as a condition of eligibility. If the parents cannot reach an agreement, the child shall be considered to be living with the parent who applied for CCAP first. Only one parent shall be eligible to receive assistance for the child in any month unless the child goes to live with the other parent during the month on a permanent basis.
- (d) The following individuals shall be included in the family, unless otherwise specified in this section:
- (1) parents of the children for whom assistance is requested as defined in subsection (32) of section 17b-749-01 of the Regulations of Connecticut State Agencies;
  - (2) the parent's spouse and their minor dependents; and
  - (3) any individuals who receive cash assistance together as part of the same TFA assistance unit.
- (e) If the household contains a minor parent, the legal guardian or parents of the minor parent through blood, marriage or adoption and their current or former spouses shall be included in the family together with their minor dependents.
- (f) If a minor parent lives with someone acting in loco parentis who is not his or her legal guardian or parent through blood, marriage or adoption or the current or former spouse of such individuals, the family shall include the individual acting in loco parentis, his or her current or former spouse and their minor dependents under the following conditions:
- (1) if the person acting in loco parentis receives TFA cash assistance as part of the same assistance unit as the minor parent; or
  - (2) if the person acting in loco parentis requests child care assistance to support his or her own work, school or employment services activity or that of his or her spouse.
- (g) If a minor parent lives with someone acting in loco parentis who is not his or her legal guardian or parent through blood, marriage or adoption or the current or former spouse of such individuals, the family shall include only the minor parent, the minor parent's children and the other parent of the minor parent's children under the following conditions:
- (1) if assistance is requested only for the children of the minor parent(s); and



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- (2) assistance is requested only to support the work, school, or employment services activity of the minor parent(s).
- (h) A separate family unit shall be established for children receiving foster care payments from the Connecticut Department of Children and Families. The foster parent and other household members shall not be included in the same family unit with the foster child or children for purposes of determining income eligibility or benefits. The CCAP administrator shall establish a separate family unit if the foster parent requests assistance for another child in the household who is not a foster child.
- (i) A child who is adopted from DCF shall continue to be treated as his or her own family unit for twelve months following the date of the adoption. After twelve months following the date of adoption, the adoptive parent and other household members shall be included in the family unit.

**Sec. 17b-749-04. Non-Financial Eligibility Requirements**

To be eligible for the Child Care Assistance Program, the family shall meet the requirements outlined in this section.

**(a) Residency**

- (1) The family members shall be residing in Connecticut, not for a temporary purpose. The department shall not apply a durational requirement when making a determination of residency or require the family to live in a permanent dwelling or to have a fixed mailing address.
- (2) Family members who are adults or minor parents shall be considered residing in Connecticut under the following conditions:
- (A) if they intend to remain in the state permanently or for the foreseeable future; or
- (B) if they entered the state with a job commitment or for the purpose of seeking employment.
- (3) Family members not in the state for a temporary purpose meet the residency requirement.
- (4) Temporary absence from the state does not constitute a change in residency if the family member intends to return to Connecticut within thirty days and the individual maintains his or her residence in Connecticut. The commissioner may extend the thirty-day limit for up to ninety days if the family member is absent due to a temporary military duty assignment. A child who is temporarily absent from the home while attending school out of the state shall be considered a resident if the parent maintains living quarters for the child and the child intends to return home following completion of the school activities.
- (5) Family members who apply for or receive cash assistance, Food Stamps, Medical Assistance or other public benefits from another state are not considered residents of Connecticut.

**(b) Social Security Numbers**

- (1) Disclosure of the Social Security number of a family member shall be mandatory only for children whose CCAP subsidy is or will be claimed by the Department as an expense under the TANF program or other federal programs that require recipients to disclose a Social Security Number.. This requirement does not apply to children who are not citizens of the United States, who are not eligible to obtain a Social Security number (SSN) from the Social Security Administration. Disclosure of the Social Security numbers of other family

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members shall be voluntary. If the SSN is not disclosed, the CCAP administrator may obtain and use the SSN of a family member for whom disclosure is voluntary to the extent the number is available from other programs or agencies with whom the Department shares such information.

- (2) Assistance shall not be delayed pending verification of an SSN unless there is a discrepancy between a number given and other available information that causes the CCAP administrator to question the identity of the individual. The parent shall have thirty days from the date assistance is granted to verify that an application has been submitted to the Social Security Administration for a child who does not have an SSN for whom such number is mandatory.
- (3) Parents shall disclose the SSN of any member who did not have a valid number by the first redetermination following the onset of initial eligibility.
- (4) Child care providers shall disclose their SSN or a Connecticut Tax ID as a condition of eligibility for the provider.
- (5) An individual who has more than one SSN must disclose all of the numbers.
- (6) Disclosure may be from a number which has been committed to memory, a written document, such as a wage stub, Social Security award or denial letter, income tax return, or Social Security card.
- (7) If disclosure is mandatory, the individual child is ineligible if the parent fails to disclose or apply for an SSN for the child. Ineligibility shall continue until such time that the parent applies for or discloses the SSN.

**(c) Securing Child Support**

- (1) If a child for whom assistance is requested is deprived of financial support from the child's natural or adoptive parent, the custodial parent or person acting in loco parentis shall agree to apply for services and cooperate with the Bureau of Child Support Enforcement (BCSE) in obtaining support from the non-custodial parent, unless support is actively being pursued through private legal means or an exemption from cooperation is granted pursuant to section 17b-179(a)-4 of the Regulations of Connecticut State Agencies.
- (2) The custodial parent shall not be required to apply for support services for children for whom assistance is not being requested or children who are emancipated pursuant to sections 46b-150b and 46b-150e of the Connecticut General Statutes. The department shall waive the fee charged to non-assistance recipients pursuant to 17b-179(i)-1 of the Regulations of Connecticut State Agencies.
- (3) Parents who apply for or receive cash or medical assistance from the department for a child for whom child care assistance is requested shall not be required to apply for support for the child as long as the parent complies with the requirements of the other program. The family, however, shall become ineligible for child care assistance until proof of cooperation is provided if a sanction is imposed for non-compliance with the support requirements of the other program.
- (4) The application for support shall be made pursuant to section 17b-179 (h) of the Connecticut General Statutes. Parents shall verify that an application was filed not later than the first redetermination conducted after the initial date of eligibility for the child. The CCAP administrator shall provide written information about the procedure for applying for support to the parent.

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- (5) The parent shall cooperate with the department as provided in section 17b-179(a)-4 of the Regulations of Connecticut State Agencies. The parent shall supply accurate and complete information about the non-custodial parent(s). When paternity has not been established for a child, the parent shall supply accurate and complete information about the putative father and take part in any legal proceedings as requested by the department unless an exemption is granted under section 17b-179(a)-4. Parents shall not be required to take additional action if an exemption is granted or if the department decides not to pursue support for reasons other than non-cooperation.
- (6) The entire family shall be determined ineligible if the parent does not comply with the requirements of this section and shall remain ineligible until such time that the parent complies.

**(d) Citizenship**

- (1) To be eligible for CCAP, the child for whom assistance is requested shall meet the citizenship requirements established under section 431 of Public Law 104-193, the Personal Responsibility and Work Opportunity Reconciliation Act, as amended. The citizenship status of the child's parents or other family members are not taken into consideration when determining eligibility for CCAP.
- (2) To be eligible for assistance, the child shall be a United States citizen, a national of the United States pursuant to 8 U.S.C. section 1101, or an eligible non-citizen who is a lawfully residing immigrant.
- (3) Citizens include the following individuals:
  - (A) individuals born in the United States or a US territory;
  - (B) a naturalized citizen;
  - (C) individuals under the age of 19 whose parents are citizens; and
  - (D) individuals who meet specific Immigration and Naturalization Service conditions for citizenship including a foreign born individual with at least one parent who is a citizen and the foreign born spouse of a U.S. citizen.
- (4) Eligible non-citizens include, but are not limited to the following individuals as determined by the Immigration and Naturalization Service:
  - (A) a non-citizen lawfully admitted for permanent residence under the Immigration and Nationality Act;
  - (B) a non-citizen granted asylum under section 208 of the Immigration and Nationality Act;
  - (C) a refugee admitted to the United States under section 207 of the Immigration and Nationality Act;
  - (D) a non-citizen paroled into the United States under section 212 (d)(5) of the Immigration and Nationality Act for a period of at least one year;

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- (E) a non-citizen whose deportation is being withheld under section 243 (h) of the Immigration and Nationality Act as in effect prior to April 1, 1997, or whose removal is being withheld under section 241 (b)(3) of the Act;
  - (F) a non-citizen who is a Cuban or Haitian entrant as defined in section 501 (e) of the Refugee Education Assistance Act of 1980; or
  - (G) a non-citizen whose child has been battered or subjected to extreme cruelty in the United States and otherwise satisfies the requirements of 8 U.S.C. 1641 (c).
- (5) Parents shall be required to disclose the citizenship status of the child, provide requested verification of the child's immigration status and to report any changes in the child's status within 10 days of the date of the change as a condition of eligibility. Where federal law prohibits copying naturalization papers, the CCAP administrator shall make arrangements to schedule a meeting with the parent to review the naturalization documents. The meeting shall be conducted in the local regional office of the department or other mutually agreed to location.
- (6) If assistance is denied because a child does not meet the citizenship requirements, the CCAP administrator shall provide written notice to the parent explaining the reason for the denial and how to contact the Immigration and Naturalization Service to seek correction if the parent believes the information regarding the child's citizenship status to be erroneous. If the parent requests an administrative hearing to appeal the determination to deny assistance, the CCAP administrator shall contact the Immigration and Naturalization Service for assistance if the parent challenges the determination of the child's citizenship status. The CCAP administrator shall not be required to contact the Immigration and Naturalization Service if the parent does not contest the child's status, but disputes whether the status makes the child ineligible.

**(e) Need for Care**

- (1) The parent shall have at least one eligible child residing in the home who needs child care assistance. Families with no eligible children are ineligible for CCAP. The approved hours of care shall be determined in accordance with the requirements of subsection (b) of section 17b-749-13 of the Regulations of Connecticut State Agencies.
- (2) To be eligible for assistance, child care shall be needed to allow parents to participate in the following approved activities:
  - (A) employment for which the individual receives wages as opposed to goods or services for compensation;
  - (B) a self-employment activity as defined in subsection (f) of this section;
  - (C) for individuals receiving cash assistance, an employment services activity approved by the Department of Social Services, the Department of Labor or the designee of either agency in accordance with the State Plan requirements for the TFA cash assistance program; or
  - (D) for teenage parents under the age of twenty who do not receive cash assistance, a high school program or equivalent as defined in subsection (6) of section 17b-749-01 of Regulations of Connecticut State Agencies.

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- (3) Parents who were participating in an employment services activity at the time their TFA cash assistance benefits were discontinued shall be eligible for child care services to support completion of the activity for up to twelve months after TFA assistance is discontinued, provided that the parent is employed and all other eligibility requirements are satisfied. Eligibility based on the employment services activity shall end if the parent stops participating in the activity or if the activity ends.
- (4) Parents shall maintain continuous involvement in an approved work or employment services activity. Assistance is available only during the hours the parent or family member is participating in an activity listed in subdivision (2) of this subsection.
- (5) A child shall not be eligible for assistance if the applicant's spouse or the child's other parent is living in the home and is available and capable of providing care. The spouse or other parent shall be considered unavailable if the individual is participating in an activity defined in subdivision (2) of this subsection during hours that exclude the possibility of providing care. The spouse or other parent shall be considered incapable of providing care if the individual has a significant physical or mental condition, disability or impairment that would prevent him or her from caring for the child for a period which is expected to last for at least one calendar month.
- (6) The parent shall demonstrate that his or her spouse or the other parent is not available to provide care by certifying that the spouse or other parent does not reside in the household or by verifying participation in an activity listed in subdivision (2) of this subsection. Attendance or participation in an activity not specifically listed in subdivision (2) shall not constitute grounds for considering the individual unavailable.
- (7) Parents working at home shall be considered unavailable to provide care only if the nature of the employment or self-employment activity prevents the parent from providing adequate care or supervision, or if the parent routinely operates equipment or machinery that would be hazardous if the child was in the same room or area with the parent.
- (8) The applicant shall be required to verify that the spouse or the other parent is incapable of providing care by submitting verification from a treating physician or certified mental health professional. The verification shall provide details of the nature and degree of the person's disability or impairment, the reason the condition prevents the individual from providing care and the expected duration of the disability or impairment. The CCAP administrator may refer, but not require the individual to apply for disability benefits with the Social Security Administration if the condition is expected to last for more than twelve months. The evidence must clearly establish that the spouse or other parent is not capable of providing safe and competent care. The CCAP administrator may request additional verification if the information submitted is not conclusive. In determining that an individual is not capable of providing safe and competent care, the department shall consider the age of the child, special needs, the degree of supervision required, medical information and all other available evidence.

**(f) Specific Requirements for Self-Employed Family Members**

- (1) Child care assistance shall be approved to support a self-employment activity only if the activity is carried on to create a livelihood and in good faith to make a profit as evidenced by business and financial records and tax returns. The parent shall be required to provide documentation of continuous activities that are not passive or casual, or more appropriately associated with a hobby or volunteer work. Family members who own multiple or multi-family properties shall

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not be considered self-employed unless the individual actively manages the properties and can demonstrate work hours that justify the need for care.

- (2) Parents working at home as child care providers shall be considered available to provide care for their own children during their work hours, except under the following conditions:

(A) if the parent is a licensed family day care home provider; and

(B) if caring of his or her own children would cause the parent to exceed the licensed capacity established by the Department of Public Health.

- (3) The self-employment business activity shall be producing some taxable income at the time assistance is requested as reported as net profit on Schedule C of IRS form 1040. After six months, the taxable earnings for each family member involved in the activity shall equal or exceed the state minimum wage times the number of hours the family member purports to be working on the activity on a continual basis. Child care needs related to the activity shall be disapproved if income from the activity does not meet the income standards. Any subsequent requests for assistance made by the family related to self-employment shall be approved only if the gross taxable income produced equals or exceeds the state minimum wage times the number of hours each family member spends working on the activity.
- (4) The parent shall be responsible for submitting tax returns, estimated tax filings and business records documenting the income, business deductions and hours of participation where appropriate. Upon request, families with reported income that does not appear sufficient to meet basic daily living expenses shall provide verification of how the expenses are being met, including checking account, savings or loan records or an alternate means of financial support. The gross income from the self-employment business activity shall be used to determine eligibility and the amount of assistance if the information submitted by the parent is not sufficient to adequately determine the net profit.

**(g) Availability of Other Child Care Resources**

- (1) Payments shall not be made for the hours the child attends school, home schooling or other academic programs, or for the hours the child attends an after-school program or other state, federal or privately funded program for which the parent does not incur a fee.
- (2) If the family receives a direct subsidy or funds for child care expenses from a source other than CCAP, including support payments from a non-custodial parent earmarked specifically for child care, this funding shall be applied first as payment toward the approved cost of care as determined in subsection 17b-749-13 of the Regulations of Connecticut State Agencies. Scholarships, Pell grants and other awards provided directly to students are exempt and shall not be applied toward the approved cost of care.

**Sec. 17b-749-05. Financial Eligibility Requirements**

**(a) Gross Income Eligibility**

- (1) Gross countable family income for applicants and recipients shall be less than fifty percent of the state median income level for the appropriate family size as established by the Department of Health and Human Services. The commissioner shall have discretion to increase the income limit to up to seventy-five percent of the state median income level for all CCAP recipients or for both applicants and recipients. The commissioner may also,

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upon the request of the commissioner of Children and Families, waive the gross income limit for families who need child care assistance for a child who was adopted from the Department of Children and Families after October 1, 1999 and whose countable income does not exceed the maximum level established for participation pursuant to 42 CFR section 98.20 of the federal Child Care and Development Fund Regulations. Adoptive families for whom the income limit is waived shall be responsible for paying the maximum fee required pursuant to subsection (f) of section 17b-749-13 of the Regulations of Connecticut State Agencies.

