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**SC DSS SC VOUCHER PROGRAM**  
**Policy Manual**



**SC VOUCHER PROGRAM**

# SC VOUCHER PROGRAM

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**CHAPTER 1 .....12**

**INTRODUCTION TO THE SC VOUCHER PROGRAM .....12**

**1.1 PROGRAM PURPOSE AND LEGAL BASIS.....12**

1. PURPOSE OF THE CHILD CARE ASSISTANCE PROGRAM .....12

2. FEDERAL REGULATIONS .....12

3. LEGAL BASIS .....13

4. CHILD CARE SERVICE GOALS .....13

5. BASIC SERVICE PHILOSOPHY .....14

6. USE OF POLICY MANUAL .....14

7. NON-DISCRIMINATION.....15

**1.2 CONFIDENTIALITY OF INFORMATION.....15**

1. FREEDOM OF INFORMATION REQUEST .....15

2. CONFIDENTIAL CASE INFORMATION .....15

3. DISCLOSING CONFIDENTIAL INFORMATION .....16

**1.3 CONFLICT OF INTEREST WHEN DETERMINING ELIGIBILITY .....16**

**1.4 VOLUNTARY PROGRAM .....17**

**1.5 MANDATED REPORTER.....17**

**1.6 THE SC VOUCHER PROGRAM CONTROL CENTER.....18**

**1.7 CHILD CARE PAYABLES.....18**

**1.8 ACCESSING THE SC VOUCHER PROGRAM.....19**

**CHAPTER 2 .....20**

**CHILD CARE ASSISTANCE .....20**

**2.1 ELIGIBILITY REQUIREMENTS .....20**

1. RESIDENCY .....20

2. AGE .....20

3. CITIZENSHIP .....21

4. CITIZENSHIP/ALIEN STATUS .....21

5. ESTABLISHING THE NEED FOR CHILD CARE SERVICES .....23

6. FAMILY DEFINITION.....24

7. INCOME DEFINITION .....26

8. TREATMENT OF OVERTIME INCOME.....

9. TREATMENT OF IRREGULAR FLUCUATION OF EARNINGS.....

10. INCOME INCLUSIONS .....28

11. INCOME EXCLUSIONS.....32

**2.2 VERIFICATION REQUIREMENTS .....34**

1. VERIFICATION REQUIREMENTS .....34

2. VERIFICATION OF AN ABSENT PARENT .....35

3. WORK .....35

4. VERIFICATION OF WORK.....36

PRESUMPTIVE ELIGIBILITY PROCESS FOR NEW EMPLOYMENT.....37

5. VERIFICATION OF SCHOOL .....37

6. VERIFICATION OF TRAINING .....39

7. VERIFICATION OF SELF-EMPLOYMENT .....39

8. HOME-BASED BUSINESS .....39

9. VERIFICATION OF DISABILITY.....40

**2.3 CHILD CARE ASSISTANCE REQUIREMENTS**

1. TEMPORARY CHANGES

2. NON-TEMPORARY CHANGES

3. USE OF THE 10 DAY TERMINATION POLICY

**2.4 SPECIFIC CHILD CARE ELIGIBILITY CATEGORIES.....40**

**2.5 APPLICANT CHILD CARE (ACC) .....42**

1. APPLICATION PROCESS FOR APPLICANT CHILD CARE.....42

2. DISPOSITION OF THE FI APPLICATION .....42

**2.6 FAMILY INDEPENDENCE (FI).....43**

1. CHALLENGING ADULTS THROUGH REHABILITATION, EDUCATION AND SERVICES (CARES).....44

2. FI TWO-PARENT PROGRAM .....44

3. FI - CHILD ONLY (FI/CO) .....45

**2.7 JUMMP CHILD CARE .....ERROR! BOOKMARK NOT DEFINED.**

1. CHILD CARE AUTHORIZATION/APPROVAL PROCESS.....47

2. ACC/JUMMP.....48

3. FI/JUMMP .....48

4. TCC/JUMMP .....49

5. JUMMP NON-COMPLIANCE .....49

6. FI BENEFIT CASE CLOSURE/DENIAL .....50

7. JUMMP PARTICIPANT REFERRED BACK TO THE COUNTY DSS OFFICE .....50

**2.8 TRANSITIONAL CHILD CARE (TCC).....51**

1. TWO-PARENT FAMILY .....51

**2.9 TRANSITIONAL CHILD CARE 1 (TCC1).....52**

1. SEAMLESS ELIGIBILITY FOR FIRST YEAR OF TRANSITIONAL CHILD CARE.....53

**2.10 TRANSITIONAL CHILD CARE 2 (TCC2) .....54**

**2.11 TRANSITIONAL CHILD CARE 24 (TCC24) .....55**

1. TCC24-1.....55

2. TCC24-2.....55

**2.12 TRANSITIONAL CHILD CARE – FULL FAMILY SANCTION (TCC/FS) .....55**

1. TCC/FS - 1 .....55

2. TCC/FS - 2 .....56

**2.13 CHILD WELFARE CHILD CARE .....56**

1. EXCEPTION CRITERIA FOR CPS AND FC CHILD CARE CASES .....57

2. APPLICATION PROCESS FOR CPS AND FC CHILD CARE .....57

3. CPS-IN.....58

4. CPS-OUT.....59

5. FOSTER CARE CRITERIA.....60

6. SPECIALIZED AND IFCCS FOSTER CARE.....62

7. CHILD CARE FOR BABY OF A FOSTER CHILD .....62

**2.14 NON-WELFARE LOW-INCOME FAMILIES.....62**

**2.15 CRIMINAL DOMESTIC VIOLENCE .....63**

**2.16 HEAD START.....63**

**2.17 FIRST STEPS.....64**

**2.18 SPECIAL NEEDS.....64**

**2.19 HOMELESS CHILD CARE.....65**

**2.20 FAMILY LITERACY CHILD CARE.....66**

**CHAPTER 3 .....67**

**APPLICATION PROCESS.....67**

**3.1 INTAKE AND APPLICATION .....67**

**3.2 CHILD CARE APPLICATION .....67**

1. CLIENT AND RECIPIENT SOCIAL SECURITY NUMBERS .....68

2. PSEUDO/TEMPORARY SOCIAL SECURITY NUMBERS .....68

3. TEMPORARY ABSENCE DURING CHILD CARE ELIGIBILITY PERIOD (IN LOCO PARENTIS) .....68

4. CUSTODY VERIFICATION .....69

5. SIGNATURE REQUIREMENTS .....70

**3.3 APPLICANT RIGHTS AND RESPONSIBILITIES.....70**

1. APPLICANT RIGHTS .....70

2. APPLICANT RESPONSIBILITIES .....70

**3.4 CHILD CARE INCOME STANDARDS .....71**

1. ASSESSMENT OF FEES .....72

2. CLIENT FEES .....72

**3.5 ELIGIBILITY WORKSHEET .....72**

**CHAPTER 4 .....74**

**PROVIDER AUTHORIZATION .....74**

**4.1 PROVIDER AUTHORIZATION/CONNECTION .....74**

1. PARENTAL CHOICE .....74

2. PROVIDER SELECTION.....75

3. CLIENT PASSWORDS .....75

4. MAXIMUM CARE ALLOWED.....76

5. MEMO FIELD DOCUMENTATION .....76

6. REGISTRATION FEES .....77

7. FUNDING/CONNECTING A CHILD UNDER THE APPROPRIATE AGE GROUP.....77

8. DUAL FUNDING.....77

9. NOTICE OF CONNECTION TO AN SC VOUCHER PROGRAM CHILD CARE PROVIDER.....78

10. CHILDREN WHO DO NOT CONNECT OR RECONNECT TO A PROVIDER.....78

**4.2 IMMUNIZATIONS.....78**

**CHAPTER 5 .....80**

**PROVIDER INFORMATION .....80**

**5.1 CHILD CARE PROVIDER DEFINITIONS .....80**

1. CHILD CARE CENTER (CCC) .....80

2. GROUP CHILD CARE HOME (GCCH) .....80

3. FAMILY CHILD CARE HOME (FCCH).....80

4. FAMILY, FRIEND AND NEIGHBOR CARE (FFN) .....81

**5.2 REQUIRED REGULATORY STATUS.....81**

1. CHILD CARE CENTER (CCC) .....81

2. GROUP CHILD CARE HOME (GCCH) .....82

3. FAMILY CHILD CARE HOME (FCCH).....82

4. PROVISIONAL LICENSES .....82

5. PROVIDERS NOT ELIGIBLE TO BE ENROLLED IN THE SC VOUCHER PROGRAM.....82

6. DUAL EMPLOYMENT OF A CHILD CARE PROVIDER .....83

7. WHEN NEW/UPDATED PROVIDER PAPERWORK IS REQUIRED .....83

**5.3 GRANTS .....83**

1. PROVIDER GRANTS .....83

2. NON-COMPLIANCE WITH GRANT TERMS .....84

3. RECOUPMENT OF GRANT FUNDING.....84

**5.4 SC VOUCHER PROGRAM PARENT/CARETAKER/GUARDIAN WHO OWNS  
A CHILD CARE PROGRAM.....84**

**5.5 LICENSING/REGISTRATION REQUIREMENTS.....84**

1. INTERNAL REVENUE REQUIREMENTS .....85

2. PROVIDER PASSWORDS .....85

**5.6 PROVIDER SELECTIONS AND TYPES .....86**

1. REPORTS OF ABUSE AND NEGLECT .....86

2. LEVEL A AND B PROVIDERS .....87

3. LEVEL C PROVIDERS.....89

4. FAMILY, FRIEND AND NEIGHBOR CARE PROVIDERS (FFN) .....91

5. DENIAL OF FFN ARRANGEMENTS .....93

6. FAMILY, FRIEND AND NEIGHBOR CARE (IN THE CHILD’S HOME) (FNI).....94

**5.7 THREE-YEAR PROVIDER AGREEMENT .....96**

**5.8 EXPIRATION OF THREE-YEAR ENROLLMENT AGREEMENT .....96**

**5.9 SUBSEQUENT ENROLLMENT CRITERIA.....96**

1. PROVIDERS APPLYING FOR SUBSEQUENT ENROLLMENT PERIODS .....96

**5.10 SUBSEQUENT ENROLLMENT PROCESS.....98**

**5.11 HISTORY OF COMPLIANCE .....99**

1. HISTORY OF COMPLIANCE DEFINITION .....99

2. DEFINITION OF TERMS .....99

**5.12 PROCESS FOR DETERMINING HISTORY OF COMPLIANCE.....101**

1. PROCESS FOR DETERMINING COMPLIANCE FOR ENROLLMENT FOR LEVELS A AND B.....101

2. PROCESS FOR ONGOING MONITORING FOR LEVELS A AND B .....101

3. PROCESS FOR OFFERING A CORRECTIVE ACTION PLAN (CAP) .....102

**5.13 CORRECTIVE ACTION .....103**

**5.14 MAXIMUM PAYMENT RATES.....105**

**5.15 SECOND CHILD DISCOUNTS .....105**

**5.16 PROVIDER RATE CHANGES .....105**

1. RATE INCREASES .....105

2. RATE INCREASES FOR LEVEL A AND B CHILD CARE PROVIDERS.....106

3. RATE INCREASES FOR LEVEL C AND FAMILY, FRIEND, AND NEIGHBOR CHILD CARE PROVIDERS 107

4. RATE DECREASES FOR ALL LEVELS.....107

**5.17 RECORDS.....108**

1. ATTENDANCE.....108

2. SERVICE VOUCHER LOG (SVL) .....109

3. CLIENT/CHILD RECORDS .....109

**5.18 ADVERSE ACTIONS BY THE SC VOUCHER PROGRAM .....109**

1. TERMINATION OF PROVIDER ENROLLMENT BY THE SC VOUCHER PROGRAM .....110

2. PROCESS FOR INCOMPLETE APPLICATIONS .....110

3. DENIALS FOR INCOMPLETE APPLICATIONS .....110

4. FAILURE TO MEET REGULATORY REQUIREMENTS.....111

5. FAILURE TO MAINTAIN HISTORY OF COMPLIANCE .....111

6. FAILURE TO MAINTAIN REQUIRED PROGRAM ASSESSMENT SCORES.....112

7. FAILURE TO MAINTAIN NATIONAL ASSOCIATION FOR THE EDUCATION OF YOUNG CHILDREN (NAEYC) ACCREDITATION (LEVEL A ONLY) .....113

8. USE OF CORPORAL PUNISHMENT .....113

9. OHAN FINDINGS .....114

10. FAILURE TO SUBMIT REQUIRED CORRECTIVE ACTION .....114

11. FACILITY MOVES .....114

12. FAILURE TO PROVIDE CHILD CARE SERVICES AT ENROLLED ADDRESS .....114

13. PROVIDING SERVICE AT A LOCATION OTHER THAN THE ENROLLED ADDRESS OR OTHER THAN THE SITE THE CHILD IS CONNECTED TO.....115

14. FAILURE TO RESPOND TO ATTEMPTS BY SC VOUCHER PROGRAM STAFF TO REACH THE PROVIDER. ....115

15. FAILURE TO OPERATE DURING STATED HOURS OF OPERATION.....116

16. FAILURE TO MAINTAIN LAN (LOCAL AREA NETWORK) PHONE SERVICE .....116

17. MISUSE OF SC VOUCHER PROGRAM GRANT FUNDS .....116

18. FRAUD .....116

19. OWNER/OPERATOR OR DIRECTOR GUILTY OF FRAUD IN A STATE-FUNDED OR FEDERALLY-FUNDED PROGRAM .....116

20. FAILURE TO MAINTAIN SC VOUCHER PROGRAM DOCUMENTATION REQUIREMENTS.....117

21. VERBAL OR PHYSICAL ABUSE OF SC VOUCHER PROGRAM STAFF.....117

22. REFUSAL TO ALLOW SC VOUCHER PROGRAM REPRESENTATIVE ACCESS TO THE FACILITY .....117

23. SMOKING IN A FACILITY .....117

**5.19 PROCESS FOR TERMINATING A PROVIDER ENROLLMENT .....118**

1. LIFE-THREATENING OR SUBSTANTIAL THREAT OF HARM .....118

2. NON-LIFE-THREATENING SITUATIONS .....118

3. NOTIFICATION TO CHILD CARE STAFF .....119

4. FIRST NOTIFICATION TO PROVIDER FROM QRIS QUALITY MONITORING.....119

5. APPEALS .....119

6. FINAL NOTIFICATION TO PROVIDER FROM QRIS QUALITY MONITORING.....120

7. FINAL NOTIFICATION TO THE CLIENTS AND THE PROVIDER FROM THE SC VOUCHER PROGRAM CONTROL CENTER .....120

8. REFERRAL RESOURCES TO ASSIST CLIENTS.....121

9. PROVIDER FILES.....121

**5.20 EXCEPTIONS TO THE PROCESS FOR TERMINATING A PROVIDER ENROLLMENT .....121**

**5.21 RECLASSIFICATION.....122**

1. PROCESS FOR RECLASSIFICATION .....123

**5.22 VOLUNTARY TERMINATION BY THE PROVIDER.....123**

**5.23 RE-ENROLLMENT.....124**

1. WAITING PERIOD FOR RE-ENROLLMENT OF TERMINATED ENROLLMENTS .....124

2. WAITING PERIOD FOR PROVIDER WHO VOLUNTARILY TERMINATES ENROLLMENT.....124

3. WAITING PERIOD WHEN PROVIDER IS NOT ELIGIBLE FOR SUBSEQUENT ENROLLMENT AGREEMENT  
124

4. EXEMPTION OF WAITING PERIOD.....125

**5.24 ENROLLMENT/RE-ENROLLMENT EXCEPTIONS .....125**

1. DEATH OF A CHILD .....125

2. FRAUD .....125

3. FALSIFIED DOCUMENTS .....125

4. ADMINISTRATIVE OR JUDICIAL DETERMINATION OF ABUSE AND/OR NEGLECT .....126

5. INELIGIBILITY TO PARTICIPATE IN PUBLICLY FUNDED PROGRAMS .....126

**5.25 AMENDMENTS TO A PROVIDER’S FILE .....126**

1. ADDING OR DELETING ADDITIONAL AGE GROUP .....126

2. CHANGE IN FACILITIES REGULATORY STATUS .....127

3. CHANGE IN NAME OF CHILD CARE FACILITY.....127

4. CHANGE IN DIRECTOR OF CHILD CARE FACILITY .....127

5. CHANGE IN MAILING/PAYMENT ADDRESS OR PHONE NUMBERS .....128

6. WORKING TELEPHONE.....128

**CHAPTER 6 .....129**

**CASE MANAGEMENT.....129**

**6.1 ABSENCES.....129**

1. ALLOWABLE ABSENCES.....129

2. WAIVER OF ABSENCES.....130

**6.2 STOP AND START DATES.....131**

**6.3 BREAKS IN WORK, SCHOOL OR TRAINING.....131**

**6.4 RETENTION SCHEDULE .....132**

**6.5 TRANSFERS FROM ONE PROVIDER TO ANOTHER .....132**

**6.6 EARLY RELEASES.....134**

**6.7 TRANSFERS OF FOSTER AND CHILD PROTECTIVE SERVICE CLIENTS  
134**

**6.8 NOTIFYING CLIENTS AND PROVIDERS OF TRANSFERS .....134**

**6.9 CLIENT MOVES TO ANOTHER COUNTY .....134**

**6.10 CHANGES WITHIN THE ELIGIBILITY PERIOD.....135**

1. AMENDED APPLICATION PROCESS.....136

**6.11 DESK REVIEW PROCESS.....136**

**6.12 MONTHLY CHILD CARE CASELOAD MONITORING.....137**

**6.13 TERMINATION OF SERVICES TO CLIENTS.....138**

1. WHEN A PROVIDER STOPS SERVING A CLIENT.....138

2. TERMINATION BY THE SC VOUCHER PROGRAM.....138

3. TERMINATION OF A CLIENT .....139

4. NOTIFYING CLIENT AND PROVIDER OF TERMINATION .....140

**6.14 CLIENT COMPLAINTS .....141**

**6.15 END OF SERVICE NOTIFICATION.....141**

**6.16 CLOSE OUTS.....142**

**6.17 SYSTEM GENERATED LETTERS.....142**

**CHAPTER 7 .....144**

**PAYMENT INFORMATION.....144**

**7.1 PAYMENT INFORMATION.....144**

1. PAYMENT METHODS .....144

2. REQUESTS FOR PAYMENT .....145

3. HAND-DELIVERED SVL’S.....146

4. PAYMENT INSTRUCTIONS.....146

5. PROVIDER CHECK PICKUP.....147

6. PROVIDER ADJUSTMENTS .....147

7. TAX LIENS AND LEVIES .....147

**CHAPTER 8 .....148**

**FAIR HEARINGS .....148**

**8.1 APPEALS/FAIR HEARINGS .....148**

1. THE CLIENT APPEAL .....148

2. APPEALS/FAIR HEARINGS .....148

3. PROVIDER APPEALS .....149

4. CONNECTING CLIENTS DURING AN APPEAL.....149

5. STAFF ROLES IN APPEALS/FAIR HEARINGS .....150

**CHAPTER 9 .....151**

**FRAUD/IMPROPER PAYMENTS .....151**

**9.1 MISUSE OF SERVICES.....151**

1. REPORTING/INVESTIGATING MISUSE .....151

2. MISUSE OF SERVICES .....151

3. DETERMINATION OF MISUSE.....152

**9.2 IMPROPER PAYMENTS.....152**

**9.3 FRAUD .....152**

**APPENDIX 1.....153**

APPENDIX 2 .....154

CHILD DEVELOPMENT FEE SCALE.....154

APPENDIX 3 .....156

MAXIMUM PAYMENT ALLOWED .....156

APPENDIX 4 .....161

URBAN/RURAL COUNTY DESIGNATION.....161

APPENDIX 5 SCALE OF ALLOWABLE ABSENCES .....162

**GLOSSARY .....163**

**FORMS .....173**

**DSS FORM 1027 .....JUMMP COMMUNICATION FORM  
173**

**DSS FORM 1105 AUTHORIZATION AGREEMENT AND ENROLLMENT FORM FOR  
ELECTRONIC VENDOR PAYMENT AND REMITTANCE ADVICE .....173**

**DSS FORM 1247 ..... MEDICAL RELEASE/PHYSICIAN’S STATEMENT  
173**

**DSS FORM 1269 ..... REQUEST FOR SUPPORT SERVICES  
173**

**DSS FORM 3004 ..... CPS/FOSTER CARE CHILD CARE REFERRAL FORM  
173**

**DSS FORM 3772 ..... CLIENT RIGHTS AND RESPONSIBILITIES  
173**

**DSS FORM 3772 SPA..... CLIENT RIGHTS AND RESPONSIBILITIES (SPANISH  
VERSION) .....173**

**DSS FORM 3773 ..... LEVEL C PROVIDER RATE CERTIFICATION FORM  
173**

**DSS FORM 3774 .....FFN CHILD CARE ENROLLMENT AGREEMENT FORM  
173**

**DSS FORM 3776 .....FFN CHILD CARE CERTIFICATION  
173**

**DSS FORM 3778 ..... HEALTH AND SAFETY GRANT REIMBURSEMENT REQUEST  
173**

**DSS FORM 3781 ..... PRE-AUTHORIZATION NOTICE  
173**

**DSS FORM 3791 ..... SC VOUCHER PROGRAM APPLICATION  
173**

**DSS FORM 3791 SPA..... SC VOUCHER PROGRAM APPLICATION (SPANISH  
VERSION) .....173**

**DSS FORM 37101 ... LEVEL C PROVIDER ENROLLMENT FORM AND AGREEMENT  
173**

**DSS BOOKLET 37102..... LEVEL C BUSINESS PROCEDURES  
173**

**DSS BOOKLET 37103.....FFN PROVIDER BUSINESS PROCEDURES  
173**

**DSS BOOKLET 37104..... PARENT HANDBOOK  
173**

**DSS BOOKLET 37105.....LEVEL A AND B PROVIDER BUSINESS PROCEDURES  
174**

**DSS FORM 37106-1.....LEVEL A PROVIDER AGREEMENT  
174**

**DSS FORM 37106-2.....LEVEL B PROVIDER AGREEMENT  
174**

**DSS FORM 37107.....LEVEL A AND B PROVIDER RATE FORM  
174**

**DSS FORM 37108.....LEVEL A AND B PROVIDER ENROLLMENT FORM  
174**

**DSS FORM 37109.....FAIR HEARING PROCESS  
174**

**DSS FORM 37110.....CLIENT ELIGIBILITY WORKSHEET  
174**

**DSS FORM 37117.....GUARDIANSHIP/IN LOCO PARENTIS VERIFICATION  
174**

**DSS FORM 37124.... FFN CENTRAL REGISTRY RELEASE OF INFORMATION AND  
CONSENT FORM.....174**

**ELIGIBILITY LETTER.....174**

**AUTHORIZATION/CONNECTION LETTER.....174**

**SERVICES END LETTER .....174**

**CLIENT TERMINATION LETTER.....174**

**PROVIDER TERMINATION LETTER.....174**

**TRANSFER LETTER.....174**

**Chapter****1****Chapter 1****Introduction to the SC Voucher Program****1.1 Program Purpose and Legal Basis****1. Purpose of the Child Care Assistance Program**

The South Carolina Department of Social Services (SCDSS) administers the child care subsidy program, hereafter referred to as the SC Voucher Program. Child care services provided through this program are funded by the Child Care and Development Fund (CCDF), the Social Services Block Grant (SSBG), and State dollars. The CCDF is under the administration of the U.S. Department of Health and Human Services, Administration for Children and Families and is distributed to the states to provide child care services for low income families.

The purpose of the SC Voucher Program is to:

- A. Increase the availability, affordability, accessibility and quality of child care for families in the state of South Carolina
- B. Assist families in achieving and maintaining economic self-support and self-sufficiency.

The goals of economic independence and prevention of welfare dependency are promoted through the belief that continued employment results in more secure families. This program reinforces the idea that the strength of the family is important to the state's and the nation's economy. Targeting families that are attempting to achieve and maintain economic independence from welfare is a concern of state and federal government.

**2. Federal Regulations**

As the lead agency, SCDSS is responsible for implementing a program that complies with federal regulations associated with the CCDF. Under these regulations, SCDSS must ensure that:

- A. The program is made accessible to all eligible parents as funding permits.

- B. A parent is given a choice of eligible providers and that the requirement of this program will not significantly restrict parental choice of the types of providers.
- C. A parent will have unlimited access to their child and to the provider who is caring for their child during normal hours of operation.
- D. A record of parental complaints is maintained and made available to the public on request.
- E. Consumer education information is made available to the public concerning:
  - a. Licensing and regulatory requirements
  - b. Complaint procedures
  - c. Health and safety information
  - d. Policies relative to child care services.
- F. Payment rates will be sufficient to ensure equal access for an eligible child.

### **3. Legal Basis**

The following laws and regulations govern the administration of the child care services:

- A. 42 USC 1397c (Public Law 97-35, Omnibus Budget Reconciliation Act of 1981). Requires the state to publish an annual intended-use report for Title XX SSBG funds.
- B. The Child Care and Development Block Grant Act of 1990 (P.L. 101-508) as amended by P.L.102-401, P.L. 102-586, P.L.103-171 and found at Title VI, Personal Responsibility and Work Opportunity Reconciliation Act of 1996, P.L.104-193.

### **4. Child Care Service Goals**

The goals of the child care services are:

- A. To promote family independence by giving priority for the use of child care funds to Welfare Reform clients through the Family Independence Act
- B. To enhance the quality and increase the supply of child care for all families, including those who receive no direct assistance under CCDF or SSBG

- C. To provide parents with a broad range of options in addressing their child care needs
- D. To strengthen the role of the family
- E. To improve the quality of, and coordination among, child care programs and early childhood development programs
- F. To increase the availability of early childhood development and before-school and after-school care services (school-age care).

The SC Voucher Program incorporates the following elements which are beneficial to families, providers, and local communities:

- A. Families are offered information regarding accessible child care arrangements.
- B. Child care providers are afforded opportunities for participating in the delivery of paid care, less paperwork, timely payment, resources for staff training and program improvement.
- C. The consolidated management of publicly funded child care results in effective administration, planning, and reporting.

At many levels, information and referral options are being provided and applicants are learning about child care and what is available in the communities. A guiding principle of the SC Voucher Program is a commitment to provide the applicant with information that allows informed choices regarding child care arrangements.

## **5. Basic Service Philosophy**

Since the passage of the South Carolina Family Independence Act in 1995 and the related federal Welfare Reform Law of 1996, funding priority for the SC Voucher Program is given to parents participating in the State's Family Independence Program (FI).

Child care is essential to parents who are:

- A. Participating in a training program
- B. Securing employment
- C. Pursuing educational opportunities
- D. Participating in FI.

## **6. Use of Policy Manual**

The SC Voucher Program Policy Manual, as well as any applicable procedural manuals and attachments, will be used by SCDSS staff to determine eligibility for child care

assistance in a fair, consistent, and timely manner. All SCDSS staff are responsible for exercising prudent and reasonable judgment when applying policy.

If a child care worker is unable to reach a decision about a specific situation that is not addressed in the manual, the child care worker will contact the SC Voucher Program Control Center Supervisor or other identified supervisors for a decision. If a decision is still unable to be made, the Program Director will be consulted.

All SCDSS child care staff will be held accountable for carrying out policies and procedures of the program in a timely, accurate, courteous, and non-discriminatory manner.

## **7. Non-Discrimination**

In accordance with Title VI Section 601 of the Civil Rights Act of 1964 and Title V Section 504 of the Rehabilitation Act of 1973, SCDSS will administer programs so that no person shall, solely because of race, color, national origin or qualified handicap, be:

- A. Excluded from participation in
- B. Denied the benefit of
- C. Subjected to discrimination under any program or activity administered by SCDSS.

## **1.2 Confidentiality of Information**

### **1. Freedom of Information Request**

All requests for information on specific clients or child care providers must be coordinated with the Office of General Counsel. A child care worker should gather the information and send it to their appropriate agency attorney.

Policy indicates that all client and provider case files are maintained by the appropriate worker for a period of three years or until all applicable audits have been completed. If an audit is in progress, all documents shall be maintained until the audit is complete. Applications for applicants who are not funded shall be maintained for 12 months. See [Retention Schedule](#) (Section 6.4)

### **2. Confidential Case Information**

The following case information is considered confidential and must be safeguarded:

- A. All information obtained in the course of interviews with the applicant/recipient (A/R)
- B. All information obtained while verifying eligibility for the A/R
- C. Name, address, and Social Security Number (SSN) of the A/R

- D. Information on the economic, social or medical circumstances of the A/R.

### 3. Disclosing Confidential Information

Confidential information may be disclosed in the following situations:

- A. **Verification:** When the child care worker is attempting to verify eligibility and must disclose information limited to the facts required to determine eligibility
- B. **Federal Assistance:** When another agency administering a federal or federally assisted program, which provides needs-based assistance directly to an individual, is attempting to assist an A/R and requests information directly related to that agency's programs
- C. **Audit:** When a legislative body or designated audit body certifies the information is needed for auditing purposes
- D. **Federal Program Investigation:** When any investigation, prosecution, or criminal/civil proceeding is being conducted in connection with the administration of federal programs administered by SCDSS
- E. **Child Abuse/Neglect:** When child abuse and/or neglect is suspected
- F. **Child Care Applicant Consent:** When the applicant discloses information or when the applicant or their authorized representative request to view information in the applicant's case file.

**EXCEPTION:** The applicant may not view confidential medical reports from third parties nor give consent for this information to be disclosed.

## 1.3 Conflict of Interest When Determining Eligibility

A conflict of interest is defined as a situation (actual or perceived interest) in which staff decisions are influenced by their personal interests. The definition includes any bias or the appearance of being bias in a decision-making process that would reflect a dual role played by staff.

Child care staff must maintain program integrity in all aspects of their jobs at all times and are to avoid any conflict or appearance of a conflict of interest. SC Voucher Program staff are responsible for answering the SC Voucher Program Control Center phone lines for clients and providers and determining eligibility for child care services. The child care

staff should not review, determine eligibility nor consult on any case involving a person related to them or any case where there is any type of relationship, such as a friend or neighbor. Any case where a conflict of interest exists, or may exist, should be brought to the attention of a supervisor immediately. The supervisor must assign the case to another worker who is not related to, nor has any conflict of interest, with any person included in the case.

## **1.4 Voluntary Program**

The SC Voucher Program is a voluntary program. A licensed, registered, waived, exempt and/or approved child care provider may enroll into the program as a Level A, B, or C provider. Level A and B providers voluntarily meet quality standards higher than the basic health and safety standards established by Child Care Licensing. Level C, Family, Friend, or Neighbor, and In-home Care providers voluntarily participate in the SC Voucher Program for payment only.

## **1.5 Mandated Reporter**

SC Voucher Program staff, as well as all other agency employees, are required to report any suspected abuse or neglect to the appropriate entities. The following is an excerpt of the SC Code of Laws on Mandated Reporters:

**SECTION 20-7-510.** Persons required or permitted to report; method; confidentiality.

(A) A physician, nurse, dentist, optometrist, medical examiner, or coroner, or an employee of a county medical examiner's or coroner's office, or any other medical, emergency medical services, mental health, or allied health professional, member of the clergy including a Christian Science Practitioner or religious healer, school teacher, counselor, principal, assistant principal, social or public assistance worker, substance abuse treatment staff, or childcare worker in a childcare center or foster care facility, police or law enforcement officer, undertaker, funeral home director or employee of a funeral home, persons responsible for processing films, computer technician, or a judge must report in accordance with this section when in the person's professional capacity the person has received information which gives the person reason to believe that a child has been or may be abused or neglected as defined in Section 20-7-490.

(B) If a person required to report pursuant to subsection (A) has received information in the person's professional capacity which gives the person reason to believe that a child's physical or mental health or welfare has been or may be adversely affected by acts or omissions that would be child abuse or neglect if committed by a parent, guardian, or other person responsible for the child's welfare, but the reporter believes that the act or omission was committed by a person other than the parent, guardian, or other person responsible for the child's welfare, the reporter must make a report to the appropriate law enforcement agency.

**NOTE: Child care staff should refer any questionable situations to a supervisor.**

## 1.6 The SC Voucher Program Control Center

The SC Voucher Program Control Center, hereafter called the Control Center, is located at SCDSS. Staff are responsible for the:

- A. Daily operation of the SC Voucher Program
- B. Coordination of child care eligibility
- C. Selection and payment to providers.

Toll-free lines for clients and providers are operated by the Control Center staff. Clients and providers may access the SC Voucher Program by calling the toll-free telephone numbers between the hours of 8:00 a.m. - 5:00 p.m. Monday thru Friday. The toll-free lines are designed to:

- A. Provide information to a client receiving child care services.
- B. Provide information to an interested family wishing to apply for services.
- C. Provide technical assistance and resolution to a provider regarding payment information or for other situations encountered by a client or provider.

Parents may call 1-800-476-0199 for assistance and child care providers are to call 1-800-262-4416. Both lines are available Monday – Friday from 8:00 a.m. – 5:00 p.m. The Control Center fax number is 1-800-310-5417.

The mailing address for the Control Center is:

SC Voucher Program  
SC Department of Social Services  
P.O. Box 100160  
Columbia, South Carolina 29202-3160

## 1.7 Child Care Payables

Child Care Payables is responsible for receiving all [Service Voucher Logs](#)~ (SVL's) for payment. This area reviews each SVL for proper documentation of absences and reason codes. Properly documented SVL's are entered into the SC Voucher Program database for payment. The payment process takes approximately 14 days to complete. A remittance advice is mailed to providers detailing the services paid for each child in attendance and reflects the amount of funds deposited to the personal banking account or Xerox MasterCard debit card. Providers also receive with each remittance advice a new SVL for returning for payment for children with continued services.

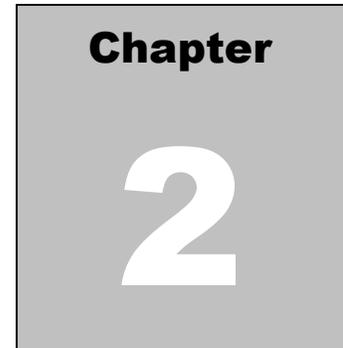
Child Care Payables is also responsible for updating and entering banking information for providers requesting direct deposits to personal accounts. Providers MUST complete a direct deposit form, [DSS Form 1105](#), Authorization Agreement and Enrollment Form for

Electronic Vendor Payment and Remittance Advice, and send in a VOIDED check when a deposit is made to a checking account. Providers electing to have funds deposited to a savings account must have their bank complete Section 3 of the direct deposit form for account verification. The form should be sent to Child Care Payables for entering into the E-pay system. A pre-note process is necessary in order for funds to be deposited to personal accounts. This process takes approximately 14 business days for proper verification of account information.

Child Care Payables is **NOT** responsible for the garnishment of payment due to notices of levy by other agencies such as SC Department of Revenue or the IRS. If the provider's payment is intercepted by any agency referenced above, the provider is responsible for contacting the imposing agency for negotiating the levy. The imposing agency is responsible for forwarding release of levy notices to SCDSS when garnishments are to be terminated and the imposing agency is responsible for administering any refunds due to the provider.

## **1.8 Accessing the SC Voucher Program**

A family interested in applying for child care assistance may inquire about the SC Voucher Program through the local SCDSS county offices or by contacting the Control Center at 1-800-476-0199 or other identified entities. Child care assistance is based on available funding and specific eligibility criteria. Information regarding the SC Voucher Program and enrolled child care providers may be obtained from the SCDSS child care website at [www.abcquality.org](http://www.abcquality.org) or [scchildcare.org](http://scchildcare.org).



## Chapter 2

### Child Care Assistance

#### 2.1 Eligibility Requirements

##### 1. Residency

In order to receive child care services through the SC Voucher Program, the applicant must be a legal resident of the state of South Carolina. When residency is questionable, the applicant may be asked to submit proof of residency. Proof of residency may include a copy of one of the following:

- A. Lease agreement
- B. Utility bill
- C. Driver's license
- D. State identification card
- E. Voter registration
- F. Other documents as approved by State Office.

**NOTE:** Notarized statements from friends or relatives are not acceptable methods for verification of residency.

##### 2. Age

In order to apply for child care assistance through the SC Voucher Program, the applicant must be 18 years old or within six months of turning eighteen at the time of the application. If the applicant does not meet the age requirements to apply for child care assistance, the minor's parent must apply for child care services in their own name and use their family size and income, or the minor's parent must sign an [emancipation statement](#).

**NOTE:** This does not apply to FI and FI/CO eligibility categories.

In order to receive child care assistance through the SC Voucher Program, the child in need of care must be within the ages of birth up to age 13, unless the child has special needs, in which services may be approved up to age 19. Some sources of funding have different age requirements.

Exceptions to the age requirements for applicants and children will be made on a case-by-case basis and must be approved only by designated SC Voucher Program Staff, the Control Center Supervisor or his/her designee. See [Exception Criteria for CPS and FC Child Care Cases](#) (Section 2.12.1).

### 3. Citizenship

A child served through the SC Voucher Program must be a citizen of the United States or a qualified alien. An applicant for and recipient of the child care subsidy must declare that the child for whom they are applying or receiving child care subsidy for is a citizen or qualified alien. The parent's declaration that their child is a citizen or qualified alien must be accepted unless there is reason to question the validity of the declaration. If the applicant acknowledges that the child is an alien, the child care worker must verify if the child is an "eligible alien" able to receive federal benefits. If the child care worker has a suspicion that the documentation may be invalid or falsified, additional documentation should be requested. Incorrect reporting of citizenship or status will result in loss of child care eligibility even if otherwise eligible.