- (2) A family whose income equals or exceeds the established income limit is ineligible for CCAP, unless the income exceeds the limit for not more than one calendar month due to an extra pay period or other temporary increase.
- (3) Income shall be counted in the month it is received by the family member, except to the extent the income is averaged in accordance with requirements of subsection (d) of this section.
- (4) The department shall adjust the state median income standards annually. For new applicants, the adjusted standards shall take effect beginning on or after July 1 of each year. For families receiving child care assistance on June 30, the adjusted standards shall take effect not later than the first redetermination completed after July 1 of each year.

**(b) Countable Income**

- (1) In determining the gross income, the following types of income shall be counted except as specified in subdivision (2) of this section:
  - (A) unearned income of all adult and child family members; and
  - (B) gross earnings of all parents and adult family members.
- (2) The following types of income shall be excluded from the gross income determination:
  - (A) TFA cash assistance benefits;
  - (B) child support payments;
  - (C) income paid by the Census Bureau to low-income temporary census workers;
  - (D) the value of Food Stamp benefits;
  - (E) the earnings of a family member who is under the age of eighteen who is not the parent of a child for whom assistance is requested;
  - (F) earned income credit payment, including advanced payments;
  - (G) cash contributions from non-profit charitable agencies or organizations;
  - (H) interest and dividends totaling less than six hundred dollars per calendar year;
  - (I) lump sum payments from unearned income sources totaling less than six hundred dollars per calendar year;

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- (J) income tax refunds;
- (K) special need payments issued by the department on behalf of a cash assistance recipient that are paid to a vendor;
- (L) income from the sponsor of a non-citizen;
- (M) grants, loans and scholarships paid to students;
- (N) cash gifts received on an irregular basis, the aggregate of which does not exceed twelve hundred dollars per calendar year;
- (O) the value of goods and services given as in-kind income rather than cash payments;
- (P) reimbursements for expenditures that do not represent a benefit or gain to the recipient;
- (Q) disaster assistance paid under the Disaster Relief Act of 1974, as amended, including the Individual and Family Grant (IFG) program, and comparable disaster assistance provided by states, local governments and private organizations, and any interest earned on funds from this source;
- (R) payments made by the Department of Labor to meet the cost of pursuing employment;
- (S) state or federal government rental subsidies;
- (T) security deposits returned by a landlord to the family;
- (U) payments made under means-tested energy assistance programs and utility subsidies; and
- (V) payments received under Title II of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970.

**(c) Income Deductions**

- (1) Self-employed individuals shall be entitled to standard deductions for business expenses permitted under the Internal Revenue Code. Deductions shall be allowed only after submission of appropriate documentation using applicable Internal Revenue Service forms and schedules.
- (2) Payments made for child support shall be deducted from the gross income of the individual who makes the support payment. A representative average shall be used if the amount of the support payments fluctuates.

**(d) Income Calculations**

- (1) Gross income shall be calculated based on the best estimate of the income the family is expected to receive. Generally, income received monthly or over a more frequent period shall be annualized based on the amount received in the four week period immediately prior to the date of the income calculation. If the income fluctuates in an unpredictable manner, the income shall be averaged over a longer more representative period. If income is



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received regularly according to a schedule, the income shall be annualized based on such schedule.

- (2) School or other employees who are under contract shall have income annualized over the contract period. Income received less frequently than monthly shall be averaged over the period which it is intended to cover.
- (3) If the income is expected to change or when a family member is beginning new employment or changing work schedules, gross income shall be calculated based on the best estimate of the income the family is expected to receive over the next six months. The CCAP administrator shall use all available documentation to make the determination.
- (4) Self-employed family members shall have income calculated based on the prior years income tax return or current business records, whichever is most representative of the current projected earnings. Standard business deductions shall be allowed in accordance with the requirements of subdivision (1) of subsection (c) of this section.

**Sec. 17b-749-06. Verification**

**(a) Responsibilities for Providing Verification**

- (1) The parent has primary responsibility for supplying, on a timely basis, information sufficient to determine eligibility and the level of benefits. The CCAP administrator shall allow parents to submit any evidence they believe will support a factor that needs to be verified.
- (2) The CCAP administrator assists in obtaining verification of application information on behalf of the family under the following conditions:
  - (A) when the CCAP administrator has the capacity to obtain the information internally by accessing the department's computer records or through other direct access; or
  - (B) when the parent has been unable to obtain the needed verification after making a bona fide effort and the assistance unit has requested help; and
  - (C) when the CCAP administrator has the capability to obtain the verification needed without undue administrative hardship.
- (3) Providers are responsible for providing verification requested from them by the CCAP administrator.
- (4) The CCAP administrator considers all evidence submitted or received from other sources.

**(b) Standard of Proof**

A statement or condition shall be considered verified when the available evidence indicates that it is more likely to be true than not.

**(c) Verification Requirements**

- (1) The CCAP administrator requires verification of information when required by federal or state law, when necessary to confirm any circumstances pertaining to eligibility for the family, a child care provider or the amount of benefits. The CCAP administrator shall not require parents or providers to verify circumstances not relevant to the case.
- (2) Applicants assigned to the waiting list pursuant to section 17b-749-10 of the Regulations of Connecticut State Agencies shall be required to provide verification of information upon request of the CCAP administrator.

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- (3) Self-employed individuals shall be required to provide copies of federal and state income tax returns and business records upon request. If the reported income does not appear sufficient to meet family needs, the CCAP administrator may require the parent to verify current living expenses and document any alternate means of financial support, such as a loan or credit card expense.
- (4) The CCAP administrator may conduct an investigation if the gross or net income reported from rental property or a self-employment enterprise is not consistent with the income produced by other similar rental properties or businesses.
- (5) The CCAP administrator shall not require parents or providers to verify a negative or nonexistent condition or circumstance, unless evidence exists to suggest that the information provided is erroneous.
- (6) The CCAP administrator shall issue a written notice whenever verification of information is requested. The notice shall specify the information that is needed, the date the information is due, that assistance may be available if the parent is unable to obtain the requested information and a statement that eligibility or benefits may be affected if the information is not submitted timely by the due date.

**(d) Effect of Not Providing Verification**

- (1) If establishing eligibility for the program depends directly upon a factor or circumstance for which verification is required, not providing the requested information results in ineligibility for the entire family.
- (2) If establishing eligibility for an individual child depends directly upon a factor or circumstance for which verification is required, not providing verification results in ineligibility only for the child. The entire family is ineligible if there are no other eligible children in the home.
- (3) If the eligibility of the provider depends directly upon a factor or circumstance for which verification is required, not providing verification results in ineligibility for the provider.
- (4) If only the approved hours of care or benefit calculation is affected, not providing verification results in the disallowance or non-consideration of the unverified factor or circumstance.

**(e) Good Cause**

- (1) The department shall not deny assistance, discontinue or reduce a family's benefits if the parent can establish good cause for not providing requested verification. A parent shall be considered to have good cause for not providing verification under the following circumstances:
  - (A) if the parent has had difficulty obtaining information requested from a third party source other than a family member or the parent's child care provider and the parent has made all reasonable attempts to obtain the verification and is complying with the CCAP administrator's request; or
  - (B) if the CCAP administrator has taken responsibility for assisting the parent in obtaining the verification; or
  - (C) if extenuating circumstances, including but not limited to a death in the immediate family, severe illness or other mitigating circumstances prevented the parent from timely submitting the verification.
- (2) To be eligible for good cause, the parent must contact the CCAP administrator and request a good cause exemption within ten days of the date the notice of denial or adverse action is

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issued in accordance with section 17b-749-07 of the Regulations of Connecticut State Agencies.

**(f) Methods of Verification**

- (1) Parents shall be required to submit written documentation as the primary method or source of verification, except where self-declarations are requested on the application or other program forms.
- (2) In the absence of written documentation or where the verification submitted is questionable, the CCAP administrator shall have the option of verifying information by contacting other disinterested third party sources or persons who are not members of the household or the child care provider.
- (3) Whenever possible, the CCAP administrator shall use information obtained through on-line computer interfaces or other automated resources to verify eligibility factors or circumstances to the extent the information is reliable, current and is readily available.
- (4) Parents shall be required or permitted to submit affidavits or self-declarations for review by the CCAP administrator. Such documents shall be evaluated along with all other available evidence; however, parents are generally expected to submit written documentation from reliable independent sources when such documentation is available.
- (5) The CCAP administrator shall obtain a notarized statement on a form prescribed by the department prior to authorizing replacement of a lost, stolen or destroyed check.

**Sec. 17b-749-07. Notice Requirements**

**(a) Requirements of the CCAP Administrator**

- (1) Parents shall be notified of their rights and responsibilities as specified in section 17b-749-2 of the Regulations of Connecticut State Agencies, including but not limited to the need to report changes in household circumstances to the CCAP administrator within ten days of the date of the change. Providers shall be notified of their responsibility to report changes in accordance with requirements of subdivision (b)(5) of section 17b-749-12 of the Regulations of Connecticut State Agencies.
- (2) Parents shall be notified of the receipt of an initial or reopened application, of any actions they are required to complete and the effect of any reported or requested changes on eligibility or the level of benefits.
- (3) When a Social Security number is requested, parents shall be notified if the disclosure of the number is not mandatory.
- (4) Parents and their current providers for whom a completed child care agreement form has been submitted are notified of the following circumstances:
  - (A) action to grant or deny assistance;
  - (B) assignment to the wait list;
  - (C) the scheduling of a redetermination and the results of the redetermination;
  - (D) changes affecting program eligibility, provider eligibility or eligibility of an individual child;
  - (E) a change in the payee; and
  - (F) increases or decreases in benefit or payment amounts.

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- (5) Parents are notified when their case is assigned to a specific worker and when their case is reassigned to a different worker.
- (6) Parents assigned to the wait list are notified of changes in their priority status, if they are removed from the wait list and of any actions necessary to maintain eligibility for the wait list.
- (7) All notices of actions taken by the CCAP administrator or actions required by the parent or provider shall be given in writing. Written notice shall include documents and forms delivered by mail, in person, by facsimile machine or through formalized electronic communication processes established with the parent or provider. Each notice shall contain sufficient information to allow the parent or provider to clearly understand the reason for the action and the relevant state statute or regulation upon which the action is based.
- (8) Parents shall be notified of their rights to an administrative hearing whenever an action is taken that affects eligibility, benefits, provider eligibility or eligibility for the wait list. Parents shall be notified of their right to an administrative disqualification hearing pursuant to section 17b-749-22 of the Regulations of Connecticut State Agencies.
- (9) Parents and providers shall be notified of their right to speak to a CCAP supervisor or someone not directly involved with the case if they are not satisfied with the actions taken by the case worker.

**(b) Date of Notification**

The date of notification shall be the date a notice is issued by the CCAP administrator.

**(c) Adverse Action Notice Requirements**

- (1) Parents and their approved provider(s) are notified when a change in circumstances results in the discontinuance, termination or reduction in benefits.
- (2) Adverse action notices shall contain a reference to the relevant statute or regulation upon which such action was based.
- (3) Notice is given at least ten days prior to the effective date of the intended action, except as specified in subdivision (4) of this subsection.
- (4) Notice is given no later than the effective date of the action under the following circumstances:
  - (A) when the a child who is receiving child care assistance is deceased;
  - (B) when a parent who is the only adult member of the family is deceased;
  - (C) when the Department receives a written request to discontinue benefits from the parent;
  - (D) when changes are made following completion of a redetermination;
  - (E) when mail is returned with no forwarding address and the CCAP administrator is not able to determine the whereabouts of the family from other department records;
  - (F) when the parent or a child for whom assistance was requested is granted public benefits in another state;
  - (G) when a child who receives assistance is removed from the home by the Department of Children and Families or is placed in foster care;
  - (H) when assistance is granted for a specific period of time and written notice was given at the time of the grant explaining that eligibility or benefits will terminate at the end of the specified period;
  - (I) when an application for benefits is denied;

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- (J) when the parent or provider informs the CCAP administrator that the child is no longer receiving care or has changed providers;
- (K) when a provider becomes ineligible for payment incentives for accreditation or professional development pursuant to subsection (d) of section 17b-749-13 of the Regulations of Connecticut State Agencies;
- (L) when the Department of Public Health notifies the CCAP administrator that the provider's licensed has been revoked; and
- (M) when the CCAP administrator has obtained reliable evidence that the child care provider does not meet the health and safety requirements of the CCAP program specified in subsection 17b-749-12 (c) to subsection 17b-749-12 (f) of the Regulations of Connecticut State Agencies, inclusive.

**Sec. 17b-749-08. Prioritization for Child Care Funding**

- (a) Each family shall be assigned to an applicable priority group. Within available funding, the department shall accept applications and authorize payments based on the following order of priorities:
  - (1) parents receiving TFA cash assistance who are employed or participating in an approved employment services activity and working parents who are completing an approved employment services activity that started before the family's TFA cash assistance was discontinued pursuant to subdivision (e)(3) of section 17b-749-04 of the Regulations of Connecticut State Agencies;
  - (2) working parents whose cash assistance benefits were discontinued within six calendar months prior to the date of application for CCAP;
  - (3) parents under the age of twenty not receiving cash assistance who attend high school or another secondary school program;
  - (4) working parents with gross countable family income below fifty percent of the state median income;
  - (5) working parents with gross countable family income between fifty and seventy-five percent of the state median income who request assistance for a child who was adopted from the Department of Children and Families; and
  - (6) all other working parents with gross countable family income between fifty and seventy-five percent of the state median income.
- (b) A family's priority status shall not be affected if the parent is removed from cash assistance due to the application of a TFA program sanction.
- (c) The commissioner may establish additional priority groups from time to time based on exceptional public need that result from unforeseen circumstances. When establishing additional priority groups, the commissioner shall designate a target expenditure level for each additional priority group created if such level is not otherwise specified by legislative action. Additional priority groups may be added or deleted based on available funding.
- (d) The CCAP administrator shall maintain a list of any additional priority groups established. The list shall include the expenditure level specifically allocated to each additional priority group. A copy of the listing of additional priority groups shall be made available to the public upon written request.

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**Sec. 17b-749-09. Application Process**

**(a) Filing an Application**

- (1) The parent shall apply for assistance by submitting an application to the CCAP administrator using a form prescribed by the department. The parent may use a copy of the application form, provided the information submitted on the form is original and not copied. If the form submitted is obsolete or inadequate, the CCAP administrator may require the parent to complete a new application. The date of application shall be the date the initial application was filed.
- (2) If the family contains a minor parent, the minor or the minor's parent may submit the application. The parent of the minor parent shall be considered the applicant and shall be required to sign the application form before assistance is granted, unless the minor parent is emancipated by marriage or court decree.
- (3) The application form shall be submitted to the address specified by the department for the submission of applications. Applications received by the department at an address other than the one specified for the submission of CCAP applications shall be forwarded to the CCAP administrator within one business day of the date the application was received.
- (4) Parents may apply or reapply for the program at any time. The parent shall be required to complete a new application form with each application, except under the following circumstances:
  - (A) when an application is reopened in accordance with the requirements of subsection (e) of this section, the CCAP administrator shall not require the parent to submit a new application form if the original application form submitted by the parent is not more than sixty days old; or
  - (B) if the original application was denied because the parent did not comply with a request for missing information or verification, the CCAP administrator shall waive the requirement for submitting a new application form if the parent submits some or all of the missing information within sixty days of the previous application date.
- (5) Telephone contacts or other requests for assistance not utilizing the prescribed application form shall be considered inquiries and do not constitute an application.
- (6) At a minimum, the application form filed shall include the full name and address of the parent, the date and the parent's signature. Applicants are not required to submit a child care agreement form or other documentation with the application.
- (7) Application forms may be requested from the CCAP administrator by phone or in writing. Application forms requested by phone shall be mailed to the parent by the next business day following the date of the request. Application forms shall also be made available in local offices of the department at sites designated for the coordination of employment services activities for cash assistance recipients. Upon request, the CCAP administrator shall make application forms available in reasonable quantities to licensed child care providers, legal assistance organizations or other entities that regularly assist low and moderate income families.
- (8) Parents may be required to complete a telephone interview as part of the application process. Interviews may be scheduled by contacting the parent by phone, except that written notice shall be issued before an application is denied because the parent did not

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comply with attempts to complete the interview. Interviews shall be scheduled within thirty days of the date of application at a time mutually agreed to by the parent and the CCAP administrator.

**(b) Date of Application**

- (1) The date of application shall be the date the signed and dated application form is received by the CCAP administrator at the address specified by the department for filing child care applications. If the application form is sent to the department, but to an incorrect address, the date of application shall be the earlier of the date the application is received by the CCAP administrator or the next business day following the date the application form was received by the department.
- (2) If the requirement to file a new application form is waived in accordance with the requirements of subdivision (a)(4)(B) of this subsection, the date of application shall be the date upon which the CCAP administrator receives documentation sufficient to reopen the applicant's case using a previously submitted application form.
- (3) For applications reopened in accordance with the requirements of subsection (e) of this section, the application date shall be the date the original application form was filed.

**(c) Application Processing**

- (1) Applications are processed and eligibility is determined within thirty days of the date the application form is received by the CCAP administrator, except where otherwise specified in this subsection. The first day of the processing period begins on the day following the date the application form was received. The parent shall be notified of the eligibility decision in accordance with the requirements of section 17b-749-07 of the Regulations of Connecticut State Agencies. The provider shall also be notified if a completed child care agreement form was submitted with the application.
- (2) Eligibility is determined when sufficient information exists to determine if the family is eligible or ineligible. If the application is incomplete, the CCAP administrator shall issue a notice to the parent requesting the information that is missing. The parent shall be given a minimum of fifteen days from the date the notice is issued to return the information to the CCAP administrator. The first day of the fifteen-day period begins on the day the notice was issued.
- (3) If the parent has not selected a provider by the time eligibility is determined, the CCAP administrator shall determine if the family is eligible for the program without regard to eligibility for payments. The parent shall be notified of the decision and informed that eligibility will be terminated if a provider is not selected and the information needed to enroll the provider is not submitted within thirty days. The CCAP administrator shall determine if a child is eligible for payment within ten days of the date the provider information is submitted. The family shall become ineligible if the information needed to determine payment eligibility for at least one child is not submitted within thirty days of the date assistance was granted.
- (4) Incomplete applications shall be denied only if the parent has been given at least fifteen days notice to comply with an initial request for missing information.
- (5) Parents shall be given additional time to respond to a request for missing information if good cause exists for not providing the information in accordance with the requirements of

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subsection (e) of section 17b-749-06 of the Regulations of Connecticut State Agencies. Applications that remain incomplete after the fifteen day notice period has expired shall be processed without regard to the missing information if good cause does not exist. If eligibility has not been established, the application shall be denied and the parent notified.

- (6) The processing period shall be extended beyond thirty days under the following conditions as long as the parent continues to cooperate with the application process:
- (A) if good cause exists for not providing verification in accordance with the requirements of subsection (e) of section 17b-749-06 of the Regulations of Connecticut State Agencies, and the delay causes the application to remain pending for more than thirty days;
  - (B) if the parent or provider was not given at least fifteen days to respond to an initial request for information;
  - (C) if the parent responds timely to a request for missing information and the information submitted is either incomplete or requires additional verification before the application can be processed; or
  - (D) if the CCAP administrator has assumed responsibility for obtaining missing information and has not been able to obtain the information.
- (7) The application shall continue to be processed if a good cause extension is granted or while the CCAP administrator is waiting to obtain additional verification. The extension shall continue for as long as necessary provided that the parent continues to cooperate and responds to written requests for verification in a timely manner. Additional verification or reverification of circumstances that have already been verified may be required if the application remains pending more than thirty days. The delay in processing the application shall be considered the responsibility of the parent as long as the CCAP administrator has taken prompt action to request the missing information in time to process the application within thirty days.

**(d) Application Dispositions**

- (1) If the family is eligible and funding is available for the parent's priority group, the application shall be approved. A notice of eligibility for the program shall be issued to the parent if the information needed to enroll the provider and determine payment eligibility has not been submitted. The notice shall identify any action the parent is required to take to determine payment eligibility and the specified time frames.
- (2) If at least one child has been determined eligible for payment, a certificate of payment eligibility shall be issued to the parent and the approved provider. The parent shall also be notified of any actions that need to be completed to secure payment eligibility for other children in the home and the date for completing such actions.
- (3) If a family is eligible but funding is not available for the parent's priority group, the family shall be assigned to the wait list if the wait list is open pursuant to section 17b-749-10 of the Regulations of Connecticut State Agencies. If the wait list is closed, the application shall be denied.
- (4) If the application is denied, a copy of the notice shall be sent to any provider for whom a completed child care agreement form was submitted with the application.



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**(e) Reopening Denied Applications**

- (1) A denied application shall be reopened retroactive to the original date of application under the following conditions:
  - (A) if the application was denied because the parent did not comply with a request for missing information; and
  - (B) the parent is able to establish good cause for not submitting missing information within ten days of the date the application was denied in accordance with the requirements of subsection (e) of section 17b-749-06 of the Regulations of Connecticut State Agencies; or
  - (C) if some or all of the missing information is submitted to the CCAP administrator within ten days of the date the application was denied; or
  - (D) if the application was denied in error.
- (2) Applications that are reopened shall be given priority over other pending applications. The CCAP administrator shall have thirty days from the date the application is reopened to complete the eligibility determination.

**(f) Applications Assigned to the Wait List**

- (1) The CCAP administrator shall maintain a wait list if sufficient funding is not available to keep the program open for all priority groups. If a family meets the eligibility requirements for the program but funding is not available for the parent's priority group, the family shall be assigned to the wait list unless the wait list is closed pursuant to section 17b-749-10 of the Regulations of Connecticut State Agencies. Parents and their providers shall be notified if the family is placed on the wait list.
- (2) If the commissioner chooses to close the wait list to some or all priority groups, applicants who fall into priority groups to whom the wait list is closed shall be denied. Action to close the wait list shall not be subject to an administrative hearing.

**(g) Eligibility Period**

- (1) For families approved without assignment to the wait list, including families whose applications are reopened pursuant to subsection (e) of this section, eligibility shall be granted retroactive for up to fifteen days prior to the date of application if the family is otherwise eligible and using child care services as of that date.
- (2) Families selected from the wait list shall be granted retroactive for up to fifteen days prior to the date on which the parent submits required documentation in response to a notice of selection from the wait list or on the date specified by the CCAP program administrator, whichever is later.
- (3) If the parent did not timely submit information or verification needed to determine eligibility for a particular child without good cause, eligibility for the child shall begin on the date the parent provides some or all of the requested information or verification.

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- (4) Eligibility shall be approved for up to a maximum of six months from the month of application. The CCAP administrator shall schedule a redetermination within six months in accordance with the requirements of subsection (b) of section 17b-749-18 of the Regulations of Connecticut State Agencies.

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**Sec. 17b-749-10. Wait list**

**(a) Assignment to the Wait List**

- (1) Families shall be assigned to a wait list based on their priority group and the date of application. Families qualifying for more than one priority group shall be assigned to the priority group with the highest likelihood of selection for CCAP participation.
- (2) Families assigned to the wait list shall be required to notify the CCAP administrator of changes in address and to submit updated documentation of eligibility upon request by the CCAP administrator. The parent shall have a minimum of fifteen days to supply the requested documentation. Where updated information indicates a change in family circumstances, the CCAP administrator may reassign eligible families to the appropriate priority group or remove ineligible families from the wait list. The parent shall be notified of any changes made to their priority group status or eligibility for the wait list.
- (3) Parents shall inform the CCAP administrator in writing of any changes in address.

**(b) Selection from the Wait List**

- (1) As funding becomes available, the CCAP administrator shall select families from the wait list beginning in order of the highest priority group. The family's application shall be processed in accordance with the requirements of section 17b-749-09 of the Regulations of Connecticut State Agencies. If the program is not opened to all families within a particular priority group or groups, the CCAP administrator shall select families based on the date of the original application upon which assignment to the wait list was based. Selection from the next lower category may begin only after all families in the higher priority categories have been given an opportunity to participate.
- (2) Families shall be notified of their selection from the wait list, of any required actions and the specified time frames for completing the actions. The CCAP administrator shall have the option to specify the effective date of initial eligibility based on funding or other administrative considerations. If a date is specified, the family shall also be notified of the effective date.
- (3) The parent shall have a minimum of fifteen days to respond in writing to the notice of selection from the wait list. The family shall be denied if the parent does not respond timely.
- (4) Families selected from the wait list may be required to submit a new application and updated verification of family circumstances. Applications of families selected from the wait list shall be processed in a manner identical to applications not assigned to the wait list.

**(c) Removal from the Wait List**

- (1) Families shall be removed from the wait list under the following circumstances:
  - (A) when the family is selected from the wait list;
  - (B) if the parent requests removal;

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- (C) if the parent does not update information when requested or reply timely to the notice of selection from the wait list;
  - (D) if any mail sent to the parent is returned due to an unreported change in address;
  - (E) when a change in family circumstances renders the family ineligible; and
  - (F) if a change in CCAP regulations renders the family ineligible.
- (2) At the discretion of the commissioner, families may be removed from the wait list if CCAP is expected to remain closed to the family's priority group for at least twelve months.
- (3) Families removed from the wait list shall be issued a denial notice if they are not selected for participation in CCAP.

**(d) Closing the Wait List**

- (1) The commissioner shall have discretion to close the wait list for some or all priority groups. The decision to close the wait list shall be based on available funding, the number of families already assigned to the wait list and the likelihood of selecting newly added families from the list within twelve months.
- (2) If the wait list is closed, families for whom funding is not available shall have their application denied.
- (3) The commissioner shall have the option of reopening the wait list to some or all of the priority groups if additional funding becomes available or if a sufficient number of families are selected from the list to warrant reopening the list.

**Sec. 17b-749-11. Eligible Children**

- (a) The child shall be less than thirteen years old or less than nineteen years of age, if the child has special needs. A child shall remain eligible through the last day of the month in which the child reaches the appropriate age limit, provided the child was eligible on the first day of that month. A child whose thirteenth or nineteenth birthday falls in the same month for which assistance is initially requested is not eligible for CCAP.
- (b) A child shall be considered to have special needs if the child's independence, self-sufficiency and safety is dependent on others and the child requires extra supervision, care, or assistance in the child care setting due to the following physical, mental, behavioral or emotional conditions, including but not limited to:
  - (1) a physical handicap or health impairment that causes chronic or acute health problems, such as a heart condition, orthopedic impairment, tuberculosis, asthma, epilepsy, cerebral palsy, leukemia or congenital abnormality that has been diagnosed by a physician;
  - (2) mental retardation or autism spectrum disorder as diagnosed by a physician, pediatrician or psychologist;
  - (3) a behavioral or emotional disturbance, maladjustment or developmental delay that causes the child to exhibit marked and inappropriate behaviors or characteristics over extended periods

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that has been diagnosed by a psychologist, psychiatrist or other clinically trained and state-certified mental health professional acting within his or her scope of practice;

- (4) a speech, language, vision or hearing impairment that has been diagnosed by a physician or state certified health care professional acting within his or her scope of practice; or
- (5) multiple handicaps that cause problems or interfere with the child's ability to function in the child care setting without extra care or supervision.
- (c) Parents shall be required to notify the CCAP administrator and the provider if a child has special needs. A determination that a child has special needs does not guarantee eligibility for additional or increased payments. The child's payment rate and eligibility for a special needs supplement are subject to the requirements of subsection (c) of section 17b-749-13 and subsection (b) of section 17b-749-16 of the Regulations of Connecticut State Agencies, respectively.
- (d) The child shall meet the citizenship requirements established in subsection (d) of section 17b-749-04 of the Regulations of Connecticut State Agencies.
- (e) The child shall have age-appropriate immunizations in accordance with the childhood immunization schedule established by the Department of Public Health pursuant to section 19a-7 of the Connecticut General Statutes. Parents and providers shall certify that the child has had age-appropriate immunizations and has had age-appropriate comprehensive health screening examinations required by the Early and Periodic Screening and Diagnostic Treatment Program established under 42 U.S.C. §1396d(r) or according to the schedule recommended by the American Academy of Pediatrics. Parents shall provide documentation of age-appropriate immunizations and other health information to the provider and the CCAP administrator upon request, including the name and address of the child's physician, primary health care provider and health insurance company.
- (f) If a child who receives care has not been immunized, the parent shall have sixty days from the date assistance is granted to verify that the child has begun the immunization process. The child's benefits shall be terminated if the parent does not provide the required verification within sixty days. The child shall remain ineligible until such time that the parent verifies that the child has been or is in the process of being immunized. If there are no other eligible children in the home, the family shall become ineligible.
- (g) The CCAP administrator shall waive the immunization requirement if the parent is able to demonstrate that the child's medical condition or the parent's sincere religious beliefs preclude the child from being immunized.

**Sec. 17b-749-12. Eligibility Requirements for Child Care Providers**

Child care providers shall comply with the requirements of this section to be eligible for payment under the CCAP program.

**(a) Eligible Settings**

- (1) To be eligible for payments, care must be given in one of the following settings located and operating legally within Connecticut:
- (A) the child's home;

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- (B) a family day-care home licensed by the Department of Public Health;
  - (C) a day-care center licensed by the Department of Public Health;
  - (D) a group day-care home licensed by the Department of Public Health;
  - (E) the home of a relative as defined in subsection (34) of section 17b-749-01 of the Regulations of Connecticut State Agencies;
  - (F) the home of a non-relative provider, if care is provided for less than three hours per day;
  - (G) a public or private school-based child care program as defined in subsection (37) of section 17b-749-01 of the Regulations of Connecticut State Agencies;
  - (H) a recreational program operated by a library, boys' and girls' club, church-related organization, scouting, camping or community youth program or other similar entity that is legally exempt from separate licensing by the Department of Public Health pursuant to section 19a-77 of the Connecticut General Statutes, and that provides stable and regular care; or
  - (I) a drop-in supplemental child care program where parents are present on-site, for which the parent is charged a fee for child care services.
- (2) The commissioner shall have discretion to approve payments for child care services given by a licensed provider located and operating legally in an adjoining state on an exception basis. Approval shall be based on the circumstances of the individual family, including, but not limited to the availability of licensed child care services in the area where the family lives, the need to utilize out-of-state services due to the location of the child's school or the parent's work, education or employment services activity and any special needs of the child. The provider must be licensed and in good standing with the state agency responsible for regulating child care services in the adjoining state. In addition, the provider shall be subject to all other relevant requirements specified in section 17b-749-01 to 17b-749-23 of the Regulations of Connecticut State Agencies, inclusive, and shall cooperate with the department in providing or obtaining any verification needed to establish the eligibility of the child care arrangement. The determination by the commissioner shall be considered final and is not subject to an administrative hearing.
- (3) When determining if a provider is eligible, the department shall give full force and effect to any decision rendered by another agency concerning a license or application for a license to provide child care.
- (4) The following individuals are not eligible to receive payments from CCAP for providing child care because of their relationship to the child:
- (A) a person who is a mandatory inclusion in the family unit for CCAP eligibility purposes;
  - (B) the natural or adoptive parent or legal guardian of the child, or the current or former spouse of such individual;

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- (C) if the child's parent is a minor who is not emancipated, the natural or adoptive parent or legal guardian of the minor parent, or the current or former spouse of such individual if living in the same household as the minor parent;
  - (D) the child's sibling through blood, marriage or adoption if living in the same household as the child regardless of the sibling's age;
  - (E) an adult, regardless of relationship, living in the same household with the child who provides care between the hours of eleven o'clock p.m. and seven o'clock a.m., unless the child is less than three years of age or has special needs; and
  - (F) an individual who has been designated as the caretaker relative of the child under the cash assistance program and the individual's spouse.
- (5) A child care provider who has been convicted of vendor fraud pursuant to section 17b-99 of the Connecticut General Statutes is not eligible to receive payments from the CCAP program for providing child care services.