An applicant who is in the Family Independence (FI) Program or transitioning off of the FI Program is to be considered already verified for citizenship or eligible alien status by the State for child care purposes and will need no further verification. Verification of citizenship/alien status is required for Temporary Assistance for Needy Families (TANF); therefore, requirement has taken place.

### 4. Citizenship/Alien Status

When a Low-Income applicant's statement on citizenship or alien status is questionable or inconsistent with other information on the application, the child care worker will ask the applicant to provide acceptable verification of citizenship or alien status. It is the responsibility of the applicant to secure and present valid documentation.

Acceptable forms of verification include:

- A. Birth certificate
- B. INS certificate of citizenship or naturalization (U.S. nationals)
- C. Valid voter registration card from the applicant's county of residence (cards from out-of-county or out-of-state are not acceptable)
- D. U.S. passport
- E. Religious records

The following are **NOT** considered acceptable forms of verification for eligible alien status:

- A. Social Security card
- B. Driver’s license from any state
- C. Bank, credit, or check cashing cards.

The following groups of aliens may receive benefits if all other requirements are met, for up to five years from the date the status is granted. A "**qualified**" immigrant is defined by the Personal Responsibility and Work Opportunity Act (PRWORA), as amended, and includes:

|                                       |  |
|---------------------------------------|--|
| Refugee                               | Alien who is admitted into the U.S. as a refugee. I-94: stamped “Admitted under Section 207 of the INA” or I-551 stamped RE-6, RE5, RE7, RE8, RE9  |
| Asylee                                | I-94: stamped “Granted Asylum under Section 208 of the INA.” or I-551  |
| Cuban/Haitian Entrant                 | I-94 stamped “Cuban/Haitian Entrant or I-94 stamped parole status (i.e., Cubans who entered the U.S. illegally between April 15, 1980 and October 10, 1980 and Haitians who entered the U.S. illegally before January 1, 1981).  |
| Amerasian                             | Alien fathered by U.S. citizen and born in Vietnam between January 1, 1962 and January 1, 1976 and close family members admitted as immigrants. I-94 is stamped: “Processed for I-551” with codes AM1, AM2 or AM3, or I-551 is stamped with codes AM6, AM7 or AM8.   |
| Deportation Withheld                  | Alien whose deportation is withheld under Section 241(b) (3) or 243(h) of the INA. I-688B: Employment Authorization Card; or I-766: Employment Authorization Document  |
| Conditional Entrant                   | Alien granted conditional entrant refugee status before April 1, 1980. I-94 is stamped "Refugee-Conditional Entry" and cites INA Section 203(a)(7)   |
| Parolee                               | Alien granted parole for at least one year under §212(d)(5) of the INA”  |
| Victim of severe forms of trafficking | Alien forced into prostitution, slavery, and forced labor through coercion, threats of physical violence, psychological abuse, torture and imprisonment. A victim of trafficking will have a letter of certification from the Office of Refugee Resettlement, Washington D.C. or I-94: stating admission under Section 212(d)(5) |

|                |  |
|----------------|--|
| Battered alien | Alien (whose child or parent) has been battered or subjected to extreme cruelty in the U.S. as set forth in section 431 of the PRWORA, and amended by section 501 of the Illegal Immigration Reform and Immigrant Responsibility Act of 1996, P. L. 104-208 (IIRIRA), and amended by 5571 of the Balanced Budget Act of 1977, P. L. 105-33 (BBA), section 1508 of the Violence Against Women Act of 2000, P. L. 106-386. |
|----------------|--|

In rare instances, when none of the above has satisfied the citizenship status, the secondary verification procedures below should be followed:

- A. Complete INS Form G-845 for each applicant who is not a U.S. citizen.
- B. Copy the verification used to establish satisfactory immigration status.
- C. Attach a copy of the verification to Form G-845. The U.S Citizenship and Immigration Services (USCIS) requests the verification be stapled to Form G-845 in the upper left-hand corner using only one staple.
- D. Submit the verification and Form G-845 to USCIS at the address below:

U.S. Citizenship and Immigration Services (USCIS)  
 470-490 L`Enfant Plaza East, SW  
 Suite 8001  
 Washington, D.C. 20024  
 Attn: Immigration Status Verification Unit

- E. Review the returned Form G-845 to ensure that legal alien status is validated and document CLRC.

**NOTE: When entering a case for a child where the parent is not a legal citizen, but the child is, a pseudo SSN must be created for the parent in order to process the application.**

## 5. Establishing the Need for Child Care Services

There must be an established need for child care prior to applying for services. In order to be eligible for child care services through the SC Voucher Program, the applicant must be working, in school, or in a training program at least 15 hours per week (including travel time) or as determined by the child care funding source. Travel time to work, school or training is considered when determining the type of child care needed. An average of one hour of travel time per day may be given. However, additional travel may be considered if documented. Travel time may be used in determining the number of hours working or

participating per week. An FI parent may not be required to participate for a minimum of 15 hours; however, they must be in compliance with their Family Plan.

## 6. Family Definition

All family members are identified in order to determine the family household unit and the gross monthly income. For eligibility purposes, the family household unit is defined as the number of persons counted as indicated below who reside in the same household and who may be responsible for the financial support of the child whose eligibility for child care services is being determined. Additionally, all children in the household should be considered when determining the family household unit. The following is information on who to include and exclude when determining the family household unit:

Who **is** counted when determining the family household unit:

- A. Natural/adoptive parent, caretaker or grandparent, or an individual acting in loco parentis, such as a relative or non-relative who has been granted custody or guardianship by a court of law or who has assumed full physical responsibility for a child, with or without custody;
- B. Married spouse of the parent or caretaker, if residing in the same home;
- C. Families in same sex marriages, if residing in the same home;
- C. Second parent or alleged parent of the child needing care when they are residing in the home, even if unmarried to the parent/caretaker;
- D. Dependent child in the household. A dependent child is defined as an unmarried child under age 18 or under age 21 if a student in secondary school or equivalent vocational/technical school;

**NOTE: The following only applies to Welfare Reform eligibility categories (FI, FI/CO, and TCC): A dependent child age 0-13, or 13-19 if special needs, living in the household of a caretaker/ relative, but not included in the Family Independence (FI) or Supplemental Nutrition Assistance Program (SNAP) budget, is eligible to receive child care services. (See item A above to ensure loco parentis form is completed or other documentation is available verifying the dependent child is in the home which may include CHIP database information.)**

- E. Family members living temporarily away from home, i.e., military spouse, not residing in the same household due to being stationed away from home;
- F. Stepparent/grandparent;

- G. Teen parent who has their own FI benefit case but resides in the household of their parent or caretaker. The teen parent and child make up their own family household unit. A teen parent must be participating in school and/or working as a part of his/her FI Family Plan;
- H. Applicant of child care who is 18 years of age or older is considered a separate household from their parent even if the applicant resides in the same house;
- I. Foster child is considered a one-person family and only the child's income is counted. However, both parents must be employed to be eligible for child care services through the foster care child care funding source;
- J. Emancipated minor is defined as a minor 18 years or under whose parent has entirely surrendered the responsibility of the care and custody of the minor and the right to the minor's earnings and is under no legal obligation to support the minor. An emancipated minor with a child living in the home of their parent is counted as a separate household. This minor is not included in the FI or SNAP budgets. A minor is emancipated if they meet one of the following conditions:
  - a. The court legally released the minor from parental control.
  - b. Both parents of the minor have signed an [emancipation statement](#)~. This statement must be notarized.  
  
**NOTE: The SC Voucher Program uses this statement for eligibility purposes only. However, this information may be made available under the Freedom of Information Act.**
  - c. The minor has legally married.
  - d. The minor has been legally divorced or become widowed, but has not returned to parental support.

An un-emancipated minor is counted in the family size of their parent. Applications for child care will be taken in the parent's name and the parent must meet all eligibility criteria, unless the following circumstances apply:

- a. The teen parent has no parent or legal guardian whose whereabouts is known.
- b. No parent or legal guardian of the teen parent allows the teen to live in their home.
- c. The teen parent lived apart from their own parent or legal guardian for a period of at least one year before the birth of the dependent child.

- d. The physical or emotional health or safety of the teen parent or dependent child would be jeopardized if they resided in the same residence with the major parent or legal guardian.
- e. There is otherwise good cause for the teen parent or dependent child to receive assistance while living apart from the major parent, legal guardian, another adult relative, or an adult supervised supportive living arrangement.

**NOTE: Documentation of good cause includes, but is not limited to, written statements from at least two corroborating persons showing that it is not in the best interest of the teen parent to live with their parent or legal guardian. One of these corroborating persons should be a professional such as a school counselor, social worker, or mental health professional.**

- K. Non-related adult who is counted in the FI or Food Stamp budget should be counted in the family household unit

Those **NOT** counted when determining the family household unit:

- A. Incarcerated family member, such as a parent or sibling, is not included in the family size.
- B. Adults who are not married and do not consider themselves common-law spouses but reside in the same household are not considered part of the same family household unit unless they are the parents of the same child.

## 7. Income Definition

For eligibility purposes, gross family income is defined as the source and amount of current gross income earned by all adult family members identified in the family household unit through the receipt of:

- A. Wages
- B. Tips
- C. Salaries
- D. Commissions
- E. Piece-rate payments
- F. Cash bonuses
- G. Armed services pay, including uniform and living allowances.

The income of the following individuals is counted when determining eligibility:

| Individual                                   | Special Instructions   |
|--|--|
| Dependent child                              | Earned income of a dependent child is excluded.  |
| Minor  | Earned income of any minor is excluded.  |
| Teen Parent Adult                            | All earned and unearned income of the teen adult parent is counted unless specifically excluded.   |
| Parent in the home                           | All income is counted unless specifically excluded.  |
| Caretaker relative other than child's parent | Income is counted if needs is included in the benefit calculation unless specifically excluded. If married, and caretaker relative is included in the <a href="#">family household unit</a> , ~ both spouse and caretaker relative living in the home must be included in the family household unit. |
| Stepparent in the home                       | All income is counted unless specifically excluded.  |

The family's monthly income is calculated by adding the gross monthly income of each adult family member identified in the family household unit. Income such as regularly received child support payments or Social Security benefits for a child under age 18 should also be included. A family member living temporarily away from home must be included in the family size and their income included in the calculation. See [Family Definition](#) (Section 2.1.6)

To arrive at the gross monthly income for an applicant who receives wages, child support, or other earned/unearned income, follow the formulas below according to how often the income is received:

- A. Weekly – The salary is multiplied by 4.33.
- B. Biweekly (every other week) – The salary is multiplied by 2.16.
- C. Semi-monthly (client is paid twice a month) – Add the two checks together.
- D. Monthly (client is paid once a month).
- E. Through self-employment. Use the average gross monthly income.
- F. Seasonal or irregular income must be averaged.

Verification of income from work will be used to determine eligibility for child care. The child care eligibility worker may use agency databases available such as CHIP, PATS, etc. for information to verify income when other documentation is not provided. Written

verification of child support is not required. However, the applicant should disclose all applicable sources of income. Child care eligibility staff will review check stubs to ensure there is **NO** appearance of the check stubs being tampered with, falsified, etc. If there are discrepancies, third-party verification will be obtained and documented.

## **8. Treatment of Overtime Income**

Overtime income will be counted when it appears on at least half of the paystubs submitted with a child care application, even if the overtime pay amounts vary with each paystub. Unusual pay amounts will be counted only if they appear on at least half of the paystubs submitted with a child care application.

For example, an applicant is employed as a waitress and submits four paystubs with the application. Three of the paystubs show \$250 gross per week; the fourth paystub shows \$1000 gross for the week. The client lives and works in North Augusta and the paystubs submitted are for the month of April. The \$1000 paystub is for the same week as the Masters Golf Tournament in North Augusta. It is not typical for the client to receive a \$1,000 paycheck. That paystub is an unusual pay amount and would not be considered in determining the applicant's gross monthly income. For this example, to determine the client's gross monthly income, the three \$250 paystubs would be averaged; the \$1000 paystub would not be included.

## **9. Treatment of Irregular Fluctuation of Earnings**

For initial child care determination and redetermination of eligibility irregular fluctuation in earnings will be considered. Temporary increases in income, including temporary increases that result in monthly income exceeding 85% SMI, does not affect eligibility or family copayments. Seasonal income or irregular income must be averaged over a period of time.

## **10. Income Inclusions**

The following types of income **are** to be considered when computing the amount of gross income for eligibility purposes:

- A. **Family Independence Stipend**  
Assistance payment to aid a family with a dependent child who is in the financial assistance budget. CHIP will be used to verify receipt of an FI stipend.
- B. **Alimony**  
Allowance, usually ordered by the Family Court, paid to an individual by the spouse or former spouse after a legal separation or divorce or while legal action is pending. This may be verified through the court or, if paid voluntarily, by the person making payments.

- C. **Child Support**  
Allowance, usually ordered by the Family Court, for the support of a child. The child care applicant may provide self-declaration of the amount and frequency of the receipt of child support payments. This may be verified through the court or, if paid voluntarily, by the person making payments.
- D. **Social Security**  
Social Security pensions, survivor's benefits, and permanent disability insurance benefits paid by the Social Security Administration (SSA) before deductions for medical insurance. Railroad retirement insurance benefits from the U.S. Government.
- E. **Veterans' Pensions**  
Money paid periodically by the Veterans Administration to a disabled member of the armed forces or to a survivor of a deceased veteran, as well as subsistence paid to a veteran for education and on-the-job training, and "refunds" paid to a veteran as G.I. insurance premiums.
- F. **Pensions and Annuities**  
Pensions or retirement benefits paid to a retired person or their survivor by a former employer or by a union, either directly or through an insurance company.
- G. **Unemployment Compensation**  
Compensation received from a government unemployment insurance agency or a private or public insurance company for an injury incurred at work. The cost of this insurance must have been paid by the employer and not the individual. The length of time the individual is expected to be out of work due to injury should be included in the narrative.
- H. **Workers' Compensation**  
Compensation received periodically from a private or public insurance company for an injury incurred at work. The cost of this insurance must have been paid by the employer and not the individual. The length of time the individual is expected to be out of work due to injury should be included in the narrative.
- I. **Wages or Salary** (Includes seasonal work/income)  
Total money received for work performed as an employee, including:
- a. Wages
  - b. Salary
  - c. Commissions
  - d. Tips
  - e. Piece-rate payments
  - f. Cash bonuses
  - g. Armed forces pay, including uniform and living allowances
  - h. Shift differential pay

- i. Holiday pay
- j. Leave pay

This is to be the gross amount before deductions are made for:

- a. Taxes
- b. Bonds
- c. Pensions
- d. Insurance
- e. Union dues
- f. Similar purposes.

The best form of verification is the most consecutive 30 days of pay stubs. Other methods of verification include the following:

- a. Last W-2 Form or Income Tax Form
- b. Written statement from the employer on company letterhead indicating the hourly rate of pay and the number of hours worked
- c. Military Leave Earning Statement (LES). This is the only acceptable form of verification for a member of the military.

**J. Self-Employment (Non-Farm)**

Adjusted gross income or net income earned in self-employment in one's own business, professional enterprise or partnership. Net income means gross receipts minus expenses. Gross receipts are the value of all goods sold and services rendered. Expenses include the following:

- a. Cost of goods purchased
- b. Rent, heat, light/power
- c. Depreciation charged
- d. Wages and salaries paid
- e. Business taxes (not personal income tax)
- f. Similar costs.

The most recent income tax return is the best method of verification. If a return is not available, a copy of one of the following may be used:

- a. Receipts of purchase
- b. Records of sale
- c. Business ledger
- d. Other records or statements of expenses and profits.

**NOTE:** [Reference Verification of Self-Employment \(Section 2.2.7\).](#)

**K. Farm Self-Employment**

Gross receipts minus expenses from the operation of a farm by a person on their own account as an owner, renter, or sharecropper. Gross receipts include the following:

- a. Value of all products sold
- b. Government crop loans
- c. Monies received under the Agricultural Stabilization Act
- d. Monies received from the rental of farm equipment to others
- e. Incidental receipts from the sale of wood, sand, gravel, and similar items.

Operational expenses include the following:

- a. Cost of feed, fertilizer, seed, and other farming supplies
- b. Cash wages paid to farm hands
- c. Depreciation charges
- d. Cash rent
- e. Interest on farm mortgages
- f. Farm building repairs
- g. Farm taxes (not state and federal income taxes).

The value of food, fuel, or other farm products used for family living is not included as part of net income. The most recent income tax return is the best source of verification. If a return was not filed or is unavailable, one of the following may be used to determine net income:

- a. Copies of receipts of purchase
- b. Records of sale
- c. Other records or statements of expenses and profits.

Farm income is usually available only at the end of the crop year, but may be prorated over the next 12 months.

**L. Dividends from Stocks and/or Bonds**

Benefits received by a person who holds shares of stock (interest in a company) or bonds (interest bearing certificates), or benefits received from profits of an insurance company with whom they have a policy, or as a result of their membership in an association which shares its profits with its members. The amount received may be documented by placing a copy of the individual's dividend statement in the record.

- M. **Interest on Savings or Bonds**  
Benefits accrued as a result of a savings account or bonds. This includes all such income whether paid directly or reinvested in the savings account or bonds.
- N. **Income from Estate or Trusts**  
Periodic receipts from estates or trust funds. This may be verified through probate court or the institution handling the trust fund.
- O. **Net Rental Income**  
Income from the rental of a house, store, or other property, minus expenses necessary to the upkeep of the rental property. This amount may be verified by copies of rent receipts and expense records placed in the file. Further verification should be obtained from those persons paying a rental fee to assure accuracy.
- P. **Income from Boarders/Lodgers**  
Income from boarders/lodgers minus expenses necessary to provide room and/or board. This may be verified in the same manner as net rental income.
- Q. **Net Royalties**  
This includes the following:
- a. The share of proceeds paid to the applicant as owner of a right (for example, a patent) for permission to use it or operate it
  - b. The share of proceeds paid to one from whom land rich in oil or minerals is leased
  - c. The share, usually a specified percentage, or proceeds from the work of a composer or writer and paid to the individual.
- This amount should be verified by placing a copy of the royalty contract in the record.
- R. **General Assistance**  
State-funded assistance payment to the totally and temporarily disabled. This may be verified by checking the assistance payments case record.

## 11. Income Exclusions

The following types of income **are not** to be considered when computing the amount of gross income for eligibility purposes:

- A. **Supplemental Security Income (SSI)**

Supplemental Security Income issued through the Social Security Administration (SSA) and the Optional Supplement issued by SCDSS.

- B. **Funds Connected with Judgments of Indian Claims**  
Per capita payments or funds held in trust for any individual in satisfaction of a Judgment of the Indian Claims Commission or the United States Court Claims.
- C. **Income from Property Sold**  
Money received from the sale of property (such as stocks, bonds, a house, or a car) is to be disregarded unless such individual was engaged in the business of selling such property.
- D. **Supplemental and Special Food Programs**  
Exclude the value of supplemental food assistance under the National School Lunch Act, as amended.
- E. **Payment from Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970**
- F. **Children's Earnings**  
No inquiry shall be made regarding the earned income of a dependent child under 18 years of age unless the child is emancipated or is a teen parent with an FI benefit case in their own name. See [Family Definition](#) (Section 2.1.6)
- G. **Certain Loans and Grants**  
Disregard income from loans and grants, such as scholarships, obtained and used under conditions that preclude their use for current living costs. Also, disregard any loans or grants to any undergraduate student for educational purposes made or issued under any program administered by the Commissioner of Education under the Higher Education Act (e.g., Pell or Carl Perkins grants or Montgomery GI Bill).
- H. **Home Products**  
Disregard the value of home produce used for household consumption.
- I. **Value of Meals Received Through Special Programs**  
The value of meals received through congregate dining programs, etc., is excluded regardless of funding source for such programs.
- J. **Volunteers in Services to America (VISTA) Income**  
The income received by volunteers under the VISTA program must be disregarded.
- K. **Foster Care Board Payments**  
These payments, including clothing allowances, are excluded from the income of both foster parents and foster children.

- L. **Earnings Received Under Job Training Partnership Act of 1983**
- M. **Adoption Subsidy**
- N. **Lump Sum Payments from Social Security, Supplemental Security Income (SSI), Housing and Urban Development (HUD), and child support payments in arrearage**
- O. **Bank Withdrawals**
- P. **Borrowed Money**
- Q. **Tax Refunds (to include payment or refunds from Earned Income Tax Credit or Dependent Care Credits)**
- R. **Gifts**
- S. **Lump Sum Inheritances or Lump Sum Insurance Payments**
- T. **Capital Gains**
- U. **Value of SNAP Allotment**
- V. **Income from Work-Study Programs**  
Income from work-study will not be counted as income.
- W. **United States Department of Agriculture (USDA) Donated Food Value.**
- X. **Funds from the Cobell Settlement**  
Income received from Cobell v. Salazar settlement, codified in the Claims Resolution Act of 2010 is excluded. The settlement is the result of a lawsuit originally filed by Eloise Cobell over the mismanagement of Native American trust assets.

## **2.2 Verification Requirements**

### **1. Verification Requirements**

All child care eligibility staff and SC Voucher Program staff have access to the Client History and Information Profile System (CHIP), which contains a client's information about TANF/SNAP benefits. Staff also have access to the Child and Adult Protective Services System (CAPSS), which contains information about children in CPS and foster care cases. These systems are used to verify that clients are open in TANF, CPS or foster care cases, prior to determining child care eligibility. Child care eligibility workers also have access to the Participation and Tracking System (PATS), which shows an FI client's participation in the Family Independence Program.

When researching cases and verifying information submitted by applicants, clients, or child care providers, staff may use the internet as a resource. Searching information on general websites for verification of addresses, phone numbers, public record searches for marriage licenses, births, etc. is permissible for all child care staff and may be used when determining eligibility.

Based on child care funding eligibility criteria, in order to be eligible for child care assistance, the applicant must be working, in school, in a training program, complying with the FI Family Plan, or permanently or temporarily disabled. If a two-parent household, both parents must be working, in school or in a training program or permanently or temporarily disabled. Income from employment, enrollment in school or participation in a training program will be verified. Also, an applicant who is disabled will verify income and submit a doctor's statement to verify disability.

An applicant must be determined eligible for child care based on the number of hours per week child care is needed. In addition to the number of hours the client is working, in school or training, the actual hours or credit hours at the job, school or training and travel time are considered. The hours child care is needed may not always coincide with the work hours of the parent. For example, a parent who works third shift needs to sleep during the day; therefore, child care may be approved during the day to help support the family. Study time is not considered when determining hours needed. The goal is to use a reasonable approach that supports the family's efforts to be productive. A non-welfare reform parent must need a minimum of 15 hours of child care services per week per child. An FI parent may not be required to participate a minimum of 15 hours.

## 2. Verification of an Absent Parent

If an applicant is married but separated during the time of the application, verification may be required in order to prove separation, if questionable. Legal papers verifying separation may also be used. However, in the event that court documentation is not available, the applicant may submit proof of separate residence via a lease agreement, utility bill, etc. The burden of proof is always upon the applicant.

**NOTE: Notarized statements from friends or relatives are not acceptable methods for verification of an absent parent.**

## 3. Work

Employment for child care purposes also includes subsidized employment, i.e., On-the-Job Training, VR sheltered workshop, or unsubsidized employment, including self-employment. It may also include part-time, post-secondary work-study assignments of at least 15 hours per week. Volunteer activity (such as a Vista Volunteer) is not considered employment. Employment income from a child under age 18 is excluded.

An applicant is considered employed if they are working at an occupation where they are paid a wage/salary, or has a documented commitment of employment that will begin within two weeks from the application date. An applicant participating in a work-study program will be considered employed; however, their income from the work-study program is not considered. Substitute teaching or other as needed employment or job assignments are not considered employment unless they are long-term placements of a month or more. Verification of the long-term assignment is required. An applicant who has a new commission-only job may receive three months of child care in order to establish a work history. Continued eligibility will be re-determined at the end of this time period.

Additionally, a retired individual does not meet the criteria for working/school/training.

In order to meet the work criteria and receive child care services, the non-welfare parent/guardian must be:

- A. Employed full-time: Average of 30 or more hours per week
- B. Employed part-time: 15 - 29 hours per week

**NOTE: Travel time may be considered when determining the number of hours worked per week.**

An FI parent may not be required to participate a minimum of 15 hours. If both parents are in the household, both parents must be working, in school, or in training. If one or both parents work only part-time, then only part-time care will be given.

**NOTE: The burden of proof of income and work, school or training status is upon the applicant.**

#### **4. Verification of Work**

It is preferred that the applicant submit 30 days of consecutive paystubs with the child care application to verify income and employment. If the applicant submits paystubs for less than 30 days and there is a year-to-date amount included on the paystubs, the year-to-date amount may be used to calculate gross monthly income. If less 30 days of check stubs available, worker can average the available stubs, document the calculation used and ensure documentation of calculations is imaged with the case file. If pay stubs are not available, a wage form, a letter on company letterhead indicating the hourly rate of pay and the number of hours worked may be submitted. These statements from employers will be verified by the child care eligibility worker. Tax forms may also be submitted when pay stubs are not available. Information from CHIP or other data bases may be used to verify, such as work number, PATS, or other available data base.

**NOTE: For an applicant in the military, a Leave Earning Statement (LES) is the only acceptable method of verification.**

## Presumptive Eligibility Process for New Employment

This process is used to assist an SC Voucher Program client with child care who has obtained a new job and is in the process of obtaining verification of the employment, including rate of pay and number of hours to be worked per week/pay period. The client is in need of child care to maintain their new job.

The client will be given six weeks of child care to allow them time to obtain the wage information from their new employer. The amount of child care given will be based on the client's or casemanager's statement, if applicable, showing the number of hours the client is working per week.

Once the employment verification is received by the child care eligibility worker, the worker will complete a new eligibility worksheet based on the income received and if the client is eligible additional weeks will be added to voucher.

they will make all attempts to follow the procedures listed below in order to process the amended SC Voucher Program child care application:

- A. Closeout the current application in the SC Voucher Program database
- B. Print the application from the SCOSA system, if needed
- C. Update the application from SCOSA to include the new employment information and any other applicable changes
- D. Initial any changes
- E. Complete a new Eligibility Worksheet
- F. Enter in the updated application into the SC Voucher Program database and obtain a new application number
- G. Ensure all sections of the SC Voucher Program database are updated to include new employment information, as appropriate AND
- H. Send case to child care imaging.

**NOTE: If only 30 days or less remain on the SC Voucher Program Application, the child care eligibility worker will request the client to complete a new application.**

## 5. Verification of School

An applicant is considered participating in an educational program if the program results in one of the following:

- A. High school diploma
- B. General Equivalency Diploma (GED)
- C. Associate's degree
- D. Other college degree.

An applicant attending school may submit a copy of their school schedule or other school information from available databases, such as PATS, and (except for FI recipients) proof of paid registration for the term in which they are applying to the SC Voucher Program. Units of service for school participation may also be used. A client's statement is acceptable for verification of school attendance for a dependent child age 18 or under 21 in the household. If the situation is questionable, verification of the paid school registration/schedule will be requested.

**NOTE: Actual class instruction time issued for programs that do not use a credit hour system and travel time are considered; however, study time is not counted when determining eligibility and the need for care.**

When a parent/guardian attends school, the child care services for which they are eligible is determined by whether they are a full-time student or a part-time student. A student who is registered in school for full-time, as determined by the institution, will be given full-time child care services as long as they are otherwise eligible. A student who is registered in school for part-time, as determined by the institution, will be given half-time child care services if school attendance is the only criteria they meet, i.e., they are not also working. When a client is registered for less than 12 credit hours but has required labs, seminars or practicums for which they do not receive credit, staff may request a copy of their school schedule for consideration to receive part-time or full-time child care services. Graduate schools consider a full-time student to be registered nine or more credit hours. Therefore, full-time child care may be authorized.

On-line computer courses from an accredited college or university that count as credit hours leading to a degree are acceptable courses for post-secondary education. Distance education/on-line courses may be countable under limited circumstances.

**NOTE: Schools offering distance education must be accredited by one of the following:**

- A. **South Carolina Department of Education (SCDE) if located in South Carolina**
- B. **Department of Education of any other state in which the program is located**
- C. **US Department of Education.**

Vocational educational training programs are provided by the following:

- A. Employment and training providers contracted by SCDSS
- B. Accredited vocational-technical schools
- C. Certificate programs at accredited secondary, proprietary schools
- D. Non-profit organizations

- E. Secondary schools that offer vocational education
- F. Post-secondary educational institutions
- G. Accredited internet-based institutions offering distance learning intended to prepare the participant for specific occupations.

No more than 10 hours per week will be counted as participation for distance learning programs unless approved by the State Administrative entity.

## 6. Verification of Training

An applicant is considered participating in job-training if the training is to teach marketable skills in the competitive labor market. A non-welfare reform parent must need a minimum of 15 hours of child care per week per child. An FI parent's hours of care will depend on participation required in the FI Family Plan. Verification of training will be required.

## 7. Verification of Self-Employment

Self-employment income is earned income received directly from one's own business, trade, or profession, instead of receiving a specified wage from an employer. **Child care may be denied or closed for a client who has been employed in the same self-employment business for at least one year and is not making at least minimum wage.**

An applicant who is self-employed may submit the most current copy of their **individual** income tax return and the adjusted gross income is used in order to obtain an accurate estimate of income. The profit/loss statement including the adjusted gross income may also be used.

If the applicant is newly self-employed and tax information is not available, the applicant may submit a copy of the ledger books, receipts, or statements from their clients to be considered for eligibility purposes. The applicant may be given three months of child care services to allow time to show a work history. Continued eligibility will be re-determined after this time period. The burden of proof is always on the applicant.

## 8. Home-Based Business

A parent who works in the home (i.e., medical transcriptionist) may be eligible for assistance with child care. The child care worker may obtain verification of income from the employer, either through check stubs from the employer or a notarized declaratory statement denoting:

- A. Nature of the home-based business
- B. Hours worked per day AND
- C. Day-to-day business duties.

If self-employed, the child care worker may use tax statements (quarterly or yearly) to verify income.

## 9. Verification of Disability

Eligibility criteria in some child care categories may not allow the applicant to be disabled. See [Specific Child Care Categories](#) (Section 2.3) for clarification. If one or both parents are temporarily or permanently disabled, verification will be required. The applicant must submit a physician's or other health professional's statement to verify the disability along with proof of disability income, if applicable. The applicant must submit a statement from the physician stating that the applicant cannot work and indicate the date that they may return to work, along with any applicable disability income. The statement may also include if the applicant is capable of caring for their own child. Temporary disability typically is a result of a short-term injury, pregnancy, etc.

A disability may be physical or mental, and must be verified by a physician or other health professional who includes:

- A. Physician assistant
- B. Nurse practitioner
- C. Psychologist
- D. Psychiatrist
- E. Physical therapist
- F. Other professional qualified to make a clinical diagnosis.

**NOTE: A child care worker may use the Medical Release/Physician's Statement, DSS Form 1247, as needed to verify the client's disability.**

## 2.3 Child Care Assistance Requirements

Once a child has been determined eligible for child care assistance, the child is eligible for a minimum of 12 months regardless of temporary changes in a parent's work, school or training activities or family income, as long as the income does not exceed 85 percent of state median income (SMI). Child care assistance may not be terminated prior to the end of the 12 month period if a family experiences a temporary job loss or temporary change in participation in a training or school activity.

Parents will have continuous eligibility throughout the 12 month period as long as the income does not exceed 85% SMI or experience a non-temporary change. If a parent experiences a non-temporary loss of work, school or training, child care assistance can be terminated however, child care assistance must be provided at the same level for a period of three months to allow parents to engage in job search, resume work, or to attend an education or training program as soon as possible.

### 1. Temporary Changes

Temporary changes are defined as a situation not expected to last more than 3 months (use calendar days to compute). These changes, include but are not limited to the following:

- A. Spring/summer/winter breaks
- B. Leave of Absence from a job
- C. Extended Medical Leave
- D. Seasonal Work
- E. Temporarily loss of a job not expected to last more than 3 months (use calendar days to compute)
- F. Change of residency within the state
- G. Increase in wages that does not exceed 85% SMI

## 2. Non-Temporary Changes

Non-temporary changes are defined as a situation that may exceed 3 months (use calendar days to compute). These situations can be terminated provided child care assistance is provided for three months. These changes, include but are not limited to the following:

- A. Stop participating in work, school, or training
- B. Stop participating in the FI program
- C. CPS case closes
- D. Foster Care case closes
- E. Adoption in finalized

## 3. Use of the 10 day termination policy

The effective date of termination using the 10 day termination policy is the first Monday following the 10<sup>th</sup> working day from the date of determination. (Holidays and weekends are not considered work days.) These change, include but are not limited to the following:

- A. Child on no connection report
- B. Child on excessive absence report
- C. Child no longer needs care or stops attending facility
- D. Client moves out of state
- E. Parent voluntarily withdraws

## 2.4 Specific Child Care Eligibility Categories

A client may be eligible for more than one eligibility category. However, the eligibility category with the most stringent eligibility requirements for which the client qualifies takes priority. As a family's eligibility changes, the client may be switched from one eligibility category to another based on the client's status and availability of funds. A parent may apply for child care services for a dependent child who resides in the caretaker's household. A client may be eligible for child care assistance if they fall within one of the following categories:

## 2.5 Applicant Child Care (ACC)

Applicant Child Care (ACC) is available:

- A. For up to one week to assist an applicant of the FI Program while the FI applicant conducts the initial job search OR
- B. To obtain or maintain a job during the application period. ACC may be paid for up to the 30 day application period.

**NOTE: An applicant who is unable to secure child care assistance will not be required to participate in initial job search which is mandated by the FI Program.**

### 1. Application Process for Applicant Child Care

Payment for ACC is made through the SC Voucher Program under the ACC eligibility category. There is no client fee associated with this category.

The FI CM should send a referral to the child care eligibility worker via the [DSS Form 1269](#), Request for Support Services, with a notation explaining the need for ACC. The SC Voucher Program Application, [DSS Form 3791](#), can be completed with the client by the FI CM or designated county DSS staff.

The child care eligibility worker enters the application into the SC Voucher Program database using the ACC eligibility category and indicates the start date for services in the memo field.

### 2. Disposition of the FI Application

Once the FI case manager (CM) has received the pending information, they will determine eligibility for FI cash assistance. If the FI benefit case is:

- A. **Approved:** Current FI policy and procedures should be followed to determine if FI child care services are needed for participation in the FI Program. The FI CM will meet with the client at the Family Plan appointment. If child care is needed, a new [DSS Form 1269](#), Request for Support Services, and the [DSS Form 3791](#), ABC Child Care Application, may be sent via SCOSA to the ABC Mailbox to the FI child care unit.
- B. **Denied:** If the FI benefit application is denied, the ACC child care will be allowed to end in accordance with termination policy and the memo field in the SC Voucher Program database may be documented.

## 2.6 Family Independence (FI)

The Family Independence Act of 1995 established the FI Program administered by SCDSS. The purpose of child care through FI is to provide the necessary child care for a family to participate in approved employment, education, training, or to comply with their FI Family Plan. A fundamental goal of FI is to emphasize parental responsibility and self-sufficiency.

SCDSS must provide support services such as child care to enable the parent to move into employment, education or training. A parent participating in FI is not required to pay a fee to the provider. However, the parent is responsible for paying the difference in what the SC Voucher Program pays and what the provider charges, if applicable. The FI CM will make a referral to the child care worker using the [DSS Form 1269](#), Request for Support Services. FI child care authorization may be up to 52 weeks at a time as needed for the component in which the client is participating.

In order to receive child care through this category, the individual must meet the following criteria:

- A. Be receiving an FI stipend
- B. Be an FI participant who is either:
  - a. Working
  - b. Attending school
  - c. Attending training
  - d. Complying with the Family Plan as agreed upon with the FI CM  
OR
  - e. Participating in an FI countable component OR
  - f. Attempting to start an FI countable component within two weeks.
- C. Have a need for child care for a child under age 13

**NOTE: A child aged 13-19 with special circumstances may be considered for eligibility.**

- D. Attempting to remedy a sanction (up to 30 days)
- E. In the case of an employed FI recipient who becomes temporarily disabled and is unable to work and unable to care for child, they may continue to receive child care assistance as long as they remain employed and can verify that they are on leave from their employment.

## 1. Challenging Adults through Rehabilitation, Education and Services (CARES)

Child care may be paid for an FI client in the CARES Program. In order to be included in the CARES Program, the incapacity of the adult recipient must prevent the individual from participating in an FI work activity for a period of 90 days or more. An individual diagnosed with a physical or mental disability expected to last 90 days or more, and accepted for treatment by Vocational Rehabilitation, Department of Disabilities and Special Needs, or Mental Health, is also eligible for the CARES Program.

**NOTE: A recipient who is permanently and totally disabled will be included in CARES regardless of their ability to work or participate full-time. A case in which an individual works full-time despite the fact that they are totally and permanently disabled would continue in the CARES Program.**

The medical incapacity is subject to reevaluation at intervals that are specific to each recipient's circumstances, at a minimum, at annual redetermination. This interval is dependent on what has been determined by the doctor or other health professional and what is documented on the [DSS Form 1247](#), Medical Release/Physician's Statement or other verification which is completed and signed by a physician.

**NOTE: Support services funds may be used to pay to have medical forms completed for a participant in the FI Program once they have been determined eligible and have been participating in the CARES Program.**

**Child care services may be provided to comply with the Family Plan as agreed upon by the FI CM. The FI CM must notify the child care worker if there is a change in medical capacity. FI-CARES child care authorization may be up to 52 weeks at a time.**

If child care assistance is needed, the FI CM will send the FI child care unit via the ABC Mailbox in SCOSA the [DSS Form 1269](#), Request for Support Services, and the [DSS Form 3791](#), SC Voucher Program Application, and other documentation as appropriate to request child care.