**(b) Provisions Applicable to all Providers**

- (1) The department is not a licensing authority or the employer of the provider. The agreement to provide care is an arrangement between the parent and the provider and shall not be considered a legal contract between the department or the CCAP administrator and the provider. Parents shall be responsible for selecting a provider who can provide safe, appropriate and suitable care for their child. The Department or the CCAP administrator shall only determine whether the provider has submitted evidence of compliance with the requirements of section 17b-749-12 of the Regulations of Connecticut State Agencies and is therefore eligible to participate in the CCAP program. Neither the Department nor the CCAP administrator undertakes any duty of care that can be reasonably relied upon by any person that a provider is suitable or appropriate to provide child care.
- (2) Neither the department nor the CCAP administrator is the employer of the provider. The Department or the CCAP administrator, by making benefit payments on behalf of an eligible family to a provider that has been selected by the family, does not undertake any of the responsibilities of an employer, including, but not limited to, tax withholding, unemployment compensation or worker's compensation. The Department's responsibility is limited to making child care assistance payments to providers who are eligible to receive payment for child care services provided on behalf of eligible families, in accordance with the terms, conditions and limitations of sections 17b-749-01 to 17b-749-23 of the Regulations of Connecticut State Agencies, inclusive.
- (3) Providers shall allow parents unlimited access to their children and to the location where child care is provided.
- (4) Providers shall certify that they will report any instances of suspected child abuse or neglect to the appropriate protective service agency in a manner required by section 17a-101a of the Connecticut General Statutes.
- (5) In order to maintain eligibility for payments, providers shall provide the following information to the CCAP administrator upon request:

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- (A) the name, address, photo identification, Social Security number and telephone number of the provider and all adults who work for or reside at the location where care is provided;
- (B) the name and address of the child's doctor or primary care provider and health insurance company;
- (C) whether the child is immunized and has had appropriate health screens; and
- (D) the number of children cared for by the provider.

- (6) Providers shall notify the CCAP administrator of any changes in the child care arrangements, including but not limited to changes in the hours of care, actual charges, changes in programs due to the age group of the child, the location where care is given and changes in licensing or accreditation status. Changes shall be reported in writing or by phone by the time the first invoice is submitted following the date of the change. This requirement shall not relieve the parent of the responsibility to report these changes to the CCAP administrator within ten days of the date of the change.
- (7) Providers shall report actual charges and attendance accurately in the format required by the CCAP administrator. Providers shall maintain records of such figures on-site for at least one year and make such records accessible to the department for inspection upon request.
- (8) Providers shall not charge or report charges for CCAP participants at a rate that is higher than the rate charged to a comparable family not participating in the CCAP program. The charges reported to CCAP shall be the actual amount charged to the parent for services, unless the child attends a state-supported day care center or school readiness program funded under section 8-210(b) or sections 10-16p(8)(c) or 10-16p(8)(d) of the Connecticut General Statutes respectively. For children attending such state-supported programs, the charges reported to CCAP for use in determining the benefit calculation and payment shall be the lesser of the provider's full charge for the program or the approved cost of care as determined in subsection (a) of section 17b-749-13 of the Regulations of Connecticut State Agencies.
- (9) Providers shall not increase charges to CCAP parents to offset a reduction in payments due to an overpayment that was caused by the provider that is being recouped by the department.

**(c) Requirements for Providers Subject to Licensing by the Department of Public Health**

- (1) Child care providers that are required to be licensed by the Department of Public Health in accordance with section 19a-77 of the Connecticut General Statutes shall be licensed and in good standing before any payments to the provider are approved.
- (2) Providers shall report changes in licensing status to the CCAP administrator by phone or in writing by the time the first invoice is submitted following the date the Department of Public Health informs the provider of the change. Changes in accreditation status shall be reported within ten days of the date of the change.
- (3) Payments shall not be made for child care services provided during periods the provider did not possess or maintain the required license, except when the provider has timely taken steps to renew a license but the Department of Public Health has not completed the renewal



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process. Providers are not entitled to advance notice if payments are terminated because the provider is not licensed.

- (4) The CCAP administrator shall withhold any payments that have not already been issued for periods during which the provider was determined to be operating illegally without a license. Any payments issued for services provided during periods the provider was operating without a required license shall be considered overpayments caused by the provider.
- (5) The CCAP administrator shall report providers who appear to be over capacity to the Department of Public Health for investigation of regulatory violations.

**(d) Requirements for Unlicensed Child Care Providers**

- (1) Unlicensed child care providers must be eighteen years of age or older. Parents receiving benefits for care given by a provider who is less than eighteen years old shall have up to ninety days from the effective date of this regulation to locate a new provider. Payments shall continue during the ninety-day period provided the family is otherwise eligible.
- (2) The provider shall disclose his or her full name, residence address, date of birth and social security number or any other information necessary to verify identity. Upon request, the provider shall provide identification that includes the provider's photograph, date of birth and signature.
- (3) The provider shall not be working another job during the hours that the child is in care or engage in an activity that distracts his or her attention from providing child care services.
- (4) No child care subsidy shall be paid to an unlicensed child care provider if such provider has been convicted of any crime involving sexual assault of a minor or serious physical injury to a minor or any crime committed in any other state or jurisdiction the essential elements of which are substantially the same as such crimes pursuant to section 17b-750 of the Connecticut General Statutes. The commissioner shall have discretion to refuse payments to any provider if the person has been convicted in this state or any other state of any crimes specified in section 17b-749k of the Connecticut General Statutes or has a criminal record or was the subject of a substantiated report of child abuse or neglect in this state or in any other state that the commissioner reasonably believes renders the person unsuitable to provide child care.
- (5) The commissioner shall have discretion to refuse payments under the following conditions:
  - (A) if the provider has an outstanding arrest warrant for any offense that is classified as a felony;
  - (B) if the provider has a child abuse or neglect allegation pending;
  - (C) if the provider is physically or mentally incapable of providing safe or competent care to the child; or
  - (D) whenever the commissioner has obtained information from a reliable source that a provider has not been providing or is not capable of providing safe or competent care, including but not limited to a record of an outstanding arrest for child abuse or neglect,

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risk of injury or impairing the morals of a minor, the illegal use, sale or possession of controlled substances, a crime against persons or other similar offenses.

- (6) The parent and provider shall both certify that the provider is capable of providing safe and competent care as a condition of payment eligibility, including the ability to feed, bathe and toilet the child as appropriate, the ability to respond to potential emergencies and the ability to provide adequate care and supervision. The department may deny payment if sufficient evidence exists to support a conclusion that the child's needs may not be satisfied or that the child's health and safety may be at risk in the child care setting. In making this determination, the department may consider information obtained from police records, medical records and information obtained from other agencies, physicians, health care workers, social workers health officials or other sources. The hours of care, the child's age and special needs shall be taken into consideration when assessing the ability of the provider to properly care for and supervise the child.
- (7) The provider shall certify in writing that he or she has not been convicted of any crime or subject to any of the conditions listed in subdivisions (4) and (5) of this subsection.
- (8) The provider and parent shall certify by signing the child care agreement form that the child care location meets the following requirements:
- (A) there is an operating fire extinguisher available at the child care location;
  - (B) there is an operating smoke alarm installed at the child care location;
  - (C) there is an operating hard wired telephone at the child care location or a cellular phone owned and operated by the provider with emergency telephone numbers posted ; and
  - (D) the child care location complies with all applicable local and state fire, zoning and building codes.
- (9) The child care arrangements shall not be approved if care is provided in a location that does not meet the requirements of subdivision (8) of this subsection.
- (10) An unlicensed child care arrangement shall not be approved if care is provided by an in-home child care provider or a relative who provides child care services to more than six children during substantially the same hours. Up to three children under the age of two may receive child care services together at a time, as long as they are the only children in the provider's care. No more than two infants may receive care at any one time if the provider cares for any other preschool or school age children during the same hours.

**(e) Criminal and Child Abuse Background Checks for Unlicensed Providers**

- (1) The department shall check the state's child abuse registry at application and periodically according to a schedule established by the department to determine if the provider has a substantiated history of child abuse or neglect.
- (2) The department shall check the state and national criminal history of any unlicensed provider that is suspected of having a conviction for sexual assault of a minor or other related crime in accordance with the requirements of section 17b-750 of the General statutes.

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- (3) The department shall conduct criminal background checks for unlicensed providers pursuant to the requirements of sections 17b-749k and 17b-750 of the Connecticut General Statutes.
- (4) Providers shall be informed of the requirements to conduct criminal and child abuse background checks and shall supply the department with fingerprints and any other information required to conduct the background check when requested by the CCAP administrator. Providers shall be given a minimum of thirty days to return the requested information to the department.
- (5) The department may charge the provider for any fees charged by the State Police or the FBI for conducting the criminal background check. The department may deduct the fee from payments made to the provider or require the submission of payment with the fingerprints. A provider who does not submit fingerprints, fees or other information when requested shall be ineligible for payments until such time the provider complies with the request.
- (6) Assistance shall not be delayed pending the completion of a criminal or child abuse background check unless evidence exists to warrant a delay, except as specified in subdivision (f) of this section.

**(f) Termination of Payments**

- (1) No child care subsidy shall be paid to any licensed or unlicensed child care provider if there is evidence that a child's needs are not being met, or that the child is not receiving or is not likely to receive safe and competent care from the provider. Parents and providers shall be notified of the denial or termination of payments to the provider. Disclosure of information obtained from the child abuse registry shall be in accordance with the requirements of subsection (d) of section 17b-749-02 of the Regulations of Connecticut State Agencies.
- (2) Providers who disagree with the results of the background check shall be referred to the Departments of Children and Families or Public Safety if they wish to dispute the findings of those agencies. If the findings are reversed, payments may be authorized as of the date verification of the decision by the Department of Children and Families or Public Safety is submitted to the department.
- (3) Providers may ask the department to reconsider the decision to deny or discontinue payments if they feel the decision was made in error. The decision by the department shall be considered final and shall not be subject to an administrative hearing request by the provider. Parents may appeal the decision to deny or discontinue payments pursuant to the requirements of section 17b-749-21 of the Regulations of Connecticut State Agencies.
- (4) The request for reconsideration must be made in writing by the provider and contain the details the department is being asked to consider. The department shall reach a decision within ten days of the date of the written request for reconsideration or the date that all necessary documentation has been submitted or obtained. The parent and provider shall be provided with a written response concerning the request for reconsideration..

**(g) Enrollment of the Provider**

- (1) To be eligible for payment, the child care provider shall enroll in the CCAP program as the child's provider. To enroll, the provider shall complete the following actions:
  - (A) submit a completed child care agreement using a form prescribed by the department that provides details of the child care arrangements, including but not limited to information

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about the provider's licensing and accreditation status, the relationship of the provider to the child, the location where care is given, the days and hours of care and the actual charges for the care provided;

- (B) certify that the child care provider and the facility meet the licensing and health and safety standards outlined in this section;
  - (C) provide any additional documentation required by the CCAP administrator, including but not limited to verification of identity;
  - (D) agree to report changes in the child care arrangements or licensing and accreditation status by the date the first invoice is submitted following the date of the change, whichever is earlier; and
  - (E) submit a completed W-9 form or other documentation of tax identification number as specified by the department.
- (2) The parent shall be required to co-sign the child care agreement form. The parent's signature confirms the child care arrangements and serves as a release to allow the department to share information with the provider or as necessary for the administration of the CCAP program in accordance with the requirements of subsection (d) of section 17b-749-02 of the Regulations of Connecticut State Agencies.

**Sec. 17b-749-13. Payment Calculations**

**(a) Calculating the Approved Cost of Care**

- (1) The CCAP administrator shall calculate the approved monthly cost of care for each eligible child based on the activity schedule, the need for care, the applicable payment rate and eligibility for increased payments due to an ongoing special needs supplement. The approved cost of care shall represent the maximum ongoing CCAP payment, excluding adjustments for supplements, accreditation and professional development incentives or underpayment corrections. The approved cost shall not exceed the amount charged by the provider, except to the extent that weekly charges are converted to an average monthly amount as specified in subdivision (2) of this subsection.
- (2) In calculating the approved cost, the weekly payment rate and the provider's actual weekly charges shall be converted to average monthly amounts by multiplying by a factor of four and three tenths weeks per month. The results may be rounded to the nearest whole dollar amount.
- (3) The approved monthly cost of care shall be the lesser of the following amounts:
  - (A) the maximum payment rate based on the authorized hours of care, the type of child care setting, the age of the child, the location where care is given or the location of the family's residence in cases where payment is approved for an out-of-state provider pursuant to subdivision (a)(2) of section 17b-749-12 of the Regulations of Connecticut State Agencies, plus
  - (B) fifteen percent of the amount determined in subparagraph (A) for a child with special needs who is eligible for an increase in the standard payment rate pursuant to the

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requirements of subdivision (b)(3) of section 17b-749-16 of the Regulations of Connecticut State Agencies; or

(C) the provider's actual monthly charges.

- (4) The actual charge shall be the amount charged to the parent for services, unless the child attends a state-funded day care center or a school readiness program that charges families according to a sliding income scale pursuant to subdivision (b)(7) of section 17b-749-12 of the Regulations of Connecticut State Agencies. For children attending such programs, the actual charge shall be considered to be the lesser of the following amounts:

(A) provider's full charge for the program; or

(B) the maximum CCAP payment rate based on the authorized hours of care, the type of child care setting, the age of the child and the location where care is given; plus

(C) fifteen percent of the amount determined in subparagraph (B) for a child with special needs who is eligible for an increase in the standard payment rate pursuant to the requirements of subdivision (b)(3) of section 17b-749-16 of the Regulations of Connecticut State Agencies.

- (5) Actual charges shall not exceed the amount charged by the provider for children attending the same program who do not receive assistance from CCAP.

**(b) Authorized Hours of Care**

- (1) The CCAP administrator shall calculate the number of hours of care that are needed for each eligible child. The number of hours of care authorized shall be based on all of the following factors and shall be limited to not more than twelve hours in a twenty-four hour period:

(A) hours of the work or employment services activity;

(B) the availability of a parent who is living with the child to provide care;

(C) the hours the child is in school;

(D) travel time to and from the approved activity; and

(E) the hours of care specified on the child care agreement form.

- (2) Care shall not be authorized during the hours the child is in school, an academic or home schooling program, when a parent living in the home is available and capable of providing care or outside the activity schedule, including travel and lunch time.
- (3) The time needed to commute to and from the activity shall be taken into consideration when determining the actual number of hours of care that is needed. Travel time shall be limited to a maximum of one hour per day, unless the parent verifies that additional time is needed.
- (4) Households where both parents participate in approved activities at different times shall be required to arrange their home schedules, including sleep time, in a manner that maximizes

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each parent's availability to provide care. If after making reasonable efforts to adjust their schedules child care is needed, care shall be authorized for the part of the day the parents are not able to supervise the child.

- (5) A maximum of four hours per day may be approved to allow a parent who works third shift or an equivalent schedule to sleep if the child does not attend school or if the other parent is not available to provide care.
- (6) Care shall not be authorized between the hours of eleven p.m. and seven a.m. if the child care provider is a person who resides in the same home as the child, unless the child is less than three years of age or has special needs.
- (7) Weekly schedules shall be converted to monthly figures by multiplying by a factor of four and three tenths weeks per month. The result may be rounded to the nearest half-hour.
- (8) If the hours of the activity fluctuate in an unpredictable manner, the CCAP administrator shall calculate the authorized hours by using a representative average of number of hours the individual is expected to participate in the activity over the period of the certificate.
- (9) For parents beginning a new employment services activity, employment or changing schedules, the number of hours authorized shall be based on documentation provided by the parent, the employer or entity responsible for coordinating the employment services activity.
- (10) The number of hours authorized shall not exceed the number of hours specified on the child care agreement form.
- (11) The number of hours of care authorized shall be used as the basis for determining the level of care needed and the applicable payment rate. The maximum number of hours approved for any one child shall not exceed sixty-five hours per week or two hundred eighty hours per calendar month, except to the extent the child is eligible for a supplemental payment for an alternate child care provider pursuant to section 17b-749-16 of the Regulations of Connecticut State Agencies.