## 2. FI Two-Parent Program

In order to be included in the Two-Parent program there must be two or more parents in FI. Casemanagement of Two-Parent cases begins with an evaluation and assessment of the adults in the family. The evaluation will be an overall picture of the strengths and growth areas within a family unit. A Family Plan will be developed with the two-parent family and will indicate the activities in which they are required to participate. Support Services, including child care is available to two-parent families in need of care.

**NOTE: Any support services payments offered to participants in the FI Work Program must also be offered to participants that meet the criteria for inclusion in the Two-Parent program.**

If child care assistance is needed, the FI CM will send the FI child care unit via the ABC Mailbox in SCOSA the [DSS Form 1269](#), Request for Support Services, and the [DSS Form 3791](#), SC Voucher Program Application, and other documentation as appropriate to request child care.

### **3. FI - Child Only (FI/CO)**

A parent/caretaker relative who is receiving an FI benefit (FI Child Only case) for a child may be eligible to apply for FI/Child Only (FI/CO) child care. These cases contain caretaker relatives, SSI parents, or disqualified parents. The following criteria must be used in determining child care eligibility:

- A. Child must be an FI or SSI recipient
- B. Parent/caretaker relative must be employed at least part-time (15 - 29 hours), in school or training or have a verified disability at the time of application. Employment may be in conjunction with training or attending school.  
  
In two-parent families, both parents/caretakers must be working at least part-time, in school/training, or have a verified disability.
- C. Parent/caretaker relative must meet income guidelines to be eligible for FI/CO.
- D. Parent/caretaker relative must pay a fee based on their income.
- E. Authorization may be up to 52 weeks.
- F. The family must comply with the SC Voucher Program attendance policies.
- G. The child is under the age of 13 (or the child is aged 13 -19 with Special Needs).

#### **Processing of FI/CO Child Care Cases**

Due to FI/CO cases not having an FI CM in the DSS county offices, child care eligibility staff will be responsible for obtaining an SC Voucher Program Application from the parent/caretaker relative. The following process will be followed:

- A. Review CHIP to ensure that the child is receiving an FI benefit in a Child-Only case (use the child's SSN to inquire on a specific child). This review will serve as the child care referral.
- B. If the child is receiving an FI benefit and the parent/caretaker relative meets the specific FI/CO eligibility criteria as outlined in [FI-Child Only \(FI/CO\)](#) (See Section 2.5.3), then the child care eligibility worker can mail, email, or fax the SC Voucher Program Application to the parent/caretaker relative and request income verification or training verification if the parent/caretaker relative is on SSI, according to policy.

An individual who meets qualifications will be eligible to receive 12 months of services and may re-apply for an additional 12 months as funding permits and as long as the child continues to receive FI benefits. The application must be filed in the name of the parent/caretaker relative and entered into the SC Voucher Program database using the FI/CO eligibility category. A parent/caretaker relative whose FI/CO case closes due to income exceeding the limit is eligible to apply for transitional child care services.

#### 4. FI - Child Only – Protective Services (FI/CO-PS)

Caretaker/Relatives (aunts, uncles, grandparents, etc.) receiving an FI benefit for a dependent child may be eligible for child care assistance. Child care may be provided for child(ren) who have experienced emotional, physical, or other trauma.

- A. Child must be an FI recipient.
- B. The family can receive up to 52 weeks of child care. Family can re-apply for services if child remains eligible.
- C. The parent/caretaker is the applicant, and all the information on the application relates to the family.
- D. Parent/caretaker relative must be employed at least part-time (15 - 29 hours) at the time of application and remain employed to continue receiving services. Employment may be in conjunction with training or attending school. A parent/caretaker who receives SSI may be eligible for child care assistance if they are either employed at least part-time or participating in an activity (training or education) that will enable them to become employed in the future.
- E. In two-parent families, both caretakers/relatives must be working at least part-time. Exceptions to this policy are made if one of the caretaker/relatives meets the following criteria: **A caretaker/relative in a two-parent family who has a verified temporary or permanent disability.**
- F. The applicant does not have to meet the income guidelines, however the income must be verified in order to assess a client fee.

- G. Only licensed child care providers may be used for FI/CO-PS child care. If there is a situation in which a licensed provider cannot be obtained, an exception to the policy will be reviewed on a case-by-case basis in order to determine approval by State Office. See [Exception Criteria for CPS and FC Child Care Cases](#) below (Section 2.12.1). Also See **Out-of State Provider Section 5.6.7.**
- H. The family will be responsible for the weekly client fee per child. The fee is based on family size and the family's total gross income. If the family's income is above the maximum entrance amount (but under the exit amount), the fee is assessed at a dollar less than the maximum entrance amount. If the family's income is above the maximum exit income, the fee is assessed at a dollar less than the maximum exit amount.
- I. The family must comply with the SC Voucher Program attendance policies.
- J. The child is under the age of 13 (or the child is aged 13 -19 with Special Needs).

## **2.7 JUMMP Child Care**

As a requirement of the Family Independence (FI) program eligibility, applicants and recipients must participate with work programs designed by the agency to promote work and work readiness. Jobs Upfront Mean More Pay (JUMMP) is one such program. The JUMMP program's focus is on obtaining a job or retention of a job in order to support self and family. Mandatory participants must actively engage in job related activities for 30 hours per week during the JUMMP period.

The SC Voucher Program will provide child care for JUMMP participants. In order to access the child care, the participant must have an eligible child under the age of 13, be otherwise eligible for FI, and be in need of child care to participate in JUMMP activities. Child care may also be provided for 5 weeks in order for the JUMMP participant to cure an FI sanction.

**NOTE: A child aged 13 through 18 with special circumstances may be considered for eligibility.**

### **1. Child Care Authorization/Approval Process**

The authorization and approval process for child care is as follows:

- A. The JUMMP Employment Specialist (ES) will complete forms [DSS Form 1269](#), Request for Support Services, and [DSS Form 3791](#), Child Care Application, and if employed, provide 30 days of consecutive check stubs,

wage form, statement on company letterhead, etc. Income from CHIP, PATS, or SCOSA imaging may also be used, if available.

- B. The JUMMP contractor will scan the information into the SCOSA imaging system and assign the information to the ABC mailbox.

## 2. ACC/JUMMP

As an FI applicant, child care assistance may be provided to a JUMMP participant in order for them to:

- A. Participate in the JUMMP orientation appointment.
- B. Start the initial job search requirement.
- C. Participate in JUMMP activities as required.

Child care will be provided for up to six weeks of full-time care under the applicant (ACC/JUMMP) child care category.

## 3. FI/JUMMP

The ACC/JUMMP child care can be seamlessly switched to FI/JUMMP child care. The JUMMP ES must notify the child care eligibility unit via [DSS Form 1027B](#), JUMMP Communication Form, indicating the client's three week compliance with the program via the ABC Mailbox in SCOSA in order to make child care aware of the continued need for care. There may be breaks in the weeks of connections between the ACC/JUMMP and the FI/JUMMP; however the client's FI benefit application date is the same as the FI benefit application date used to obtain ACC/JUMMP child care. Full-time child care will be provided for up to 52 weeks. FI/JUMMP child care may be obtained if the:

- A. FI benefit case is approved AND
- B. JUMMP participant has complied with the JUMMP requirements (If the client is a late referral to JUMMP, the FI benefit case may be approved before there is time to complete the JUMMP requirements. Therefore, FI/JUMMP child care will be given if the FI benefit case is approved in order for the client to participate.)
- C. In a two-parent household where one parent is disqualified and the other parent is referred to JUMMP, child care may be provided only if the disqualified parent is working, in school, in training or have a verified disability (unable to care for the child). Verification must be provided, as appropriate

**NOTE: During ongoing case management, the JUMMP ES must notify the child care eligibility unit via [DSS Form 1027B](#), JUMMP Communication Form, if the client**

becomes non-compliant with the program via the ABC Mailbox in SCOSA in order to make sure child care services can be terminated.

#### 4. TCC/JUMMP

**SPECIAL NOTE: For the period of June 2012 through August 2012, the SC Voucher Program operated under original JUMMP policy to allow transitional child care when the FI benefit case was denied due to earned income. This policy was later clarified as indicated below:**

Transitional child care (TCC/JUMMP) may be provided when a client's FI benefit case is:

- A. Closed due to earned income. Due to the timing of the FI benefit approval and subsequent closure due to earned income, the child care category can change from ACC/JUMMP child care to TCC/JUMMP child care. There may be breaks in weeks of connections between ACC/JUMMP and TCC/JUMMP. TCC/JUMMP child care will be provided for up to 52 weeks from effective date of CHIP closure.
- B. Denied due to income from new employment or increased hours obtained for the FI applicant by the JUMMP contractor. TCC/JUMMP child care will be provided for up to 52 weeks from the first Monday in the month of the denial date in the CHIP notices (For example, if the client's FI benefit case was denied on October 15<sup>th</sup>, the TCC/JUMMP child care start date would be the 1<sup>st</sup> Monday in October for 52 weeks.)
- C. In a two-parent household where one parent is disqualified and the other parent is referred to JUMMP, child care may be provided only if the disqualified parent is working, in school, in training or have a verified disability (unable to care for the child). Verification must be provided, as appropriate

**NOTE: Transitional child care CANNOT be provided for a client who has income, at the time they apply for FI benefits, which makes them ineligible for an FI benefit and the FI application is subsequently denied due to income.**

#### 5. JUMMP Non-Compliance

FI benefit applications with JUMMP mandatory participants who do not comply with the JUMMP requirements during the application period will result in the denial of the application. The JUMMP ES will notify child care eligibility unit via [DSS Form 1027B](#), as appropriate.

FI cases with JUMMP mandatory participants who do not comply with the JUMMP requirements will be sanctioned as soon as CHIP cutoff schedules permit. The JUMMP ES will notify child care eligibility unit via [DSS Form 1027B](#), as appropriate, to terminate FI/JUMMP child care.

## 6. Client Curing Sanction

A client is eligible for 5 weeks of child care in order to cure a sanction. JUMMP ES should scan a DSS Form 1027B to the ABC Mailbox with “curing a sanction” written on the form. Once the client has cured the sanction and the case has been re-opened, then the JUMMP ES or CERCU should submit a DSS Form 1027b to the ABC Mailbox so that additional child care can be authorized. NOTE: The case in the CHIP system needs to be in an open case status.

## 7. FI Benefit Case Closure/Denial

If the FI benefit case is closed or denied for any reason, the CERCU or JUMMP ES will notify the child care unit via [DSS Form 1027B](#), JUMMP Communication Form, and the child care will be terminated as appropriate according to the SC Voucher Program’s termination policy.

## 8. JUMMP Participant Transferred to the County DSS Office

At the end of the JUMMP participation period, the JUMMP ES will refer the participant to the county for case management and the following steps should be taken:

- A. CERCU should close out any active components on PATS.
- B. CERCU or JUMMP ES should forward, the [DSS Form 1027B](#) to the ABC Mailbox, as appropriate, and to the county FI designated supervisor for assignment of a case manager.

### Action Needed by Child Care Unit

Upon receiving the [DSS Form 1027B](#), JUMMP Communication Form, the child care worker will take the appropriate action:

- A. If the client is employed, FI/JUMMP child care will continue for 30 days or for the remaining weeks the client is connected in the SC Voucher Program database, whichever is less, to allow time for the client to meet with the FI CM. The employed FI client must meet with the FI CM to complete a Family Plan, SC Voucher Program Application, and provide 30 days of consecutive check stubs, wage form, company letterhead, etc. The FI CM will follow current procedures for sending a new child care request to the ABC Mailbox.

- B. If the client is not working at the time that they are transferred to the county, child care will be terminated following the SC Voucher Program's termination policy. In order for child care to be continued, the client will need to meet with their FI CM for a Family Plan and be placed in a component. FI CM will complete the child care paperwork as indicated above.

## **2.8 Transitional Child Care (TCC)**

An individual who has received an FI benefit and whose benefit ends due to one of the following is eligible to apply for transitional child care assistance:

- A. Employment
- B. Increase in earned income
- C. Expiration of earned income disregards
- D. Waiver of earned income disregards
- E. Voluntary closure requests when excluded income exceeds the income limit
- F. 24-month FI time limit.

A parent is eligible based on meeting the child care income limit guidelines and the fact that they are employed at least part-time (15 – 29 hours per week). Travel time is also considered when determining the number of hours worked each week. A client that is employed who becomes temporarily disabled and is unable to work and unable to care for child, they may continue to receive child care assistance as long as they remain employed and can verify that they are on leave from their employment. See [Establishing the Need for Child Care Services](#) (Section 2.1.5). A parent receiving child care through this category is required to pay a portion of their child care cost through a client fee paid to the provider. TCC may be authorized for up to two years.

There are four different types of transitional categories:

- A. Transitional Child Care 1 ([TCC1](#))
- B. Transitional Child Care 2 ([TCC2](#))
- C. Transitional Child Care 24 ([TCC24](#))
- D. Transitional Child Care – Full Family Sanction ([TCC/FS](#)).

### **1. Two-Parent Family**

In a [two-parent family](#)~ one parent must be working at least part-time (15 – 29 hours per week). Travel time is also considered in determining the number of hours worked per week. See [Establishing the Need for Child Care Services](#) (Section 2.1.5). The parent can also attend school in conjunction with work. The second parent must be working or going to

school at least part-time, or have a verified disability. If one or both parents work or attend school or training part-time, only part-time child care will be given.

**NOTE: A family household unit where one parent works at least part-time and the other attends only school is eligible to apply for such assistance.**

## 2.9 Transitional Child Care 1 (TCC1)

Eligibility for TCC1 begins the first month of FI benefit ineligibility. The child care eligibility worker will use CHIP to determine that the FI benefit case has been closed for a transitional closure reason and to determine the effective date of FI benefit closure, to ensure that the appropriate number of service weeks are given to the client. To receive child care through this category, the individual must:

- A. Be closed from FI due to earned income exceeding the FI income guidelines or due to voluntary withdrawal due to earned income as indicated by closure code VE
- B. Have received an FI benefit in the month immediately preceding the first month of ineligibility
- C. Have a need for child care for a child under age 13

**NOTE: A child aged 13-19 with special needs may be considered for eligibility.**

- D. Be working part-time or full-time. A parent who is attending school and working at least part-time is eligible for child care assistance for both school and work. Total hours must be a minimum of 30 hours per week (travel time can be considered). See [Two-Parent Family](#) (Section 2.7.1) on criteria for two-parent families.
- E. Be income-eligible based on current income standards.

**NOTE: TCC1 authorization may be up to 52 weeks.**

The child care worker must verify the client’s transitional eligibility period using the CHIP system to research the reason for case closure/denial and the effective date of the FI closure/denial. The following CHIP closure/denial codes should be used:

| Action by FI CM | CHIP Code | Code Reason                               |
|-----------------|-----------|---|
| Closure         | EX        | Closed Due to Earned Income               |
| Closure         | DX        | Closed Due to Loss of Disregards          |
| Closure         | CX        | Closed Due to Child Support Income        |
| Closure         | JE        | Closed Due to Earned Income JUMMP         |
| Closure         | TL        | Closed Due to FI Time Limit               |
| Closure         | VE        | Voluntary Withdrawal Due to Earned Income |
| Closure         | FA        | Full Family Sanction                      |

|         |    |                      |
|---------|----|----------------------|
| Closure | AT | Full Family Sanction |
| Closure | RJ | Full Family Sanction |
| Closure | DS | Full Family Sanction |
| Denial  | IN | Full Family Sanction |

## 1. Seamless Eligibility for First Year of Transitional Child Care

SC Voucher Program services should be continued in a timely manner without interruption, and in an effort to ensure that there is no break in services for a family moving between FI child care to the first year of TCC, a child care application from the client will not be required. If the FI benefit effective date of closure is within 60 days of the processing date, the seamless process can be used. If the FI benefit effective date of closure is over 60 days then the client will complete a new child care application and submit income verification.

When the FI Child Care Unit becomes aware that an open FI child care case needs to go seamless to TCC, they will enter the status code 55 in the SC Voucher Program database and send the appropriate TCC unit staff person an email indicating that they need to process seamless transitional child care for the client.

If the seamless TCC case is approved, the TCC staff will determine the effective transitional closure date in CHIP and close out the FI child care accordingly. If the effective transitional closure date in CHIP has past, then closeout the FI child care effective the first available Monday and insert the new TCC application into the SC Voucher Program database, which will produce an approval/connection letter that will be sent to the client and provider. Child care eligibility worker will call the client and the provider to make them aware of the change in connection.

To allow for continued child care services, the TCC Unit staff will:

- A. Review CHIP to ensure that the client's FI benefit case has been closed appropriately for a transitional reason code.
- B. Determine the effective date of closure in CHIP to ensure that the appropriate number of weeks are given for child care, up to 52 weeks from the effective date of closure.
- C. Review the SC Voucher Program database to ensure that the client is currently receiving FI child care. If the FI participant is not receiving FI child care, a [DSS Form 3791](#), SC Voucher Program Application, must be completed.
- D. Use information from CHIP and SCOSA to update the SC Voucher Program database, as appropriate, with a current address, family composition, family size, employer information, and income.

- E. Determine income using the current wage information in CHIP. Verify that the income does not exceed the child care income standards.
- F. Update the information into the SC Voucher Program database for the first year of TCC and obtain an application number.
- G. Call the client and the provider to make them aware of the changes such as the category change, the copay, number of weeks approved, etc.

**NOTE: If during the review of the TCC case, the seamless TCC case is denied, the TCC worker will complete a termination according to policy for the case so that a termination notice will go to the client and provider.**

## **2.10 Transitional Child Care 2 (TCC2)**

The transitional child care, second year (TCC2), eligibility category is for:

- A. An individual whose first year of transitional time period is ending. An additional 52 week eligibility period may begin under TCC2 when any of the aforementioned categories end. If receiving TCC1, the SC Voucher Program sends an automated notification to the parent and provider 60 days prior to services ending.
- B. A former FI participant who was eligible to apply for TCC but failed to do so. If the participant is eligible, only the remaining months in the transitional eligibility period can be approved. The child care worker must verify the remaining transitional time period using the CHIP system.

Eligibility for child care begins effective the first Monday after the TCC1 eligibility period has ended. If the participant does not request TCC2 until after the second 12-month eligibility period begins, only the remainder of the second 12 months may be authorized. A new application is required and income eligibility must be re-determined.

A parent receiving child care through this category is required to pay a portion of their child care cost through a client fee paid to the provider.

To receive child care through this category, the individual must:

- A. Not be receiving an FI benefit, and the FI benefit case closed for a transitional reason.
- B. Be working full-time or part-time (second parent may be permanently or temporarily disabled—verification required). If working and attending school, employment and education hours must be for a minimum of 30 hours per week.
- C. Have a need for child care for a child under age 13.

**NOTE: A child aged 13-19 with special needs may be considered for eligibility.**

- D. Be income-eligible based on current income standards.

## **2.11 Transitional Child Care 24 (TCC24)**

### **1. TCC24-1**

Eligibility for TCC24-1 (first year) begins the first month of FI benefit ineligibility due to 24-month FI time limits.

A parent receiving child care through this category is required to pay a portion of their child care cost through a client fee paid to the provider.

To receive child care through this category, the individual must:

- A. Be closed from FI benefits due to time limits.
- B. Be working full-time or part-time (second parent may be permanently or temporarily disabled—verification required)
- C. Have a need for child care for a child under age 13

**NOTE: A child aged 13-19 with special needs may be considered for eligibility.**

- D. Be income-eligible based on current income standards.

### **2. TCC24-2**

The transitional child care is due to FI benefit case closing due to the client using all of their 24-month FI benefit time limits. Second year uses child care category TCC24-2.

## **2.12 Transitional Child Care – Full Family Sanction (TCC/FS)**

### **1. TCC/FS - 1**

Eligibility for TCC/FS -1 (first year) begins the first month of FI benefit ineligibility due to full family sanction. A family household member who becomes employed or increases

earnings during a full family sanction and the earnings cause the family household unit to become ineligible for FI benefits may be eligible to receive child care services under TCC/FS.

To request TCC/FS during the full family sanction, the FI CM must:

- A. Verify new employment or increased earnings AND
- B. Complete a mini-budget to determine if income exceeds the FI gross and/or net income limit.

All available earned income disregards must be given to determine eligibility or ineligibility.

If case is income ineligible for FI benefits, the FI CM must:

- A. Make a referral to the child care worker on the [DSS Form 1269](#), Request for Support Services
- B. Indicate on the referral that the FI case benefits originally terminated due to full family sanction AND
- C. Indicate that the individual is now employed or has had an increase in earnings.

The client may be eligible for seamless child care eligibility if they were receiving FI child care in order to cure their sanction. If the client was not receiving FI child care, an SC Voucher Program application must be taken. An individual who qualifies may receive TCC/FS for 12 months and may reapply for an additional 12-month period based on the availability of child care funding.

## 2. TCC/FS - 2

A client may reapply for an additional 12-month period based on the availability of child care funding. The child care category in the SC Voucher Program database for the second year is TCC/FS -2.

### 2.13 Child Welfare Child Care

Child care assistance may be provided if funding is available for a family that has an open Child Protective Services (CPS) treatment case or a child in an open foster care (FC) case. Foster parents must be working. Specialized and Intensive Foster Care and Clinical Services (IFCCS) foster child care cases will also be approved on a case-by-case basis (follow exception criteria below). A child may also be in the process of being adopted, but the adoption has not been finalized. Services are provided to a child's family to prevent

further abuse or neglect or to provide a stable and consistent routine for a child to compensate for stressful experiences. A child is eligible for child care through age 12. However, a child, 13 years old through age 18, who should not be left unsupervised or who has emotional problems may receive child care after the age of 12. Documentation should support the reasons child care is needed after age 12.

**NOTE: Only children in the custody of South Carolina are eligible for child care services through the SC Voucher Program. If the child is in the custody of another state, it is the sending state's responsibility to provide assistance to the child.**

Only licensed child care providers may be used for CPS and FC child care. If there is a situation in which a licensed provider cannot be obtained, an exception to the policy will be reviewed on a case-by-case basis in order to determine approval by State Office. See [Exception Criteria for CPS and FC Child Care Cases](#) below (Section 2.12.1). Also See [Out-of State Provider Section 5.6.7](#).

## 1. Exception Criteria for CPS and FC Child Care Cases

Child care arrangements for CPS and Foster children must be in licensed facilities enrolled in the SC Voucher Program. However, exceptions will be made on a case-by-case basis. The Human Services (HS) worker should request exceptions in writing (via email) to Liz Smith at Liz.Smith@dss.sc.gov. The request should detail the following:

- A. Caretaker's name and SSN
- B. CPS/FC child's name and SSN
- C. Reason the particular facility is requested
- D. Worker's assessment that the facility meets the child's assessed needs
- E. Documented approval from the HS program supervisor for the child to receive child care services in a facility that is registered or exempt from regulatory requirements.

Approval for requests for exceptions are not guaranteed. Therefore, requests should be made as far in advance as possible. If the approval is granted by State Office, the child care worker must notate the approval in the memo field.

## 2. Application Process for CPS and FC Child Care

The HS worker will refer cases for child care to the child care worker using the [DSS Form 3004](#), Child Care Referral Form. Child care services should be authorized by the child care worker prior to the start date for services. Therefore, referrals must be made in a timely manner.

The child care worker with a caseload in the county of case management (county in which the case originates) is responsible for determining eligibility for CPS and FC cases. This policy includes those cases managed through Specialized Foster Care and IFCCS. A CPS client may receive child care for up to 52 weeks.

**NOTE: When a CPS case is closed or no longer active, the child care case will be terminated according to SC Voucher Program's termination policy upon notification from the HS worker or via verification from agency databases.**

### 3. CPS-In

A case is considered to be a CPS-In case when the child continues to live in their own home. An application will be processed by the child care worker if the following eligibility criteria are met:

- K. The family must have an open treatment CPS case managed by an HS CM.
- L. The CPS family can receive up to 52 weeks of child care (maximum of 52 weeks of care per open case).
- M. The parent/caretaker is the applicant, and all the information on the application relates to the family.
- N. The applicant does not have to meet the income guidelines or be working, in school or in training, because the service is provided in conjunction with protective services. However, income must be verified in order to assess a client fee. If the parent/caretaker refuses to provide income verification, the child care worker must enter income in the SC Voucher Program database at \$1.00 below entrance maximum in order to assess the client fee.

**NOTE: CPS clients who are not working, in school, or training can receive up to full-time child care, as needed.**

- E. The HS CM must provide information to the child care worker to include:
  - a. Completed [DSS Form 3004](#), Child Care Referral Form
  - b. Completed [DSS Form 3791](#), SC Voucher Program Application. **It is preferred that the parent/caretaker sign the application. If the parent/caretaker refuses to sign, it is recommended that the HS CM sign the application.**
  - c. Verification of income.
- F. A CPS-In client must need the service for one of the following reasons:
  - a. To enable the child to remain in the home while the parent pursues rehabilitation

- b. To reduce the detrimental effects of abuse and neglect by providing the child with developmentally appropriate experiences in the areas of physical, social, emotional, cognitive, and language development.
- G. The family will be responsible for the weekly client fee per child. The fee is based on family size and the family's total gross income. If the family's income is above the maximum entrance amount (but under the exit amount), the fee is assessed at a dollar less than the maximum entrance amount. If the family's income is above the maximum exit income, the fee is assessed at a dollar less than the maximum exit amount. The family may also be responsible for the difference in what the SC Voucher system pays and what the child care provider charges.
- H. The family must comply with the SC Voucher Program attendance policies.
- I. The child is under the age of 13 (or the child is aged 13 -19 with Special Needs).

#### 4. CPS-Out

A case is considered to be a CPS-Out case when the child is living in the home of a relative or designated caretaker.

An application must be processed by the child care worker, and the following eligibility criteria met:

- A. The family must have an open treatment CPS case managed by an HS CM.
- B. The CPS-OUT family can receive 52 weeks of child care. (Maximum of 52 weeks of care per open case).
- C. The caretaker/relative is the applicant, and all the information on the application relates to the caretaker.
- D. The applicant does not have to meet the income guidelines or be working, in school or in training, because the service is provided in conjunction with protective services. However, income must be verified for the program to comply with reporting requirements. If the caretaker/relative refuses to provide income verification, the child care worker must enter income in the SC Voucher Program database at \$1.00 below entrance maximum.

**NOTE: CPS clients who are not working, in school, or training can receive up to full-time child care, as needed.**

- E. The HS CM should provide information to the child care worker to include:
  - a. Completed [DSS Form 3004](#), Child Care Referral Form
  - b. Completed [DSS Form 3791](#), SC Voucher Program Application. **It is preferred that the caretaker sign the application. If the parent/caretaker refuses to sign, it is recommended that the HS CM sign the application.**
  - c. Verification of income.
- F. A CPS-Out client must need the service for one of the following reasons:
  - a. To enable the child to remain in the home of the caretaker/relative while the parent pursues rehabilitation
  - b. To reduce the detrimental effects of abuse and neglect by providing the child with developmentally appropriate experiences in the areas of physical, social, emotional, cognitive, and language development.
- G. The family is not responsible for the weekly client fee but may be responsible for the difference in what the SC Voucher system pays and what the child care provider charges.
- H. The family must comply with the SC Voucher Program attendance policies.
- I. The child is under the age of 13 (or the child is aged 13 -19 with Special Needs).

## 5. Foster Care Criteria

Child care services may be provided to a foster child if the foster parent is working, in school/training or has a verified disability. A child in a licensed group home or emergency shelter is not eligible to receive child care. An application is completed in the name of the foster child. It is preferred that the application is signed by the foster parent on behalf of the foster child. Since the foster parent is caring for a child of the State, no fee is charged for child care assistance for the foster child. However, a foster parent will be responsible for the difference between what the SC Voucher Program pays for and what the provider charges. A foster child whose case is transferred to Adoption Services remains eligible for child care benefits until the adoption is finalized by the court, as long as the foster parent and/or adoptive parent meet the eligibility criteria for the SC Voucher Program.

**NOTE: A foster parent who owns a licensed or registered family child care or group child care home or center cannot receive child care assistance to provide child care for their own foster child.**

The information on the application relates to the foster child and the foster child's income. However, all foster parents must meet the working requirement. Exceptions to the work requirement may be made by the Child Care Director/designee on a case-by-case basis. The following eligibility criteria must be met if exception not granted:

- A. For entrance into the program, the foster child's monthly gross income shall not exceed 150% of poverty based on a family size of one. The foster child may remain in the program, as long as the other eligibility criteria are met and the foster child's monthly gross income does not exceed 175% of poverty for a family of one. Child care can be authorized for up to 52 weeks.
- B. The foster parent must need the service in order to work, attend school/training or have a verified disability (unless exception has been granted). The child care eligibility worker can use the 30 days of consecutive pay stubs which are preferred to verify the hours a foster parent is working. Child care eligibility staff can use one check stub to verify employment if there is year-to-date income on the check. If pay stubs are not available, a letter printed on company letterhead, indicating the number of hours worked, may be submitted. Actual wages are not required since only the foster child's income is counted. If a foster child is in a two-parent foster family, both parents must be working. Documentation must be obtained for both parents. Information from CHIP, PATS, Work Number or other databases may be used to verify work status. Exceptions to the work requirement may be made by the Child Care Director/designee on a case-by-case basis.
- C. Only the foster child's income is used in eligibility. The case must be entered using the foster child's actual income. If there is no income, enter \$0.
- D. The foster child is under the age of 13 (or the child is aged 13 -19 with Special Needs).
- E. The case is entered using the foster child's name and SSN.

**NOTE: If the foster child does not have a valid SSN, the child care worker must use the child's birth date to construct a temporary pseudo SSN.**

- F. A client receiving assistance under this program can choose only licensed facilities or programs. The only exception is when the HS CM has received prior authorization from State Office SC Voucher Program staff.

## 6. Specialized and IFCCS Foster Care

Child care eligibility for a child in a licensed Specialized and IFCCS foster home may be approved on a case-by-case basis. These cases must be reviewed in writing or by email by Liz Smith in Child Care Services. Follow [Exception Criteria for CPS and FC Child Care Cases](#). (Section 2.12.1)

A foster parent in this category may be eligible for child care, if the foster parent meets the requirements of the FC Program, is working, in school/training or has a verified disability and the child care is appropriate. Child care can only be considered when the child is placed in a licensed home.

The referring Foster Care CM is responsible for:

- A. Completing the [DSS Form 3004](#), Child Care Referral Form
- B. Completing the [DSS Form 3791](#), SC Voucher Program Application
- C. Obtaining the necessary signatures
- D. Verifying employment, school/training and/or disability
- E. Requesting authorization from State Office to approve child care for a child in specialized or intensive foster care AND
- F. Submitting a waiver request, as appropriate, for use of a child care facility that is not licensed.

## 7. Child Care for Baby of a Foster Child

A foster parent may receive child care assistance for the baby of a foster child when SCDSS does not have custody of the baby. The foster parent must be employed, in school/training or disabled and the foster child must be attending school or be employed in conjunction with school attendance. The baby will be eligible as long as the mother (foster child) remains in foster care and the child resides in the care of the mother. The application should be entered in the name of the foster child and all income information will be based on the foster child's income.

### 2.14 Non-Welfare Low-Income Families

These eligibility categories are used for an eligible client when they do not meet the criteria for:

- A. [ACC](#)

- B. [FI](#) or [FI CARES](#), [FI Two-Parent Child Care](#) or FI - Child Only ([FI/CO](#))
- C. [TCC1](#), [TCC2](#), [TCC24](#) or [TCC/FS](#)
- D. [Child Welfare Child Care](#).

If funding is available, an individual who is not eligible may be determined eligible under other funding sources as long as the following criteria are met:

- A. The applicant must need child care services in order to work or attend school or training. An exception may be made for a family where one parent is working, in school or training and the other parent is disabled, or both parents are disabled, either permanently or temporarily.
- B. The applicant needs a minimum of 15 hours of child care per week.
- C. The family's total gross income at the time of entrance into the program shall not exceed 150% of poverty based on family size. The family may stay in the program until their gross income exceeds 175% of poverty, provided they meet the other eligibility criteria.
- D. The applicant has a need for child care for a child(ren) under the age of 13 (or child aged 13 -19 with Special Needs).

## **2.15 Criminal Domestic Violence**

This eligibility category provides child care vouchers for an individual living in a shelter to escape a domestic violence or sexual assault situation or who is receiving services from a state-funded domestic violence/sexual assault program. A parent receiving child care for this category is required to pay a portion of their child care costs through a weekly client fee paid to the child care provider. Funding for this category is limited and is for only a **lifetime maximum of 52 weeks**. Parents must meet the basic SC Voucher Program criteria and verification of participation with a State-funded domestic violence program as required.

## **2.16 Head Start**

Parents applying for Head Start child care must meet basic SC Voucher Program criteria. Head Start provides child care wrap-around services to a parent whose child is enrolled in a Head Start program as funding is available. Intake is done through the local participating Head Start program or Early Head Start program and eligibility is handled by the Control Center.

If approved for services, the child must attend the Head Start approved child care site for a minimum of two weeks before transferring to another provider. Failure to attend for two weeks may result in the termination of services unless otherwise approved by the grantee.

## 2.17 First Steps

Parents applying for First Steps must meet the basic SC Voucher Program criteria. First Steps provides child care assistance to low-income families when funding is available through the local First Steps County Partnerships. Intake is done in a variety of ways through the local participating First Steps Partnerships and eligibility is handled by the Control Center. Provider selection may be limited for this category of child care.

## 2.18 Special Needs

Special Needs provides child care assistance to a parent who has a child with a documented disability or special need and is available to children from birth to age 19. Intake is handled through one of the following entities:

- A. County [Department of Disabilities and Special Needs](#) offices
- B. [BabyNet](#) offered through the SC First Steps to School Readiness
- C. [Children's Rehabilitative Services](#) offered through DHEC
- D. [SC School for the Deaf and Blind](#)
- E. [Easter Seals](#)
- F. [Bright Start](#)
- G. [SC Autism Society](#)

The child must have a special need as identified by one of the entities above, or must have a current Individualized Education Plan (IEP) through their school, which specifies that they are receiving speech, occupational, or physical therapy. Child care applications for children who have IEPs can be obtained by calling SC Voucher Program Special Needs at 1-803-898-9735. Additionally, children with IEPs receive child care services only through the ending date listed on the IEP.

**NOTE: All children with identified special needs are not automatically eligible for this fund source.**

Eligibility is handled at the State Office. An applicant may be determined eligible under this category if the following criteria is met:

- A. Must be working, in school, in training, or disabled
- B. Must have a child with a documented disability or special need and be referred from one of the above entities
- C. Eligible children must be under the age of 19 years old
- D. Must need child care a minimum of 15 hours per week
- E. Must be 18 years old or an emancipated minor AND
- F. Must be at or below 150% of poverty.

The parent must pay a fee based on their income.

Child care is authorized only for the child who has special needs. Other children listed on the application will not be approved for services under the special needs funding.

## **2.19 Homeless Child Care**

Child care slot are provided in coordination with the State Department of Education Homeless liaison and the four homeless coalition continuum of care organizations throughout the state:

- Eastern Carolina Homeless Organization
- Low Country Homeless Coalition
- Midlands Area Consortium for the Homeless
- United Housing Connections

According to the McKinney-Vento definition of homelessness, a family will be considered homeless when they lack a fixed, regular and adequate nighttime residence. The lack of a fixed nighttime residence includes loss of housing, economic hardship, living in motels, hotels, trailer parks or camping grounds due to the lack of alternative accommodations or are living in emergency or transitional shelters. Furthermore, living in cars, parks, public spaces, abandoned buildings, substandard housing, bus or train stations or similar settings.

To qualify for funding set aside for the homeless, a family must:

- Meet the McKinney-Vento definition of homeless (above)
- Must provide verification of homelessness via a letter on Coalition or Department of Education letterhead indicating that the family has been determined to meet the definition of homelessness as defined by the McKinney-Vento Act.
- Must be at or below 150% of poverty at the time of application.

- Must be working, in school, in training or actively searching for work
  - If working, the most recent 30 days of pay stubs is preferred or a letter from the employer indicating the number of hours worked per week and the rate and frequency of pay.
  - If in school, a copy of the current school schedule and proof of paid registration.
  - If in a job search component, it should be indicated at the time the application is submitted. The applicant will be given 12 weeks of presumptive eligibility.
  - If in a current drug and/or alcohol or mental health treatment program, it should be indicated at the time the application is submitted. The applicant will be given 12 weeks of presumptive eligibility.
- Must have a child under the age of 13 in need of child care services

Clients approved for funding under the homeless initiative will not have a co-pay. However, if the child care provider charges more than what the SC Voucher Program can pay, the provider may require the parent to pay the difference.

## **2.20 Family Literacy Child Care**

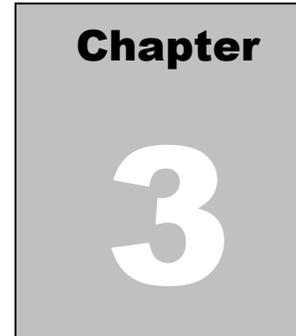
Child care slots are provided via coordination with the South Carolina Department of Education for parents pursuing a high school diploma or GED.

To qualify for the child care funding the parent:

- Must provide a copy of their current school schedule
- If working, provide the most recent 30 days of check stubs
- Must be at or below 150% of poverty

## Chapter 3

### Application Process



#### 3.1 Intake and Application

Since the passage of the South Carolina Family Independence (FI) Act, the majority of child care applications come through the county offices of the South Carolina Department of Social Services (SCDSS) which is the focal point for FI/Welfare Reform. However, when funds are available for other non-welfare low-income clients, an individual may apply for services through SCDSS other entities that may be identified by SCDSS.

Within the ABC Program, in addition to FI/Welfare Reform participants, certain funds are set aside and designated to serve specific target populations, which are handled by State Office. Intake for these target populations is handled as follows:

#### 3.2 Child Care Application

It is recommended that the SC Voucher Program Application, [DSS Form 3791](#), be the primary document used for determining eligibility; however, other information such as pay stubs, tax forms, agency databases (including CHIP, PATS, CAPSS, documentation in SCOSA, etc.) may be used to determine eligibility and may be used in conjunction with the application or database available. Every effort must be made to ensure that child care eligibility is processed into the SC Voucher Program database within 15 calendar days from the date the information is received.

Eligibility is determined at least once every 12 months and more often if:

- A. The applicant reports an increase in income.
- B. The client changes eligibility categories within that 12-month time period.
- C. There is a change in family size.
- D. A change in employment necessitates a change to full-time care for a client who is initially determined eligible for half-time care only. Changes from half-time to full-time or full-time to half-time will be effective the Monday after the change has been requested forward unless payments have not been made. See [Changes Within the Eligibility Period](#) (Section 6.10).

**NOTE:** A new SC Voucher Program application is not used for a family moving from FI to the first year of transitional child care or from ACC/JUMMP to FI/JUMMP and TCC/JUMMP.

If the applicant meets eligibility criteria for funding under which they are applying, a determination is made that the family is eligible. When the family is eligible, all children under age 13 within the family are eligible. However, all children may not need child care services or they may not meet the age requirements for particular funding sources. Additionally, a family may meet all eligibility requirements, but it does not ensure a family will receive child care under the SC Voucher Program as there may be limited funding.

### 1. Client and Recipient Social Security Numbers

The SC Voucher Program currently collects the client's/child's SSN on the child care application and uses the SSN as the primary client identifier in the database. Only the last four digits of the SSN are printed on any documentation that is sent out from the SC Voucher Program. However, services will not be denied for an applicant or child who refuses to provide an SSN. In those instances, a pseudo SSN will be created.

### 2. Pseudo/Temporary Social Security Numbers

If the parent/caretaker or the child does not have an SSN, the child care worker may create a pseudo SSN using the following process:

- A. The first three positions of the temporary SSN should be zeros.
- B. The next two positions should be the child's month of birth.
- C. The last four positions should be the child's day and year of birth.

**EXAMPLE:** If the birth date is 3/4/06, the temporary SSN will be 000-03-0406. In the instance of multiple births, such as twins or if another child has the same birthday, the first child is 000, the second is 001, and so forth.

Child care staff must monitor these temporary numbers and obtain the actual SSN as soon as possible. Upon receipt of the correct SSN, staff should document the memo field indicating the change has been made.

### 3. Temporary Absence During Child Care Eligibility Period (In Loco Parentis)

Temporary absence of the primary parent/caretaker from the home may be due to reasons related to one of the following which requires the caretaker/guardian to act in loco parentis~ for the child:

- A. Work
- B. Educational and vocational training
- C. Institutionalization
- D. Joint custody arrangement
- E. Other circumstance.

The child remains eligible for child care as long as the primary parent/caretaker's permanent residence remains in the State of South Carolina and the guardian responsible for the child has a need for child care in order to work, attend school/training. The Caretaker/Guardian must complete [DSS Form 37117](#), Guardianship/In Loco Parentis Verification

**NOTE: This form or other verification of guardianship/in loco parentis status must be notarized.**

#### **Work Related Temporary Absence**

If a family household member is temporarily absent from the home due to a work related assignment, including military, they are considered part of the family household unit unless a separate legal residence is established.

#### **Temporary Absence Due to Educational/Vocational Training**

An individual temporarily absent due to participation in an educational or vocational program remains eligible for child care as long as their permanent residence remains that of the child. Examples of educational/vocational training include colleges, technical schools, and training centers. If a parent/caretaker relative is the individual away at the educational/vocational facility, they remain eligible unless another relative who is caring for the child applies for benefits.

#### **Time Frame for Reporting Permanent Absence**

When it is reported that a parent/caretaker is temporarily living away from home, the guardian or person acting in loco parentis should be advised that if the parent/caretaker does not return, notification must be given to SCDSS within five days of this change.

## **4. Custody Verification**

When custody is in question, verification may be required. Acceptable methods of verification include, but are not limited to:

- A. Court documentation/guardianship papers OR
- B. Signed, notarized statement from **both parents** indicating that guardianship, either permanent or temporary, has been given to the caretaker.

If in the same FS or FI budget, custody has already been verified, CHIP may be used as verification.

## 5. Signature Requirements

It is recommended that the child care application be signed and dated by the applicant before the application is processed and before services are rendered; however, this is not required if all other eligibility criteria is met.

### 3.3 Applicant Rights and Responsibilities

Upon being approved for child care, the parent/caretaker receives a copy of their rights and responsibilities in an eligibility packet mailed to them. Additionally, the rights and responsibilities are available to the applicant on the last page of the application.

#### 1. Applicant Rights

The applicant has the right to:

- A. Choose one of the following types of providers:
  - a. Child care center
  - b. Family child care home
  - c. Group child care home
  - d. Church facility
  - e. Neighbor, friend or relative.

**NOTE: A client receiving services under Child Protective Services or Foster Care may choose only a licensed facility or program (unless otherwise approved for a waiver to policy). See [Exception Criteria for CPS and FC Child Care Cases](#). (Section 2.12.1)**

- B. Receive a fair hearing, regarding any decision which results in the denial or termination of services, provided that decision is not due to lack of funding. The Notice of Appeal shall be in writing to:

Individual and Provider Rights, SCDSS,  
P.O. Box 1520, Columbia, SC 29202-1520.

- C. Make complaints, or discuss areas of concern or suggestions regarding the SC Voucher Program or their child care provider by calling 1-800-763-2223.
- D. Visit their child anytime that they are in the provider's care.

#### 2. Applicant Responsibilities

The applicant has the responsibility to:

- A. Provide current and accurate verification of **all** of the following:

- a. Gross family income
  - b. Family size
  - c. Age of child
  - d. Employment, school or training.
- B. Report **all** changes in the following within 10 calendar days after the change occurs:
- a. Gross family income
  - b. Family size
  - c. Address
  - d. Employment, school or training.
- C. Pay a weekly client fee based on family size and income to the provider before service delivery. A parent is responsible for the difference between the maximum amount the SC Voucher Program pays and what the provider charges.
- D. Pay for child care services when an appeal is in process.
- E. Get approval from the SC Voucher Control Center before transferring to another provider.
- F. Give advance notice before terminating services.
- G. Choose a child care provider within 15 calendar days from the date of the notification of eligibility.
- H. Comply with SC Voucher Program attendance policies in using child care services.
- I. Pay for services received before or after the authorized dates of service.

**NOTE: Failure to comply with these responsibilities could result in services being denied or terminated.**

### **3.4 Child Care Income Standards**

When determining if an applicant meets the income requirements for initial approval for child care services through the SC Voucher Program, the total family size, see [Family Definition](#) (Section 2.1.6) and the total gross income for the family must be within the entrance guidelines of the Child Care Income Standards ([Appendix 1](#)). If the client is currently receiving child care services and there is not a gap in service (a week or more), the family must be within the exit guidelines to qualify. If there is a gap in the eligibility period (a week or more) when the client submits a new application, the family must have monthly income below the entrance guidelines to qualify.

## 1. Assessment of Fees

Within the SC Voucher Program, there are [client fees](#)~ and [registration fees](#)~. The [client fee](#) covers the co-pay portion of the weekly child care costs and the [registration fee](#) is used to pay a portion of the enrollment costs to the child care provider. The SC Voucher Program does not pay for activity, transportation, or other fees outside of the weekly child care or registration fees.

Once it is determined that the client meets the income guidelines, the Child Development Fee Scale ([Appendix 2](#)) is used to determine the weekly co-pay for the client. The client fee is the fee that is to be paid by the client directly to the child care provider. The fee is per week, per child.

## 2. Client Fees

Client fees are based on family size and gross monthly income and are assessed according to the Child Care Fee Scale. This is a weekly fee and applies to all children receiving care. Each provider is responsible for collecting this fee in advance of service delivery. **The SC Voucher Program assumes no responsibility for collection or payment of client fees.**

**NOTE: A foster parent, CPS-Out client, or client participating in the FI Program do not pay client fees. However, if the providers' rate exceeds the maximum rate allowed by the SC Voucher Program, the foster parent, CPS-Out client, or FI client is responsible for paying the difference to the provider.**

## 3.5 Eligibility Worksheet

It is strongly recommended that child care eligibility staff use the SC Voucher Program Client Eligibility Worksheet, [DSS Form 37110](#), when determining eligibility for all applicants. The eligibility worksheet is a tool to be used in order to provide consistent eligibility determination.

**NOTE: Seamless eligibility of FI to TCC1 does not require a new application; however, it is strongly recommended that the eligibility worksheet and supporting documentation (such as CHIP print screens) be included in the child care case.**

## 3.6 Notification of Eligibility

When a client is entered into the SC Voucher Program database, an [Eligibility Letter](#) is sent to the client informing them of their eligibility. In addition to the letter of eligibility, the parent receives an eligibility packet that includes the following:

- A. Parent handbook, which includes B, C, and D
- B. Options sheet for choosing a child care provider
- C. Holiday schedule
- D. Copy of the client rights and responsibilities
- E. Connection card
- F. Earned income tax credit information.

**Chapter****4**

## **Chapter 4**

### **Provider Authorization**

#### **4.1 Provider Authorization/Connection**

Prior to taking a child to an enrolled SC Voucher Program provider, the parent must complete a connection card/fax; a pre-printed card/fax. The connection card must be signed and dated by both the client and the child care provider. Once completed, the connection card/fax must be sent to the Control Center in order for the child to be connected with the selected child care provider. The provider should not begin serving the child until they receive written authorization from the SC Voucher Program that the connection has been approved. If a provider serves a client outside the authorized period (start and stop dates), the client is responsible for the full cost of the service.

Connections are made for the Monday of the week the connection card/fax is received or for a future date of service if specified or for other dates indicated in the memo field by eligibility staff. Connections will not be backdated prior to the week of receipt unless otherwise authorized by the Control Center Supervisor or other designee.

##### **1. Parental Choice**

A parent is legally and morally responsible for their child and has the right to select the child care provider of their choice. Finding suitable child care is one of the most important decisions that a parent can make. The goal of any interaction between a parent and staff is to ensure that the applicant receives adequate information to make choices that provide stable and reliable child care. A parent receiving SC Voucher Program assistance is offered a broad range of options in addressing their child care needs. A client eligible for child care may request a listing of approved Level A & B child care providers to assist them with finding child care, or may visit, [abcqualitycare.org](http://abcqualitycare.org) or [scchildcare.org](http://scchildcare.org). A parent has the option of choosing the provider who will care for their child, whether the provider is a:

- A. Child care center
- B. Family or group day home
- C. Church or synagogue
- D. School

- E. Employer
- F. Family, Friend, and Neighbor.

## 2. Provider Selection

As with all child care categories, if the provider chosen is not currently enrolled in the SC Voucher Program, the child care worker must:

- A. Send an email to designated Control Center staff with the following information: Client name and SSN, if known, provider's name and complete address (street, city, state, zip), contact telephone number, including area code, provider's FEIN/SSN, if known.
- B. Ensure, prior to sending the email, if a new Family, Friend, and Neighbor (FFN) provider is chosen, that basic FFN criteria is met. See [Family, Friend, and Neighbor Care Providers](#) (Section 5.6.4). If a Family, Friend, and Neighbor Care (In the Child's Home) (FNI) arrangement is needed, ensure that FNI provider criteria is met. See [Family, Friend, and Neighbor Care \(In the Child's Home\) \(FNI\)](#) (Section 5.6.6), i.e., to ensure that there are at least five children from that family requiring care.

## 3. Client Passwords

A client is required to establish a password to be assigned to their client file. This ensures a level of security that will prevent an individual, other than the actual client, to call and obtain information about the client's child care case.

In order to create a password, the following actions are taken:

- A. Verify client's SSN in order to access the file.
- B. Verify client's mailing address.
- C. Verify at least one child's birth date.
- D. Have the client establish a six-character password upon verification of the above information. The password can be either letters or numbers, or a combination of the two. The client should refrain from using symbols or punctuation marks.

**NOTE: The password is NOT case sensitive.**

- E. Advise the client that if they lose or forget the password or wish to change the password at any time, they will have to supply a copy of their driver's license along with a request to change their password via mail or fax before the password can be changed and before further information can be given.

**NOTE: Advise the client NOT to share their password with anyone.**

F. Proceed with the call.

For a file with an existing password:

A. Verify client's SSN in order to access the file.

B. Verify client's mailing address.

C. Ask the client to verify their password.

**If the password is correct:** Have the client verify at least one of their child's birth dates. If the client can provide the correct date, proceed with the call.

**If the password is not correct:** Advise the client that they will have to supply a copy of their driver's license along with a request to change their password via mail or fax before the password can be changed and before further information can be given.

#### 4. Maximum Care Allowed

An eligibility period is defined as a period of one calendar year (52 weeks) for which a client is determined eligible. A client may receive up to a maximum of 52 weeks of care during any one-year eligibility period. This may be full-time care, half-time care, [less-than-half-time](#) care (LHT) or a combination of the three. Oftentimes, the client may get a pro-rated number of weeks based on their particular funding source. Additionally, an applicant may have an older child who needs care only when school is out, such as during summer, spring break or a holiday. It is permissible to fund and connect only the services needed in this situation.

**NOTE: LHT care is used only for the Welfare Reform (FI, TCC1, TCC2, TCC/24 and TCC/FS) child care eligibility categories. LHT care may be used in conjunction with a full-time or half-time care arrangement or it may be used alone. It cannot be used to pay the same child care provider.**

#### 5. Memo Field Documentation

The memo field is the official documentation within the SC Voucher Program database. All conversations, information, and actions regarding the specific client or child care provider should be documented with each instance and as the actions occur. The memo field is used for appeals, Freedom of Information (FOIA) requests, and to maintain historical information. The memo field is not to be used as an editorial and the information documented should be specific to each action taken on the case.

## 6. Registration Fees

Registration fees are set amounts established by the provider to cover costs not included in the weekly rate. The SC Voucher Program will pay registration fees to providers up to an established program maximum per child per calendar year. Regardless of the number of different providers who may provide services to the child during the eligibility period, total registration fees paid for a child will not exceed the established program maximum for a one-year calendar period.

**EXCEPTION: If a provider closes their facility and a client is forced to find another provider, the ABC Program will pay a registration fee to the new provider regardless of whether the client has already used their allocation of the registration fees.**

The provider may require the client to pay a registration fee due even if the client has already used their registration fee allocation for the eligibility period. Registration fees are automated and paid on a provider's [SVL~](#) after a child has had three consecutive paid weeks of services.

## 7. Funding/Connecting a Child Under the Appropriate Age Group

When a child is being funded and connected to a particular child care facility, the facility may not be enrolled for the age group of the child. The SC Voucher Program has the age groups 0-2, 3-5, 6-12 and 13-18. If during the connection process, the provider of choice is not authorized for the care type that the child is in, but the child is within six months of going into the next age group, the funding and connections can be made under the next age group.

**EXAMPLE: If a child is two years old and will be three within six months and the provider of choice is not authorized for the 0-2 age group, the child can be funded and connected under the 3-5 age group.**

## 8. Dual Funding

Dual funding is the process by which multiple children in a family are eligible under different fund sources during the same child care eligibility period. Dual funding situations are rare, but are generally used when one child in a family is eligible for special needs child care and one or more other children are eligible under another funding source. Dual funding applies to a family with multiple children only and cannot be used to add more than one fund source for the same child.

**EXAMPLE: Child 01 may be eligible under Special Needs and child 02 may be eligible under FI.**

## 9. Notice of Connection to an SC Voucher Provider

Once the client has been connected to a particular child care provider, an [Authorization/Connection Letter](#) is mailed to the client and the selected child care provider. The letter includes the following:

- A. Client name and last four digits of the SSN
- B. Authorization period (start and stop dates)
- C. Name of child to receive the service
- D. Assessed fee
- E. Type of care
- F. Number of weeks authorized.

A client may receive more than one authorization letter if they:

- A. Change from one provider to another
- B. Receive full-time service part of the year and half-time service the remainder of the year
- C. Receive a combination of full-time, half-time or less than half-time services.

## 10. Children Who Do Not Connect or Reconnect to a Provider

A client has 15 calendar days to select a child care provider from the date of notification of eligibility. If a client does not choose a provider and submit a connection card, services will be terminated for never connecting. Likewise, if a client stops attending one provider and never connects to another provider, services will be terminated for failure to connect. See [Termination of a Client](#) (Section 6.11.3).

### 4.2 Immunizations

All children receiving services through the SC Voucher Program must be age-appropriately immunized as outlined in the U.S. recommended immunization schedule; see the following links:

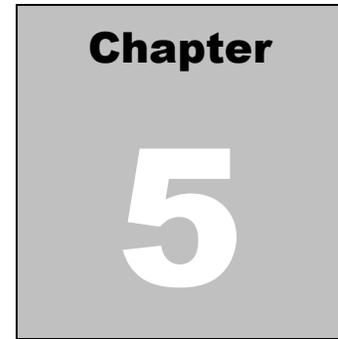
[Recommended Immunization Schedule for Persons Aged 0 Through 6 Years](#)

[Recommended Immunization Schedule for Persons Aged 7 - 18 Years](#)

[Catch-up Immunization Schedule for Persons Aged 4 Months Through 18 Years](#)

An applicant for the SC Voucher Program self-certifies that the child for whom they are requesting child care services has received all required immunizations. A child whose

parent objects to immunizations on religious grounds or a child whose medical condition contraindicates immunization are exempt from the immunization requirement.



## Chapter 5

### Provider Information

#### **5.1 Child Care Provider Definitions**

##### **1. Child Care Center (CCC)**

A child care center (CCC) is a facility operating with a capacity of 13 or more children. A CCC must be licensed or approved if the program operates more than four hours per day and more than two days a week. A program that operates less than four hours per day may keep children during the week and during school vacations and holidays and be exempt from licensing.

##### **2. Group Child Care Home (GCCH)**

A group child care home (GCCH) is a facility operating with a capacity from seven to 12 children. A GCCH may care for eight children without an additional caregiver. When the attendance reaches nine, or there are more than three children under the age of 24 months, an additional caregiver must be present at all times. In addition, there must be an emergency backup person available who is not included in the staff-to-child ratio. Since August 25, 2000, a GCCH may not be operated in a separate building; it must be in the residence of the operator. As of September 1, 2009, all GCCH's must meet the same fire codes as a CCC, and some county zoning offices no longer allow GCCH's. A provider who resides in a mobile home should contact the State Fire Marshall's Office at 803-896-9800 to determine if the structure meets fire codes.

##### **3. Family Child Care Home (FCCH)**

A family child care home (FCCH) is a provider that may provide care for up to six children at any given time. Registration or licensure is required if a person provides care to more than one unrelated family or child on a regular basis (more than two days a week and more than four hours a day).

## 4. Family, Friend and Neighbor Care (FFN)

A family, friend, and neighbor (FFN) is a provider who is unregulated and is not required to meet licensing/regulatory requirements.

## 5.2 Required Regulatory Status

In order to enroll in the SC Voucher Program, a provider must be appropriately regulated as required by [SC Child Care Licensing Law](#) as follows:

### 1. Child Care Center (CCC)

A CCC serving 13 or more children and operating for more than four hours per day is required to be licensed, whether the center is for-profit, non-profit or private. This requirement does not apply to the following:

- A. Educational facility, whether private or public, which operates solely for educational purposes in grade one or above
- B. Five-year old kindergarten program
- C. Kindergarten or nursery school or other daytime program operating no more than four hours per day and receiving children younger than lawful school age
- D. Facility operating for more than four hours a day in connection with a shopping center or service or other similar facility where the same children are cared for less than four hours a day and not on a regular basis while a parent or custodian is occupied on the premises or is in the immediate vicinity
- E. School vacation or school holiday day camp for children operating in district sessions running less than three weeks per session
- F. Summer resident camp for children
- G. Bible school normally conducted during a vacation period
- H. Facility for the intellectually disabled
- I. CCC owned and operated by a local church congregation or an established religious denomination or a religious college or university which does not receive State or federal financial assistance for child care services.

## 2. Group Child Care Home (GCCH)

A GCCH operating in a residence where the provider cares for at least seven but not more than 12 children, including children living in the home and children received for child care who are related to the operator, is required to be licensed.

## 3. Family Child Care Home (FCCH)

An FCCH operating in a residence where the provider cares for up to six children may be registered or licensed. Registration is required if a provider cares for more than one unrelated child on a regular basis (more than two days a week and more than four hours a day). An FCCH which chooses to become licensed will have to meet additional requirements.

**NOTE: A child care facility which is not required to be regulated by SCDSS must have approval by SCDSS in order to participate in the SC Voucher Program.**

## 4. Provisional Licenses

In order to enroll in the SC Voucher Program as a Level A or Level B provider, the provider must have a regular license. A Level A or Level B provider may remain in the SC Voucher Program if they receive a provisional license at subsequent license renewals.

A provider who enrolls in the SC Voucher Program as a Level C provider may have a regular.

## 5. Providers Not Eligible to be Enrolled in the SC Voucher Program

The SC Voucher Program will not enroll the following as providers:

- A. A significant other, (boyfriend, girlfriend, life partner, etc.) of the custodial parent to provide child care for the custodial parent's child, regardless of the significant other's residence (in or out of the child's home).
- B. A known sex offender or provider with a founded Child Protective Services (CPS) case will also not be approved to serve an SC Voucher Program child. See [Denial of FFN Arrangements](#) (Section 5.6.5).
- C. A person who is employed by the South Carolina Department of Social Services within the State, Regional or County offices.

## 6. Dual Employment of a Child Care Provider

If the provider chosen by the parent is a State employee, verification must be obtained to ensure that the State employment hours of the provider do not coincide with the hours they are providing child care. The Level C Provider Enrollment and Agreement, [DSS Form 37101](#), must include this information.

## 7. When New/Updated Provider Paperwork is Required

New provider paperwork for the SC Voucher Program is required at the following periods for all provider types:

- A. Initial enrollment
- B. Every three years thereafter
- C. Re-enrollment

**EXAMPLE: When a Level A, B, or C provider has been terminated and has waited the mandatory six months to re-enroll.**

- D. When a provider changes FEIN/SSN information
- E. When there is a change in ownership.
- F. When an FFN provider begins caring for an additional family or has been inactive and begins serving a new family.

## 5.3 Grants

### 1. Provider Grants

A provider may receive several types of grants from SCDSS. The type of grant a provider receives, which providers are eligible for the grants, how much the grant is, and when the provider receives it is determined by the SC Voucher Program ABC Quality Rating and Improvement System (QRIS) Quality Monitoring staff, hereafter called Quality Monitoring.

When a provider receives a grant, there are different requirements regarding using the grant funds, maintaining receipts for purchases, and maintaining enrollment in the SC Voucher Program. The specific requirements for the individual grant types will be included in the grant applications for the different types of grants.

The types of grants available are dependent on available funding, and range from initial grants for first-time enrollment in the SC Voucher Program, to scholarship grants for attending specific training, to smoke and fire extinguisher grants for FFN providers.

Federal requirements governing the SC Voucher Program funds prohibit the use of grant funds for start-up costs for child care providers.

## 2. Non-Compliance with Grant Terms

Providers who are given grants to include materials grants and other special one-time grants or scholarships such as computer grants, etc. must stay in the SC Voucher Program for the period required by the grant. If the provider does not comply by staying in the SC Voucher Program for the required amount of time, recoupment of grant funds will be initiated. If the provider still has the materials or equipment purchased with the grant funds, and if it is possible, these items may be retrieved from the provider and given to other providers.

If a provider awarded a grant does not comply with the grant requirements, and/or if funds have to be recouped, then the SC Voucher Program reserves the right to disqualify the provider for any future grants. **This is not appealable.**

## 3. Recoupment of Grant Funding

If a recoupment has been initiated against the provider perhaps because of an audit, overpayment, or if the provider owes money to the Government due to an IRS lien, and funds are being recouped from the provider through their payments, then the provider will not be eligible for any grants offered at that time due to the fact that the SC Voucher Program will automatically take the grant money in payment towards the recoupment or lien. **This is not appealable.**

Failure to use grants funds properly may result in the initiation of an audit by the Program.

## 5.4 SC Voucher Program Parent , Caretaker, or Guardian Who Owns a Child Care Program

An SC Voucher Program parent/caretaker or guardian, to include a foster parent, who owns a licensed or registered FCCH, licensed GCCH, or center, **will not** receive child care assistance to provide child care for their own child, a child in their custody, or a foster child.

## 5.5 Licensing/Registration Requirements

State regulatory requirements mandate that CCCs and GCCHs be licensed and that FCCHs be licensed or registered. A CCC or GCCH owned and operated by a local church congregation or established religious denomination or religious college/university must be licensed in order to receive federal or State funds if the program operates more than four hours per day.

The SC DSS Child Care Licensing (CCL) should be contacted to report a possible violation of the law any time staff believe a provider is exceeding their licensed capacity and serving more children than allowed under State regulatory law.

## 1. Internal Revenue Requirements

The SC Voucher Program complies with Internal Revenue Services (IRS) regulations and sends an IRS Form 1099, for payments made to a provider who participates in the SC Voucher Program. Form 1099 will be mailed by January 31st of each year. A Form 1099 is sent to all child care providers, except corporations, who are paid \$600 or more by the State during the tax year. A provider should contact the IRS for more information.

Every provider, including FFN providers, is considered self-employed and is not considered an employee of the State of South Carolina. Therefore, it is the responsibility of the provider to pay applicable taxes on all money earned.

## 2. Provider Passwords

A provider is required to establish a password to be assigned to their provider file. This ensures a level of security that will prevent an individual, other than the actual provider, to call and obtain information about the provider's information. In order to create a password, the following actions are taken:

- A. Verify provider's FEIN or SSN in order to access the file.
- B. Verify the provider's mailing address.
- C. Have the provider establish a six-character password upon verification of the above information. The password can be either letters or numbers, or a combination of the two. The provider should refrain from using symbols or punctuation marks.

**NOTE: The password is NOT case sensitive.**

- D. Advise the provider that if they lose or forget the password or wish to change the password at any time, they will have to supply a copy of their driver's license and along with a request to change their password via mail or fax before the password can be changed and before further information can be given.

**NOTE: Advise the provider NOT to share the password with anyone.**

- E. Proceed with the call.

For a file with an existing password:

- A. Verify provider's FEIN or SSN in order to access the file.

- B. Verify the provider's mailing address.
- C. Ask the provider to verify their password.

**If the password is correct, proceed with the call.**

**If the password is not correct:** Advise the provider that they will have to supply a copy of their driver's license along with a request to change the password via mail or fax before the password can be changed and before further information can be given.

## **5.6 Provider Selections and Types**

A provider is selected by an individual client after the client is determined eligible, funded, and notified that they may choose a provider. A client is given a wide range of child care options, including:

- A. Center-based care
- B. Family child care home (FCCH)
- C. Group child care home (GCCH)
- D. Church or synagogue
- E. School
- F. Employer
- G. Care by a Family, Friend, or Neighbor.

The client may request to receive a list of Level A and B providers to assist them with choosing an enrolled SC Voucher Program provider, or may visit [abcquality.org](http://abcquality.org). The client may choose a provider from the list or any provider willing to participate and enroll in the SC Voucher Program. The provider must complete certain documents which are required before they can be authorized to serve a child and receive reimbursement. The types of providers are:

- A. Level A, B and C
- B. Family, Friend, and Neighbor Care (Out of child's home) (FNO)
- C. Family, Friend, and Neighbor Care (In the child's home) (FNI).

**NOTE:** The SC Voucher Program may enroll and reimburse regulated center-based, group or family child care providers that operate outside the state of South Carolina. Out of state Family, Friend and Neighbor (FFN) providers will be approved only for child protective service and foster care cases and only with prior approval of the arrangement by the designated program staff and human service worker. (See Section 5.6.7)

### **1. Reports of Abuse and Neglect**

State law requires a provider to immediately report suspected child abuse or neglect to SCDSS, Department of Child Protective and Preventive Services or local law enforcement.

A provider must also notify other SCDSS staff as follows when they have been reported for suspected child abuse or neglect:

- A. Level A, B and C provider – report to Quality Monitoring
- B. FFN provider – report to Control Center staff.

A client who suspects child abuse or neglect will be directed to contact the SCDSS Department of Child Protective and Preventive Services in the county in which they reside.

## **2. Level A and B Providers**

A Level A or B provider is a provider who:

- A. Meets standards higher than the minimum health and safety licensing requirements
- B. Has had an on-site visit by Quality Monitoring
- C. Has completed the necessary documents to enroll with the SC Voucher Program.

A Level A provider is an exemplary program measured against rigorous quality standards. A facility at this level:

- A. Meets better staff-child ratios
- B. Has additional staff qualifications
- C. Receives a one-time grant at initial enrollment
- D. Receives Environment Rating Scales (ERS) assessments
- E. Is eligible for the highest grants
- F. Is eligible for higher maximum payments
- G. Is eligible for highest maximum bonus payments
- H. Is recognized as the highest ABC level
- I. Receives free training materials/resources
- J. Receives on-going technical assistance from Quality Monitoring staff
- K. Is placed on a county listing of child care providers that is given to potential and approved clients when requested.

A Level B provider is a program measured against quality standards beyond basic State regulations. A facility at this level:

- A. Meets voluntary standards
- B. Is eligible for a one-time grant at initial SC Voucher Program enrollment
- C. Is eligible for bonus payments
- D. Is eligible for higher payments
- E. Receives free training materials/resources
- F. Receives on-going technical assistance from Quality Monitoring staff
- G. Is placed on a county listing of child care providers that is given to potential and approved clients when requested.

In order to be enrolled in the SC Voucher Program as a Level A or B provider, the following steps are taken:

- A. An interested provider contacts the Control Center and indicates that they are interested in becoming enrolled in the SC Voucher Program.
- B. Control Center staff emails the appropriate Quality Monitoring staff with the provider's contact information to request an enrollment packet.
- C. Upon receipt of the packet request, the Quality Monitor makes contact with the provider and mails an enrollment packet.
- D. The provider completes the forms and returns the enrollment packet to Quality Monitoring. Quality Monitoring staff verify that the packet is complete and forwards it to the appropriate Quality Monitor based on county assignment.
- E. The Quality Monitor sets-up the appointment with the provider and conducts the on-site visit and completes the enrollment.
- F. Quality Monitoring forwards the following completed forms to the Control Center:
  - a. Level A and B Provider Enrollment Form, [DSS Form 37108](#)
  - b. Level A Provider Agreement, [DSS Form 37106-1](#), or the Level B Provider Agreement, [DSS Form 37106-2](#)
  - c. Level A and B Provider Rate Form, [DSS Form 37107](#)

- d. IRS Form W-9
- e. Copy of IRS Form SS-4 or [IRS Letter 147-C~](#) if operating under a federal identification number (FEIN) OR
- f. Copy of the social security card if operating under an SSN. If the social security card is not available, a printout from the Social Security Administration (SSA) is acceptable. Other documents with the SSN will be reviewed on a case-by-case basis for acceptance.
- g. Copy of driver's license or State ID, if operating under an SSN.

Upon receipt of the completed enrollment packet, the Control Center staff take the following actions:

- A. The information from the IRS Form W-9, [IRS Letter 147-C~](#), and/or IRS Form SS-4 is entered into the SCEIS (South Carolina Enterprise Information System) in order to obtain a vendor number. A confirmation of the SCEIS vendor number is sent via email to the Control Center staff. SCEIS uploads the vendor information to the STARS system at the Comptroller General's (CG's) Office.

**NOTE: The provider name, I.D, and SSN/FEIN must be identical in both the CG files and the SC Voucher System in order for payments to be made to the provider.**

- B. Once the provider information has been loaded and accepted in the CG's files, the Control Center enters the provider information into the SC Voucher Program database. At this point, the provider is eligible to begin serving children.
- C. After an established period of time (usually within 30 days) the provider paperwork is prepped and sent for imaging.

### 3. Level C Providers

A Level C provider who is licensed or registered by SCDSS must complete the necessary documents to be accepted by the SC Voucher Program. A Level C provider is participating for payments only, but agrees to follow the Participating Provider Business Procedures and established policies and procedures of the SC Voucher Program.

In order to be enrolled in the SC Voucher Program as a Level C provider, the following steps are taken:

- A. An interested provider contacts the Control Center and indicates that they are interested in becoming enrolled in the SC Voucher Program.

- B. Control Center staff sends an email to the appropriate Quality Monitoring staff for a packet request.
- C. Upon receipt of the email, Quality Monitoring staff will make contact with the provider and mails an enrollment packet.
- D. Upon receipt of the paperwork, the provider completes the following forms:
  - a. Level C Provider Enrollment and Agreement, [DSS Form 37101](#)
  - b. Level C Provider Rate Form, [DSS Form 3773](#)
  - c. IRS Form W-9
  - d. Copy of IRS Form SS-4 or [IRS Letter 147-C~](#) if the provider is operating under a FEIN OR
  - e. A copy of the social security card if operating under an SSN. If the social security card is not available, a printout from the SSA is acceptable. Other documents with the SSN will be reviewed on a case-by-case basis for acceptance
  - f. Copy of driver's license or State ID, if operating under an SSN.

Upon receipt of the completed paperwork, the Control Center takes the following actions:

- A. The information from the IRS Form W-9, [IRS Letter 147-C~](#), and/or IRS Form SS-4 is entered into the SCEIS (South Carolina Enterprise Information System) in order to obtain a vendor number. A confirmation of the SCEIS vendor number is sent via email to the Control Center staff. SCEIS uploads the vendor information to the STARS system at the Comptroller General's (CG's) Office.

**NOTE: The provider name, I.D, and SSN/FEIN must be identical in both the CG files and the SC Voucher Program database in order for payments to be made to the provider.**

- B. Once the provider information has been loaded and accepted in the CG's files, the Control Center enters the provider information into the SC Voucher Program database. At this point, the provider is eligible to begin serving children.
- C. A copy of the Level C Provider Business Procedures is mailed to the provider upon enrollment.

- D. After an established period of time (usually within 30 days) the provider paperwork is prepped and sent for imaging.

#### 4. Family, Friend and Neighbor Care Providers (FFN)

The use of FFN is mandated by the Amendments to the Child Care and Development Block Grant Act of 1996. The federal regulations state that a parent eligible for child care assistance may choose an FFN child care provider.

In order to be enrolled in the SC Voucher Program as a Family, Friend, or Neighbor child care provider, the following steps are taken:

- A. An interested provider contacts the Control Center and indicates that they are interested in becoming enrolled in the SC Voucher Program.
- B. A packet of information is sent to the provider.
- C. Upon receipt of the paperwork, the provider completes the following forms:
  - a. Family, Friend, and Neighbor Child Care Enrollment and Agreement, [DSS Form 3774](#)
  - b. Family, Friend, and Neighbor Child Care Certification, [DSS Form 3776](#)
  - c. IRS Form W-9
  - d. Picture Identification (South Carolina driver's license or identification card required).

**NOTE: No out-of-state identification will be accepted, unless an out of state arrangement is approved.**

- e. Copy of social security card for proof of social security number (SSN). If the social security card is not available, a printout from the SSA is acceptable. Other documents with the SSN will be reviewed on a case-by-case basis for acceptance.
- f. Copy of driver's license or State ID, if operating under an SSN.
- g. Copy of a completed [DSS Form 37124](#), Family, Friend, and Neighbor Central Registry Release of Information and Consent Form, on all household member 18 years or older.

Upon receipt of the completed paperwork, the Control Center takes the following actions:

- A. The completed [DSS Form 37124](#) will be scanned by Control Center staff and forwarded via email to the designated Child Care Licensing staff.
- B. The information from the IRS Form W-9 and social security card is entered into the SCEIS (South Carolina Enterprise Information System) in order to obtain a vendor number. A confirmation of the SCEIS vendor number is sent via email to the Control Center staff. SCEIS uploads the vendor information to the STARS system at the Comptroller General's (CG's) Office.

**NOTE: The provider name, I.D, and SSN/FEIN must be identical in both the CG files and the SC Voucher Program database in order for payments to be made to the provider.**

- C. Once the provider information has been loaded and accepted in the CG's files, the Control Center enters the provider information into the SC Voucher Program database. At this point, the provider is eligible to begin serving children.

**NOTE: Control Center staff may conditionally enroll the FFN child care provider into the SC Voucher Program database if the Central Registry and Sex Offender results are not received when the provider has been loaded into SCEIS.**

- D. A copy of the Family, Friend and Neighbor Child Care Provider Business Procedures is mailed to the provider upon enrollment.
- E. After an established period of time (usually within 30 days) the provider paperwork is prepped and sent for imaging.

It is the responsibility of SCDSS to advise clients on what to look for in choosing FFN providers. It is the client's responsibility to monitor their FFN arrangement. SCDSS explains the necessary forms and the payment procedures. Additionally, SCDSS requires FFN providers to self-certify the existence of a smoke detector and fire extinguisher in the home where the child will be served. When these basic health and safety requirements are not available, the FFN provider must purchase these items and may request reimbursement up to \$45.00. The Control Center Staff must use the Family, Friend, and Neighbor Provider Health and Safety Grant Reimbursement Request, [DSS Form 3778](#), to request the reimbursement.