**(c) Payment Rates**

- (1) The commissioner shall establish payment rates pursuant to the requirements of this subsection. The payment rates shall be updated periodically in accordance with state and federal requirements after consideration of local market conditions, or for unlicensed providers, changes in the minimum wage. The rates shall be established with the intention of providing participating parents with reasonable access to child care services available to the general public in a variety of settings. The payment rates shall be made available to the general public upon request.
- (2) The payment rates for all providers shall be based on four levels of care. Each level shall cover a range of hours. The number of hours authorized in subsection (b) of this section shall be converted to an average monthly amount and used to determine the maximum allowable payment rate for each certificate of payment. The lower and upper limits of the four levels of care shall be as follows:
  - (A) for care in excess of full-time care, fifty one to sixty-five hours per week;

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- (B) for full-time care, thirty-five to fifty hours per week;
- (C) for half-time care, sixteen to thirty-four hours per week; and
- (D) for quarter-time care, one hour to fifteen hours per week.
- (3) The commissioner shall have discretion to modify the payment rate structure to establish daily rates or other payment levels as necessary to approximate the manner in which child care providers charge for care in the open market, including supplemental payments for extended nontraditional hours.
- (4) Payment rates for school-based child care programs and providers licensed by the Department of Public Health shall depend on the age of the child in care. Children shall be classified into the following age groups:
- (A) infants/toddlers under the age of three;
- (B) preschool children ages three through five; and
- (C) school age children age six and older.
- (5) The child's age group shall be established as of the date the certificate of payment is issued and shall remain the same until the family's next redetermination or until the certificate is cancelled and a new certificate of payment is issued for the child.
- (6) Separate rates shall be established for the following types of child care providers:
- (A) licensed child day care centers;
- (B) licensed group day care homes;
- (C) licensed family day care homes;
- (D) relatives, in-home care providers and other types of unlicensed providers.
- (7) Payment rates for licensed providers shall be established for geographic regions as defined by the commissioner based on a review of local market conditions. The regional payment rate for a particular child shall be determined by the location at which child care is provided.
- (8) With the exception of school-based child care programs, payment rates for unlicensed providers shall be based on the state minimum wage. The weekly payment rate for the full-time care of one child shall be equal to one third of the state minimum wage times forty hours. Payment rates for school-based child programs shall be determined in the same manner as rates for child day care centers, group and family day care homes licensed by the Department of Public Health.
- (9) Providers who have attained national accreditation or completed professional development course work shall be entitled to bonus payments pursuant to subsection (d) of this section.
- (10) The commissioner may take other market factors into consideration when establishing payment rates, including discounts given by providers who care for more than one child

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from the same family. The commissioner may establish payment limits or differentials for children who are cared for in their own homes pursuant to 45 CFR 98.30 based on the additional cost of providing care in a licensed setting, including insurance, facility and business expenses, staffing, professional certifications and early childhood education programming.

- (11) The payment rate shall be increased by fifteen percent for a child with special needs who meets the requirements established in subsection (b) of section 17b-749-16 of the Regulations of Connecticut State Agencies.
- (12) Payment rates may be modified at any time. Changes in rates shall be made effective on the date specified by the commissioner. A minimum of thirty days advance notice shall be given to parents and providers with active certificates of payment if the payment rates are decreased.

**(d) Payment Incentives for Accreditation and Professional Development**

- (1) Licensed child care providers whose programs meet the standards promulgated by state or national accrediting agencies recognized by the commissioner shall be entitled to a payment incentive as long as they maintain their accreditation. The payment incentive shall be equal to five percent of the amount calculated in subdivision (b)(1) of section 17b-749-15 of the Regulations of Connecticut State Agencies prior to any deductions for fees, overpayments or any mandated withholding. Accrediting agencies recognized by the commissioner include but are not limited to:
- (A) the National Academy of Early Childhood Programs, a division of the National Association for the Education of Young Children;
- (B) the National School Age Child Care Alliance;
- (C) the National Association of Family Child Care; and
- (D) the Council on Accreditation of Services for Families and Children, Inc.
- (2) The commissioner may establish additional payment incentives for licensed and unlicensed providers based on completion of course work toward achieving a Child Development Associate credential, a degree program or other professional development courses or credentials or other quality standards. Incentives may be paid as a lump sum bonus, a flat amount added to the monthly payment or as an increase in the payment rate.
- (3) Providers shall apply for payment incentives in a manner specified by the CCAP administrator and shall provide satisfactory documentation. Incentives for eligible providers shall become effective in the month following the month in which the application and all required documentation are submitted to the CCAP administrator. Providers may be required to submit updated documentation confirming their current accreditation or professional development status. Providers shall notify the CCAP administrator if their accreditation is revoked or expires, or if the conditions that qualified the provider for the incentive pursuant to subdivision (2) of this subsection change. Incentives shall continue to be paid until the end of the month in which such status changes.

**(e) Maximum Payments**



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- (1) Payments for a child who is cared for by a single provider shall not exceed the established payment rate for fifty-one to sixty-five hours of care per week, excluding incentive payments for accreditation and professional development authorized under subsection (d) of this section and supplemental payments authorized under subsection (b) of section 17b-749-16 of the Regulations of Connecticut State Agencies.
- (2) If a child receives care from two or more providers, the payment rate shall be calculated independently for each provider. The payment rate for each certificate of payment shall be based on the hours of care authorized for the provider, except that the total hours authorized for all providers shall not exceed sixty-five hours per week or two hundred eighty hours per month. To determine the level of care, the CCAP administrator shall first calculate the weekly number of authorized hours of care for the provider with whom the child spends the majority of time or the provider for whom an existing certificate is already in effect. The authorized hours for this provider shall be subtracted from the sixty-five to determine the maximum number of hours available for the other or new provider. If the hours are approximately equal, the CCAP administrator may consult with the parent to determine how the hours will be allocated. The CCAP administrator shall not be required to cancel a certificate that is already in effect.

**(f) Parent Fee and Financial Responsibilities**

- (1) The parent is responsible for all costs not reimbursed by CCAP on behalf of the parent. In addition, families with earnings or self-employment income shall be responsible for paying a portion of the authorized cost of care based on a monthly sliding fee scale.
- (2) To determine the monthly fee, the family's gross countable annual income shall be compared to the state median income standard for the family size as promulgated annually by the Department of Health and Human Services. The fee shall be equal to the following percentage of the family's gross countable income:
  - (A) for families with income below twenty percent of the SMI, two percent;
  - (B) for families with income of twenty percent to less than thirty percent of the SMI, four percent;
  - (C) for families with income of thirty percent to less than forty percent of the SMI, six percent;
  - (D) for families with income of forty percent to less than fifty percent of the SMI, eight percent; and
  - (E) for families with income of fifty percent of SMI to less than seventy-five percent of SMI, ten percent.
- (3) The fee may be rounded to the nearest whole dollar amount and applied against the approved cost of care as determined in subsection (a) of this section.
- (4) The fee shall be allocated to the youngest child first or in a manner that will avoid the need to allocate a portion of the fee across multiple certificates. If the fee exceeds the approved cost for a child, the remaining amount shall be allocated to the next oldest child until the full parent share has been allocated. If payment is terminated, the CCAP administrator shall

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apply the unallocated fee to the remaining active children or to the new certificate issued for the same child after giving appropriate notice to the parent and provider.

- (5) The family shall be ineligible if the monthly fee exceeds the approved cost for all of the eligible children.
- (6) The monthly fee shall be determined at the time of application and when a redetermination is conducted. The fee shall remain the same until the next redetermination, unless an ongoing decrease in income occurs that is expected to last for at least two or more months. The fee shall not be increased between redeterminations if the family's income increases, except to correct an error in the prior calculation. Families shall be subject to the gross income limit and must report increases in income exceeding fifty dollars per month even if the change does not immediately affect the fee.
- (7) Decreases in the monthly fee shall be implemented in the month following the month in which the change is reported if the change is verified timely. If the change is not verified timely, the decrease shall take effect in the month following the month in which the change is verified, unless good cause exist for not providing timely verification pursuant to subsection (e) of section 17b-749-06 of the Regulations of Connecticut State Agencies.
- (8) Parents shall be responsible for paying the fee to the provider. The family's eligibility shall not be affected if the fee is not paid to the provider.

**(g) Compliance with Applicable Labor and Tax Laws for In-Home Care**

Parents shall be responsible for compliance with applicable laws governing in-home domestic services. The CCAP administrator may withhold the parent's share of any mandated unemployment compensation, Social Security or Medicare taxes from payments issued to an in-home provider to the extent that benefits are paid to the in-home provider instead of the parent.

**Sec. 17b-749-14. Certificates of Payment**

**(a) Authorizing Payments**

- (1) The CCAP administrator shall determine payment eligibility at the time assistance is granted if the information needed to enroll the provider was submitted with the application. If the information needed to determine payment eligibility was not submitted with the application, payment eligibility shall be determined within ten days of the date the completed child care agreement form and other information needed to determine payment eligibility is received.
- (2) The CCAP administrator shall issue a certificate of payment to the parent and the provider if payment is approved. The certificate of payment is evidence of payment eligibility. Certificates of payment are issued for a particular child, provider and location of care, number of hours of care and for a specified period. Child care services provided outside the scope of the certificate are not eligible for payment by CCAP. A certificate of payment is not considered a grant or contract between the department and the child care provider.
- (3) Certificates of payment shall include the names of the parent, the child and the provider, the number of authorized hours of care, the certificate authorization period, the maximum approved cost, the monthly fee where applicable, the approved payment amount and the payment authorization period.

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- (4) Certificates of payment shall be issued even when the authorized payment is zero due to the application of the monthly fee, provided another child is eligible to receive a payment.

**(b) Payment Authorization Period**

- (1) Payment is limited to child care services provided between the start and end dates of the certificate of payment. The payment authorization period shall not exceed six months for any individual certificate.
- (2) Payments may be authorized for up to ten days prior to the start of an activity if the parent is required to pay for services before the activity starts to secure a child care slot with a licensed provider. Payment is authorized prior to the start of the activity only if the slot would otherwise be filled because of a lack of vacancies in the program. Payments shall not be authorized in advance of the activity if care is given by an unlicensed provider.
- (3) For families newly approved for participation in the CCAP program, the payment start date shall be the later of the following dates:
- (A) the date the family becomes eligible for the program pursuant to subsection (g) of section 17b-749-09 of the Regulations of Connecticut State Agencies;
- (B) the date child care services begin; or
- (C) fifteen days prior to the date the completed child care agreement is submitted to the CCAP administrator if the application was granted without an approved provider for the child.
- (4) For active families, the payment start date shall be the applicable date specified in section 17b-749-19 of the Regulations of Connecticut State Agencies.

**(c) Payment End Date**

- (1) Eligibility for payment terminates automatically as of the date printed on the certificate of payment. Additional notice is not required.
- (2) A certificate of payment shall be cancelled prior to the date indicated on the certificate under the following circumstances:
- (A) if the family or child becomes ineligible for CCAP;
- (B) if the child care provider becomes ineligible for CCAP; or
- (C) if changes in household circumstances, the activity schedule or provider arrangements require recalculation of the benefit.
- (3) Notice shall be given pursuant to the requirements of subsection (c) of section 17b-749-07 of the Regulations of Connecticut State Agencies.
- (4) Payment eligibility shall end on the earlier of the following dates:
- (A) the date specified on the certificate of payment;

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- (B) the last day services are provided;
- (C) six calendar months from the start of the payment authorization period, but not later than the last day of the month family is scheduled for redetermination;
- (D) the day the ten day advance notice of adverse action expires; or
- (E) the date the notice of adverse action is issued if advance notice is not required.

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**Sec. 17b-749-15. Payment Process**

**(a) Monthly Invoices**

- (1) Payments shall be post-paid on a monthly basis. Payments are considered assistance to the parent, not assistance to the provider.
- (2) The CCAP administrator shall issue a monthly invoice to the provider by the first day following the end of the service month or at the time the certificate of payment is issued to the provider for a retroactive period of payment eligibility.
- (3) Providers shall return the completed invoice. By submitting the invoice, the provider attests to the services performed and the actual amount charged to the parent. The parent may also be required to sign the invoice as confirmation of the amount and cost of services performed. Invoices shall be submitted after the end of the service month. The provider shall have one hundred twenty days from the end of the service month or from the date the CCAP administrator issued the invoice to return the invoice to the department, whichever is later. Invoices submitted more than one hundred twenty days after the end of the service month shall not be paid unless the invoice is submitted late due to a CCAP administrative error or delay.
- (4) The completed invoice shall reflect the provider's actual charges and shall be signed and dated by the provider. Weekly charges shall be converted to an average monthly amount by multiplying by a factor of four and three tenths. Providers shall also report attendance or other information as required by the CCAP administrator. The parent may be required to co-sign the invoice for all or specific types of child care settings.
- (5) Payment shall be issued within fifteen days of the date the properly completed invoice is submitted to the CCAP administrator.

**(b) Payment Calculations**

- (1) Payments for the service month shall be calculated based upon submission of the completed invoice. The amount of the CCAP payment shall be determined by adding or subtracting the amounts listed in subdivisions (2) and (3) of this subsection to the lesser of the following amounts:
  - (A) the approved cost of care calculated in subdivision (a)(3) of section 17b-749-13 of the Regulations of Connecticut State Agencies; plus
  - (B) any supplemental payments authorized for the provider under subsection (a) and subdivision (b)(3) of section 17b-749-16 of the Regulations of Connecticut State Agencies; or
  - (C) the provider's actual charges for the service month.
- (2) Incentives for accreditation and professional development authorized under subsection (d) of section 17b-749-13 of the Regulations of Connecticut State Agencies that are paid as a percentage increase in the payment shall be added to the amount calculated in subdivision (1) of this subsection. Lump sum and flat rate incentives may be issued together with the regular monthly payment or paid separately.

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- (3) The allocated monthly fee determined in subsection (f) of section 17b-749-13 of the Regulations of Connecticut State Agencies and any reductions due to the recoupment of an overpayment or mandated withholding shall be deducted from the sum of the amounts calculated in subdivisions (1) and (2) of this subsection. The resulting total shall be the CCAP payment amount. Payments shall be prorated if the child is eligible for payment for only part of the month. Parents shall be responsible for any costs not covered by CCAP.

**(c) Payee**

- (1) Unless otherwise specified in this section, benefit payments shall be made to the order of the child care provider or to the provider's fiduciary if the provider is subcontractor or part of a network of child care providers. Benefit payments shall be mailed to the provider's home or business address or issued through direct deposit, except that the department shall have the option of paying the parent directly for care that is provided in the child's own home. In such cases, the benefit payment shall be issued to the parent's home address. If the department elects to make benefit payments through direct deposit, parents and providers shall cooperate in establishing a bank account as a condition of payment eligibility.
- (2) Benefit payments issued by mail may be sent to a post office box address under the following conditions:
- (A) if the provider is not a relative or in-home provider, and the provider's business address is a post office box; or
- (B) if the parent or provider has submitted adequate verification of residence and the postal authority confirms that mail is not delivered to the home address.
- (3) Benefit payments may be issued to an alternate payee under the following conditions if the individual acting on the behalf of the provider can verify that services were provided:
- (A) if the provider is deceased at the time the payment is issued, payment shall be issued to the fiduciary of the provider's estate appointed by the probate court; or
- (B) if the provider becomes incapacitated or incompetent, payment shall be issued to a conservator appointed by probate court or other individual acting with power of attorney.
- (4) Benefit payments may be issued to the parent on an exception basis if an administrative error caused payment to be delayed for three or more months and the parent was required to pay the provider for the full cost of care while waiting for the department to correct the error. The parent and provider shall be required to verify that the parent has already reimbursed the provider for the services and that payment should be remitted to the parent rather than the provider.