## 5. Denial of FFN Arrangements

Denial of FFN arrangements include, but are not limited to:

- A. Potential FFN provider who resides in the same household as the child approved for child care services.
- B. Any asterisked items on the FFN forms that are answered in the negative.
- C. A founded or open Child Protective Services investigation and support allegation against a provider who is known to the public (e.g., a provider is involved in an active CPS case).
- D. SCDSS has public knowledge of a criminal allegation that may jeopardize the health and safety of children, at State Office discretion.
- E. The child care worker suspects that the provider is under the influence of drugs or alcohol at the time of application or subsequently thereafter.
- F. An individual receiving SC Voucher Program vouchers for their own child, grandchild, foster child or other child in their custody cannot become an FFN provider for someone else.
- G. The FFN provider requested is the child's absent parent or the parent's significant other (spouse, girlfriend, boyfriend, life partner, etc.) that resides either in or out of the home.

**NOTE: If it is known that the potential FFN provider plans to have another person care for the child while they are en route from their primary employment, or other activity, the arrangement must be denied.**

- H. FFN arrangement cannot be approved for a provider who is a member of the same FI/FS family household unit as the parent applying for child care services, even if a member of the FI/FS household unit has been disqualified and is not in the FI/FS budget.
- I. A person who becomes an FFN provider (or potential provider) is found to have been terminated from the SC Voucher Program for misrepresentation as an SC Voucher Program client will not be approved as an FFN provider. The child care worker will notify the provider in writing, if the arrangement

is terminated or denied. If a provider is terminated or denied, payment may not be made for services rendered.

- J. Other reasons as determined appropriate based on the individual situations.
- K. Any provider or family member 18 years or older with a negative Central Registry finding or sex offender search.
- L. Any provider who is employed by the South Carolina Department of Social Services within the State, Regional or County offices.
- M. Failure to return the FFN provider packet within 15 calendar days may result in the denial of the enrollment request.

## 6. Family, Friend and Neighbor Care (In the Child's Home) (FNI)

An in-home child care arrangement is care that is provided in the child's own home by a relative or non-relative child care provider who is at least 21 years old and who does not live in the same household as the child.

In-home care is affected by interaction with other laws and regulations. For example, in home providers who are NOT related to the child are classified as domestic service workers under the Fair Labor Standards Act (FLSA) (29-USC Section 206 (A) and are therefore covered under minimum wage. FNI providers are also subject to tax requirements.

Based on these IRS Regulations, the use of an in-home arrangement is limited to:

- (1) In-home arrangement in which the provider is not related to the child will be approved only when the client has five or more children in the home that require care or
- (2) Families who need care for children with special needs or medical conditions (CCDF State Plan).

FNI providers related to the child may be approved to provide care; however, the relationship must be verified by a client statement. If relationship status is questionable, the child care worker will require verification through birth certificates, marriage license, or other legal documents. The provider must be related to the child in one of the following ways: An aunt or uncle, first generation only, sibling, grandparent or great grandparent, all of whom do not reside in the same household as the child.

**NOTE:**        **The SC Voucher Program will not pay for child care services to any member of the household in which the child resides.**

The same procedures for FFN providers who are providing care in their home (FNO) apply to FNI providers (who provide care in the child's home). See [Family, Friend, and Neighbor Care \(FFN\)](#) for specific criteria. (Section 5.6.4).

## 7. Out-of-State Child Care Providers

The SC Voucher Program may enroll and reimburse regulated center-based, group or family child care providers that operate outside the state of South Carolina. Primarily, out-of-state providers are enrolled to allow payment of child care costs for children in Child Protective Services (CPS) or Foster Care (FC) who are in the custody of SCDSS, but have been placed with a caretaker or relative who resides outside of South Carolina. However, this option can be used for all child care categories.

Border state providers (Georgia and North Carolina) may request enrollment into the SC Voucher Program and may continue to be enrolled for the agreement period and serve any SC Voucher Program client who chooses them as a provider.

**NOTE: Out of state Family, Friend and Neighbor (FFN) providers will be approved only for child protective service and foster care cases and only with prior approval of the arrangement by the designated program staff and human service worker.**

Out-of-state center, family or group child care providers must be licensed and agree to:

- A. Reimbursement via direct deposit
- B. Enrollment in the on-line SVL system
- C. Reimbursement at the Level B URBAN rate.

To request an out-of-state provider, the child care eligibility worker will contact the provider team (send email to Darlene Caldwell and cc a copy to Sheila Evins, Sonya Winston, and Chasity Keller-Huggins). The request should include the following information:

- A. Client's name and Social Security Number
- B. Provider's name and complete address (street, city, state and zip code)
- C. Contact telephone number for the out-of-state provider, including the area code.

Designated provider team staff will make contact with the out-of-state provider and forward the appropriate paperwork to them for completion. Once the paperwork is received, a work order will be done to add the out-of-state provider county to the SC Voucher Program database. Once the provider information has been loaded into SCEIS and the county added to the options in the SC Voucher Program, the provider information will be entered into the system and connections made, as appropriate.

## 5.7 Three-Year Provider Agreement

Enrollment and participation in the SC Voucher Program at any Level is strictly voluntary. Providers meeting eligibility criteria may apply for enrollment for a period of three years.

## 5.8 Expiration of Three-Year Enrollment Agreement

Enrollment periods/agreements are effective for a period of three years from the date signed by the provider. The provider's SC Voucher Program enrollment expires on the expiration date of the agreement. **The end of the enrollment period is not appealable.**

All providers will be notified in writing 90 days prior to the expiration date of their agreement and provided an application to re-apply for a subsequent enrollment period at the same Level.

If the provider meets the eligibility criteria for a subsequent enrollment period, the provider will be offered the opportunity to voluntarily sign another three-year enrollment period/agreement.

If the provider does not meet the eligibility criteria for the Level which they applied, they will be given 30 days to apply for another Level.

**NOTE: The process for subsequent enrollments for Level C providers has not been finalized.**

## 5.9 Subsequent Enrollment Criteria

### 1. Providers Applying for Subsequent Enrollment Periods

Providers who have maintained a History of Compliance with regulatory requirements can apply for a subsequent three-year enrollment period. The provider must have consistently demonstrated the following eligibility criteria during the current three-year enrollment period:

- A. **Level A+ (NAEYC) Providers Enrolled Before January 1, 2008:**
  - a. Must have a current regular license or approval.
  - b. Must have maintained accreditation by National Association for the Education of Young Children (NAEYC) without a break in accreditation. (Failure to maintain NAEYC accreditation requires the provider to meet the criteria for Level A+ providers who enrolled January 1, 2008 and after or enroll at another Level.)

- c. Must have adhered to the Level A mandatory standards which are inherent in the NAEYC Standards.

**B. Level A (ERS) Providers Enrolled January 1, 2008 and After:**

- a. Must have a current regular license or approval.
- b. Must meet the Level A mandatory standards, and submitted corrective action within the required time frame, if applicable.
- c. Must meet the overall average score of 4.5 (on a 7-point scale) or higher, with a 4.0 minimum score on the interaction subscale for each age group assessed with the Environment Rating Scale (ERS) on an on-site review conducted by a Quality Monitor during the current enrollment period.

**C. Level B+ and B Providers:**

Eligibility for subsequent enrollment is based on a summative review of the provider's performance during the previous three-year enrollment period (see Note). Factors used to determine re-enrollment eligibility include, but are not limited to repeated non-compliance with the following:

- a. Must have met 80 percent or higher compliance score during each annual review within the three-year period.
- b. Must have met the Level B+ or B mandatory standards and submitted corrective action within the required time frame, if applicable.
- c. Must have had no repeated violations with the same program Mandatory Requirements in which corrective action had to be submitted each time, (i.e. never has training hours, Corporal Punishment Statements, CPR/FA, etc.).
- d. Must have complied with the time frames for meeting educational requirements.

**NOTE: Providers who demonstrated repeated non-compliance with any of the above criteria will be staffed internally to determine re-enrollment eligibility for the Level enrolled.**

**NOTE: Subsequent enrollments for Level C providers have not been finalized.**

## **5.10 Subsequent Enrollment Process**

The process outlined below should be followed for providers who have maintained a History of Compliance and have consistently demonstrated the enrollment criteria and wish to apply for a subsequent three-year enrollment period:

- A. Level A+ (NAEYC) Providers Enrolled Before January 1, 2008:**
  - a. Quality Monitoring staff will notify providers in writing at least 90 days prior to the expiration date of the existing agreement. Providers will be sent an application to complete and return if they are interested in applying for another three-year enrollment period. The application must be returned 60 days before the end of the existing agreement.
  - b. Providers who meet the eligibility criteria will be offered the opportunity to sign another three-year agreement.
  - c. Providers currently enrolled at Level A+ (NAEYC) who do not meet the eligibility criteria will be given the reason(s) and 30 days to apply for enrollment at either Levels A, B, or C. The end of agreement date is not appealable. If the provider wishes to re-enroll as a Level A provider, they must meet the criteria established for Level A (ERS) after January 1, 2008.
  
- B. Level A (ERS) Providers Enrolled after January 1, 2008:**
  - a. Quality Monitoring staff will notify providers in writing at least 90 days in advance of the expiration date of the existing agreement. Providers will be sent an application to complete and return if they are interested in applying for another three-year enrollment period. The application must be returned 60 days before the end of the existing agreement.
  - b. If the provider meets all the eligibility criteria, the provider will be offered the opportunity to sign another three-year enrollment agreement.
  - c. Providers currently enrolled at Level A (ERS) who do not meet the eligibility criteria will be given the reason and 30 days to apply for enrollment at either Levels B or C. The end of agreement date is not appealable. If the provider chooses to apply for the same Level, they must wait six months and complete a self-study.

**C. Level B+ and B Providers:**

- a. Quality Monitoring staff will notify providers in writing of their eligibility status for another enrollment period at least 90 days prior to the expiration date of the existing agreement. Providers will be sent an application to complete and return if they are interested in applying for another three-year enrollment period. The application must be returned 60 days before the end of the existing agreement.
- b. Providers who meet the eligibility criteria will be offered the opportunity to sign another three-year agreement.
- c. Providers currently enrolled at Level B+ or B who do not meet the eligibility criteria will be given the reason and 30 days to apply for enrollment at Level C. The end of agreement date is not appealable. To reapply for enrollment at Level B, providers must wait six months and document they have received technical assistance from a Certified Technical Assistance Provider (TAP). TAP's are certified through the Center for Child Care Career Development (CCCCD). Failure to provide this documentation renders the provider ineligible to reapply at Level B.

**5.11 History of Compliance**

The child care facility is required to have and maintain a History of Compliance with regulatory requirements in order for the facility to enroll and maintain enrollment in the SC Voucher Program. Child care licensing conducts inspections bi-annually and the results of these inspections determine health and safety compliance.

**1. History of Compliance Definition**

History of Compliance is defined as:

- A. No frequent or multiple deficiencies or a significant event *posing substantial threat to the health or safety of a child that involve supervision, compliance with ratios, or health and safety violations.*
- B. At least one caregiver with a Cardiopulmonary Resuscitation (CPR) certification and pediatric first aid certification who is on-site at all times when a child is in care.

**2. Definition of Terms**

History of Compliance terms are defined as follows:

- A. **Frequent** is having three or more violations that pose a substantial threat to a child's health and safety within a six-month period of time.
- B. **Multiple** is having three or more different violations that pose a substantial threat to a child's health and safety within a six month-period of time.
- C. A **significant event** is characterized as, but not limited to: any one-time environmental condition, situation, or occurrence that poses a substantial threat to the health and safety of a child.
- D. A **substantial threat** to the health and safety of a child is any action, condition, or event that results in a child being placed in impending danger or harm.

Conditions that could pose a substantial threat may include, but are not limited to:

- a. A child being left alone in the facility
- b. Sewer backed up in the facility
- c. No water in the facility
- d. No heat or air conditioning in the facility in extreme weather conditions
- e. Fire alarm disconnected
- f. Lack of supervision resulting in a child leaving the facility unnoticed
- g. Lack of supervision resulting in a child left at another location, such as a restaurant, zoo, etc.
- h. A child removed due to abuse or neglect by Child Care Licensing (CCL), OHAN, or Child Protective Services staff
- i. Smoking in the facility by staff
- j. Exceeding the facility capacity or staff-child care ratios defined by CCL.

## **5.12 Process for Determining History of Compliance**

### **1. Process for Determining Compliance for Enrollment for Levels A and B**

The following process should be used when determining compliance for Level A and B enrollment:

- A. Upon receipt of the enrollment application, Quality Monitoring management will consult with CCL to determine if the provider meets History of Compliance.
- B. If the provider meets the definition of History of Compliance, the enrollment process will continue.
- C. If the provider fails to meet the definition, Quality Monitoring management will staff the provider to verify History of Compliance is not met. The enrollment application will be denied and the provider will be notified to reapply when history has been clear for six consecutive months.

### **2. Process for On-going Monitoring for Levels A and B**

The following process should be used to monitor ongoing Level A and B providers:

- A. Quality Monitoring management will continually monitor enrolled providers to determine if History of Compliance is maintained. This will be done via copies of deficiency letters received from CCL, documentation of visits by Quality Monitors, and information shared through the monthly Action Team meetings between CCL and the SC Voucher Program staff.
- B. If a provider fails to meet the definition of History of Compliance, a warning letter will be sent to the provider outlining the violations and reiterating the policy of the SC Voucher Program regarding History of Compliance.
- C. The provider will be referred to the Child Care Services Action Team for discussion.

- D. If the provider receives any further violations after receipt of the warning letter, the provider will be staffed internally by the Quality Monitoring Manager, SC Voucher Program designee, provider's Quality Monitor and SC Voucher Policy Person. Based on the staffing, one of two actions may occur:
  - a. Initiate termination of provider's enrollment OR
  - b. Offer the provider a Corrective Action Plan (CAP).

### 3. Process for Offering a Corrective Action Plan (CAP)

A CAP may be offered if the following criteria are met:

- A. The provider has met History of Compliance in the past with licensing regulations (no other periods of being out of compliance).
- B. There are no other major deficiencies that impact the health and safety of the children served.
- C. The provider has a clear history consisting of good scores/mandatory standards met.
- D. The provider meets regulatory requirements (has a regular License versus provisional License, which means there are no Licensing deficiencies).

If a Corrective Action Plan is offered, it will include:

- A. A timeline for the CAP. The period for a CAP is 90 days from the date the CAP is signed by the provider.
- B. Immediate correction of the problem.
- C. Outline of the specific areas of non-compliance.
- D. Provisions for increased monitoring of the provider by Quality Monitoring and/or CCL (if applicable).
- E. Action to be taken by Quality Monitoring if the CAP is not met.
- F. Signatures of the provider, the provider's Quality Monitor and Quality Monitoring management.
- G. Statement indicating the provider is not eligible for any bonus or grant opportunities until the CAP is successfully completed.

Once the CAP is completed:

- A. Quality Monitoring management will contact the provider via telephone with conditions of the CAP, and, if possible, schedule a conference to discuss and sign the CAP.
- B. If the provider is unable to schedule a conference, Quality Program Monitoring will mail the CAP, along with a cover letter.
- C. The provider must sign the CAP within the designated time frame indicated in the letter.
- D. If Quality Monitoring does not receive the signed CAP within the designated time frame, the agency will attempt one more contact via telephone to secure the signed CAP.
- E. If the CAP is not received within the second designated time frame, the SC Voucher Program will initiate termination of the provider.

## 5.13 Corrective Action

During monitoring visits, if it is found that providers have deficiencies that require corrective action (other than History of Compliance), it is the intent of the SC Voucher Program to give providers sufficient time to make the corrections in order to maintain their enrollment in the SC Voucher Program.

When deficiencies/violations identified at an SC Voucher Program child care facility are ***not life threatening or do not pose an immediate and substantial threat to the health and/or safety of the children enrolled***, the provider will be given an opportunity to correct the deficiencies/violations.

The following outlines the process for allowing providers to submit corrective action:

- A. **First Notice to Provider:** Upon the occurrence of a monitoring visit, if deficiencies are found, the monitor will leave the provider a Site Report which outlines the deficiencies found, what needs to be submitted, and the time frame for the corrective action to be submitted. If the monitor is unable to leave a Site Report on the day of the visit for whatever reason, upon return to the office, the Site Report is to be mailed to the provider and time frame is given.
- B. **Second Notice to Provider:** The monitor turns the monitoring report in to the Quality Monitoring designee who prepares their reports and letter to the provider. If all corrective action has been received within the required time frame, the provider's letter indicates that all corrective action has been received and the provider's report is finalized and filed. However, if the provider has not submitted any or all required corrective action within the

required time frame, then the letter indicates this is “a second notice” and is sent to the provider with their report. The letter indicates what has or has not been received and gives the provider another time frame to submit the corrective action. The report is held in a pending file until all corrective action is received and the report is finalized.

- C. **Third and Final Notice to Provider:** Anytime during or at the end of the second time frame (second notice), if all corrective action has been received, the provider will receive a letter indicating that all corrective action has been received, and the report is finalized and filed. However, if the provider has not submitted any or all required corrective action within the required time frame, a third and final written notice is sent to the provider by certified mail. This letter indicates what has or has not been received and gives the provider another time frame to submit all corrective action and indicates that failure to comply will result in the termination process being initiated. If all corrective action is received within the required time frame, the provider receives a letter indicating such and the report is finalized.
- D. **In-House Staffing:** If the provider still has not complied by submitting the required corrective action by the deadline of the third and final notice, the provider is staffed by the QRIS Quality Monitoring Manager or designee, provider’s Quality Monitor and SC Voucher Program Policy Person to ensure that policy has been followed before proceeding with the final course of action regarding the provider’s continued SC Voucher Program enrollment.

During the staffing, the decision can be made to:

- A. **Extend Time for Correction:** In cases where the provider has made reasonable efforts to comply, but may be lacking a piece of documentation, the QRIS Quality Manager has the option to contact the provider by phone and discuss the situation and explain to the provider what is still needed and give an additional time frame. This would be situations where the provider can easily make the correction such as submitting a plan for hand washing, or submit copies of signed educational plans or copy of policies, etc.
- B. **Terminate:** If the deficiencies/violations are still not corrected at the end of the extension period, the enrollment termination process may be initiated.
- C. **Reclassify:** If the deficiencies/violations are still not corrected at the end of the extension period, reclassification may be initiated, if the provider meets the criteria for reclassification.

Any further consideration for extenuating circumstances must be approved by the Director of Early Care and Education or designee.

Please note: These notices are separate and distinct notices to the provider. When corrective action is required, then the SC Voucher Program has always reserved the right to amend the policy and extend the time frames depending upon the situation. Our goal is to improve the quality of care, but not to be punitive, thus the program may extend more time as needed.

**NOTE: In the event the SC Voucher Program terminates a provider's enrollment during the three-year enrollment period, and the Appeals Office upholds the provider, any outstanding corrective action not affected by the appeal must be submitted.**

## **5.14 Maximum Payment Rates**

The SC Voucher Program establishes the maximum payment rates every two years through the Market Rate Survey.

Maximum rates are categorized by provider type, care type and by rural or urban designations. Although the maximum rates change every two years, a provider must submit rate increases in order to receive the new higher rates.

## **5.15 Second Child Discounts**

A second child discount is established by provider at the time of enrollment. The discount is an amount (percentage) of discount applied to a family with multiple children receiving care with the same provider. The second child discount is applied to all children except the youngest when the children are at the same facility. Therefore, a family with four children will have the second child discount applied to the oldest three children. All SC Voucher Program providers do not elect to have second child discounts. A second child discount offered to a private paying client must be offered to SC Voucher Program clients. When a second child discount is applied, it will remain in effect until the connection ends, the child transfers to another provider, or eligibility ends.

## **5.16 Provider Rate Changes**

### **1. Rate Increases**

A child care provider may increase the child care rates they charge at any time during their enrollment within the SC Voucher Program. The rate increase does not automatically go into effect for all children. Rate increases apply to:

- A. Foster children

- B. All children connected with a Level A provider
- C. Connections made for a client after the effective date of the increase for:
  - a. Level B providers
  - b. Level C providers
  - c. Family, Friend, and Neighbor providers.

## 2. Rate Increases for Level A and B Child Care Providers

A provider who increases their child care rates may request a rate increase form at any time. The following steps are taken when increasing child care rates:

- A. The provider must call the QRIS Quality Monitoring staff to request a Level A and B Provider Rate Form, [DSS Form 37107](#).
- B. The rate increase form is sent to the child care provider.
- C. The form is completed by the provider and returned to Quality Monitoring with the required documentation, which is:
  - a. A copy of the provider's published/written child care rates, (i.e., written fee policy, parent handbook with rates included)
  - b. Any correspondence given to parents notifying them of the rate increase.

**NOTE: The rate increase will not be processed without this information.**

- D. The provider will receive written notification of the outcome of the request for a rate increase. The rate increase form is forwarded to the designated Control Center staff to be updated in the SC Voucher Program database.
- E. Once approved, and the SC Voucher Program database is updated, the rate increase will not immediately take effect for a client currently being served by the provider. The payment rate will remain the same until the client's eligibility period is re-determined. If the client continues to select the provider, then the new payment rate will be effective for the client with the date of the new eligibility period.

**EXCEPTION: Foster children and children connected to Level A providers are the only recipients immediately connected at the new rate.**

- F. Any new client selecting the provider on or after the date of the rate increase will be paid at the new rate.

- G. If the provider charges more than the maximum allowed by the SC Voucher Program, only the maximum will be paid. The provider may require the client to pay the difference.

### 3. Rate Increases for Level C and Family, Friend, and Neighbor Child Care Providers

A provider who increases their child care rates may request a rate increase form at any time. The following steps are taken when increasing child care rates:

- A. The provider must call the Control Center to request a Level C Provider Rate Certification Form, [DSS Form 37107](#), or FFN Child Care Enrollment and Agreement Form, [DSS Form 3774](#).
- B. The rate increase form is sent to the child care provider.
- C. The form is completed by the provider and returned to the Control Center. Control Center staff updates the information in the SC Voucher Program database.
- D. Once approved, and the SC Voucher Program database is updated, the rate increase will not immediately take effect for a client currently being served by the provider. The payment rate will remain the same until the client's eligibility period is re-determined. If the client continues to select the provider, then the new payment rate will be effective for the client with the date of the new eligibility period.

**EXCEPTION: Foster children and children connected to Level A providers are the only recipients immediately connected at the new rate.**

- E. Any new client selecting the provider on or after the date of the rate increase will be paid at the new rate.
- F. If the provider charges more than the maximum allowed by the SC Voucher Program, only the maximum will be paid. The provider may require the client to pay the difference.

### 4. Rate Decreases for All Levels

When a provider has a rate decrease, the decrease will immediately apply to all children connected to the provider and all future connections.

**NOTE: The same procedures as outlined in Rate Increases will be followed with the exception that all rate decreases will be effective immediately without regard to the client's eligibility period.**

## 5.17 Records

A provider should establish good record keeping methods and maintain all documentation in an orderly fashion. Records should be kept for a period of three years or until all applicable audits have been completed. If an audit is in progress, all documents shall be maintained until the audit is complete.

The following records **are required to be kept on-site and will be reviewed** during regular monitoring visits, audits, or as needed to resolve discrepancies:

### 1. Attendance

- A. Daily attendance records must be maintained for each child served through the SC Voucher Program.
- B. Attendance may be documented in several different ways, which include the following:
  - a. Recording days and actual hours of attendance or absences in a roll book or log sheet, to include the USDA Log Sheet
  - b. Using sign-in/sign-out sheets OR
  - c. Using computer logs, etc.

**IMPORTANT NOTE: If the provider uses sign-in/sign-out sheets, and the parent fails to sign-in and also sign-out, the SCDSS Auditors may recoup funds.**

- C. The child's name on the attendance must match the name on the SVL. **The child's given name, not a nickname, should be recorded.**
- D. Records must match the absences reported on the SVL submitted for the period. Providers must accurately report all absences on the SVL indicating "0" for the hours attended and the absence reason code or the actual number of hours attended daily (whole numbers only).
- E. **A provider who does not maintain daily attendance or accurate records may be required to repay funds if the provider cannot provide documentation that the child attended the program.**
- F. Daily attendance records may be requested to resolve a discrepancy between two different providers when a child's date of attendance is in question.

## 2. Service Voucher Log (SVL)

- A. A provider must maintain copies of the submitted SVL on-site for a period of three years or longer, if in an audit.

**NOTE: Providers who participate in the On-line SVL system must keep a paper copy of the submitted SVL.**

- B. The provider should review the SVL against the Provider's Remittance Advice.

## 3. Client/Child Records

An individual file should be kept on-site for each child enrolled through the SC Voucher Program. Information should include, but not be limited to, the following:

- A. Parent name and child's complete name
- B. SSN of the parent and child.

**NOTE: It is helpful to cross-reference each child's file with other children from the same family, especially when the last names are different.**

- C. [SC Voucher Program Authorization/Connection Letter](#) which describes the following:
  - a. Client's name and name of the child
  - b. Amount of billing
  - c. Start and stop dates
  - d. Client fee amount (if applicable)
  - e. Type of care.
- D. Correspondence from the SC Voucher Program related to the client.

## 5.18 Adverse Actions by the SC Voucher Program

Adverse actions taken by the SC Voucher Program towards providers may include:

- A. Termination of Provider Enrollment
- B. Reclassification.

## 1. Termination of Provider Enrollment by the SC Voucher Program

The SC Voucher Program will initiate termination of an SC Voucher Program child care provider's enrollment agreement if the provider fails to comply with the requirements of the SC Voucher Program and criteria to maintain enrollment at the Level enrolled. To maintain enrollment in the SC Voucher Program at any level, a provider is required to meet regulatory requirements and attendance and payment documentation requirements at all times.

**EXCEPTION:** See [Reclassification](#). (Section 5.21)

If enrollment is terminated for cause, the provider cannot reapply at any level for six months following the date the appeals process has ended.

**NOTE:** If the process results in termination of the provider's enrollment, the termination date should be effective the first Monday following 10 working days (excluding weekends and holidays) after notification that the appeals process has ended.

A child care facility's enrollment will be terminated as an SC Voucher Program provider for, but not limited to, the following reasons:

## 2. Process for Incomplete Applications

In order for a potential client to apply for child care services, or for a potential provider to apply for enrollment as an SC Voucher Program provider in the SC Voucher Program, certain required forms and documentation must be submitted. (See Chapter 3 [Application Process](#) and Section 5.6 [Provider Selections and Types](#)). If all of the required forms and documents are not submitted with the child care application or the provider enrollment forms, the Control Center staff will send the applicant (client or provider) an Incomplete Letter, which will indicate the information that is needed. The Incomplete Letter will include a deadline (15 calendar days from the date of the letter) for submission of the missing information. The applicant (client or provider) must submit the missing information by close of business on the 15<sup>th</sup> calendar day.

## 3. Denials for Incomplete Applications

Failure to return the requested information by the deadline will result in the denial of child care services for the client or the denial of the enrollment for the provider. The potential client or provider will be sent a denial letter, which will indicate that the application was denied due to non-submission of missing information by the deadline given in the

Incomplete Letter. Both client and provider applicants may request a fair hearing regarding the denial of their application for the SC Voucher Program.

#### 4. Failure to Meet Regulatory Requirements

If the provider's regulatory status is revoked, denied, or suspended, or an injunction is issued to close the facility, the provider's enrollment will be terminated. The termination of enrollment process shall be initiated immediately.

If a provider is under appeal with Child Care Licensing (CCL) and deficiencies or violations are found that ***are life threatening or pose an immediate and substantial threat to the health and/or safety of the children enrolled***, the Child Care Services Director can make the decision to remove all SC Voucher Program children from the facility during the appeals process. If an injunction is issued to close the facility by CCL, then the children will be removed immediately.

#### 5. Failure to Maintain History of Compliance

History of Compliance is defined as having:

- A. No frequent (three or more within six months) deficiencies *posing substantial threat to the health or safety of a child that involve supervision, compliance with ratios, or health and safety violations.*
  - a. **Maintaining Staff-Child Ratios Requirements** – Providers shall at all times maintain staff-to-child ratios. When it has been determined a provider has failed to meet the required staff:child ratios three or more times during any six-month period, the termination of enrollment process will be initiated.
  - b. **Maintaining Supervision Requirements** – Providers shall at all times maintain supervision requirements. When it has been determined that a provider has failed to meet supervision of children requirements three or more times during any six-month period, the termination of enrollment process will be initiated.
  - c. **Maintaining Regulatory Capacity** – Providers shall at all times maintain the facility's regulatory capacity. When it has been determined a provider has exceeded the regulatory capacity at a facility three or more times during any six-month period, the termination of enrollment process will be initiated.
  - d. **Maintaining Health and Safety Regulations** - Providers shall at all times maintain health and safety regulations. When it has been determined that the provider has received multiple violations which

affect the health and safety of children, the termination of enrollment process will be initiated.

- B. No multiple (three or more within six months) deficiencies *posing substantial threat to the health or safety of a child that involve supervision, compliance with ratios, or health and safety violations.*
  - a. **Maintaining a Combination of Ratios, Supervision, Regulatory Capacity, or Health and Safety** – When it has been determined a provider has failed to meet a combination of ratios, supervision, regulatory capacity requirements or health and safety (#a, b, c, and d above) during any on-site visit, or individually for three or more times during any six month period (i.e., first violation ratios, second violation supervision, third violation ratios), the termination of enrollment process will be initiated.
- C. At least one caregiver with cardiopulmonary resuscitation (CPR) certification and pediatric first aid (FA) certification who is on-site at all times when a child is in care.
  - a. **Meeting CPR/First Aid Certification** – Providers shall at all times have one caregiver with CPR and FA on-site. When it has been determined that a provider has failed to meet the CPR/First Aid Certification coverage at a facility three or more times during any six-month period, the termination of enrollment process will be initiated.
- D. Maintaining History of Compliance in which **no** significant event occurs that poses a substantial threat to *the health or safety of a child that involve supervision, compliance with ratios, or health and safety violations.*

## 6. Failure to Maintain Required Program Assessment Scores

Program assessment scores are required to be maintained as indicated for the following providers:

### A. Level A Providers:

The minimum score required for enrollment and to maintain enrollment is: an average score of 4.5 on the Environment Rating Scales (ITERS-R, ECERS-R, and/or SACERS) appropriate for each age group of children in randomly selected classrooms. Additionally, each classroom observed must earn a minimum score of 4.0 on the Interaction Subscale.

### B. Level B Providers:

- a. The minimum score required for enrollment and to maintain enrollment is: 1) Center-based = 80 percent for each age group 2) Family/Group = 80 percent overall.
- b. If a center-based facility scores less than 65 percent in all age groups or a Family/Group facility scores less than 65 percent overall during an on-site Level B Child Care Standards assessment, the termination of enrollment process shall be initiated with that review.
- c. If a center-based facility is enrolled for more than one age group and any age group scores less than 65 percent, de-enrollment of the age groups scoring less than 65 percent shall be initiated upon the first visit.
- d. If a center-based facility is enrolled for more than one age group and any age group scores **at least** 65 percent, but less than the 80 percent required, then two more assessments will be conducted for that age group. If after three assessments, the score is still below 80 percent, the de-enrollment process of the age groups not meeting the 80 percent requirement shall be initiated upon the third visit.

## **7. Failure to Maintain National Association for the Education of Young Children (NAEYC) Accreditation (Level A Only)**

Level A National Association for the Education of Young Children (NAEYC) providers enrolled in the SC Voucher Program prior to January 1, 2008, were grandfathered into Level A based on current accreditation by NAEYC. A grandfathered Level A provider may remain a Level A provider as long as they maintain their NAEYC Accreditation. Should they lose their accreditation for any reason, providers will be given 30 days to apply for whatever Level best suits them. Upon receipt of the provider's completed application, the SC Voucher Program will have 90 - 150 days to complete the applicable on-site assessment depending on the size of the program, scheduling constraints, and/or provider circumstances.

**NOTE: Level C does not require an on-site assessment prior to enrollment. If the provider does not make application within the prescribed time frame, the termination of enrollment process will be initiated.**

## **8. Use of Corporal Punishment**

The SC Voucher Program defines corporal punishment as *the use of physical force to the body as a discipline measure. Physical force to the body includes but is not limited to spanking, slapping, biting, and shaking.*

If the owner/operator of the facility administers corporal punishment, termination of

facility enrollment will occur on the first offense.

If staff in a child care center uses corporal punishment, and the corporal punishment was not condoned by the owner/operator, the provider should be given an opportunity to take appropriate corrective action. If appropriate action is taken, termination of enrollment will not occur.

If further instances of corporal punishment are used at the facility within any 12-month period, the termination of enrollment process will be initiated.

**NOTE: A Level C provider must comply with CCL regulations in regards to corporal punishment. Violations of the regulations may result in termination from the SC Voucher Program.**

## **9. OHAN Findings**

If a staff's name at an SC Voucher Program facility is entered into the Central Registry, and the perpetrator is not barred from the facility, the termination of enrollment process will be initiated immediately. For Family/Group facilities, the termination of enrollment process will be initiated immediately. The Child Care Services Director may make a decision to remove all SC Voucher Program children from the facility during the appeals process.

## **10. Failure to Submit Required Corrective Action**

If a provider does not correct the deficiencies/violations within the time frame allowed (including any extension of time allowed for correction), the termination of enrollment process may be initiated.

**NOTE: In the event the SC Voucher Program terminates a provider's enrollment during the three-year enrollment period, and the Appeals Office upholds the provider, any outstanding corrective action not affected by the appeal must be submitted.**

## **11. Facility Moves**

If the facility moves to another location, and the new location does not meet regulatory requirements, the termination of enrollment process will be initiated. The effective termination date will be the first Monday following the date of the move.

## **12. Failure to Provide Child Care Services at Enrolled Address**

Providers must notify the SC Voucher Program in advance of days the facility will be temporarily closed, or if the facility is moving or permanently closing.

When an unannounced on-site visit is conducted at an SC Voucher Program facility during the hours the facility should be in operation, and services cannot be verified on the day of the visit, the SC Voucher Program will provide written notification by certified mail to the provider that if services cannot be verified during the next unannounced on-site visit, the termination of enrollment process will be initiated.

If a second visit is conducted and services cannot be verified (i.e. no one is there or comes to the door), the termination of enrollment process shall be initiated.

When an unannounced on-site visit is conducted and there is no evidence of child care services being offered at the enrolled address (i.e., looks abandoned, no furniture inside, wood over windows, grass overgrown, etc.) or if information is obtained from reliable sources (i.e., DSS personnel, CCR&R personnel, etc.) that the provider is operating at another address, or that a child is being served at an address which the provider is not authorized, and this is verified by the SC Voucher Program, the termination of enrollment process shall be initiated upon that visit. Funds will be recouped for the period of time when services could not be verified.

### **13. Providing Service at a Location Other than the Enrolled Address OR Other than the Site the Child is Connected To**

Per the Provider Agreement, providers are authorized only to serve a child at the site which is enrolled and has been approved by the SC Voucher Program. When a child is served at a location that has not been approved by the SC Voucher Program, this potentially places that child in harm. For example, the other location may not be a licensed facility where health and safety codes are met. Additionally, the SC Voucher Program is paying for a higher quality of care at the enrolled location and thus cannot guarantee the quality of care at locations other than the enrolled site.

A child must be served at the location for which they have been connected. If the provider has two or more locations enrolled, they may not switch or transport a child between locations without notifying the Control Center for authorization. A child will appear on the SVL for the location in which they have been connected. When it is verified that a child is being served at a location other than the enrolled address, the termination of enrollment process will be initiated.

### **14. Failure to Respond to Attempts by SC Voucher Program Staff to Reach the Provider**

If a provider has an SC Voucher Program child currently connected, and there are three documented attempts within a period of 15 days (excluding weekends and holidays) by the SC Voucher Program to reach the provider, by phone, letter, e-mail, and/or on-site visit and there is no response by the provider, the termination of enrollment process shall be initiated. Funds will be recouped for the period of time when services could not be verified.

## **15. Failure to Operate During Stated Hours of Operation**

If there are three documented incidents of non-compliance with the stated hours of operation during any 12-month period, the termination of enrollment process may be initiated.

## **16. Failure to Maintain LAN (Local Area Network) Phone Service**

Providers are required to have LAN phone services where an SC Voucher child is being served. Cell phones are not permitted as the primary/sole phone service. When it becomes known to the SC Voucher Program that a provider does not have LAN phone services at a facility where SC Voucher Program child care services are provided, the provider should be given 30 days to secure LAN phone services. If the provider does not secure LAN phone services within the 30 days, or if it is documented that the provider did not have active LAN phone services two times within any 12-month period, the termination of enrollment process may be initiated.

**NOTE: FFN providers are the only providers allowed to have cell phones as the sole phone source.**

## **17. Misuse of SC Voucher Program Grant Funds**

If a provider uses SC Voucher Program grant funds on purchases other than its approved use and the provider does not reimburse the SC Voucher Program within the time frame given for reimbursement (including any extension of time approved), the termination of enrollment process may be initiated. Recoupment of the funds will also be initiated.

## **18. Fraud**

If a provider intentionally makes a false statement or misrepresentation regarding a material fact or fails to disclose a material fact that results in obtaining, attempting to obtain, or continuing to receive SC Voucher Program funds which the provider would not otherwise qualify to receive, the termination of enrollment process will be initiated. Funds will be recouped for the period of time when the provider did not qualify for the funds.

## **19. Owner/Operator or Director Guilty of Fraud in a State-Funded or Federally-Funded Program**

If an owner/operator is found guilty of committing fraud in another state-funded or federally-funded program, the termination process will be initiated. If a director is found guilty of committing fraud in another state-funded or federally-funded program and the director is retained in the capacity as director of the facility, the termination of enrollment process will be initiated.

## **20. Failure to Maintain SC Voucher Program Documentation Requirements**

If a provider is cited three times for the same record keeping violations during any 12-month period, the termination of enrollment process may be initiated. The violations can be noted by the SC Voucher Program Staff, the DSS Audit Staff or CCL.

## **21. Verbal or Physical Abuse of SC Voucher Staff**

If a provider curses or yells at any SC Voucher Program staff, the provider will be sent a certified letter after the first offense. The letter will describe the incident and inform the provider that another such incident will result in termination being initiated. If a second offense occurs, the termination of enrollment process will be initiated. If the provider threatens, or physically assaults any SC Voucher Program staff during the course of conducting SC Voucher Program business, the termination of enrollment process will be initiated.

## **22. Refusal to Allow SC Voucher Program Representative Access to the Facility**

If a provider refuses to allow an SC Voucher Program staff on the premises or in the building of an enrolled child care facility, and the SC Voucher Program staff is on official SC Voucher Program business during the stated operating hours of the facility and the provider is open for business, the provider will be sent a certified letter after the first offense, describing the incident and notifying the provider that as a result of the incident:

- A. Any available bonus or grant for the review period is forfeited, AND
- B. If SC Voucher Program staff are denied access during any future visits, the termination of enrollment process will be initiated.

If a second incident occurs, the termination of enrollment process will be initiated.

## **23. Smoking in a Facility**

If a provider has three documented incidents of violating Public Law 103-227, Part C, Environmental Tobacco Smoke Act, also known as the Pro-Children Act, which prohibits smoking in any indoor facility used routinely or regularly for the provision of health, day care, education, or library services to children under the age of 18 years, the provider will be terminated within 10-working days' notice, excluding the weekends and holidays, to the provider and clients.

## **5.19 Process for Terminating a Provider Enrollment**

The following shall occur when the SC Voucher Program is initiating termination of an SC Voucher Program provider's enrollment:

### **1. Life-Threatening or Substantial Threat of Harm**

When there are life-threatening issues at an SC Voucher Program enrolled facility, the termination of enrollment process shall be initiated immediately and CCL shall be notified. Life-threatening issues include, but are not limited to the following:

- A. Sewer backed up in facility
- B. No water in the facility
- C. Over-heated facility
- D. Fire alarm disconnected
- E. A child seriously injured or death due to lack of supervision or negligence by staff
- F. Lack of supervision resulting in a child leaving the facility unnoticed
- G. Lack of supervision resulting in a child being left at another location
- H. A child removed due to abuse or neglect by staff
- I. Ratios exceeded by 25 percent or more, etc.

If the termination of enrollment process results in termination, the termination of enrollment should be effective immediately after the appeals process ends. The Child Care Services Director may make a decision to remove all SC Voucher Program children from the facility during the appeals process.

### **2. Non-Life-Threatening Situations**

If the reason for the termination of enrollment is **not** determined to be life threatening and does not pose an immediate and substantial threat to the health and/or safety of the child, termination of enrollment notices should be effective the first Monday after 10 working days (excluding weekends and holidays) from the date the final termination notice is mailed to the provider, unless a different time frame is otherwise noted in this document. This allows for mail delivery of the notices and time for the families to make other child care arrangements.

### 3. Notification to Child Care Staff

If termination of enrollment results after the appeals process, the QRIS Quality Monitoring Designee will send an e-mail to notify the Control Center of the final decision to terminate enrollment and the effective enrollment termination date.

### 4. First Notification to Provider from SC Child Care Program Monitoring

A written letter, prepared by the QRI Quality Monitoring Designee and signed by the Child Care Services Director or Designee, will be sent by certified mail to the provider notifying the provider of the SC Voucher Program's intent to terminate enrollment. The letter will include, at a minimum:

- A. Notice that the termination of enrollment process is being initiated
- B. Reason for the termination of enrollment
- C. Current number of SC Voucher Program children connected and receiving services from the provider
- D. Information regarding the provider's right to file an appeal within 30 days and the process for filing an appeal
- E. Contact person and information in case the provider has questions.

### 5. Appeals

The QRIS Quality Monitoring office will track the termination of enrollment of providers to determine if the provider files an appeal within the 30-day time frame allowed for filing an appeal.

The SC Voucher Program System Liaison will notify the QRIS Quality Monitoring office if a Level C provider files an appeal.

Once QRIS Quality Monitoring receives notification that a provider has filed an appeal, the Quality Monitoring Designee will enter this information into the SC Voucher Program database, so that no new SC Voucher Program children can be connected during the appeals process.

If a provider does file an appeal (regardless of the SC Voucher Program level), the *Provider Appeals and Hearing Process* should be followed.

If during the appeals process the violations are life-threatening or pose an immediate and substantial threat to the health and/or safety of the children enrolled, the Director of Child

Care Services may make a decision to remove all SC Voucher Program children from the facility.

## **6. Final Notification to Provider from SC Voucher Quality Monitoring**

If the SC Voucher Program prevails after the appeals process has ended, Quality Monitoring will send a letter to the provider to notify them of the final decision to terminate enrollment. The letter will include, at a minimum:

- A. Effective termination of enrollment date
- B. Waiting period for re-enrollment
- C. Statement that payment will not be made for care provided to a child remaining in the facility after the date of termination of enrollment
- D. Contact person and information in case the provider has questions.

## **7. Final Notification to the Clients and the Provider from the Control Center**

After receiving the final notification from Quality Monitoring that a facility is being terminated, the SC Voucher Program will send a letter to all SC Voucher Program clients connected to the facility, notifying them that the facility's enrollment is being terminated and that the SC Voucher Program will not pay for services after the termination of enrollment date.

The Control Center will send a final notice to the provider at the same time the Control Center sends the letter to the clients, notifying the provider of the facility's termination of enrollment from the SC Voucher Program and the last date payment will be made to the facility on behalf of SC Voucher Program clients.

Parents will be given an opportunity to select another SC Voucher Program facility for their child. A listing of all Levels A, B, and C facilities are available at [www.scchildcare.org](http://www.scchildcare.org). Parents may also request a printed list of SC Voucher Program providers from the Control Center at (800)476-0199.

Parents may choose to remove their child from the facility prior to the official termination of enrollment date, but must call the Control Center to receive prior approval. If any SC Voucher Program parents continue to choose the provider after the official termination of enrollment date, the parents will be responsible for full payment to the provider after the termination of enrollment date.

## 8. Referral Resources to Assist Clients

The SC Voucher Program should make every effort to assist clients in finding other child care arrangements.

## 9. Provider Files

A copy of all e-mails, notices and other related documents will be placed in the provider's files as applicable. The provider's file will be placed in a terminated status.

### 5.20 Exceptions to the Process for Terminating a Provider Enrollment

The detailed steps in Section 5.19, [Process for Terminating a Provider Enrollment](#), are not taken when proceeding with the termination of a providers' enrollment. However, a termination letter is generated by the SC Voucher Program upon termination in the following situations:

- A. **Provider has no current SC Voucher Program children and has closed the program or vacated the facility and did not notify the SC Voucher Program.**

Example: Quality Monitoring conducts unannounced visit and finds facility abandoned. The SC Voucher Program will attempt to reach the provider by phone. If unsuccessful, then a letter will be mailed notifying the provider that they must contact Quality Monitoring within five working days of receipt of the letter or the file will be closed. If no response is received, then the file will be closed. Should a provider reopen at another location and wish to apply for enrollment, they must wait six months before they can reapply.

- B. **Provider has no current SC Voucher Program children connected and the SC Voucher Program cannot reach anyone either at the facility (on-site) or by phone during the normal hours of operation.**

Quality Monitoring will send a letter notifying the provider that they must contact ABC Program Monitoring within five working days of receipt of the letter or their file will be closed. If there is no response by the provider, the file will be closed and the provider must wait six months before they can reapply.

### C. Facility Ownership Changes

A provider must immediately notify the SC Voucher Program of any changes in ownership of the facility. A change in ownership invalidates the enrollment agreement as it is not transferable. It also invalidates the DSS License or Registration. Agreements are non-transferable. The provider's file will be placed in a closed status. The new owner may apply for enrollment at any level desired by completing the application process and meeting the enrollment requirements.

The provider must notify Quality Monitoring at least 30 days prior to the sale.

**VERY IMPORTANT NOTE: It is extremely crucial to notify Quality Monitoring of the sale of the facility so that payment under the provider's TAX ID number can be stopped. If the provider fails to do this and the new owner continues to receive the SVLs and submits them, payment will continue to be made under the original provider's TAX ID, and thus the original provider is responsible for payment of taxes due. The SC Voucher Program cannot be held responsible when providers fail to notify the SC Voucher Program of the sale. Providers should NOT send this notification in with their last SVL, but must call or write Quality Monitoring directly.**

- D. Provider notifies the SC Voucher Program that they are closing. The termination date will be the first Monday following the date of the closure. The provider must wait six months before re-enrolling at any level.

**NOTE: The above terminations are not appealable.**

## 5.21 Reclassification

Reclassification is the process whereby providers are moved from a higher quality Level to a lower Level within the SC Voucher Program.

Reclassification may be initiated by the SC Voucher Program during the provider's three-year enrollment agreement or the provider may request this in writing at any time. Providers may appeal reclassification only if initiated by the SC Voucher Program during the three-year enrollment period. When reclassification occurs, providers remain in the SC Voucher Program and may accept vouchers; however, the payment rate is adjusted at the end of the appeal period. If the provider requests reclassification, the payment rate is adjusted upon the change of Levels.

**NOTE: Providers are not eligible for reclassification if they fail to meet the History of Compliance or regulatory requirements.**

The following are the reasons that a provider may be reclassified:

- A. Provider at Level A or B moves facility and new location does not have a regular license (only provisional) required for enrollment of new location.
- B. Provider scores are below the required scores (but at least 65 percent) for the Level enrolled after three consecutive visits.
- C. Provider cannot meet the mandatory standards, i.e. education, training hours due to health reasons or personal circumstances (spouse or family member ill or dying).
- D. Level A providers with NAEYC Accreditation lose their accreditation.

## 1. Process for Reclassification

The following process should be used when a provider is reclassified:

- A. Provider will be staffed internally to determine if criteria is met for reclassification.
- B. Provider will be mailed certified letter regarding intent to offer reclassification because provider does not meet the criteria to remain at current Level. Appropriate Level paperwork will be included in the letter with a deadline to return the paperwork.
- C. If the provider fails to return the paperwork by the deadline, termination of enrollment will be initiated and the termination process followed.
- D. If the paperwork is returned and the provider is enrolled at another Level, Quality Monitoring will place the provider's file for the original Level in a closed status.

## 5.22 Voluntary Termination by the Provider

Providers may voluntarily request to end their enrollment/agreement at any time with the SC Voucher Program at any level by notifying the SC Voucher Program in writing or through a documented telephone contact.

**Voluntary termination of a provider's enrollment agreement is not appealable. If the provider requests to voluntarily end their enrollment agreement, and then later requests to rescind the termination of their agreement, the SC Voucher Program is under no obligation to do so, particularly if the provider's file has been terminated in**

**the SC Voucher Program.** The provider may not reapply for enrollment at any level for a period of six months from the effective date of termination.

Providers who have received a grant must stay in the SC Voucher Program for the period required by the grant, or the grant funds will be recouped.

## **5.23 Re-Enrollment**

### **1. Waiting Period for Re-Enrollment of Terminated Enrollments**

When the SC Voucher Program terminates a provider's enrollment during the three-year enrollment period, and the provider does not request an appeal, the provider must wait six months after the effective date of the termination before applying for enrollment at any level.

In the case where the provider requests an appeal and the Appeals Office does not uphold the provider in the appeal, the provider must wait six months after the date the final appeals decision is issued before applying for enrollment at any level.

If the provider requests to appeal any decision, and then withdraws the request, the six months would begin upon notification that the appeal process has ended.

See [Enrollment/Re-Enrollment Exceptions](#) (Section 5.24).

### **2. Waiting Period for Provider Who Voluntarily Terminates Enrollment**

Providers who voluntarily terminate enrollment must wait six months before re-applying for enrollment at any level.

### **3. Waiting Period When Provider is Not Eligible for Subsequent Enrollment Agreement**

Level A providers who are not eligible for a subsequent enrollment agreement must adhere to the following guidelines before reapplying for enrollment:

- A. **Level A (NAEYC) providers** enrolled prior to January 1, 2008, who are not eligible for a subsequent three-year enrollment agreement have 30 days to apply for any Level. If the provider wishes to reapply as a Level A provider, they must meet the requirements established for Level A (ERS) providers after January 1, 2008.

- B. **Level A (ERS) providers** enrolled after January 1, 2008, who are not eligible for a subsequent three-year enrollment agreement will have 30 days to apply for Level B or Level C. However, should they wish to reapply for Level A again, they must wait six months and complete a self-study.

Level B providers who are not eligible for a subsequent three-year enrollment agreement will have 30 days to apply for enrollment at Level C. If the provider wishes to reapply as a Level B, they must wait six months and receive technical assistance from a Certified Technical Assistance Provider (TAP). TAP's are certified through the Center for Child Care Career Development (CCCCD). Failure to provide this documentation will render the provider ineligible to re-enroll at Level B.

**NOTE: Subsequent enrollments for Level C providers have not been finalized.**

#### **4. Exemption of Waiting Period**

If extenuating circumstances exist, SC Voucher Program management may grant an exemption of the six-month wait for applying for enrollment, if recommended by Program Monitoring staff or the Control Center, as applicable. No exemption will be granted for providers who are terminated for failure to maintain History of Compliance with regulatory requirements.

### **5.24 Enrollment/Re-Enrollment Exceptions**

The following are reasons a provider is ineligible to participate or re-enroll in the SC Voucher Program at any level:

#### **1. Death of a Child**

Any institution or its principals who have contributed to the death or serious injury of a child by failing to comply with minimum health and safety regulations (defined as SC Child Care regulations) is ineligible to participate in the SC Voucher Program at any level.

#### **2. Fraud**

Any institution or its principals who have been convicted of fraud are ineligible to participate in the SC Voucher Program at any level.

#### **3. Falsified Documents**

Institutions or principals who falsify or misrepresent official, legal documents (i.e., birth certificates, degrees, transcripts, etc.), or other SC Voucher Program documents (SVL,

attendance records) and submit to agency representatives are ineligible to participate in the SC Voucher Program at any level.

#### **4. Administrative or Judicial Determination of Abuse and/or Neglect**

Any institution or its principals who abuse or neglect a child and/or whose name has been entered into the Central Registry cannot be enrolled as long as the perpetrator continues to be employed and/or present at the facility.

#### **5. Ineligibility to Participate in Publicly Funded Programs**

Any institution or its principals who are ineligible for any other publicly funded program due to the above criteria are prohibited from participating in the SC Voucher Program at any level. However, this prohibition does not apply if the institution or principal has been fully reinstated in, or determined eligible for, that program, including the payment of any debts owed.

### **5.25 Amendments to a Provider's File**

A provider's file may be amended at any time. An amendment can be initiated by the provider, Quality Monitoring, and/or the child care worker or Control Center staff. **The provider must notify the following appropriate program area of any changes or amendments that need to be made to their enrollment:**

- A. Level A, B or C providers – Contact Quality Monitoring
- B. FFN providers – Contact Control Center staff

**NOTE: Changes should not be sent with the SVL.**

Amendments may occur for, but are not limited to, the following reasons:

#### **1. Adding or Deleting Additional Age Group**

A provider may request to add another age group not previously authorized if they are currently providing child care services for that age group (Level A and B) or at any time for Level C and FFN. To request an additional age group, the provider must:

- A. Contact the appropriate program area and request an additional age group be added.
- B. Meet regulatory requirements for the age groups served.

For Level A and B, a provider may request to add half-time or full-time for an age group for which they are already authorized without a visit being required. Level C and FFN can add at any time.

A provider or the SC Voucher Program may delete an age group under the following circumstances:

- A. A provider should request to delete an age group if they are no longer serving an age group or does not want to be authorized for that age group.
- B. The SC Voucher Program may delete an age group if it is determined that the provider is no longer serving that age group or is not meeting regulatory requirements for that age group.

## 2. Change in Facilities Regulatory Status

The provider must notify the appropriate program area if one of the following occurs:

- A. Provider changes from Family to Group
- B. Provider changes from Family or Group to a Center
- C. Provider changes from a Group to a Family
- D. Provider changes from Center to a Family or Group

**NOTE: The provider must notify the appropriate program area immediately if their registration or license is revoked or the application for renewal is denied by CCL.**

## 3. Change in Name of Child Care Facility

If the provider changes the name of the child care facility, the provider must:

- A. Notify the appropriate program area in writing
- B. Submit new enrollment and agreement under the new name, which can be requested from the appropriate program area.

## 4. Change in Director of Child Care Facility

If there is a change in the director of the child care facility, a provider must:

- A. Notify the appropriate program area in writing or by phone.

Level A and B providers must:

- A. Submit documentation [i.e. degree, CDA, diploma, etc.] showing that the new director meets the qualifications outlined in the Child Care Standards
- B. If needed, submit signed educational plan indicating the director will obtain approved credential, certificate, diploma, or degree within three years. An educational plan can be obtained from ABC Quality Monitoring.

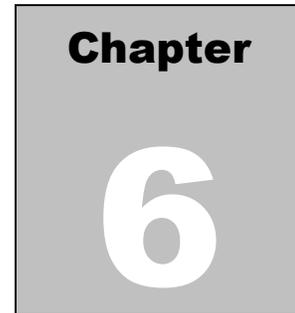
## **5. Change in Mailing/Payment Address or Phone Numbers**

If there is a change in the facility address where services are provided [other than the provider has moved], such as a change because of 911 or payment address, or phone number, the provider must:

- A. Notify the appropriate program area in writing.
- B. Submit a signed W-9 Tax form which can be requested from the appropriate program area. The W-9 is used for address changes only.

## **6. Working Telephone**

If there is a change in the facility phone number where services are being delivered, the provider must notify the appropriate program area in writing or by phone. (The provider must maintain a working LAN telephone at all times, at the facility where services are being delivered. Non-published numbers are not allowed. FFN providers are the only providers allowed to have cell phones as the sole phone source.



## Chapter 6

### Case Management

#### 6.1 Absences

##### 1. Allowable Absences

A child is allowed a maximum of 31 absences per 52 weeks of care that are funded and connected. If the child is authorized for less care, they will receive a pro-rated share of allowable absences based on the number of weeks of services received. See Scale of Allowable Absences ([Appendix 5](#)). A client receives the Scale of Allowable Absences in their eligibility packet once they have been determined eligible and have been entered into the SC Voucher Program. When a client applies at a county office, they are given this information at that time. Services may be terminated if the child exceeds the allowable number of absences. When a family is authorized to receive child care, it is assumed the family needs these services and will use it on a daily basis. If there are legitimate reasons for a child to be absent, the client and/or the provider may seek a waiver of excessive absences. If no waiver is granted, the absences will count and the child will be terminated when they exceed their allowable absences.

A provider is paid the weekly rate for the child even when absences occur. A child may have individual weekly scheduled days when they attend the facility. Failure to attend on these days must be reported as an absence.

**EXAMPLE:** A parent may work three 12-hour shifts on Monday, Tuesday and Thursday and decide to keep the child at home on Wednesday and Friday when they are not scheduled to work. The child would not be considered absent these two days (Wednesday and Friday); however, if the child failed to attend on the other days, they would be considered absent.

**EXAMPLE:** A parent/child is authorized for half-time care and attends the provider only three days a week. The two days of the week that the child does not attend the provider are not considered to be absences. Those days are reported as NSD (Not a Service Day) and are automatically waived.

Once a child exceeds the number of allowable absences, they will be terminated and a system generated letter will be sent to the client and the provider. The following absence codes should be used:

| ABS CODE | ABS DESC  |
|----------|---|
| COV      | Child had court-ordered visitation                    |
| DEC      | Child is deceased                                     |
| FCL      | Facility closed                                       |
| FNL      | Child on funeral leave                                |
| HOS      | Child out with serious injury/illness/hospitalization |
| MOV      | Child moved out of county/state                       |
| NLA      | Child no longer attends                               |
| NSD      | Not a service day for the child                       |
| SIK      | Child out sick  |
| VAC      | Child on vacation                                     |
| CNS      | Child never started the facility                      |

## 2. Waiver of Absences

The Control Center will be responsible for the waiver of any absences. Control Center staff are responsible for the review and determination of good cause for waiver requests for all absences.

An absence will be waived only when good cause has been determined. Good cause exists if circumstances prevent the child from attending the child care provider. All situations are different and the Control Center staff must use prudent judgment in determining whether or not good cause exists and be able to justify any waiver determination. A client statement may be accepted in the absence of other documentation such as a doctor's statement, court papers, etc. Examples of good cause include, but are not limited to:

- A. Illness of child or custodial parent (with or without doctor's statement)

**NOTE: If the child is chronically ill, possibly secure a statement from the physician.**

- B. Child's absence from the home, i.e., visits to the absent parent or other relative. If applicable, obtain a copy of the court order for court-ordered visitation.

**NOTE: If known prior to the child being absent, the child care worker should make contact with the provider to determine if the provider will be holding a slot for the child. If so, the child care worker should request a start/stop date for the child care services.**

All documentation to support a waiver is to be maintained in the client's file, and an entry placed in the client's memo field indicating the date and reason for the absence. When a

client is terminated based on excessive absences, a system generated letter is sent to the client and the provider. Proper termination notice will be given. When a client/child is terminated for excessive absences, the client or the provider have until the date of the termination to submit any documentation to request waivers of absences to the Control Center. Documentation submitted after the termination date will not be reviewed. When documentation is submitted prior to the termination date, staff will review it to determine if any absences can be waived. If absences can be waived and the child is below the allowable absences after the waivers, their services will be reinstated back to the original authorization of services, and the termination will be reversed.

Any child terminated for excessive absences may not be allowed to receive additional child care services for a period of six months.

**EXCEPTION: Welfare Reform and Child Welfare clients may not be required to wait six months before receiving additional services.**

## **6.2 Stop and Start Dates**

A parent may need to have a break in care in situations where the child is with a non-custodial parent for court ordered visitation, vacation, hospitalization, etc. for a period of a week or more. The parent may ask the provider to hold the child's slot during the time the child is away. The provider may bill for only 10 consecutive absences before dropping the child from their center. However, the provider may agree to insert a stop and start date for the child when the duration of the absence is known. By inserting a stop and start date, an absence does not count against the child and the child is allowed to start back with the provider at the agreed upon time. Both the parent and the provider must agree to this arrangement prior to the extended absence.

## **6.3 Breaks in Work, School or Training**

When a client stops working or attending school or training, for whatever reason, they must notify the Control Center within 10 calendar days of the date the change occurred. The client will be allowed to continue receiving child care services for 30 calendar days from the date they stopped working/school/training. The Control Center staff will terminate the child care services effective the first Monday after the 30<sup>th</sup> calendar day from the break, and the Denial/Termination letter will be sent to the client and the provider.

If the client obtains employment, or begins school or training during the 30-day period, they must submit documentation to the Control Center in order for eligibility to be re-determined. If the client is determined to be eligible, the termination will be overturned and the client will be authorized for the child care services for which they were originally authorized.

If the client does not obtain employment, or begin school or training during the 30-day period, or does not contact the Control Center during the 30-day period to inform staff about new employment/school/training, the termination will stand and child care services will end as of the date of termination.

If, when the client notifies the Control Center, it has been 30 days or more since the client stopped working or attending school or training, then child care services will be terminated for the client effective the first Monday after 10 working days from the date of notification.

**NOTE:** The exception to this policy occurs if a client has a break in employment/school/training due to a disability or medical leave. See [Verification of Disability \(Section 2.2.9\)](#).

## **6.4 Retention Schedule**

All client and provider case file material including, but not limited to the following, shall be maintained by the child care worker for a period of three years or until all applicable audits have been completed:

- A. Child care referral
- B. SC Voucher Program Child Care application
- C. Wage/school verification
- D. Eligibility worksheet
- E. Letters
- F. Written communications
- G. Forms
- H. Agreements, etc.

If an audit is in progress, all documents shall be maintained until the audit is complete. Child care applications for applicants who are denied and who are subsequently not funded shall be maintained for 12 months.

## **6.5 Transfers from One Provider to Another**

A client may transfer from one provider to another provided the client contacts the Control Center either by phone or in writing and receives approval prior to the transfer. The effective date of transfer is the first Monday following the seventh working day after the day the Control Center receives the phone call or receives the written notice. State holidays and weekends are not considered work days in counting the seven days.

A client may transfer from one provider to another through the following process:

- A. A client must notify the Control Center either by telephone or in writing and receive approval prior to the transfer.

- B. The effective date of the transfer will be the first Monday following the seventh working day after the Control Center receives the phone call or written notice from the client requesting the transfer.

To determine the effective date of transfer, the day the Control Center receives the phone call or written notice is considered day one of the notice. See *EXCEPTION* below. The child care worker begins counting seven working days from that date. In counting the seven days, State observed holidays [i.e. 4<sup>th</sup> of July, Labor Day, etc.] or weekends are not included, as they are not considered working days. Whatever date the seventh working day falls on, the transfer date will be the following Monday.

**EXAMPLE:** A request is made on Wednesday. Counting seven working days beginning with Wednesday, the working day would fall on Thursday of the next week. The transfer date would be the next Monday following this Thursday.

**EXCEPTION:** *If notification is received on a Thursday, then Friday is counted as day one. If notification is received any other day of the week (Monday, Tuesday, Wednesday or Friday), that same day is always counted as day one.*

When a client requests a transfer from an FFN/FNI provider, the connection will be ended the first Sunday following the request. No notice is required to the FFN/FNI provider.

- C. Notice may be waived under unusual circumstances if sought by the client and approved by a supervisor. The Control Center will notify the provider if the waiver is approved.
- D. The previous provider will not be paid after the start date is established for the new provider. **THE SC VOUCHER PROGRAM WILL NOT PAY TWO PROVIDERS FOR THE SAME WEEK, unless the parent also has a less than half-time arrangement.**
- E. The previous provider will be notified in writing via a [Transfer Letter](#) of the client's last authorized day of service.

**SPECIAL NOTE:** A client with unpaid fees at the time of the transfer will still be allowed to transfer. It is the responsibility of the provider to ensure client fees are paid timely.

**NOTE:** Exceptions to this policy may be granted by the Control Center Supervisor or designee when extenuating circumstances exist.

## **6.6 Early Releases**

A provider may voluntarily choose to release a child from their facility. In doing so, the provider forfeits future payments. When extenuating circumstances exist and a parent needs to be released from a provider prior to a given transfer date, the Control Center Supervisor or designee may grant the early release if deemed appropriate. If an early release is not granted and the client removes the child prior to the transfer date, the client will be responsible for payment to the new provider until the transfer/re-connection date.

## **6.7 Transfers of Foster and Child Protective Service Clients**

Only a CPS/FC Casemanager may authorize the transfer of a CPS or Foster Care child. There may be extenuating circumstances which require immediate actions from the CPS/FC Casemanager, which may include an effective transfer date that does not follow the seven-day notice rule. CMs must be aware of the provider's notice policy and is required to give the provider as much notice as possible before moving the CPS/Foster child. A child care payment may be made for a CPS/Foster child requiring an out-of-state placement where the care is provided by a child care center.

## **6.8 Notifying Clients and Providers of Transfers**

When a client is approved to transfer, the previous provider will be notified of the client's last authorized day of service (always a Sunday) via a [Transfer Letter](#). The Transfer Letter will be sent to the client and the provider from whom the client is transferring. The client is instructed at the time they request a transfer that in order for services to be authorized for a new provider, the Control Center must receive a connection card in advance of the client starting services with the new provider. If the new provider begins serving the client before the effective date of transfer, the client is responsible for the full cost of the services prior to authorization.

## **6.9 Client Moves to Another County**

When a client moves to another county, the child care worker in the former county must terminate the child care and ensure that the proper termination procedures are followed. If [early release](#) from the former provider is granted, the child care worker must document this in the memo field. If there is time remaining in the approved eligibility period or the FI

benefit case is transferred to the new county, a new application must be processed in order to continue child care services.

## **6.10 Changes Within the Eligibility Period**

A client is required to report all changes within their family household unit within 10 calendar days of the date the change occurs. Not all changes require a re-determination of eligibility.

A new application is required and a re-determination is necessary when:

- A. The change causes the client to change from one eligibility category to another, unless the change can be processed according to seamless eligibility policy.
- B. There is a change in the family size (such as having additional children).

A new application is NOT required; however, the amended application processed will be followed when:

- A. The change causes an increase in the client fee.
- B. A change in employment necessitates a change to full-time care for a client who is initially determined eligible for half-time care only. Changes from half-time to full-time or full-time to half-time will be effective the Monday after the change has been requested forward unless payments have not been made.

Changes in address, telephone numbers or income that do not increase the client fee will not require a new or amended application, but the changes should be made in the SC Voucher Program database to update page 1 and/or page 2 of the voucher system and document memo field.

In those instances where eligibility is being re-determined and a new or amended application is needed, if the child is eligible for continued care under their applicable funding source, up to 52 weeks of care will be given. If the change causes the client to be ineligible, services are terminated the first Monday following the 10th working day after the Control Center is notified.

## 1. Amended Application Process

The SC Voucher Program child care application can be amended by the child care eligibility worker upon notification of family household changes within the child care case.

It is strongly recommended that the following process be followed:

- A. Closeout the current application in the SC Voucher Program database
- B. Print the application from the SCOSA system
- C. Print and update the most current application from SCOSA to include the change(s), such as new employment information, adding a child, etc. and any other applicable changes
- D. Initial any changes made to the application
- E. Complete a new Eligibility Worksheet
- F. Enter in the updated application into the SC Voucher Program database and obtain a new application number
- G. Ensure that all sections of the SC Voucher Program database are updated to include new employment information, as appropriate AND
- H. Send the case to child care imaging.

**NOTE: If only 30 days or less remain on the SC Voucher Program Application, the child care eligibility worker will request the client complete a new application.**

## 6.11 Desk Review Process

A supervisory desk review process is in place to review a percentage of all child care eligibility workers' cases approved every two weeks. This process is used to ensure that eligibility has been determined correctly. Available agency data systems, such as CHIP, PATS, and CAPSS are accessed, as appropriate, to ensure child care is in the correct child care category. The reviewer determines that all paperwork and documentation are in the

case record. A review of the SC Voucher Program database is also conducted to ensure that information from the application has been properly entered. Any errors or improper payments addressed should be corrected by eligibility staff within 5 days of notification of the error/improper payment. Services may be terminated by desk review staff, if necessary.

These desk reviews are considered to be a preventative measure that will assist SCDSS in conducting the improper payments reporting process. The reviews are also used to identify training needs for staff and to strengthen policy and procedures.

## **6.12 Monthly Child Care Caseload Monitoring**

An active child care caseload report is reviewed monthly against agency data systems to ensure continued child care eligibility. Upon reviewing the report, the appropriate action is taken to terminate child care services or process seamless transitional child care for clients moving from FI child care to TCC. The following reports are being reviewed on a monthly basis:

- A. TCC cases with open FI benefit cases
  - a. TCC child care is terminated.
- B. FI child care cases that have closed FI benefit cases
  - a. Report lists the FI benefit cases closed for transitional closure codes. The FI child care may be seamlessly switched to TCC.
  - b. Report gives non-transitional closure codes. The FI child care cases are terminated according to SC Voucher Program's termination policy.
- C. Open FI Child Care cases are compared to PATS for the previous two months to ensure hours of participation have been entered. (This report is currently being revised).
- D. Open TCC cases are compared to CHIP to determine if the parent is receiving SNAP benefits and whether or not there is income in the SNAP benefit case. If no income is indicated, staff follow-up with the client to obtain verification of earned income.

## 6.13 Termination of Services to Clients

### 1. When a Provider Stops Serving a Client

A provider has a right to stop serving a client or child if either is disruptive to the program or does not comply with the provider's established policies. The provider must notify the client and the Control Center by calling the provider line at **[800-262-4416]** before discontinuing services to the client. The following applies when a provider wants to stop serving a client:

- A. The reason for discontinuing services must be included, i.e. failure to pay fees, parent does not pick child up on time, or child displays disruptive behavior, etc.
- B. The connection will end the last day of the service week, (always a Sunday) in which the provider asked the client to leave.
- C. The client should be notified by the provider (preferably in writing) a minimum of three working days in advance of the effective date of the discontinuation of services.
- D. The client should be allowed to finish any week in which the provider has billed for the client.

**NOTE: If the provider decides to stop serving a child in the middle of a week and does not allow the child to attend or finish the week, the client will be granted an early release to transfer the child to a new provider. The first provider will not be paid for that week of care.**

### 2. Termination by the SC Voucher Program

The Control Center may terminate a client's child care services at any time during the client's eligibility. Once a decision has been reached to terminate services, the provider will receive written verification through the following process:

- A. If termination of services is initiated by the child care worker or the Control Center, the provider and client will be notified in writing that the services are being terminated and all payments for services rendered after the termination date become the client's responsibility.

- B. Proper notice (10 days from the date of determination) will be given to both the parent and the provider of the effective termination date.

### 3. Termination of a Client

Services are terminated when a client or child is no longer eligible to receive SC Voucher Program child care services or no longer wants the service. This may come at any time during the eligibility period. When the client becomes ineligible, the entire family becomes ineligible and services are terminated. When a child becomes ineligible for reasons such as reaching age 13, or exceeding the allowable absences, services are terminated for that child only.

Reasons for terminations include, but are not limited to:

- A. The client/child is no longer eligible. This includes, but is not limited to, the following:
  - a. The client/child does not meet specific eligibility criteria or requirements.
  - b. The client's income exceeds Income Standards.
  - c. The child reaches age 13.
  - d. The child does not live with the client.
- B. The client intentionally submits false information.
- C. The client moves out of state.
- D. The child exceeds allowable absences.
- E. The client/child no longer needs services.
- F. The client did not select a provider within 15 calendar days of notification of eligibility.
- G. The client moves from one county to another. In these situations, the client's services are terminated by the former county.

**NOTE: A situation where a client is terminated from a particular provider for not following a facility's policy does not constitute a termination from the SC Child Care Program.**

When the Control Center is notified that a client and/or recipient needs to be terminated, the following procedure is followed:

- A. On the date that a termination of a client or recipient is determined necessary, the child care worker starts counting 10 working days (excluding weekends and holidays), with day one being the next day. The effective date of termination will be the first Monday following the 10<sup>th</sup> working day from the date of determination.
- B. A termination within the SC Voucher Program will not be backdated. If a request is made for termination that has not followed the 10-working day notice rule, Control Center staff will change the effective date to reflect the 10-working day notice.
- C. A client who is terminated for excessive absences will not be approved for child care services for six months from the effective date of termination. When a termination for excessive absences is required, if the client's end of eligibility is 30 days or less from the day the determination is made that the child has exceeded allowable absences, the termination will not be completed. In those instances, the client will be allowed to continue receiving services for that child until the end of the eligibility period.

**NOTE: If the client is currently funded through FI, CPS, or FC at the time of termination, SCDSS may request services again for that client prior to the end of the six months period. The records of a client whose services are reinstated by SCDSS will continue to reflect all absences accrued during the current eligibility period.**

For a Welfare Reform (WR) client, recommendations for termination or reinstatement of services will be coordinated between the county casemanager (as appropriate) and the SC Voucher Program child care eligibility worker. When a WR client has exceeded the allowed number of absences, the Control Center staff will initiate the termination of services to the child, or the entire family as deemed appropriate. This will also include a child who is funded under the CPS or FC set-aside. The Control Center staff will inform the appropriate child care eligibility worker of the termination.

#### **4. Notifying Client and Provider of Termination**

When a decision to terminate a client/child is reached by the Control Center, the client and provider will be mailed a Denial/Termination Letter that reflects the effective date of termination. The termination notice is intended to:

- A. Give the client time to make other arrangements outside of the SC Voucher Program
- B. Give program staff adequate time to process the paperwork
- C. Allow timely notification to the client and provider of the termination before the effective date of termination.

The effective date of termination is the first Monday following the 10<sup>th</sup> working day from the date of determination. (Holidays and weekends are not considered work days.) The client is also sent a notice regarding his/her right to request a fair hearing.

## 6.14 Client Complaints

During intake, an applicant is informed that they may make a complaint related to child care provided through the SC Voucher Program by calling 1-800-763-2223. A client is encouraged to report concerns or complaints about the following:

- A. A provider whom the client suspects of violating minimum licensing standards
- B. A provider whom the client suspects is not providing quality child care, as defined by the SC Voucher Program Standards.

When a call is received, it is logged-in and maintained. A substantiated complaint is:

- A. Made available to the public upon request.
- B. Placed in the provider's permanent file maintained by Quality Monitoring.
- C. Forwarded to the Control Center for necessary action when it results in the provider being terminated from the SC Voucher Program.

Quality Monitoring staff in Columbia answers the complaint line and encourages clients to notify SCDSS Child Care Licensing (CCL) when a provider is suspected of violating minimum licensing standards. Quality Monitoring also follows up with CCL and notifies the Control Center when a provider's license has been suspended or revoked. A provider will be removed from the enhanced provider list and the vendor agreement will be terminated, suspended, or denied if a provider is not in good standing with CCL.

Quality Monitoring determines appropriate action after a complaint is investigated. Investigations may include unannounced on-site visits.

## 6.15 End of Service Notification

Sixty days prior to a client's services ending, the client and provider receive an end-of-service notice that indicates the last day of SC Voucher Program child care services. Additionally, the last day of SC Voucher Program service for a child also appears on the remittance advice which the provider receives when they are paid.