**(d) Stale Dated Checks**

Checks issued as payment for child care services shall become void if they are not cashed after sixty days.

**(e) Lost, Stolen or Destroyed Checks**

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- (1) The payee may request replacement of a lost, stolen or destroyed check within ninety days of the date the original check was issued. If the CCAP administrator determines that the original check was signed or cashed by the provider, the parent or a member of the family, no replacement check shall be issued. Payments issued through direct deposit shall not be replaced under any conditions.
- (2) The payee shall be required to submit a notarized affidavit using a form specified by the CCAP administrator prior to replacing the lost, stolen or destroyed check, unless the check has been returned and has not been transacted. The payee shall also file a police report if requested by the CCAP administrator, and cooperate with any investigations conducted by the department or the police.
- (3) The CCAP administrator may withhold replacement checks for up to fourteen days from the date the affidavit is submitted if payment of the original check could not be stopped or if the original check has not been recovered or has been cashed. In the event of an ongoing investigation, the replacement check may be withheld indefinitely pending completion of the investigation.

**Sec. 17b-749-16. Supplemental Payments**

**(a) Supplements for Additional Hours of Care**

- (1) Parents shall be entitled to request a supplemental payment for increased care with the same provider when the child care needs temporarily exceed the authorized hours of care reflected on the certificate by more than twenty hours in a calendar month as the result of the following circumstances and the parent is charged for the additional hours:
  - (A) school closes for vacation or other reasons;
  - (B) the child is required to attend child care instead of school for three or more consecutive days due to illness or other reasons;
  - (C) there is a temporary increase in work hours or the hours of an employment services activity; or
  - (D) there is a temporary change in the availability of a parent who usually provides care.
- (2) Supplemental payments for the additional hours of child care with the same provider shall be approved if all of the following conditions are satisfied:
  - (A) the additional hours of care needed exceed the authorized hours as determined in subsection (b) of section 17b-749-13 of the Regulations of Connecticut State Agencies by more than twenty hours in a calendar month; and
  - (B) the hours of care fall within the work or employment services activity schedule including travel time; and
  - (C) the hours do not coincide with hours covered by an existing certificate of payment; and
  - (D) the additional charges reflect the provider's customary policy for all children attending the program.

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- (3) In addition to supplemental payments authorized under subdivision (1) of this subsection, the CCAP administrator may approve payments for a temporary alternate child care provider for up to twenty hours in a calendar month if the parent is required to use a different provider for the following reasons:
- (A) the child does not attend school due to illness or other reasons and the child's regular provider cannot provide the care;
- (B) a temporary increase in work hours or the hours of the employment services activity that fall outside the normal operating hours of the child's regular provider; or
- (C) during holiday vacations or periods during which the child's normal provider is closed or does not offer care.
- (4) The parent shall submit a child care agreement form for the alternate provider and have the provider enrolled pursuant to the requirements of section 17b-749-12 of the Regulations of Connecticut State Agencies.
- (5) In any calendar month, the parent shall be responsible for all costs associated with the first twenty hours of additional care. Payment shall be authorized only for the additional hours of care with the same or alternate provider that exceed twenty hours separately or in combination. The additional hours may be rounded to the nearest half hour.
- (6) The amount of the supplement shall be calculated by multiplying the additional needs in excess of the twenty hours by the special hourly supplemental payment rate. The hourly supplemental payment rate shall be the weekly payment rate for full-time care established in subdivision (c) of section 17b-749-13 of the Regulations of Connecticut State agencies, divided by forty. The payment amount shall be the lower of the calculated amount or the amount of the provider's additional charges.
- (7) The total number of regularly authorized hours plus the additional hours shall not exceed sixty-five hours per calendar week or two hundred eighty hours in a calendar month. Once the approved additional hours of care exceed twenty hours, the additional hours approved for that month shall be eligible for payment.
- (8) Parents shall request supplemental payments by contacting the CCAP administrator by phone or in writing, except during periods of extended school vacations where the CCAP administrator shall have the discretion to authorize payments based on information submitted by the provider for a school age child already in the provider's care. To be eligible for payment, all requests for supplemental payments shall be made within thirty days following the end of the month in which the additional hours were provided. The parent and provider shall submit any verification requested as a condition of payment eligibility. The CCAP administrator shall have thirty days to process the request for a supplemental payment once all required documentation has been submitted.

**(b) Supplemental Payments for Children with Special Needs**

- (1) Parents shall be entitled to request additional payments for an eligible child with special needs pursuant to section 17b-749-11 of the Regulations of Connecticut State Agencies. Supplemental payments shall be approved to the extent the provider cannot serve the child in his or her regular program after implementing reasonable accommodations as may be required by the Americans with Disabilities Act, 42 U.S.C. § 12132 *et. seq.*



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- (2) Payments shall not be made for services provided by a program operated by any state or local government agency. The parent shall apply and take steps necessary to receive assistance from such programs upon the request of the CCAP administrator. The request for a special needs supplement shall be denied if the parent does not apply and take the necessary steps to obtain services.
- (3) An increase in the payment rate may be granted if the child's condition requires a marked increase in the amount of care or supervision needed or special care, including but not limited to the use of special equipment, assistance with movement, feeding, toileting or the administration of medications that require specialized procedures. The child's special needs shall be clearly documented to the satisfaction of the CCAP administrator by an Individualized Education Program (IEP), or an Individualized Family Service Plan (IFSP), the child's physician or another certified health care professional who is directly involved with the child. Additional documentation may be required as necessary to establish the need for special care in the child care setting. The amount of the increase shall be equal to fifteen percent of the payment rate for a child with no special needs as determined in subsection (c) of section 17b-749-13 of the Regulations of Connecticut State Agencies. The supplement shall be included in the approved cost of care as determined in subsection (a) of section 17b-749-13 of the Regulations of Connecticut State Agencies for the purpose of calculating the monthly payment.
- (4) A child with special needs may be eligible for supplemental payments for identifiable costs charged to the parent by the provider for services specifically associated with the provision of child care to the individual child. Payments for identifiable costs shall be in addition to any increase in the payment rate authorized pursuant to subdivision (3) of this subsection. Services and costs that may be eligible for payment include, but are not limited to the following:
- (A) rental of equipment needed to provide appropriate care, such as maintenance apparatus that assists in breathing, feeding or toileting as prescribed by a therapist, physician or other certified specialist and that is not transportable and cannot be provided by the parent;
  - (B) special furniture, materials or supplies used on a routine basis as prescribed by a therapist, physician or other certified specialist and that are not provided by the parent; and
  - (C) a personal child care attendant for prescribed periods;
  - (D) specialized training needed to care for the child that is not otherwise available without charge.
- (5) Supplemental payments for identifiable costs shall not be approved for special transportation services, special education, therapeutic services or other costs not directly related to the provision of child care, the cost of diapers, supplies or other items provided by the parent, facility improvements, equipment, materials or expenses for services or accommodations that are or would be available to all children enrolled in the facility and that cannot be categorized as assistance to the parent.
- (6) The maximum payment for identifiable costs in any month shall not exceed twenty percent of the standard payment rate for a child of the same age and approved hours of care with no

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special needs as determined in subsection (c) of section 17b-749-13 of the Regulations of Connecticut State Agencies. Any costs incurred during a month that exceed twenty percent of such rate shall be the responsibility of the parent and shall not carry over as billable charges to the department in subsequent months. The commissioner may disapprove payments for identifiable costs where the cost of supporting the child in the child care setting is determined unreasonable or excessive relative to services available from other similar providers, vendors or through other means.

- (7) The parent and provider shall submit a written request to the CCAP administrator that includes a description of the additional services, why they are needed, verification of the cost of the services and the payment schedule where applicable. The request shall be co-signed by the parent.

**Section 17b-749-17. Payment Adjustments**

**(a) Child's Attendance**

- (1) Occasional absences from care shall not affect the amount of the payment unless the provider charges less due to the reduced hours. Providers shall, however, report the number of days the child attended care and any reduction in charges due to absence. Providers shall charge parents in accordance with the provider's customary attendance policy for children who do not receive CCAP assistance.
- (2) Parents may be required to document the reason the child did not attend care if the child is frequently absent for twenty-five percent or more of the scheduled days. Continued absences equal to or exceeding the twenty-five percent threshold may cause the approved hours of care to be recalculated based on the child's utilization pattern if the absences continue for two or more months. The approved hours shall be readjusted if the condition that caused the recurring absences changes.

**(b) Liens, Overpayment Recoupments and Child Support Wage Executions**

The CCAP administrator shall reduce payments as necessary to fulfill legal responsibilities related to properly filed liens, overpayment recoupments and child support wage executions. Overpayments shall be recouped in accordance with the requirements of section 17b-749-20 of the Regulations of Connecticut State Agencies.

**(c) Discretion to Withhold for Employment Related Obligations**

- (1) Parents shall be informed that there may be state and federal requirements to withhold employment related obligations from wages paid by parents to in-home child care providers to the extent the provider is not considered to be self-employed or a self-contractor, and is considered to be the employee of the parent.
- (2) The CCAP administrator may, if requested by commissioner, deduct amounts for employment related obligations from benefit payments for in-home child care services if parent of the child for whom the benefit is paid is determined to be the employer of the provider. Any amounts withheld shall be properly deposited with the appropriate federal or state agency. Parents and providers shall receive notice of all deductions made in accordance with this subdivision.

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**Sec. 17b-749-18. Continued Eligibility**

**(a) Optional Monthly Verification of Participation in Activities**

- (1) The commissioner may require parents to submit verification of their activity schedules monthly. The decision to require more frequent verification of participation in activities shall be based on the following criteria:
  - (A) CCAP case error profiles; or
  - (B) whether the activity schedule or the parent's history of participation fluctuates in a manner that requires frequent or continuous monitoring.
- (2) Verification shall be due on the tenth day of each month. The requirement may be waived in the redetermination month based on verification submitted with the redetermination. Families not submitting verification by the end of the month shall become ineligible.
- (3) The CCAP administrator shall issue a reminder notice to all parents who did not submit verification by the tenth day of the month. The notice shall inform parents that assistance will be discontinued if the verification is not received by the last day of the month. Discontinued families who submit the required verification within ten days of the discontinuance date shall be reinstated retroactive to the date of discontinuance if continued eligibility is established.

**(b) Redeterminations**

- (1) Eligibility shall be redetermined at intervals not to exceed six months from the month of initial application or from the last redetermination. The CCAP administrator shall establish the length of the redetermination period based on the stability of family circumstances and may conduct unscheduled reviews due to anticipated changes in household circumstances. Eligibility shall terminate at the end of the redetermination month unless the redetermination is completed and the family is determined eligible.
- (2) Parents shall complete a new application using a form specified by the CCAP administrator and shall submit verification and have their redeterminations processed in the same manner as at the time of initial application. Parents shall not be required to re-verify circumstances that have already been verified and are not questionable or subject to change.
- (3) Parents and their child care provider(s) shall be notified of the redetermination between forty-five and sixty days prior to the last day of the redetermination month. Parents shall have a minimum of fifteen days from the date the redetermination form is mailed to return the form to the CCAP administrator. The redetermination form shall be due on the first day of the redetermination month.
- (4) Redeterminations submitted timely shall be processed by the end of the redetermination month. Redeterminations submitted after first day of the redetermination month shall be considered late and shall be processed in the same manner as a new application. The CCAP administrator shall have thirty days from the date the form is received to process a redetermination that is submitted late, unless processing is delayed in accordance with the requirements of subsection (c) of section 17b-749-09 of the Regulations of Connecticut State Agencies. Parents shall be issued a reminder notice if the redetermination is not submitted

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on time. The CCAP administrator shall give priority to processing redeterminations that are submitted late.

- (5) Families who submit redeterminations late, but by the tenth day of the redetermination month, shall not be assigned to the wait list if the program is closed to the family's priority group at the time the redetermination is processed. If eligible, the family shall be approved for participation. Families who are denied shall be entitled to have their redeterminations reopened in accordance with the requirements of subsection (e) of section 17b-749-09 of the Regulations of Connecticut State Agencies. Redeterminations that are denied and later reopened shall be granted retroactive to the first day of the month following the end of the prior redetermination period.
- (6) Parents and providers shall be notified of the results of the redetermination.

**Sec. 17b-749-19. Changes in Eligibility or Benefits**

**(a) Reporting and Processing Changes**

- (1) Parents shall report changes in household circumstances and child care arrangements to the CCAP administrator within ten days of the date of the change. Changes may be reported by phone, in writing, or electronically as authorized by the department.
- (2) Program and payment eligibility shall continue in accordance with the requirements of this section. Families shall remain eligible until the parent withdraws from the program or until the family no longer meets the eligibility requirements of the CCAP program. Providers shall remain eligible as long as they meet the requirements of section 17b-749-12 of the Regulations of Connecticut State Agencies.
- (3) Changes in eligibility or benefits shall be processed in accordance with the requirements of this section and sections 17b-749-02 to 17b-749-23 of the Regulations of Connecticut State Agencies, inclusive. Prompt action shall be taken to determine the affect of a change whenever the CCAP administrator becomes aware that a change has occurred. To be considered prompt, action shall be taken within ten days of the date of the CCAP administrator becomes aware of the change in circumstances.

**(b) Termination of Program Eligibility**

- (1) Eligibility for the program shall end if the family no longer meets the CCAP eligibility requirements, if eligibility cannot be established because the parent did not provide requested information or if the parent did not comply with the eligibility or quality control processes. Eligibility for the program shall end on the last day of the month in which the change occurs, unless advance notice is required pursuant to subsection (c) of section 17b-749-07 of the Regulations of Connecticut State Agencies. If advance notice is required, program eligibility shall end on the last day of the month in which the notice of adverse action expires.
- (2) Families who were granted assistance without an approved provider shall become ineligible for CCAP if they do not submit the information needed to determine payment eligibility for at least one child within thirty days pursuant to the requirements of subdivision (c)(4) of section 17b-749-09 of the Regulations of Connecticut State Agencies. Eligibility shall end at the end of the month in which the thirtieth day falls.

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**(c) Determinations of Provider Ineligibility by the Department**

- (1) Eligibility for payment shall end if the department determines that the child care provider does not meet the requirements specified in section 17b-749-12 of the Regulations of Connecticut State Agencies. Eligibility for payment shall terminate on the date the parent and provider are notified of the change. Any outstanding payments to the provider may be withheld pursuant to subdivision (c)(4) of section 17b-749-12 of the Regulations of Connecticut State Agencies.
- (2) A provider is considered ineligible as of the date the provider did not meet the eligibility requirements established for providers. Payments issued during a period when the provider was ineligible shall be considered overpayments and are subject to recoupment pursuant to the requirements of section 17b-749-20 of the Regulations of Connecticut State Agencies.
- (3) Parents shall be given thirty days from the date of notification to submit a child care agreement form for the new provider. Payment for the new provider may begin retroactive to the date the services started if the information needed to enroll the provider is submitted timely. If the information is not submitted timely, payment shall begin on the date the information is submitted or the date the services begin, whichever is later. Eligibility for the program shall end on the last day of the month in which the thirtieth day falls if the child care agreement form is not submitted by the end of that month and there are no other children in the family who are eligible for payment.

**(d) Decreasing Benefits or Terminating Payments**

- (1) Changes that cause payments to be reduced or terminated shall take effect on the following dates, unless otherwise specified in this section:
  - (A) the date the action is taken if advance notice is not required; or
  - (B) the day after the notice of adverse action expires if advance notice is required; or
  - (C) within ten days of the date of an administrative hearing decision if action was delayed pending the hearing, and the department's decision is upheld.
- (2) Increased fees shall take effective on the first day of the family's next redetermination period pursuant to subsection (f) of section 17b-749-13 of the Regulations of Connecticut State Agencies.
- (3) If benefits are terminated because a child reaches the maximum age limit for the program, payments shall end on last day of the month in which the child turns age thirteen, or age nineteen for a child with special needs. Eligibility shall continue for the family unless there are no other eligible children in the home.

**(e) Adding Children and Increasing Payments**

- (1) With the exception of benefit increases that are due to a reduction in the family fee, changes that result in increased payments or payment eligibility for a new child shall take effect on the date the change is reported if the change is verified timely. If the change is not verified timely, the change shall take effect on the date the change is verified unless good cause exists for not providing timely verification pursuant to subsection (e) of section 17b-749-06 of the Regulations of Connecticut State Agencies. The parent shall not be eligible for a

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supplemental payment to replace any benefits that would otherwise have been paid if the parent had submitted the verification timely.

- (2) Decreases in fees shall be implemented in accordance with the requirements of subsection (f) of section 17b-749-13 of the Regulations of Connecticut State Agencies.

**(f) Changing Providers**

- (1) Parents may change providers at any time. The certificate of payment for the current provider shall expire on the date services ended or the date the CCAP administrator issues written notice to the provider, whichever is earlier. Payments for the new provider shall not begin prior to the date the current certificate of payment expires. To avoid a lapse in coverage, parents shall report changes in providers to the CCAP administrator at least ten days in advance of the date of the change.
- (2) Parents who change providers shall be given fifteen days to submit a child care agreement form for the new provider. Eligibility shall terminate at the end of the month in which the fifteenth day falls if the child care agreement form is not submitted by the end of that month and there are no other children in the family who are eligible for payment. If the child care agreement form is submitted late but before eligibility is terminated, the change shall be effective on the date the form is submitted or the date services began, whichever is later. Good cause provisions shall not apply. If eligibility is terminated, the parent must reapply for the program.

**(g) Extended Program or Payment Eligibility**

- (1) Otherwise eligible families who timely report the loss or interruption of employment, an employment services activity or attendance in a high school program shall, upon request, be granted an extended period of program eligibility pursuant to the requirements of this subsection. To qualify, the parent shall report the change to the CCAP administrator within ten days of the date of the interruption without exception. Eligibility for payments during the extended eligibility period shall be determined separately in accordance with the requirements of subdivision (6) of this subsection.
- (2) If employment is terminated or unpaid leave is taken due to pregnancy, an additional four months of program eligibility shall be granted if the parent intends to return to work by the end of the four month period.
- (3) If employment is terminated or leave is taken due to an extended illness or other circumstances covered under the Family and Medical Leave Act, an additional three months of program eligibility shall be granted if the parent intends to return to work on a regular basis by the end of the three month period.
- (4) If the activity is interrupted when school closes for the summer vacation, an extended period of program eligibility shall be granted to cover the period of time school is closed.
- (5) In all other circumstances where a parent timely reports a temporary interruption in employment or an employment services activity, an additional month of program eligibility shall be granted under the following conditions:
- (A) if the parent is expected to resume the activity by the end of the month following the month in which the interruption occurred; or

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- (B) if the parent terminated employment and is actively seeking a new job or has received a bona fide offer of employment that is scheduled to begin by the end of the month following the month in which the prior activity ended; or
  - (C) if the parent is expected to begin a new employment services activity by the end of the month following the month in which the current activity ended and the parent continues to receive TFA cash assistance during this period; and
  - (D) if the parent is capable of participating in the activity.
- (6) Parents who meet the conditions specified in subdivision (5) of this subsection shall be eligible for payments during the period of extended eligibility if the parent verifies that payment is needed to prevent the loss of a slot in a school-based child care program or a licensed child care setting and the child continues to attend child care. Payments shall not be approved for families granted extended program eligibility pursuant to subdivisions (2) through (4) of this subsection, if the child does not attend care, or if care is given in a setting that is not school-based or licensed.
- (7) Otherwise eligible families who timely report the loss of the need for care during the summer while their children attend temporary no cost alternative child care, such as a summer camp, shall remain eligible for the program for up to three calendar months if assistance will be needed by the end of the summer period.

**(h) Changes during Extended School Vacations or Affecting the General Caseload**

The department may establish special procedures for processing changes that occur as the result of school vacation periods or other changes that affect the general caseload, including specific reporting deadlines, timeframes for processing changes and issuing payments. The CCAP administrator shall provide adequate notice to parents and providers of any actions they are required to complete under this subsection.

**Sec. 17b-749-20. Benefit Errors**

The CCAP administrator shall take prompt action in accordance with the requirements of this section whenever an error occurs that causes benefits to be underpaid or overpaid.

**(a) Underpayments and Overpayments**

- (1) Underpayments occur when the parent does not receive all the benefits to which the family is entitled due to an administrative error made by the department, the CCAP administrator or upon submission of satisfactory documentation of an error made by the Department of Labor or its designee for a family participating in an employment services activity. The evidence must clearly demonstrate that an administrative error occurred. Underpayments do not occur as the result errors caused by the family or the provider, except when a provider makes a billing error on an invoice and the CCAP administrator is notified of the error within thirty days of the date the payment is issued to the provider.
- (2) Overpayments occur whenever the amount paid exceeds the benefit that would have been paid if the payment had been calculated correctly based on accurate information that was reported, verified and acted on in a timely manner. The cause of each overpayment shall be

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classified as administrative, parent or provider caused. Parent and provider caused overpayments shall be further classified as intentional or unintentional.

- (3) No overpayment exists if the difference between the benefits paid on behalf of the family and the correct benefit amount is less than ten dollars in any month.

**(b) Administrative Errors**

- (1) An administrative error is an overpayment or an underpayment that is attributable solely to actions taken by the department, the CCAP administrator or the Department of Labor or its designee. Administrative errors include, but are not limited to the following types of errors:
- (A) errors caused by delays in processing applications or taking prompt action on changes that were reported timely;
  - (B) errors in determining eligibility, the benefit amount or the payment authorization period;
  - (C) data entry errors;
  - (D) errors caused by the incorrect application of state regulations, policy or procedures; and
  - (E) fraud committed by an individual who works for the CCAP program.

**(c) Errors Caused by Parents and Providers**

- (1) Overpayments that are not due to administrative error shall be classified as parent or provider caused.
- (2) Overpayments caused by the parent include, but are not limited to errors caused by reporting false or inaccurate information, delays in reporting changes in household circumstances or provider arrangements, or excess payments made as the result of a request to continue benefits pending an administrative hearing.
- (3) Overpayments caused by the provider include, but are not limited to the following types of errors:
- (A) inaccurate reporting of information concerning licensing status, age or other provider eligibility requirements;
  - (B) inaccurate reporting of the provider's relationship to the child or the location at which care is given;
  - (C) inaccurate reporting of household circumstances;
  - (D) committing an illegal act, such as cashing a replacement check after falsely claiming that the original check was lost, stolen or destroyed;
  - (E) inaccurate reporting of actual charges, attendance or dates of service; and
  - (F) any other false claim for goods or services provided as enumerated in section 53a-290 of the Connecticut General Statutes.



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- (4) The error shall be classified as both parent and provider caused if the parent and the provider both had knowledge and actively participated in the action that caused the overpayment to occur.
- (5) The CCAP administrator shall make a preliminary determination of whether the overpayment was intentional or unintentional pursuant to guidelines established by the department. Overpayments shall be classified as intentional if the parent or provider knowingly withheld or provided false information on matters affecting eligibility, benefits or a claim for services. Generally, an overpayment shall be considered unintentional under the following circumstances:
- (A) if there was clearly no intent to commit fraud or to obtain benefits or payments under false pretenses;
- (B) if the parent or provider did not purposefully withhold or provide erroneous information;
- (C) if illness, a family emergency or other good cause reasons exist for not reporting information timely or accurately; or
- (D) if the error was due to a delay in taking action as the result of an administrative hearing request.
- (6) Where the CCAP administrator makes a preliminary determination that a parent or provider may have committed fraud, the case may be referred as appropriate to the Office of the Attorney General, the Office of the Chief State's Attorney or for an administrative disqualification hearing. Administrative disqualification hearings shall be conducted in accordance with the requirements of section 17b-749-22 of the Regulations of Connecticut State Agencies.
- (7) A final determination that an error was intentional shall be made only as the result of a decision by a court or administrative hearing official, or if the parent waives his or her right to an administrative hearing. If the error was intentional, the CCAP administrator shall disqualify the family or the provider from participating in CCAP for the period specified in subsection (h) of this section.

**(d) Calculating the Error**

- (1) Benefit errors shall be calculated by comparing the benefits paid during the applicable benefit period to the payment that would have been payable if eligibility and payment had been calculated correctly. The difference between the correct benefit and the amount actually paid shall be the amount of the error.
- (2) If benefits are underpaid due to an administrative error, the amount owed shall be paid within sixty days of the date the error was discovered, unless information needed to calculate the correct payment is pending or if the family or provider has an outstanding overpayment. The amount of the underpayment shall first be used to offset an outstanding overpayment.
- (3) Underpayments are corrected regardless of whether the family's case is active or closed. The parent and provider shall be notified of the determination.

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- (4) For overpayments caused by the parent or provider that are unintentional, the error shall begin on the first day of the month following the month in which the circumstances that caused the overpayment occurred.
- (5) For administrative overpayments, the overpayment shall begin on the first day of the month following the month in which the circumstances that caused the overpayment occurred, unless action would have been taken after that date due to a required period of advance notice. If advance notice would have been required, the overpayment shall begin on the day after the period of notice of adverse action would have expired. To determine this date, the CCAP administrator shall assume that the notice of adverse action would have been issued on the day sufficient information existed to warrant taking the proposed action.
- (6) For intentional errors, the overpayment shall begin on the date the circumstances that caused the overpayment occurred without regard to advance notice requirements. If the CCAP administrator fails to take timely action to correct the overpayment following discovery of the error, any benefits overpaid as the result of the administrative delay shall be considered administrative error.

**(e) Responsibility for Repayment**

- (1) The parent shall be responsible for repaying the overpayment unless the overpayment was caused solely by the provider. If the parent is responsible for the overpayment and recoupment is initiated by reducing the parent's monthly benefits, the provider may require the parent to pay the difference between the regular payment and the reduced amount.
- (2) If the provider is solely responsible for the error, the provider shall repay the overpayment. Providers shall not increase charges for children subsidized by CCAP to compensate for the loss of income due to the recoupment of an overpayment caused by the provider.

**(f) Notice of Overpayment**

The party responsible for the overpayment shall be provided with advance notice of the overpayment, the amount and repayment options. The responsible party shall be asked to select a repayment method as outlined in subsection (g) of this section. If the parent is responsible for repaying the overpayment, the provider shall be notified in advance of the proposed change in benefits. Written notice to the parent is not required if the provider is responsible for repaying the overpayment.

**(g) Methods of repayment**

- (1) If the recoupment method and rate has not been set by a court, the CCAP administrator shall first attempt to recover overpayments by a lump sum repayment or by offsetting the amount of the overpayment against any benefits owed as the result of an underpayment. If the parent or provider does not agree to a lump sum repayment, the CCAP administrator shall reduce the parent's or the provider's ongoing payments by the lesser of the following amounts until the overpayment has been recouped:
  - (A) ten percent of the parent's monthly benefits or the provider's monthly payment if the overpayment was due to an administrative or unintentional error; or
  - (B) twenty-five percent of the parent's monthly benefits or the provider's monthly payment if the overpayment was due to an intentional error.

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- (2) The percentage reduction shall be applied to each child for whom the parent receives CCAP assistance or who are in the provider's care. Recoupment shall be initiated automatically if the parent or provider does not respond to the advance notice.
- (3) If the parent or provider do not actively receive CCAP payments, the department shall attempt to recover the overpayment by establishing a monthly billing schedule.
- (4) If the parent or provider does not comply with the repayment plan, the commissioner may, to the extent allowed by law, take whatever action deemed appropriate to recover such overpayment.

**(h) Disqualification Penalties in Fraud Cases**

- (1) Parents who are overpaid due to an intentional error may be referred to an administrative disqualification hearing or to a court of appropriate jurisdiction if the CCAP administrator determines that the parent may have committed fraud. Child care providers do not have the right to an administrative hearing.
- (2) The CCAP administrator shall impose a disqualification penalty on the family if the parent is found to have knowingly committed fraud in connection with obtaining benefits from CCAP. A penalty shall be imposed only after a final determination that the parent committed fraud has been made pursuant to the requirements of subsection (a) of section 17b-749-22 of the Regulations of Connecticut State Agencies.
- (3) For the first finding of fraud committed by a parent, the period of ineligibility shall be three months from the date the notice of disqualification is issued or from the date the family's benefits are discontinued, whichever is later. For the second finding of fraud, the disqualification period shall increase to six months. For any subsequent finding, the disqualification period shall be one year for each occurrence.
- (4) Child care providers convicted of committing vendor fraud by an appropriate court of jurisdiction shall be permanently disqualified from participation pursuant to section 17b-99 of Connecticut General Statutes.
- (5) Parents may reapply and be approved for assistance at the conclusion of the disqualification period.

**Sec. 17b-749-21. Administrative Hearings**

**(a) Hearing Authority**

Administrative Hearings are conducted by the department in accordance with the provisions of Chapter 54 of the Connecticut General Statutes.

**(b) Right to an Administrative Hearing**

- (1) Parents shall have the right to request an administrative hearing if they are aggrieved by an action taken by the department, except in situations specified in subdivision (d)(2) of this section. Child care providers do not have the right to an administrative hearing. A parent may request an administrative hearing if the parent is aggrieved by an action taken against a

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child care provider to the extent such action was not the result of a decision by the Department of Public Health to deny, suspend or revoke the provider's license.

- (2) The request for an administrative hearing shall be made within sixty days of the date the parent was provided with written notice of the action.

**(c) Aid Continuing Pending a Hearing**

- (1) Action to discontinue or reduce benefits shall be delayed until the administrative hearing decision is rendered under the following circumstances:

- (A) if the parent requests a hearing within ten calendar days of the date the notice of adverse action is issued; and
- (B) if the action being taken is subject to an administrative hearing; and
- (C) if the action does not involve termination of payments due to the ineligibility of the child care provider; and
- (D) if the parent requests benefits to continue.

- (2) If the administrative hearing officer rules in favor of the Department, any benefits paid in error as the result of the delayed action shall be subject to recoupment.

**(d) Reasons for Requesting an Administrative Hearing**

- (1) An administrative hearing may be requested if the family disagrees with any of the following actions, except where otherwise specified in subdivision (2) of this subsection:

- (A) an application is denied or not acted upon timely;
- (B) benefits are denied, reduced, discontinued;
- (C) the receipt of benefits is adversely affected in any way;
- (D) an eligibility requirement is imposed incorrectly;
- (E) the amount of the income, fee or benefit calculation;
- (F) disapproval of an in-state child care provider for a reason not related to a violation of the Department of Public Health licensing requirements.
- (G) a request for replacement of a lost, stolen or destroyed check was refused; or
- (H) a requested good cause exemption of the child support requirements was denied.

- (2) Families shall not be entitled to an administrative hearing for the following actions:

- (A) when changes required by state or federal law are implemented that affect the general caseload or a specific priority group;

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- (B) if benefits are affected due to a change in the sliding fee scale or changes in the regional payment rates;
- (C) if the commissioner opens or closes the wait list for a specific priority group or removes a priority group from the wait list;
- (D) if the commissioner denies payment for provider located in an adjoining state; or
- (E) if the CCAP program is closed or a pro rata reduction in benefits is imposed due to funding limitations.