**EXCEPTION 1: A child must be connected for more than 60 days of services in order for an end-of-service notice to be generated.**

**EXCEPTION 2: If services are backdated and the last day of service has already passed, no end of service notice will be generated.**

## **6.16 Close Outs**

A close out is requested only when a client is moving from one eligibility category to another. A close out shortens the existing eligibility period so a new application may be entered.

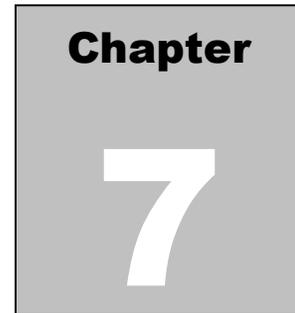
## **6.17 System Generated Letters**

The SC Voucher Program generates letters to inform applicants of action taken regarding their SC Voucher Program child care services; they are the official documentation for clients and providers. These letters include:

- A. **Eligibility Letter** – This letter is produced when an applicant’s child care application has been entered into the SC Voucher Program database. The letter informs the applicant that the application has been approved, and the child for whom child care services has been requested has been approved.
- B. **Authorization/Connection Letter** – This letter is generated after the Control Center has connected a client’s child to a specific provider. The letter includes:
  - a. Name of provider to whom the child has been connected
  - b. Start and stop dates of the connection to that provider
  - c. Client fee amount to be paid for each child connected
  - d. Rate to be paid the provider for each child
  - e. Total number of weeks each child is connected.
- C. **Services End Letter** – This letter is produced 60 days before the end of a child’s last connection, or the end of the child’s eligibility period, whichever comes last. The letter informs the client and the provider of record that the child’s services are scheduled to end on the date listed, and that the SC Voucher Program is not responsible for any payments for the child after the date indicated.
- D. **Client Termination Letter** – This letter is generated the day after a client or a child is terminated in the SC Voucher Program. The letter includes:
  - a. Name of child to be terminated
  - b. Reason for the termination
  - c. Effective date of the termination.

A copy of the letter is sent to the client and to the provider of record.

- E. **Provider Termination Letter** - This letter is generated the day after a provider is terminated in the SC Voucher Program. It includes the effective date of the termination and the reason for the termination.
- F. **Client Notice of Provider Termination** – This letter is generated for the client who was connected to a provider who has been terminated in the SC Voucher Program. The letter informs the client of the effective termination date and notifies them of the need to select a new provider.
- G. **Transfer Letter** – This letter is generated when a client is transferring their child from one provider to a new provider. It gives the effective date of the transfer and the name of the child being transferred. A copy of the letter is sent to the client and to the provider of record.



## Chapter 7

### Payment Information

#### 7.1 Payment Information

The SC Voucher Program reimburses the child care provider directly for services rendered to an eligible client. No payments are remitted directly to the client.

Prior to serving the first SC Voucher Program child, the provider must be enrolled in the SC Voucher Program. The provider must also submit a connection card or fax to the Control Center or SCDSS must notify the Control Center of the start/stop dates for a child so the connection can be made. Once the initial connections have been made, the Service Voucher Log (SVL) will be generated and sent to the provider. The SVL is the official billing document for the SC Voucher Program. It should be reviewed, completed, and signed by the provider and returned promptly after receipt to ensure timely payment. After the first SVL is generated, the provider receives another each time a payment for reimbursement is mailed. SVL's will continue to generate as long as the provider has active connections which have not been paid.

##### 1. Payment Methods

All providers must submit the SVL before payment can be remitted. There are three different payment methods:

- A. **Direct Deposit:** Direct deposit is offered to all providers. However, the provider must elect to enroll in the direct deposit method. The provider must submit a direct deposit form, [DSS Form 1105](#), along with a voided check to enroll. Once approved to receive their payments via direct deposit, the provider will no longer receive a paper check. However, the SVL and remittance advice forms will continue to be mailed to the provider with every payment cycle.

If a provider is receiving direct deposit payments from another State agency, the child care payments will be made into that same account and may not be changed unless the account is changed with the originating State agency.

If at any time during their enrollment a provider needs to change their account information, they must call the Control Center and must submit a written request along with a new direct deposit form, [DSS Form 1105](#), and a voided check to do so. The pre-note process will take place again and the provider may receive a paper check.

- B. **Check:** A provider may choose to receive a paper check. In order to do this, the provider must submit a written request to Child Care Payables requesting to be paid by paper check and must indicate the reason why they do not want direct deposit.

Unless the provider is receiving a CAPSS payment or FI benefit via the debit card, the provider may choose to receive a paper check. In order to do this, the provider must submit a written request to Child Care Payables requesting to be paid by paper check and must indicate the reason why they do not want their child care payments via the debit card.

## 2. Requests for Payment

A request for payment will be honored only if the provider has been authorized by the SC Voucher Program to serve the child. The authorization for each SC Voucher Program child gives the dates of approved child care services for a child. It is the provider's responsibility to maintain this information and bill only for eligible weeks. When a child is absent for a week due to vacation or illness the provider may bill for the week but must report those absences on the SVL using the proper absence code. If a provider plans to close their facility for a week or longer (summer, etc.), the provider must notify the Control Center at least one month in advance of the closing, and **must not** bill for that period unless private pay parents are charged. A provider will not be paid for a child who is absent longer than two consecutive weeks (Monday – Friday) unless the child returns to the facility in the third week. When a child is absent for 10 consecutive days and does not return to the facility on any day of the third week, the Control Center staff will end the child's connection on the Sunday following the 10 consecutive absences. When a child is absent for 10 consecutive days the provider must document the absences on the SVL using the proper absence code. If the child does not return in the third week, the provider should indicate a drop/transfer and pay until date for the child on the SVL. Once the connections have been ended, if the child returns to the provider after that third week, a new connection card will be needed in order to reconnect.

**Completing an SVL correctly the first time will ensure payment within 10-14 working days after receipt of the information.**

**NOTE: Payments over one year old will not be honored.**

The provider cannot submit the SVL until the last service date listed on the SVL. An SVL submitted prior to the ending date on the SVL will be returned to the provider and payment will be delayed.

### 3. Hand-Delivered SVL's

A provider may hand-deliver their completed, signed, original SVL to the drop box located at State Office SCDSS. Child Care Payables staff pick up from the drop box daily. A hand-delivered SVL is processed with all other payments. Delivering the SVL to the drop box does not guarantee a quicker payment. Payment should still be expected to be made within 10-14 working days from the date of receipt.

### 4. Payment Instructions

Payment is expected to take from 10 to 14 working days from receipt of the completed, signed, original SVL. A provider is asked and expected to wait until the 14th working day before calling about reimbursement. The provider is reimbursed by a paper check, direct deposit, or debit card transfer for services delivered. See [Payment Methods](#) (Section 7.1.1) along with the applicable Remittance Advices, and the next SVL, if appropriate.

A provider receives a Provider Remittance Advice with each reimbursement received. The Provider Remittance Advice identifies the client, child, and payment amount for each transaction making up the payment total. A provider is expected to match the Provider Remittance Advice against the provider's copy of the SVL to ensure proper payment for each transaction.

There are four types of remittance advice forms:

- A. **Paid Remittance Advice:** This form indicates which clients and weeks were paid.
- B. **Rejected Remittance Advice:** This form indicates which clients and weeks were not paid and the reason.
- C. **Adjusted Remittance Advice:** This form indicates if funds were deducted from the provider's check, the amount, and the reason. An adjusted remittance advice is sent only when there have been adjustments to the provider's payment due to overpayments.
- D. **Grant Remittance Advice:** This form indicates the amount of the grant paid.

The provider may call the Control Center (1-800-262-4416) with any questions regarding payment problems, and/or questions about transactions that did not process.

## 5. Provider Check Pickup

A provider is not allowed to pick up a paper check reimbursement unless extenuating circumstances are present, as determined by Control Center staff and/or Child Care Payables.

## 6. Provider Adjustments

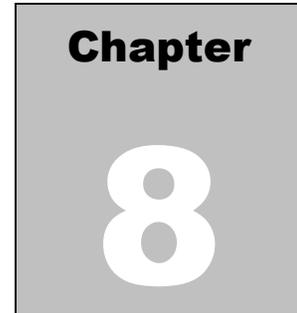
Provider payments will be adjusted when necessary to correct errors made by the payment agency or the service agency. The types of provider adjustments are:

- A. **Receivable Adjustment:** The process of collecting over-payment made to a provider. In this case, funds will be taken back for the specific period requested. The connection will be deleted or shortened once the adjustment is complete.
- B. **Partial Receivable Adjustment:** The process of collecting a portion of the over-payment made to a provider. In this case, one would process the adjustment for the difference between full-time and half-time care. The connection will not change; it will still reflect a full-time connection, but the difference between the full-time and half-time rate will be taken from the provider's payment.
- C. **Partial Payable Adjustment:** The process of paying a provider for an under-payment. In this case, one would process the adjustment for difference between half-time and full-time care. The connection will not change; it will still reflect a half-time connection, but the provider would receive the difference between the half-time and full-time rate.
- D. **Payable Adjustment:** The process of paying a provider for services due that cannot be paid under the normal SVL payment process.

The payment to a provider who owes money and has active connections will be deducted from future reimbursements until the debt has been satisfied.

## 7. Tax Liens and Levies

If an SC Voucher Program provider does not pay their applicable state or federal taxes, a lien or levy may be imposed on their SC Voucher Program reimbursements by the Internal Revenue Service and/or the State Revenue Department through the Comptroller General's Office. The provider's reimbursement will continue to be garnished until the unpaid amount of taxes has been recouped.



## Chapter 8

### Fair Hearings

#### 8.1 Appeals/Fair Hearings

##### 1. The Client Appeal

The applicant/client is given an opportunity to request a fair hearing in compliance with the Civil Rights Act of 1964. They may appeal any decision that results in the denial or termination of services, provided that decision is not based solely on lack of available funds or on the natural ending of services at the end of an eligibility period. Lack of funding or the natural ending of services at the end of an eligibility period are not negative actions taken by the SC Voucher Program and will not be allowed to be reasons a client requests an appeal. In instances where a client requests an appeal based on lack of funding or ending of services, the appeal will be dismissed. **Client appeal hearings are held by the agency that makes the decision that the client is appealing.**

A fair hearing must be requested in writing, and must be made within 30 days from the date of the negative action. The request may be made by the client/applicant or a person acting on their behalf, such as a legal representative, relative, or friend. Staff must not impede, limit, or interfere in any way with the client's right to request a fair hearing.

During an appeal process, the client is responsible for paying for their own child care arrangements. SC Voucher Program child care services will resume if the decision is in favor of the client.

##### 2. Appeals/Fair Hearings

If a client or provider disagrees with any decision that results in the denial or termination of their SC Voucher Program services, they may request a fair hearing before SCDSS. If the client or provider wishes to appeal the decision, they must notify SCDSS in writing, postmarked within 30 days of receiving a service denial notice or termination letter. The notice of intent to appeal should be directed to:

**South Carolina Department of Social Services  
Individual and Provider Rights  
P.O. Box 1520  
Columbia, South Carolina 29202-1520**

If notice of intent to appeal is not submitted to SCDSS within the 30 day period, the right to challenge the denial or termination will be lost and the decision will become final.

### **3. Provider Appeals**

A provider has the right to request a fair hearing regarding any negative action taken by the SC Voucher Program. Negative actions include, but are not limited to termination from the ABC Program and de-enrollment of a specific care type. The provider must request the fair hearing within 30 days of the negative action by submitting the request in writing to the Division of Individual and Provider Rights (DIPR). Upon receipt of the request, DIPR will schedule the fair hearing and coordinate with SCDSS legal staff as well as the provider and the provider's legal representative as appropriate. SC Voucher Program Quality Monitoring staff are responsible for representing the SC Voucher Program at fair hearings for:

- A. Level A providers
- B. Level B providers.

State Office Child Care Services staff are responsible for representing the SC Voucher Program at fair hearings for:

- A. Level C providers
- B. FFN providers
- C. FNI care providers.

### **4. Connecting Clients During an Appeal**

No new SC Voucher Program clients will be allowed to connect to an SC Voucher Program facility during an appeal with SCDSS, the SC Voucher Program or Child Care Licensing. A provider may continue serving a child who is currently connected unless the health and/or safety of the child is jeopardized. However, if a provider is currently caring for a child and the services come up for renewal, or the family is determined to be eligible for extended weeks of care and the provider is under an appeal, the family will have to find alternative child care arrangements.

## 5. Staff Roles in Appeals/Fair Hearings

When a client requests a fair hearing as a result of a negative action, DIPR will notify the SC Voucher Program. SC Voucher Program staff are responsible for sending a copy of the denial or termination letter to DIPR.

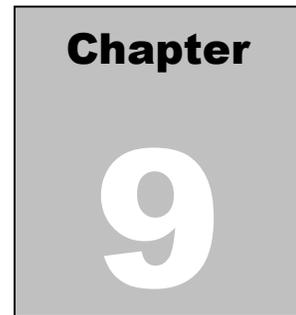
When DIPR schedules the fair hearing for the client, a copy of the letter will be sent to either the State Office or the county SCDSS office, depending on which office initiated the negative action. The appropriate staff is responsible for:

- A. Completing a summary of the situation that led to the negative action  
AND
- B. Submitting a copy of the summary, application and supporting documentation to DIPR and the client prior to the scheduled date of the fair hearing.

This information must be completed and sent timely so that DIPR and the client receive it in advance of the scheduled fair hearing date.

A fair hearing will be scheduled via the telephone unless the client requests a face-to-face hearing. On the date of the fair hearing, the appropriate county or State Office staff is responsible for attending the face-to-face hearing or for calling DIPR at (803) 898-8080 before the scheduled telephone hearing. The appropriate staff will represent SCDSS at the hearing, and will be responsible for presenting the facts and situation which led to the negative action which resulted in the denial or termination of the client's child care services.

After the fair hearing, DIPR will send a letter containing the decision of the hearing officer to the client and to the appropriate SCDSS staff person. If the negative action is upheld, no further action is necessary. However, if the negative action is reversed, the staff person is responsible for reinstating child care services for the affected client/child through the end of the existing eligibility period.



## Chapter 9

### Fraud/Improper Payments

#### 9.1 Misuse of Services

##### 1. Reporting/Investigating Misuse

When circumstances exist that cause a provider or another individual to suspect a client or provider is inappropriately receiving SC Voucher Program child care services, it should be reported to the Control Center at 1-800-262-4416.

##### 2. Misuse of Services

The client must report and verify the following changes within 10 calendar days of the date the change occurs:

- A. Income
- B. Family size
- C. Address
- D. Employment/educational training status
- E. Change in hours of employment/training/education
- F. Assistance grant
- G. Other circumstances that affect eligibility.

The client is subject to termination of child care assistance and/or prosecution if the client willfully fails to report any changes and continues to receive services for which they are not eligible.

Any individual who provides incorrect information or misrepresents the facts for the purpose of obtaining or attempting to obtain child care services from the SC Voucher Program will be subject to sanctions administered by SCDSS.

### **3. Determination of Misuse**

During the application process, the client is informed that it is their responsibility to provide correct information when the application is completed. Additionally, the client is given a copy of the Applicant Rights and Responsibilities that emphasizes the need for accurate information. Further, the service application includes a statement which must be signed by the client. In signing this statement, the client declares that the information contained within the application is true to the best of their knowledge. The information provided by the client is the basis for determining client intent of misuse of services.

If it is determined that a client intentionally misrepresented themselves, the client will be terminated for life and will not be allowed to apply or receive child care services through the SC Voucher Program.

## **9.2 Improper Payments**

According to the Improper Payments Act of 2002, SCDSS is required to annually review the SC Voucher Program and identify activities which may be susceptible to significant improper payments and submit a report to the federal authorities on the actions taken to reduce improper payments. To this end, there will be a yearly sampling of the SC Voucher Program child care client cases for review of improper authorizations which could lead to improper payments. These cases will be reviewed to determine if the client was properly authorized for SC Voucher Program services. Cases in which it is determined a client was not properly authorized will be forwarded to the appropriate child care worker so that the client can be terminated from the SC Voucher Program.

The SC Voucher Program also has controls in place to address an improper payment to a provider. The system adjustment process recoups overpayments to a provider from their next SC Voucher Program payment. The adjustment process also creates payable adjustments to a provider if the SC Voucher Program underpays a provider for child care services.

## **9.3 Fraud**

The SC Voucher Program receives reports of potential fraud through our 1-800 phone lines and the agency Fraud Hotline. Reports are researched and actions taken as appropriate to terminate child care services.

The SC Voucher Program is required by federal regulations to recover child care payments that are the result of fraud. These payments shall be recovered from the party responsible for committing the fraud. The current system adjustment process addresses recoupment of payments to a provider.

## Appendix 1

**CHILD CARE INCOME STANDARDS**  
**May 1, 2016 – SEPTEMBER 30, 2016**

Note: A client must have income within the range in the entrance column in order to enter the program. A client will become ineligible when his income exceeds the income in the exit column.

| FAMILY<br>SIZE | GROSS FAMILY INCOME |          |               |           |
|----------------|---------------------|----------|---------------|-----------|
|                | MONTHLY             |          | ANNUALLY      |           |
|                | ENTRANCE            | EXIT     | ENTRANCE      | EXIT      |
| 1              | \$0 – 1,471         | \$2,347  | \$0 – 17,655  | \$28,158  |
| 2              | \$0 – 1,991         | \$3,069  | \$0 – 23,895  | \$36,822  |
| 3              | \$0 – 2,511         | \$3,791  | \$0 – 30,135  | \$45,486  |
| 4              | \$0 – 3,031         | \$4,513  | \$0 – 36,375  | \$54,150  |
| 5              | \$0 – 3,551         | \$4,235  | \$0 – 42,615  | \$62,814  |
| 6              | \$0 – 4,071         | \$5,957  | \$0 – 48,855  | \$71,478  |
| 7              | \$0 – 4,591         | \$6,092  | \$0 – 55,095  | \$73,102  |
| 8              | \$0 – 5,111         | \$6,227  | \$0 – 61,335  | \$74,727  |
| 9              | \$0 – 5,631         | \$6,570  | \$0 – 67,575  | \$78,838  |
| 10             | \$0 – 6,151         | \$7,176  | \$0 – 73,815  | \$86,118  |
| 11             | \$0 – 6,671         | \$7,783  | \$0 – 80,055  | \$93,398  |
| 12             | \$0 – 7,191         | \$8,390  | \$0 – 86,295  | \$100,678 |
| 13             | \$0 – 7,711         | \$8,996  | \$0 – 92,535  | \$107,958 |
| 14             | \$0 – 8,231         | \$9,603  | \$0 – 98,775  | \$115,238 |
| 15             | \$0 – 8,751         | \$10,210 | \$0 – 105,015 | \$122,518 |
| 16             | \$0 – 9,271         | \$10,816 | \$0 – 111,255 | \$129,798 |

**Note: For Family Size 1 – 8 entrance is based on 150% of poverty, and exit is based on 85% of state median income. For Family Size 9 – 16 entrance is based on 150% of poverty, and exit is based on 175% of poverty.**

## Appendix 2

**CHILD DEVELOPMENT FEE SCALE**

The following chart effective May 1, 2016 through September 30, 2016 lists participant fees according to family size and monthly income:

NOTE: The participant fee is per child, per week and must be assessed for all child care eligibility categories with the exception of FI, CPS-Out and Foster Care.

| <b>Family Size</b> | <b>Monthly Income</b> | <b>Participant Fee</b> | <b>Family Size</b> | <b>Monthly Income</b> | <b>Participant Fee</b> |
|--------------------|-----------------------|------------------------|--------------------|-----------------------|------------------------|
| <b>1</b>           | \$0 – 490             | \$6.00                 | <b>2</b>           | \$0 – 664             | \$6.00                 |
|                    | 491 – 981             | \$11.00                |                    | 665 – 1,328           | \$11.00                |
|                    | 982 – 1,226           | \$14.00                |                    | 1,329 – 1,659         | \$14.00                |
|                    | 1,227 – 1,471         | \$17.00                |                    | 1,660 – 1,991         | \$17.00                |
|                    | 1,472 – 2,347         | \$20.00                |                    | 1,992 – 3,069         | \$20.00                |
| <b>3</b>           | \$0 – 837             | \$6.00                 | <b>4</b>           | \$0 – 1,010           | \$6.00                 |
|                    | 838 – 1,674           | \$11.00                |                    | 1,011 – 2,021         | \$11.00                |
|                    | 1,675 – 2,093         | \$14.00                |                    | 2,022 – 2,526         | \$14.00                |
|                    | 2,094 – 2,511         | \$17.00                |                    | 2,527 – 3,031         | \$17.00                |
|                    | 2,512 – 3,791         | \$20.00                |                    | 3,032 – 4,513         | \$20.00                |
| <b>5</b>           | \$0 – 1,184           | \$6.00                 | <b>6</b>           | \$0 – 1,357           | \$6.00                 |
|                    | 1,185 – 2,368         | \$11.00                |                    | 1,358 – 2,714         | \$11.00                |
|                    | 2,369 – 2,959         | \$14.00                |                    | 2,715 – 3,393         | \$14.00                |
|                    | 2,960 – 3,551         | \$17.00                |                    | 3,394 – 4,071         | \$17.00                |
|                    | 3,552 – 5,235         | \$20.00                |                    | 4,072 – 5,957         | \$20.00                |
| <b>7</b>           | \$0 – 1,530           | \$6.00                 | <b>8</b>           | \$0 – 1,704           | \$6.00                 |
|                    | 1,531 – 3,061         | \$11.00                |                    | 1,705 – 3,408         | \$11.00                |
|                    | 3,062 – 3,826         | \$14.00                |                    | 3,409 – 4,259         | \$14.00                |
|                    | 3,827 – 4,591         | \$17.00                |                    | 4,260 – 5,111         | \$17.00                |
|                    | 4,592 – 6,092         | \$20.00                |                    | 5,112 – 6,227         | \$20.00                |

**CHILD DEVELOPMENT FEE SCALE (Cont'd.)**

| <b>Family Size</b> | <b>Monthly Income</b> | <b>Participant Fee</b> | <b>Family Size</b> | <b>Monthly Income</b> | <b>Participant Fee</b> |
|--------------------|-----------------------|------------------------|--------------------|-----------------------|------------------------|
| <b>9</b>           | \$0 – 1,877           | \$6.00                 | <b>10</b>          | \$0 – 2,050           | \$6.00                 |
|                    | 1,878 – 3,754         | \$11.00                |                    | 2,051– 4,101          | \$11.00                |
|                    | 3,755 – 4,693         | \$14.00                |                    | 4,102 – 5,126         | \$14.00                |
|                    | 4,694 – 5,631         | \$17.00                |                    | 5,127 – 6,151         | \$17.00                |
|                    | 5,632 – 6,570         | \$20.00                |                    | 6,152 – 7,176         | \$20.00                |
| <b>11</b>          | \$0 – 2,224           | \$6.00                 | <b>12</b>          | \$0 – 2,397           | \$6.00                 |
|                    | 2,225 – 4,448         | \$11.00                |                    | 2,398 – 4,794         | \$11.00                |
|                    | 4,449 – 5,559         | \$14.00                |                    | 4,795 – 5,993         | \$14.00                |
|                    | 5,560 – 6,671         | \$17.00                |                    | 5,994 – 7,191         | \$17.00                |
|                    | 6,672– 7,783          | \$20.00                |                    | 7,192 – 8,390         | \$20.00                |
| <b>13</b>          | \$0 – 2,570           | \$6.00                 | <b>14</b>          | \$0 – 2,744           | \$6.00                 |
|                    | 2,571– 5,141          | \$11.00                |                    | 2,745 – 5,488         | \$11.00                |
|                    | 5,142 – 6,426         | \$14.00                |                    | 5,489 – 6,859         | \$14.00                |
|                    | 6,427 – 7,711         | \$17.00                |                    | 6,860 – 8,231         | \$17.00                |
|                    | 7,712 – 8,996         | \$20.00                |                    | 8,232 – 9,603         | \$20.00                |
| <b>15</b>          | \$0 – 2,917           | \$6.00                 | <b>16</b>          | \$0 – 3,090           | \$6.00                 |
|                    | 2,918 – 5,834         | \$11.00                |                    | 3,091 – 6,181         | \$11.00                |
|                    | 5,835 – 7,293         | \$14.00                |                    | 6,182 – 7,726         | \$14.00                |
|                    | 7,294 – 8,751         | \$17.00                |                    | 7,727 – 9,271         | \$17.00                |
|                    | 8,752 – 10,210        | \$20.00                |                    | 9,272 – 10,816        | \$20.00                |

Appendix 3

**MAXIMUM PAYMENT ALLOWED  
SOUTH CAROLINA VOUCHER PROGRAM  
EFFECTIVE FEBRUARY 1, 2016– SEPTEMBER 30, 2018**

| Care Type                                    | Maximum Weekly Urban Payment Allowed | Maximum Weekly Rural Payment Allowed |
|--|--------------------------------------|--------------------------------------|
| <b>LEVEL A+ CHILD CARE CENTERS<br/>(NAC)</b> |                                      |                                      |
| Age 0 through 2 Full Time                    | \$189                                | \$145                                |
| Age 0 through 2 Half Time                    | 140                                  | 110                                  |
| Age 3 through 5 Full Time                    | 175                                  | 137                                  |
| Age 3 through 5 Half Time                    | 118                                  | 97                                   |
| Age 6 through 12 Full Time                   | 148                                  | 125                                  |
| Age 6 through 12 Half Time                   | 80                                   | 75                                   |
| <b>LEVEL A CHILD CARE CENTERS<br/>(ERS)</b>  |                                      |                                      |
| Age 0 through 2 Full Time                    | \$179                                | \$135                                |
| Age 0 through 2 Half Time                    | 130                                  | 100                                  |
| Age 3 through 5 Full Time                    | 165                                  | 127                                  |
| Age 3 through 5 Half Time                    | 108                                  | 87                                   |
| Age 6 through 12 Full Time                   | 143                                  | 120                                  |
| Age 6 through 12 Half Time                   | 75                                   | 70                                   |
| <b>LEVEL B+ CHILD CARE CENTERS<br/>(EPC)</b> |                                      |                                      |
| Age 0 through 2 Full Time                    | \$169                                | \$125                                |
| Age 0 through 2 Half Time                    | 120                                  | 90                                   |

| Care Type   | Maximum Weekly Urban Payment Allowed | Maximum Weekly Rural Payment Allowed |
|---|--------------------------------------|--------------------------------------|
| Age 3 through 5 Full Time   | 155                                  | 117                                  |
| Age 3 through 5 Half Time   | 98                                   | 77                                   |
| Age 6 through 12 Full Time  | 130                                  | 115                                  |
| Age 6 through 12 Half Time  | 70                                   | 65                                   |
| <b>LEVEL B CHILD CARE CENTERS (ECR)</b>                             |                                      |                                      |
| Age 0 through 2 Full Time   | \$159                                | \$115                                |
| Age 0 through 2 Half Time   | 110                                  | 80                                   |
| Age 3 through 5 Full Time   | 145                                  | 107                                  |
| Age 3 through 5 Half Time   | 88                                   | 67                                   |
| Age 6 through 12 Full Time  | 125                                  | 110                                  |
| Age 6 through 12 Half Time  | 65                                   | 60                                   |
| <b>LEVEL C CHILD CARE CENTERS (LRC)</b>                             |                                      |                                      |
| Age 0 through 2 Full Time   | \$145                                | \$100                                |
| Age 0 through 2 Half Time   | 95                                   | 66                                   |
| Age 3 through 5 Full Time   | 130                                  | 92                                   |
| Age 3 through 5 Half Time   | 73                                   | 52                                   |
| Age 6 through 12 Full Time  | 110                                  | 95                                   |
| Age 6 through 12 Half Time  | 50                                   | 49                                   |
| <b>LEVEL NR – EXEMPT/WAIVERED LEVEL B+ CHILD CARE CENTERS (EBB)</b> |                                      |                                      |
| Age 0 through 2 Full Time   | \$169                                | \$125                                |
| Age 0 through 2 Half Time   | 120                                  | 90                                   |
| Age 3 through 5 Full Time   | 155                                  | 117                                  |
| Age 3 through 5 Half Time   | 98                                   | 77                                   |
| Age 6 through 12 Full Time  | 130                                  | 115                                  |
| Age 6 through 12 Half Time  | 70                                   | 65                                   |

| Care Type  | Maximum Weekly Urban Payment Allowed | Maximum Weekly Rural Payment Allowed |
|--|--------------------------------------|--------------------------------------|
| <b>LEVEL NR - EXEMPT/WAIVERED LEVEL B CHILD CARE CENTERS (EXB)</b> |                                      |                                      |
| Age 0 through 2 Full Time  | \$159                                | \$115                                |
| Age 0 through 2 Half Time  | 110                                  | 80                                   |
| Age 3 through 5 Full Time  | 145                                  | 107                                  |
| Age 3 through 5 Half Time  | 88                                   | 67                                   |
| Age 6 through 12 Full Time   | 125                                  | 110                                  |
| Age 6 through 12 Half Time   | 65                                   | 60                                   |
| <b>LEVEL NR – EXEMPT/WAIVERED LEVEL C CHILD CARE CENTERS (EXT)</b> |                                      |                                      |
| Age 0 through 2 Full Time  | \$145                                | \$100                                |
| Age 0 through 2 Half Time  | 95                                   | 66                                   |
| Age 3 through 5 Full Time  | 130                                  | 92                                   |
| Age 3 through 5 Half Time  | 73                                   | 52                                   |
| Age 6 through 12 Full Time   | 110                                  | 95                                   |
| Age 6 through 12 Half Time   | 50                                   | 49                                   |
| <b>LEVEL B+ GROUP CHILD CARE HOMES (EPG)</b>                       |                                      |                                      |
| Age 0 through 2 Full Time  | \$120                                | \$100                                |
| Age 0 through 2 Half Time  | 83                                   | 70                                   |
| Age 3 through 5 Full Time  | 110                                  | 100                                  |
| Age 3 through 5 Half Time  | 85                                   | 65                                   |
| Age 6 through 12 Full Time   | 98                                   | 90                                   |
| Age 6 through 12 Half Time   | 60                                   | 60                                   |
| <b>LEVEL B GROUP CHILD CARE HOMES (EGP)</b>                        |                                      |                                      |
| Age 0 through 2 Full Time  | \$110                                | \$90                                 |
| Age 0 through 2 Half Time  | 73                                   | 60                                   |
| Age 3 through 5 Full Time  | 100                                  | 90                                   |
| Age 3 through 5 Half Time  | 75                                   | 55                                   |
| Age 6 through 12 Full Time   | 90                                   | 87                                   |
| Age 6 through 12 Half Time   | 55                                   | 55                                   |
| <b>LEVEL C GROUP CHILD CARE HOMES (LRG)</b>                        |                                      |                                      |
| Age 0 through 2 Full Time  | \$95                                 | \$75                                 |
| Age 0 through 2 Half Time  | 58                                   | 55                                   |
| Age 3 through 5 Full Time  | 85                                   | 75                                   |
| Age 3 through 5 Half Time  | 60                                   | 50                                   |
| Age 6 through 12 Full Time   | 75                                   | 70                                   |
| Age 6 through 12 Half Time   | 50                                   | 50                                   |

| Care Type  | Maximum Weekly Urban Payment Allowed | Maximum Weekly Rural Payment Allowed |
|--|--------------------------------------|--------------------------------------|
| <b>LEVEL B+ LICENSED FAMILY CHILD CARE HOMES (EPF)</b>   |                                      |                                      |
| Age 0 through 2 Full Time                                | \$135                                | \$100                                |
| Age 0 through 2 Half Time                                | 92                                   | 70                                   |
| Age 3 through 5 Full Time                                | 127                                  | 100                                  |
| Age 3 through 5 Half Time                                | 89                                   | 65                                   |
| Age 6 through 12 Full Time                               | 97                                   | 90                                   |
| Age 6 through 12 Half Time                               | 65                                   | 60                                   |
| <b>LEVEL B LICENSED FAMILY CHILD CARE HOMES (LFY)</b>    |                                      |                                      |
| Age 0 through 2 Full Time                                | \$125                                | \$90                                 |
| Age 0 through 2 Half Time                                | 82                                   | 60                                   |
| Age 3 through 5 Full Time                                | 117                                  | 90                                   |
| Age 3 through 5 Half Time                                | 79                                   | 55                                   |
| Age 6 through 12 Full Time                               | 88                                   | 80                                   |
| Age 6 through 12 Half Time                               | 57                                   | 55                                   |
| <b>LEVEL B+ REGISTERED FAMILY CHILD CARE HOMES (RFY)</b> |                                      |                                      |
| Age 0 through 2 Full Time                                | \$120                                | \$95                                 |
| Age 0 through 2 Half Time                                | 77                                   | 65                                   |
| Age 3 through 5 Full Time                                | 112                                  | 95                                   |
| Age 3 through 5 Half Time                                | 75                                   | 60                                   |
| Age 6 through 12 Full Time                               | 96                                   | 87                                   |
| Age 6 through 12 Half Time                               | 62                                   | 57                                   |
| <b>LEVEL B REGISTERED FAMILY CHILD CARE HOMES (EFY)</b>  |                                      |                                      |
| Age 0 through 2 Full Time                                | \$118                                | \$87                                 |
| Age 0 through 2 Half Time                                | 75                                   | 57                                   |
| Age 3 through 5 Full Time                                | 110                                  | 80                                   |
| Age 3 through 5 Half Time                                | 72                                   | 53                                   |
| Age 6 through 12 Full Time                               | 83                                   | 75                                   |
| Age 6 through 12 Half Time                               | 56                                   | 52                                   |
| <b>LEVEL C LICENSED FAMILY CHILD CARE HOMES (LFH)</b>    |                                      |                                      |
| Age 0 through 2 Full Time                                | \$115                                | \$75                                 |
| Age 0 through 2 Half Time                                | 72                                   | 55                                   |
| Age 3 through 5 Full Time                                | 107                                  | 75                                   |
| Age 3 through 5 Half Time                                | 69                                   | 45                                   |
| Age 6 through 12 Full Time                               | 75                                   | 70                                   |
| Age 6 through 12 Half Time                               | 48                                   | 50                                   |

| Care Type   | Maximum Weekly Urban Payment Allowed | Maximum Weekly Rural Payment Allowed |
|---|--------------------------------------|--------------------------------------|
| <b>LEVEL C REGISTERED FAMILY CHILD CARE HOMES (RFH)</b>   |                                      |                                      |
| Age 0 through 2 Full Time   | \$110                                | \$70                                 |
| Age 0 through 2 Half Time   | 67                                   | 45                                   |
| Age 3 through 5 Full Time   | 102                                  | 70                                   |
| Age 3 through 5 Half Time   | 64                                   | 43                                   |
| Age 6 through 12 Full Time  | 70                                   | 65                                   |
| Age 6 through 12 Half Time  | 43                                   | 45                                   |
| <b>LEVEL NA – RELATED FAMILY, FRIEND AND NEIGHBOR CARE – PROVIDED IN THE CHILD’S HOME (FRI)</b>           |                                      |                                      |
| Age 0 through 2 Full Time   | \$45                                 | \$45                                 |
| Age 0 through 2 Half Time   | 27                                   | 27                                   |
| Age 3 through 5 Full Time   | 42                                   | 42                                   |
| Age 3 through 5 Half Time   | 27                                   | 27                                   |
| Age 6 through 12 Full Time  | 42                                   | 42                                   |
| Age 6 through 12 Half Time  | 22                                   | 22                                   |
| <b>LEVEL NA – UNRELATED FAMILY, FRIEND AND NEIGHBOR CARE – PROVIDED IN THE CHILD’S HOME (FNI)</b>         |                                      |                                      |
| Age 0 through 2 Full Time   | \$45                                 | \$45                                 |
| Age 0 through 2 Half Time   | 27                                   | 27                                   |
| Age 3 through 5 Full Time   | 42                                   | 42                                   |
| Age 3 through 5 Half Time   | 27                                   | 27                                   |
| Age 6 through 12 Full Time  | 42                                   | 42                                   |
| Age 6 through 12 Half Time  | 22                                   | 22                                   |
| <b>LEVEL NA – RELATED FAMILY, FRIEND AND NEIGHBOR CARE – PROVIDED OUTSIDE OF THE CHILD’S HOME (FRO)</b>   |                                      |                                      |
| Age 0 through 2 Full Time   | \$45                                 | \$45                                 |
| Age 0 through 2 Half Time   | 27                                   | 27                                   |
| Age 3 through 5 Full Time   | 42                                   | 42                                   |
| Age 3 through 5 Half Time   | 27                                   | 27                                   |
| Age 6 through 12 Full Time  | 42                                   | 42                                   |
| Age 6 through 12 Half Time  | 22                                   | 22                                   |
| <b>LEVEL NA – UNRELATED FAMILY, FRIEND AND NEIGHBOR CARE – PROVIDED OUTSIDE OF THE CHILD’S HOME (FNO)</b> |                                      |                                      |
| Age 0 through 2 Full Time   | \$45                                 | \$45                                 |
| Age 0 through 2 Half Time   | 27                                   | 27                                   |
| Age 3 through 5 Full Time   | 42                                   | 42                                   |
| Age 3 through 5 Half Time   | 27                                   | 27                                   |
| Age 6 through 12 Full Time  | 42                                   | 42                                   |
| Age 6 through 12 Half Time  | 22                                   | 22                                   |

**Appendix 4**

**Urban/Rural County Designation**

For the purpose of establishing the maximum payment rates paid by the SC Voucher Program, each county is designated as either a rural or urban county. The maximum payment rates for urban counties are slightly higher than those for rural counties. A county is designated as either urban or rural based on specific criteria as identified by the SCDSS. The following urban/rural designations apply:

| <b>Urban</b> |             | <b>Rural</b> |            |              |
|--------------|-------------|--------------|------------|--------------|
| Aiken        | Greenville  | Abbeville    | Greenwood  | Saluda       |
| Allendale    | Horry       | Calhoun      | Hampton    | Union        |
| Anderson     | Lexington   | Chester      | Jasper     | Williamsburg |
| Bamberg      | Marion      | Chesterfield | Kershaw    |              |
| Barnwell     | Marlboro    | Clarendon    | Lancaster  |              |
| Beaufort     | Pickens     | Colleton     | Laurens    |              |
| Berkeley     | Richland    | Darlington   | Lee        |              |
| Charleston   | Spartanburg | Dillon       | McCormick  |              |
| Cherokee     | Sumter      | Edgefield    | Newberry   |              |
| Dorchester   | York        | Fairfield    | Oconee     |              |
| Florence     |             | Georgetown   | Orangeburg |              |

## Appendix 5      Scale of Allowable Absences

### ABSENCES

When your child is approved for child care services under the SC Voucher Program, he is allowed a set number of absences based on the number of weeks of child care services authorized. Your Authorization/Connection letter gives you the authorized number of weeks of child care services.