**(e) Notice Requirements**

- (1) Parents shall be informed in writing of the following information any time action is taken to grant, deny, discontinue or modify benefits:
  - (A) the right to request an administrative hearing and the method by which an administrative hearing can be requested;
  - (B) that action may be delayed if a hearing is requested within ten days of the date the notice of adverse action is issued, and that any benefits paid in error as the result of the delay will be subject to recoupment if hearing office upholds the department's decision;
  - (C) that the family may represent itself or be represented by legal counsel, a relative, friend, or other spokesperson;
  - (D) the right to request resolution of the issue through someone not directly involved with the parent's case; and
  - (E) the availability of legal services and the toll free telephone number of statewide legal service organizations.
- (2) The administrative hearing official notifies the parent and the parent's representative of the following information:
  - (A) the time and place of the administrative hearing;
  - (B) the department's contact person;
  - (C) circumstances under which the hearing request may be dismissed;
  - (D) administrative hearing procedures; and
  - (E) the right to examine the case record prior to and during the administrative hearing.
- (3) The CCAP administrator shall prepare a written summary of actions over which the parent is aggrieved and the reason for taking the action. The summary shall be distributed at least three business days prior to the date of the scheduled hearing to the administrative hearing officer and the parent or the parent's representative.

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**(f) Scheduling and Location of the Administrative Hearing**

- (1) The department schedules administrative hearings within thirty days from the date the request is received. One continuance shall be granted to the parent for good cause as determined by the administrative hearing official. Additional continuances may be granted at the discretion of the administrative hearing official. The deadline for issuing a decision shall be extended by the length of the continuance.
- (2) If the issue is resolved prior to the administrative hearing, the hearing shall be held unless the parent or his or her representative withdraws the request in writing or through other communication with the administrative hearing official.

**(g) Delegation of Authority to an Administrative Hearing Official**

- (1) The commissioner may delegate authority to conduct administrative hearings, find facts, reach conclusions and make final decisions on his behalf to a discrete unit of the department or other person not personally involved in the decision that is the subject of the administrative hearing. The commissioner may limit the scope of the delegated authority in a directive that the authority is limited to conducting an administrative hearing.
- (2) The administrative hearing official shall be an employee of the department who has not personally acted as an investigator in the contested case, including an eligibility supervisor, caseworker or other individual with a personal interest in the case. The role of the administrative hearing official consists of scheduling the hearing and conducting the hearing, facilitating the hearing process and rendering a decision on behalf of the department.
- (3) If the administrative hearing issue concerns a medical condition, disability or a child with special needs, the hearing official may order an independent medical assessment or evaluation from a source mutually satisfactory to the parent and the department. The department shall be responsible for paying for the independent assessment.

**(h) Rights at an Administrative Hearing**

- (1) Subject to the limitations specified in subsection (e) of section 17b-749-02 of the Regulations of Connecticut State Agencies, the parent or his or her representative has the right to examine the case record and all documents to be used by the department at the administrative hearing before and during the administrative hearing.
- (2) The parent may present his or her case or have it presented by legal counsel or another person representing the family.
- (3) The parent shall have the opportunity to question or refute testimony, to present evidence, to confront and cross-examine adverse witnesses or to bring witnesses.
- (4) The parent shall have the opportunity to present an argument without undue interference.

**(i) Attendance at the Hearing**

- (1) The hearing shall be attended by an individual representing the department, the parent or the parent's representative pursuant to section 17b-60 of the Connecticut General Statutes.

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- (2) Both parties may call witnesses, except the administrative hearing official may restrict attendance when necessary to protect confidentiality.

**(j) The Administrative Hearing Record**

- (1) The administrative hearing record consists of the hearing request, notices issued by the administrative hearing official, the transcript or recording of testimony, exhibits, all papers and requests filed in the proceeding and the hearing decision.
- (2) The administrative hearing record shall be made available to the parent at a reasonable time for copying and inspection.

**(k) Hearing Decision**

- (1) A decision shall be rendered within sixty days of the close of the hearing record based exclusively on evidence introduced at the hearing and contained in the hearing record.
- (2) The decision shall be issued in writing to the parent, the parent's representative and to the CCAP administrator.
- (3) The decision is considered binding upon the department, unless the department elects to reconsider the decision as described in subsection (l) of this section.
- (4) The decision shall serve as a final resolution to the issue unless the parent appeals to a court of jurisdiction within forty five days of the date the decision is issued pursuant to subsection (n) of this section.
- (5) The hearing record shall be available for public inspection and copying, subject to the limitations of subsection (e) of 17b-749-02 of the Regulations of Connecticut State Agencies.

**(l) Reconsideration of the Decision**

- (1) The parent or his or her representative shall have fifteen days from the date the hearing decision is issued to request the commissioner or his designee to reconsider the decision. Pursuant to section 4-181a of the Connecticut General Statutes, an administrative hearing decision shall warrant reconsideration if an error or fact of law should be corrected, if new evidence is discovered that materially affects the merits of the case which was not presented at the administrative hearing for good reason or if there is other good cause for reconsidering the decision.
- (2) The commissioner or his designee shall have twenty-five days from the date the request is received by him to decide whether reconsideration is warranted.
- (3) The Department may on its own initiative decide to reconsider the decision within forty days of the date of the decision was issued.
- (4) If reconsideration is warranted, the parent and his or her representative shall be notified that the department plans to conduct additional proceedings as may be necessary to render a new decision.

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**(m) Implementation of Administrative Hearing Decision**

- (1) The department shall implement the appropriate changes or corrections within the timeliness standards for processing changes, unless otherwise specified by the administrative hearing official. Any benefits owed to the family shall be promptly restored.
- (2) If the department is upheld, action shall be taken to recover any benefits that the family may have improperly received.

**(n) Appealing the Decision**

- (1) The parent or his or her representative has the right to appeal an administrative hearing decision to superior court in accordance with the requirements of section 17b-61 of the Connecticut General Statutes. The appeal must be served and filed within forty-five days of the date the administrative hearing official mailed the notice of a decision, unless there is good cause to request an extension.
- (2) The parent or his representative must follow all appeal procedures described in state law, including the requirement to serve a copy of its petition to appeal upon the commissioner or upon the attorney general within forty-five days from the date the administrative hearing decision is mailed.

**Sec. 17b-749-22. Administrative Disqualification Hearings****(a) Hearing Process**

- (1) The department shall have the option of referring a case for an administrative disqualification hearing if the CCAP administrator determines that an overpayment was caused as the result of an intentional error by the parent to commit fraud in obtaining benefits from CCAP. The purpose of the administrative disqualification hearing is to determine if the error was intentional. The standard of proof that the administrative hearing officer shall use in making his or her decision is by clear and convincing evidence. The administrative disqualification hearing process is conducted in the same manner as an administrative hearing and is subject to requirements of section 17b-749-21 of the Regulations of Connecticut State Agencies, except as otherwise stated in this section.
- (2) The CCAP administrator shall treat overpayments caused by the parent as unintentional until an appropriate authority has confirmed the preliminary decision that the error was intentional. The CCAP administrator shall not impose a disqualification penalty until the decision that the error was intentional becomes final. The decision that the error was intentional shall become final under the following conditions:
  - (A) if a court of competent jurisdiction finds that the parent has committed fraud or grants accelerated rehabilitation; or
  - (B) if an administrative hearing officer determines that the error was intentional; or
  - (C) if the parent waives his or her right to an administrative disqualification hearing.
- (3) If the administrative hearing officer determines that the error was not intentional, the overpayment shall be treated as unintentional or as an administrative error based on the results of the hearing. If the parent is found to have committed an intentional error, the



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family shall be subject to a disqualification penalty as specified in subsection (h) of section 17b-749-20 of the Regulations of Connecticut State Agencies.

**(b) Cases Referred for Administrative Disqualification Hearings**

- (1) A parent's case may be referred for an administrative disqualification hearing under the following circumstances:
  - (A) if a preliminary determination has been made that the parent knowingly and willfully intended to commit fraud to obtain benefits from CCAP; and
  - (B) if the case is not being referred to the state police, a prosecuting authority or to the attorney general; or
  - (C) if the case was referred and has been rejected for prosecution.
- (2) The parent's case shall not be referred for an administrative disqualification hearing while the case is under consideration for referral to the state police, a prosecuting authority or the attorney general, or if a court of jurisdiction has determined that the parent is not guilty or has dismissed the case.

**(c) Notification**

- (1) The administrative hearing official notifies the parent in writing that an administrative disqualification hearing has been scheduled. The notice shall be sent to the parent by certified mail at least thirty days prior to the scheduled hearing date. Notice shall be assumed to have been given unless the certified mail return receipt is returned stamped as "undeliverable as addressed" or "forwarding address has expired."
- (2) The notice shall contain the following information:
  - (A) the time, date, and place of the hearing;
  - (B) a statement of the reasons for the hearing;
  - (C) a summary of the evidence upon which the hearing is being held and how and where the evidence can be examined;
  - (D) a warning that the decision will be based solely on the information provided by the CCAP administrator if the parent does not appear at the hearing;
  - (E) a statement of the parent's administrative hearing rights;
  - (F) a statement that the hearing does not preclude additional civil or criminal action;
  - (G) a statement of the availability of free legal representation;
  - (H) a statement of the availability of a new hearing in the event there is good cause for the individual not to attend the scheduled hearing; and
  - (I) an invitation to contact the department if additional information is needed.

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**(d) Pre-Hearing Interview**

- (1) The CCAP administrator shall send parents referred for an administrative disqualification hearing a notice scheduling a pre-hearing interview and a waiver of administrative disqualification hearing form. The pre-hearing interview shall be conducted by the CCAP administrator at an office of the department closest to where the parent lives. The CCAP administrator shall make a reasonable attempt to accommodate a request made by the parent with regard to the hearing date and time.
- (2) The purpose of the pre-hearing is to provide the parent with the opportunity to review the evidence supporting the CCAP administrator's allegations, to receive an explanation of the hearing process and to dispute the CCAP administrator's findings. The CCAP administrator shall provide the parent with a detailed explanation of the following information :
  - (A) the evidence supporting the overpayment and the determination that the error was intentional;
  - (B) the administrative hearing process and the parent's administrative hearing rights;
  - (C) the waiver process, including that the parent's right to waive the hearing, the right to change the decision to waive the hearing within 10 days, and the fact that signing the waiver is not an admission of guilt; and
  - (D) the recoupment or disqualification penalty that will be applied if the parent signs the waiver.
- (3) Failure to appear at the pre-hearing interview shall not serve as a basis for delaying the administrative disqualification hearing. A parent who does not appear at the pre-hearing interview shall be sent a formal notice of the scheduled hearing, unless the parent has submitted a signed waiver of his or her right to a hearing.

**(e) Waiver of Right to Administrative Disqualification Hearing**

- (1) The parent shall have the option to waive his or her right to an administrative disqualification hearing. The CCAP administrator shall provide the parent with a waiver form. The form shall include the following information:
  - (A) the date by which the waiver must be signed and returned to the department;
  - (B) the address where the form must be returned;
  - (C) a statement of the right of the individual to remain silent and avoid self-incrimination;
  - (D) an option to select admission or denial of guilt;
  - (E) a place for the parent's signature and date;
  - (F) that a benefit reduction or disqualification penalty will automatically be imposed if the waiver is signed, even if the parent does not admit guilt;
  - (G) that waiver of the right to an administrative disqualification hearing results in the same penalties as would be imposed in the event of a determination of guilt by an administrative

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disqualification hearing officer or a court of law, regardless of whether or not the waiver form indicates an admission of guilt;

(H) the fact that the individual may withdraw the waiver within 10 days of the date signed; and

(I) telephone numbers for additional information and for free legal services.

- (2) The parent may withdraw the waiver by submitting a written statement to the administrative hearing officer within ten days of the date the waiver form was signed. If the parent does not withdraw the waiver in a timely manner, the department proceeds with scheduling the hearing.

**(f) Time Limits**

- (1) The hearing shall be held and a decision rendered within ninety days from the date the notice of the hearing is mailed to the parent, barring continuances and extensions of the close of the hearing record.
- (2) The parent or the parent's representative may request and receive a postponement of the scheduled hearing for good cause as determined by the administrative hearing official. The hearing may not be postponed for more than thirty days.

**(g) Consolidation of Administrative Hearings with Administrative Disqualification Hearings**

- (1) The administrative hearing officer may combine an administrative hearing and an administrative disqualification hearing into a single hearing if the factual issues arise out of the same or related circumstances and the parent receives prior notice that the hearings will be combined.
- (2) If the single hearing is held for the purpose of settling the amount of the overpayment as well as determining whether intentional recipient error occurred, the parent shall not be entitled to a separate hearing to contest the amount of the overpayment.

**(h) Hearing Format**

- (1) The hearing is conducted in accordance with the requirements of section 17b-749-21 of the Regulations of Connecticut State Agencies.
- (2) The hearing official advises the parent or the parent's representative of the right to remain silent during the hearing.
- (3) If the parent or the parent's representative cannot be located or fails to appear at a hearing without good cause, the hearing is conducted without the parent being represented. If the parent does not appear at the hearing and is not represented by another person, the hearing official makes a decision based on the evidence presented.

**(i) Good Cause for Failure to Appear at Hearing**

- (1) A new hearing is scheduled if the parent had good cause for failing to appear. The parent or his or her representative must submit a good cause request to the administrative hearing official within ten days following the date of the original hearing.

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- (2) Good cause reasons for not appearing at the hearing include, but are not limited to, illness of the individual or immediate family member, a family emergency, severe weather or the unavoidable loss of transportation where there was no alternative immediately available.
- (3) The administrative hearing official decides if good cause exists and enters the decision into the hearing record. If good cause exists, the administrative hearing official who presided at the initial hearing shall schedule a new hearing. The decision reached as the result of the original hearing is rendered null and void when a new hearing is scheduled.

**(j) Hearing Decision**

- (1) The administrative hearing official issues a written decision within ninety days from the date the notice scheduling the hearing was mailed to the parent. The decision identifies the evidence used to make the decision, specifies the reasons for the decision, cites relevant policy or regulation, responds to the reasoned arguments made by the parent or his or her representative and specifies the penalty.
- (2) If a disqualification penalty is imposed, the effective date and length of the disqualification period is also specified.

**(k) Appealing the Decision**

- (1) The parent is entitled to an administrative hearing to dispute an intended action to reduce or terminate benefits or if the parent disagrees with the recoupment plan.
- (2) The parent is not entitled to an administrative hearing to dispute the findings of the administrative disqualification hearing official or the penalty imposed.
- (3) The parent may contest the hearing official's decision by appealing to the Superior Court within forty-five days of the date the hearing official issues the decision. The disqualified individual shall follow the appeal procedures described in subsection (n) of section 17b-749-21 of the Regulations of Connecticut State Agencies concerning appeals of administrative hearing decisions.
- (4) If a court reverses the finding of guilt of an intentional recipient error, the CCAP administrator shall reinstate the case if the family is currently eligible and issues payments for any underpayment that may have occurred.

**Sec. 17b-749-23. Implementation**

The requirements of sections 17b-749-01 to 17b-749-22 of the Regulations of Connecticut State Agencies, inclusive, shall take effect on January 1, 2002. Families who apply for benefits prior to January 1, 2002 shall be subject to the requirements of the regulations that are in effect on the date eligibility is determined. Families determined eligible prior to January 1, 2002 shall receive the same benefits as would have been received under the regulations in effect prior to January 1, 2002, until the next eligibility determination conducted on or after January 1, 2002.

**Section 2. Sections 8-210b-9a to 8-210b-23a and 17b-3-1 to 17b-3-6 of the Regulations of State Agencies, inclusive, are repealed.**

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**Section 3. Section 17b-749-01 to 17b-749-23, inclusive, of the Regulations of Connecticut State Agencies shall take effect on January 1, 2001.**

**Statement of Purpose:** To implement the requirements of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 and section 17b-749 of the Connecticut General Statutes concerning the establishment of a uniform child subsidy program.