Your allowable absences are as follows:

|                                      |                                      |
|--------------------------------------|--------------------------------------|
| 1 week of child care = 1 absence     | 27 weeks of child care = 16 absences |
| 2 weeks of child care = 1 absence    | 28 weeks of child care = 17 absences |
| 3 weeks of child care = 2 absences   | 29 weeks of child care = 17 absences |
| 4 weeks of child care = 2 absences   | 30 weeks of child care = 18 absences |
| 5 weeks of child care = 3 absences   | 31 weeks of child care = 19 absences |
| 6 weeks of child care = 4 absences   | 32 weeks of child care = 19 absences |
| 7 weeks of child care = 4 absences   | 33 weeks of child care = 20 absences |
| 8 weeks of child care = 5 absences   | 34 weeks of child care = 20 absences |
| 9 weeks of child care = 5 absences   | 35 weeks of child care = 21 absences |
| 10 weeks of child care = 6 absences  | 36 weeks of child care = 22 absences |
| 11 weeks of child care = 7 absences  | 37 weeks of child care = 22 absences |
| 12 weeks of child care = 7 absences  | 38 weeks of child care = 23 absences |
| 13 weeks of child care = 8 absences  | 39 weeks of child care = 23 absences |
| 14 weeks of child care = 8 absences  | 40 weeks of child care = 24 absences |
| 15 weeks of child care = 9 absences  | 41 weeks of child care = 25 absences |
| 16 weeks of child care = 10 absences | 42 weeks of child care = 25 absences |
| 17 weeks of child care = 10 absences | 43 weeks of child care = 26 absences |
| 18 weeks of child care = 11 absences | 44 weeks of child care = 26 absences |
| 19 weeks of child care = 11 absences | 45 weeks of child care = 27 absences |
| 20 weeks of child care = 12 absences | 46 weeks of child care = 28 absences |
| 21 weeks of child care = 13 absences | 47 weeks of child care = 28 absences |
| 22 weeks of child care = 13 absences | 48 weeks of child care = 29 absences |
| 23 weeks of child care = 14 absences | 49 weeks of child care = 29 absences |
| 24 weeks of child care = 14 absences | 50 weeks of child care = 30 absences |
| 25 weeks of child care = 15 absences | 51 weeks of child care = 31 absences |
| 26 weeks of child care = 16 absences | 52 weeks of child care = 31 absences |

## Glossary

**Absence:**

When the child is **not** present (absent all day) at the provider's facility during the service unit (week) either due to illness, vacation, or court-ordered non-custodial visitation or for other known or unknown reasons.

**ACC:**

Applicant Child Care

**Adjustments:**

Adjustments are made to payments to a provider that has been over paid or under paid for a particular timeframe. There are four types of adjustments:

- 1) **Receivable Adjustment:** The process of collecting an over-payment made to providers. In this case, funds will be taken back for the specific period requested. The connection will be deleted or shortened once adjustment is complete.
- 2) **Partial Receivable Adjustment:** The process of collecting a portion of the over-payment made to providers. In this case one would actually process the adjustment for the difference between FT and HT care. The connection will not change; it will still reflect a FT connection but the difference between the FT and HT rate will be taken from the provider's payment.
- 3) **Partial Payable Adjustment:** The process of paying a provider for under-payment. In this case one would actually process the adjustment for difference between HT and FT care. The connection will not change; it will still reflect a HT connection but the provider would receive the difference between the HT and FT rate.
- 4) **Payable Adjustment:** The process of paying a provider for services due that cannot be paid under the normal SVL payment process.

**A/R:**

Applicant/Recipient

**Authorized Service Period:**

The specific time frame that child care services are authorized to a client and a specific provider.

**BBA:**

Balanced Budget Act

**Billing Rate:**

The provider's weekly service rate minus any applicable client fee, and any discount for a second child.

**Care Type:**

The age groups 0-2, 3-5, 6-12 or 13-19 when special needs in which the provider has enrolled with the SC Voucher Program. Providers cannot offer services to ABC clients or receive payment for service in a care type in which they have not been enrolled.

**CCC:**

Child Care Center

**CCDF:**

Child Care Development Fund

**CCL:**

Child Care Licensing

**CDC:**

Child Development Center

**Center-based Care:**

Facility licensed by SCDSS to serve 13 or more children.

**Child:**

The recipient of child care services.

**Child Care Payables Department:**

The area that is responsible for overseeing the receipt, tracking and processing of all child care payments for the SC Voucher Program. This area is also known as Fiscal or Child Care Expenditures.

**Child Name:**

The first and last name of the child that is eligible to receive child care services.

**Child Number:**

The client's Social Security number plus the two digit code 01, 02, etc. assigned to the child. It identifies the child for the purpose of payment and system activities.  
**Providers should never change the assigned child number.**

**CHIP:**

Client History Information Profile

**CJU:**

Central Jobs Unit

**Client/Client Name:**

An individual who has met the eligibility criteria and is funded for child care. The client is listed on the SVL by the initial of their first name and their last name.  
Example: S. Jones

**Client Fee:**

That portion of the provider's weekly service rate (cost) which is based on the client's family size and income, and paid by the client directly to the provider. The fee amount is established by SCDSS on the basis of family size and gross family income.

**Client Number/ID:**

The client's Social Security Number (SSN). This number identifies all client activity in the system. The on-line SVL will list only the last four digits of the SSN.

**Client Termination of Eligibility:**

Action taken when the client is no longer eligible for services. Once notified that the client is terminated, the provider is not eligible for payment for services. Proper notice is always given when terminating child care services.

**CM:**

Casemanager

**Connection:**

A start and stop date (linked to a specific provider) within the SC Voucher Program.

**Connection Card:**

The blue card or fax that must be completed by both the client and the child care provider and submitted to the Control Center for approval prior to the child starting the facility.

**CPS:**

Child Protective Services

**DIPR:**

Division of Individual and Provider Rights

**Drop/Transfer:**

The date indicated by the provider of when a child stopped attending the facility or moved to another child care provider.

**Eligibility Period:**

The potential amount of time for which a client can receive child care services. Eligibility periods are for 52 weeks and may be shortened based on the client's individual eligibility needs.

**Emancipation Statement:**

A NOTARIZED statement signed by both parents stating that the parents have entirely surrendered the responsibility of the care and custody of the minor and the right to the minor's earnings and is under no legal obligation to support the minor. The SC Voucher Program uses this statement for eligibility purposes only. However, this information may be made available under the Freedom of Information Act.

**End Date:**

The last date of service authorization.

**ERS:**

Environment Rating Scales

**Facility Cost:**

The cost a provider charges all parents for a week of child care. Note: Parents are responsible for the difference between the facility cost and the amount paid by the SC Voucher Program, plus any applicable client fee.

**Family Child Care Home (FCCH):**

Home registered or licensed by SCDSS to serve no more than six children.

**Family Household Unit:**

Term used by the SC Voucher Program to refer to an FI Benefit Group (BG). Per the FI Policy Manual, a BG is considered the group of individuals whose income, resources, and/or needs impact the eligibility and amount of benefits in an FI case. BG members include sanctioned and disqualified individuals, as well as Family Cap children.

**Family Independence (FI):**

Child care assistance provided to current FI stipend clients to encourage participation in approved employment, education, or training activities. These requirements are met through the Family Independence Program in South Carolina in an effort to emphasize parental responsibility and self-determination.

**Family Independence Stipend:**

A monthly payment made to a family who meets the required eligibility standards; previously referred to as Welfare or AFDC.

**FEIN:**

Federal Identification Number

**FI CARES Program:**

Family Independence Challenging Adults Through Rehabilitation, Education and Services Program.

**FI/CO:**

Family Independence Child-Only

**Fiscal/Child Care Expenditures:**

The area that is responsible for overseeing the receipt, tracking and processing of all child care payments for the SC Voucher Program. This area is also known as Child Care Payables.

**FLSA:**

Fair Labor Standards Act

**FOIA:**

Freedom of Information Act

**Foster Care (FC):**

Children who are in the custody of SCDSS, and placed out of their home by and/or under the supervision of SCDSS.

**Full-Time Care:**

Thirty or more hours of child care service provided during one week. There is no outer limit for full-time care.

**Funded:**

Any child for whom dollars have been allocated in their name.

**GED:**

General Equivalency Diploma

**Group Child Care Home (GCCH):**

Home or building licensed by SCDSS to serve no more than 12 children.

**Half-Time Care:**

Less than thirty (30) hours, but more than fifteen (15) hours of child care service provided during one week.

**HS:**

Human Services

**HUD:**

Housing and Urban Development

**IFCCS:**

Intensive Foster Care and Clinical Services

**IHC:**

In-Home Child Care

**IIRIRA:**

Illegal Immigration Reform and Immigration Responsibility Act

**In Loco Parentis:**

In the position or place of a parent.

**IRS:**

Internal Revenue Service

**JUMMP:**

Jobs Upfront Mean More Pay

**LES:**

Leave Earning Statement

**Less than Half-Time Care (LHT):**

Less than fifteen (15) hours of child care services provided during a week. No registration fee is allowed for this care-type. This care-type only applies to Welfare Reform participants (**FI, TCC1, TCC2, TCC/24, and TCC/FS**) receiving subsidized child care and can be used in conjunction with a full or half-time connection and may be used alone. It cannot be used in conjunction with F/T or H/T to pay the same provider.

**Letter 147-C**

IRS Form; EIN Previously Assigned. The taxpayer and/or their authorized representative must call the IRS Business and Specialty Tax Line at 1-800-829-4933 to request the Letter 147-C, EIN Previously Assigned. A practitioner may call the Practitioner Priority Service (PPS) Line at 1-866-860-4259 for verbal confirmation. A faxed or written verification will not be provided to the practitioner calling PPS.

**Level A:**

Exemplary programs measured against rigorous quality standards.

**Level B:**

Programs measured against quality standards beyond basic state regulations.

**Level C:**

Programs meeting basic licensing regulations (health & safety).

**Major Parent:**

Parent in the home of a teen parent under the age of 18.

**Maximum Rate:**

Maximum weekly rates established by SCDSS on the basis of a market rate survey of urban and rural counties, type of facility, and care types.

**OHAN:**

Out-of-Home Abuse and Neglect

**Processed:**

When a payment has gone through the payment process.

**Provider:**

An authorized child care group, home, or center-based facility or a non-regulated care arrangement provided by family, friends, or neighbors to care for eligible children with the SC Voucher Program.

**PROWA:**

Personal Responsibility and Work Opportunity Act

**Provider Number:**

The Federal Employer Identification Number [FEIN] or Social Security Number (SSN) of the provider. This number identifies the provider for purposes of payment, tracking and reporting.

**Quality Monitoring:**

The entity that enrolls, monitors, and provides technical assistance to providers enrolled in the SC Voucher Program, and makes all changes to a provider's file. There are two offices of Quality Monitoring; one located in Columbia and one in Greenville.

**Registration Fee:**

A fee most providers charge to client's participating in a child care program. This fee covers program costs not included in the service rate i.e., insurance, materials, supplies. This fee may not exceed the fee charged to private-paying children in the child care program. Registration fees are automatically paid based on registration information submitted by the provider at initial enrollment. A provider is not eligible for a registration fee for clients receiving less than half-time care. The provider may require the client to pay the fee if the client has used up their allocation for registration fees.

**Remittance Advice:**

A document included with the provider's check. There are three different types:

- 1) Paid Remittance Advice: indicates what clients and weeks were paid
- 2) Rejected Remittance Advice: indicates which clients and weeks were not paid and the reason

- 3) Adjusted Remittance Advice: indicates if funds were deducted from the provider's check, the amount, and the reason. An Adjusted Remittance Advice is sent only when there have been adjustments to the provider's payment due to overpayments.

**SCDE:**

South Carolina Department of Education

**SCDSS:**

South Carolina Department of Social Services

**SC Voucher Program:**

The South Carolina statewide child care assistance program funded by the Child Care and Development Fund (CCDF), Social Services Block Grant (SSBG) and State match.

**SC Voucher Program Control Center: (Control Center):**

The authorized child care voucher system management center that is available to provide assistance to clients and providers, and to handle child care applications, funding and connecting.

Providers call: 1-800-262-4416 for notification requirements and/or questions concerning SC Voucher Program procedures.

Parents call: 1-800-476-0199 for any questions.

**SC Voucher Program Database:**

Automated child care eligibility system used to process the child care application, connect children to providers, and make payments to the providers.

**Second Child Discount:**

The second child discount is a discount that is determined by the provider at enrollment to apply to families with multiple children. The second child discount applies to all children in the family **except** the youngest.

**Service Codes:**

Those codes assigned to identify the type of payment being made to the provider, i.e. CS for client services, RF for registration fees, and GR for grants.

**Service Cost:**

The provider rate as reflected in the ABC Voucher System.

**Service Unit:**

One week of child care [Monday - Sunday]. A service unit may be for half-time, full-time, or less than half-time child care.

**Service Voucher Log [SVL]:**

A pre-printed payment request form used to process payments to providers for eligible clients.

**SNAP:**

Supplemental Nutrition Assistance Program

**SSA:**

Social Security Administration

**SSBG:**

Social Services Block Grant

**SSI:**

Supplemental Security Income

**SSN:**

Social Security Number

**Start Date:**

The date services are authorized to begin by SCDSS or the SC Voucher Program/Control Center staff.

**Stop Date:**

The last date of service authorization. Services are not paid past this date.

**TANF:**

Temporary Assistance for Needy Families

**TCC:**

Transitional Child Care

**TCC/FS:**

Transitional Child Care/Full Family Sanction.

**Teen Parent:**

Individual under the age of 20 who has parented or is pregnant.

**Teen Parent/Adult:**

Individual under the age of 20 whose primary role in the FI Family is parent.

**Two-Parent Family:**

A Benefit Group (BG) in which two or more parents are included in the family as defined in the FI Policy Manual.

**USCIS:**

United States Citizenship and Immigration Services

**USDA:**

United States Department of Agriculture

**VISTA:**

Volunteers in Service to America

**Week:**

Monday through Sunday

## Forms

THE FOLLOWING FORMS AND LETTERS ARE FOR REFERENCE ONLY

**PLEASE CONSULT THE MASTER FORMS INDEX  
FOR THE ORIGINAL FORM**

|                                   |   |
|-----------------------------------|---|
| <a href="#">DSS Form 1027</a>     | JUMMP Communication Form  |
| <a href="#">DSS Form 1105</a>     | Authorization Agreement and Enrollment Form for Electronic Vendor Payment and Remittance Advice |
| <a href="#">DSS Form 1247</a>     | Medical Release/Physician's Statement   |
| <a href="#">DSS Form 1269</a>     | Request for Support Services  |
| <a href="#">DSS Form 3004</a>     | CPS/Foster Care Child Care Referral Form  |
| <a href="#">DSS Form 3772</a>     | Client Rights and Responsibilities  |
| <a href="#">DSS Form 3772 SPA</a> | Client Rights and Responsibilities (Spanish Version)  |
| <a href="#">DSS Form 3773</a>     | Level C Provider Rate Certification Form  |
| <a href="#">DSS Form 3774</a>     | FFN Child Care Enrollment Agreement Form  |
| <a href="#">DSS Form 3776</a>     | FFN Child Care Certification  |
| <a href="#">DSS Form 3778</a>     | Health and Safety Grant Reimbursement Request   |
| <a href="#">DSS Form 3781</a>     | Pre-Authorization Notice  |
| <a href="#">DSS Form 3791</a>     | SC Voucher Program Application  |
| <a href="#">DSS Form 3791 SPA</a> | SC Voucher Program Application (Spanish Version)  |
| <a href="#">DSS Form 37101</a>    | Level C Provider Enrollment Form and Agreement  |
| <a href="#">DSS Booklet 37102</a> | Level C Business Procedures   |
| <a href="#">DSS Booklet 37103</a> | FFN Provider Business Procedures  |
| <a href="#">DSS Booklet 37104</a> | Parent Handbook   |

- [DSS Booklet 37105](#) Level A and B Provider Business Procedures
- [DSS Form 37106-1](#) Level A Provider Agreement
- [DSS Form 37106-2](#) Level B Provider Agreement
- [DSS Form 37107](#) Level A and B Provider Rate Form
- [DSS Form 37108](#) Level A and B Provider Enrollment Form
- [DSS Form 37109](#) Fair Hearing Process
- [DSS Form 37110](#) Client Eligibility Worksheet
- [DSS Form 37117](#) Guardianship/In Loco Parentis Verification
- [DSS Form 37124](#) FFN Central Registry Release of Information and Consent Form

[Eligibility Letter](#)

[Authorization/Connection Letter](#)

[Services End Letter](#)

[Client Termination Letter](#)

[Provider Termination Letter](#)

[Transfer Letter](#)

## What's New - Vol 025 Updated 05.01.16

**Manual Section 2.1.8** Section revised to include policy for the treatment of overtime income.

**Manual Section 2.1.9** Section revised to include policy about treatment of irregular fluctuations of income.

**Manual Section 2.2.1** Deleted reference to searching Facebook, etc. for verification of a client's eligibility since blocked by the agency.

**Manual Section 2.2.4** Revised to give six weeks of presumptive eligibility instead of 30 days.

**Manual Section 2.3** Revised to include policy based on the new CCDF law and proposed regulations for providing child care assistance for 12 months regardless of temporary changes. Defined temporary and non-temporary changes.

**Manual Sections 2.3 through 2.17** re-numbered.

**Manual Section 2.13** items 2, 3 and 4 have been updated to allow CPS-IN and CPS-OUT cases can get up to 52 weeks of child care.

**Manual Section 2.19** This section added to provide information about the Homeless child care category.

**Manual Section 2.20** This section added to provide information about the Family Literacy child care category.

**Manual Section 4.1** Revised to include that connections, from connection cards received, are also made for dates indicated in the memo field by eligibility staff.

**Manual Section 6.11** Revised to include a time limit of 5 days for correcting desk review errors/improper payments.

**Appendix 1** Updated to include new income guidelines for 2015 – 2016 and revised the exit guidelines effective May 1, 2016 to coincide with 85% State Median Income (SMI).

**Appendix 2** Update to include the new income guidelines for 2015 – 2016 and revised the exit guidelines effective May 1, 2016 to coincide with 85% State Median Income (SMI).

**Appendix 3** Updated to reflect the provider rate increases which were effective February 1, 2016.

## What's New

### What's New - Vol 024 Updated 07.01.15

**Manual Section 2.1.6** Added section C and re-lettered the section to allow for same sex marriages to be considered when determining the family household unit when determining eligibility for child care.

**Manual Section 2.9** May 2015 transitional child care, year 2 (TCC2) policy was restored to allow families working full-time to get full-time child care, previous policy only allow for part-time child care. All cases that were currently receiving TCC2 were reviewed. If the eligibility worksheet indicated that the families were eligible for full-time child care then the child care services were reconnected to begin receiving full-time child care on or around June 1, 2015.

**Manual Section 2.12.3** Section deleted since information is in the following two sections. Reminder of 2.12 has been re-numbered.

**Manual Section 2.12.5** Foster care child care policy has been expanded to allow for the foster parent to be working, in school/training, or disabled.

**Manual Section 2.12.6** Foster care child care policy has been expanded to allow for the foster parent to be working, in school/training, or disabled.

**Manual Section 2.12.7** Foster care child care policy has been expanded to allow for the foster parent to be working, in school/training, or disabled.

**Manual Section 3.4.2** Revised to add that as of July 1, 2015 CPS-Out clients do not pay a client fee. CPS-Out client's determined eligible for child care on or after July 1, 2015 will not have a client fee assessed.

**Manual Section 4.1.6** Effective July 1, 2015, the registration fee paid for children via voucher system will be increased from \$50 to \$100 per year.

**Manual Section 5.6.7** Revised to reflect change in out-of-state providers reimbursement rate. Reimbursement changed effective July 1, 2015 from Level B Rural to Level B Urban.

## What's New - Vol 023 Updated 10.01.14

Throughout the policy manual, references to ABC Child Care program have been removed and replaced with SC Voucher program to reflect name changes within the Division.

**Manual Section 2.5.3** Section revised to provide clarification to the FI/CO child care policy.

**Manual Section 2.5.4** Section created to provide new policy for a new category of child care, Family Independence/Child-Only – Protective Services (FI/CO-PS).

**Appendix 1** Child Care Income Standards updated to reflect the October 1, 2014 - September 30, 2015 income guidelines.

**Appendix 2** Child Development Fee Scale updated to reflect the October 1, 2014 - September 30, 2015 income guidelines.

**Appendix 3** Child Care Maximum Payment chart updated to reflect the Quality Incentive Bonus increase for Level A Child Care Centers.

## What's New

### What's New - Vol 022 Updated 03.01.14

**Manual Section 1.8** Section revised to delete the old child care website address.

**Manual Section 2.1.8** Section revised to add under the wage or salary section, items to include shift differential, holiday, and leave pay. No change in policy. This is just for clarification.

**Manual Section 2.2.5** Section has been revised to give direction on how to handle school verification of a dependent child age 18-21.

**Manual Section 6.13.3** Removed an old reference to the county child care workers.

**Manual Section 7.1.2** Section has been revised to indicate when a child is absent from a facility two consecutive weeks (Monday – Friday) but returns on any day of the third week, the provider can continue to bill and be paid for that time period for the child.

## What's New

### What's New - Vol 021 Updated 01.01.14

**Manual Section 2.1.8** Beginning with this section and sections throughout the manual, clarification has been made to reflect the child care eligibility workers ongoing practice of using 30 consecutive check stubs when processing a child care application. References to “recent” have been removed to avoid confusion.

**Manual Section 2.12.2** Section clarified to reflect the child care eligibility workers ongoing practice of using agency databases as verification for child care eligibility.

**Manual Section 5.11** Section clarified policy effective 06/01/13 to include that Child Care Licensing bi-annual inspections of child care providers are used by ABC Quality to determine health and safety compliance.

**Manual Section 5.13** Operating procedures have been clarified effective 06/01/13 to reflect practices for notification of providers that corrective action is needed.

## What's New - Vol 020 Updated 11.01.13

**Manual Section 2.1.7** Section has been revised to show an example on how unusual pay amounts should be calculated when determining an applicant's gross monthly income. Also removed the definition of employment out of this section that discusses income. Employment definition is already in Section 2.2.3.

**Manual Section 2.1.9** Section has been updated to change the name of the Income Exclusion listed under letter 'M' from Special Service Supplemental Benefits for Adoption to Adoption Subsidy.

**Manual Section 2.2.3** Section has been revised to state that substitute teaching, along with other as needed job employment or job assignments, are not considered employment unless they are long-term placements.

**Manual Section 2.2.4** Section has been revised to clarify that when verifying employment, paystubs showing employment for 30 consecutive days are preferred. However, if the applicant submits paystubs covering less than 30 days, and there is a year-to-date amount included on the paystubs, the year-to-date amount may be used to calculate gross monthly income.

**Manual Section 2.2.5** Section has been updated to reflect that post-secondary institutions have criteria to determine if a student based on their registration is considered a full or part-time student.

**Manual Section 2.6** Any references to CJU have been changed to CERCU. Also, verbiage was added to indicate that child care can be approved for five weeks in order for a client to cure an FI sanction.

**Manual Section 2.6.2** Effective October 1, 2013, the number of weeks approved for ACC/JUMMP child care changed from seven to six weeks.

**Manual Section 2.6.3** Revised to indicate JUMMP contractors can send the DSS 1027 directly to the child care eligibility unit via SCOSA when child care continues to be needed.

**Manual Section 2.6.4** Item B has been updated to reflect how to determine child care start date for TCC/JUMMP child care in those rare cases in which the FI benefit was denied for income from the job found by JUMMP.

## What's New

### What's New - Vol 020 Updated 11.01.13 (Cont'd)

**Manual Section 2.7** No new policy, just clarifies that a TCC client that becomes temporary disabled due to pregnancy, injury, etc. and unable to work and care for a child may continue to receive child care as long as they remain employed and has verification that their job is being held for them.

**Manual Section 2.8.1** Section revised to give guidance when switching FI or FI/JUMMP child care to transitional child care. Also, section clarified when a new child care application is needed.

**Manual Section 2.12.6** Section has been clarified for foster care child care to indicate employment verification can be made using one check stub containing year-to-date income. This has been the process just needed to clarify.

**Manual Section 3.4** Section has been revised to state that if there is a gap in the eligibility period of a week or more when a client submits a new application, the family must have monthly income below the entrance guidelines to qualify for assistance.

**Manual Section 5.6** Clarified the Note

**Manual Section 5.6.7** Section clarified to state out-of-state FFN provider can be approved only for CPS and Foster Care child care cases and only with prior approval of the arrangement by the designated program staff and human services worker.

**Manual Section 6.10** Section has been updated to state that a new application is required and a re-determination is necessary when a change within a client's household causes the client to change from one eligibility category to another, unless the change can be processed according to seamless eligibility policy.

**Appendix 1** has been updated to reflect the Child Care Income Standards which are effective from October 1, 2013 – September 30, 2014.

**Appendix 2** has been updated to reflect the Child Development Fee Scale which is effective from October 1, 2013 – September 30, 2014.

**Appendix 3** has been updated to reflect the Maximum Payment Allowed rates which are effective from October 1, 2013 – September 30, 2015.

## What's New - Vol 019 Revised 05.01.13 (Cont'd.)

**Manual Section 2.2.3** Section has been revised to state that when an applicant is in a long-term substitute teaching assignment, verification of the assignment is required. An applicant who has a new commission-only job may receive three months of child care in order to establish a work history. Continued eligibility will be redetermined at the end of this time period. A Note has also been added to state that travel time may be considered when determining the number of hours worked per week. Furthermore, verbiage also has been added to clarify that an FI parent may not be required to participate a minimum of 15 hours.

**Manual Section 2.2.4** Section has been updated to clarify that when pay stubs are not available to verify work, a letter on company letterhead may be submitted which indicates the hourly rate of pay and the number of hours; however, these statements from employers will be verified by the child care eligibility worker. Policy regarding the presumptive eligibility process for new employment has been moved from Section 2.5.4 to 2.2.4. Verbiage regarding the procedures that the FI CM must follow has been removed.

**Manual Section 2.2.5** Section has been revised to state that, except for FI recipients, applicants may submit proof of paid school registration for the term in which they are applying for child care assistance as verification that they are participating in an educational program. Units of service for school participation may also be used. The Note has been revised to clarify that actual class instruction time issued for programs that do not use a credit hour system will also be considered, along with travel time. Furthermore, when determining whether an applicant qualifies for part-time or full-time child care assistance, an applicant who is registered to attend nine or more credit hours of graduate school is considered attending school full-time; therefore, full-time child care may be authorized.

**Manual Section 2.2.7** Section has been updated to state that the most current copy of a self-employed applicant's individual income tax return and the profit/loss statement may be used to obtain an accurate estimate of income. If the applicant is newly self-employed, an applicant may be given three months of child care services to allow time to show a work history. Continued eligibility will be determined after this time period.

**Manual Section 2.2.9** Section has been revised to state that eligibility criteria in some child care categories may not allow the applicant to be disabled.

**Manual Section 2.4.1** Section has been updated to state that the FI CM or designated county staff can complete the ABC Child Care Application when an FI applicant applies for ACC.

## What's New - Vol 019 Revised 05.01.13 (Cont'd.)

**Manual Section 2.4.2** Section has been revised to state that when an FI benefit case is approved, the FI CM will meet with the client at the Family Plan appointment. If child care is needed, a new DSS Form 1269, Request for Support Services, and the DSS Form 3791, ABC Child Care Application, may be sent via SCOSA to the ABC Mailbox to the FI child care unit. If the FI benefit application is denied, the child care will be allowed to end in accordance with termination policy and the memo field in the ABC Voucher System may be documented.

**Manual Section 2.5** Section has been updated to reflect that the purpose of child care through FI is to provide the necessary child care for a family to participate in approved employment, education, training or to comply with their Family Plan.

**Manual Section 2.5.1** Section has been revised to add that if child care assistance is needed for an FI client in the CARES Program, the FI CM will send the FI child care unit via the ABC Mailbox in SCOSA the DSS Form 1269, Request for Support Services, and the DSS Form 3791, ABC Child Care Application, and other documentation as appropriate to request child care.

**Manual Section 2.5.3** Section has been updated to state that in an FI Child Only case, if a parent/caretaker has a verified permanent disability, a physician's statement indicating the inability of the patient to care for their own children or children in their custody will be provided.

**Manual Section 2.6.1** Section has been updated to state that income data from CHIP or SCOSA imaging may also be used when determining eligibility.

**Manual Section 2.6.4** Section has been revised to include a **Special Note** stating that for the period of June 2012 through August 2012, the ABC Program operated under original JUMMP policy to allow transitional child care when the FI benefit case was denied due to earned income. This policy was later clarified to reflect the current policy notated in this section.

**Manual Section 2.7** Section has been updated to state that when determining eligibility for transitional child care, travel time is also considered when calculating the number of hours worked each week.

**Manual Section 2.7.1** Section has been updated to state that when determining eligibility for transitional child care in a two-parent family, travel time is also considered when calculating the number of hours worked each week.

## What's New - Vol 019 Revised 05.01.13 (Cont'd.)

**Manual Section 2.8** Section has been revised to state that when establishing eligibility for TCC1, the child care eligibility worker will use CHIP to determine that the FI benefit case has been closed for a transitional closure reason and to determine the effective date of FI benefit closure to ensure that the appropriate number of service weeks are given to the client.

**Manual Section 2.8.1** Section has been updated to state that when the FI Child Care Unit becomes aware that an open FI child care case needs to go seamless, the TCC Unit will determine the effective date of closure in CHIP to ensure that the appropriate number of weeks are approved, starting from the effective date of closure.

**Manual Section 2.9** Section has been revised to state that the TCC2 eligibility category is for an individual whose first year of transitional eligibility time limit is ending. If the parent is currently receiving TCC1, the ABC Voucher System sends an automated notification to the parent and to the provider 60 days prior to the services ending. The policy stating that TCC2 cannot be retroactive and the participant cannot be reimbursed for any payments made prior to the established date of eligibility has been removed. To receive child care through TCC2, the individual must not be receiving an FI benefit and the FI benefit closed for a transitional reason.

**Manual Section 2.11** Section has been updated to remove the verbiage which states that the child care worker must also attach a copy of the mini-budget and a copy of the CAP2 screen to the DSS Form 1269 when determining eligibility for TCC/Full Family Sanction-1.

**Manual Section 2.12.2** Section has been revised to remove verbiage stating that there may be situations in which the child care worker in the county where the child resides and the county of case management will need to work together to secure services needed for the child has been removed. A CPS child may also receive child care up to 26 weeks, with a possible extension up to 26 additional weeks. The Note has been revised to state that when a CPS case is closed or no longer active, the child care case will be terminated according to ABC Program termination policy upon notification from the HS worker.

**Manual Section 2.12.6** Section has been updated to state that exceptions to the work requirement for foster parents may be made by the Child Care Director/designee on a case-by-case basis.

## What's New - Vol 019 Revised 05.01.13 (Cont'd.)

**Manual Section 2.12.7** Section has been revised to include additional procedures that the referring Foster Care CM is responsible for, including requesting authorization from State Office to approve child care for a child in specialized or intensive foster care (E) and for submitting a waiver request, as appropriate, for use of a child care facility that is not licensed (F). Verbiage stating that the child care worker in the county of case management is responsible for determining eligibility for child care and that coordination is essential has been removed.

**Manual Section 2.14** Current policy has been updated to state that parents must meet the basic ABC Program criteria and verify participation with a state-funded domestic violence program as required.

**Manual Section 2.15** Section has been clarified to state that a parent applying for Head Start child care must meet basic ABC Program funding criteria, as funding is available. If approved for services, the child must attend the Head Start approved child care site for a minimum of two weeks prior to transferring to another provider. Failure to attend for two weeks may result in the termination of services, unless otherwise approved by the grantee.

**Manual Section 2.16** Section has been updated to state that parents applying for child care assistance through First Steps must meet the basic ABC Program criteria. Furthermore, provider selections may be limited for this category of child care.

**Manual Section 3.2** Section has been revised to state that agency databases such as CHIP, PATS and CAPSS, and documentation from SCOSA imaging, may be used in conjunction with the ABC Child Care Program Application to determine eligibility for child care services. A Note has been added which states that an ABC application is not used for a family moving from FI to the first year of transitional child care or from ACC/JUMMP to FI/JUMMP and TCC/JUMMP.

**Manual Section 3.2.5** Section has been updated to state that while it is recommended that the child care application be signed and dated by the applicant, that it is not required if all other eligibility criteria is met.

**Manual Section 3.3** Section has been revised to state that the parent/caretaker receives a copy of their rights and responsibilities in an eligibility packet that is mailed to them and it is provided on the last page of the application.

## What's New - Vol 019 Revised 05.01.13 (Cont'd.)

**Manual Section 3.3.1** The Note has been updated to state that a client receiving services under CPS or FC may only choose a licensed facility or program, unless otherwise approved for a waiver to policy.

**Manual Section 3.4** Section has been revised to state that if there is a gap in services of a week or more when the client submits a new application, the family must have monthly income below the entrance guidelines to qualify.

**Manual Section 5.6.5** Section has been updated to state that an individual receiving ABC vouchers for their own child, grandchild, foster child, or other child in their custody cannot become an FFN provider for someone else.

**Manual Section 5.6.7** Section has been updated to state that although out-of-state providers are primarily enrolled to allow payment of child care costs for children in CPS or FC, that this option can be used for all child care categories. Specific procedures regarding out-of-state providers are thoroughly outlined in this updated policy.

**Manual Section 6.10.1** Section has been added to explain the process that a child care eligibility worker should follow when amending an ABC application.

**Manual Section 6.12** Section has been revised to include a synopsis of the monthly child care caseload monitoring reports.

**Glossary** Definitions for Major Parent, Teen Parent and Teen Parent/Adult have been added.

## What's New - Vol 018    Effective 02.01.13

**Manual Section 1.3** Section has been revised to include policy regarding conflicts of interest when determining eligibility for child care services. Sections 1.3 through 1.7 were renumbered sequentially.

**Manual Section 2.5.4** Section has been added to include policy regarding the presumptive eligibility process for an FI client who has obtained employment and is in the process of verifying their employment.

**Manual Section 2.5.5** Section has been added to include policy regarding the process for amending an ABC Child Care Application due to a change that causes a new eligibility period to be determined.

**Manual Section 2.7** Section has been updated to clarify that a parent who works from 15 to 29 hours a week is considered working part-time with determining eligibility under Transitional Child Care (TCC).

**Manual Section 2.7.1** The Note has been revised to clarify that in a two-parent household where one parent works at least part-time and the other attends only school, the household is eligible to apply for TCC. Also added is a new TANF Closure Code, JE, which is used for a JUMMP participant whose earned income exceeds the FI benefit income limit.

**Manual Section 2.8** Section has been updated to clarify eligibility requirements for a TCC1 applicant and to include a link to policy regarding the criteria a two-parent family must meet to be eligible for TCC1.

**Manual Section 2.8.1** Section has been revised to clarify ongoing policy regarding seamless eligibility for first year transitional child care.

**Manual Section 2.12.6** Section has been revised to update policy regarding verification of working hours for foster parents.

**Manual Section 4.1.7** Section has been revised to include an Exception regarding registration fees that the ABC Program will pay to for a client when a facility closes and the client is forced to find another provider.

**Manual Section 5.6.7** Section has been added to clarify policy regarding out-of-state providers approved for the ABC Program.

## What's New - Vol 017 Effective 10.01.12

**Manual Section 2.11** Section has been revised to update the verbiage in the Note regarding child care assistance for Child Welfare cases and to reiterate that it is the sending state's responsibility to provide assistance to the child when a child is placed in South Carolina from another state.

**Manual Section 5.1.2** Section has been revised to state that as of September 1, 2009, a GCCH provider must meet the same fire codes as a CCC provider, and that some county zoning offices no longer allow GCCH providers. Also, a provider who resides in a mobile home needs to contact the State Fire Marshal's Office to determine if the structure meets fire codes.

**Manual Section 5.6** Section has been revised to state that a child care payment may be made for a CPS/Foster child who requires an out-of-state placement where the care is provided by a child care center. Out-of-state family, group or informal child care arrangements will not be authorized.

**Manual Section 6.7** Section has been revised to state that a child care payment may be made for a CPS/Foster child who requires an out-of-state placement where the care is provided by a child care center.

**Appendix 1** The Child Care Income Standards chart has been updated to reflect the current income limits which are effective October 1, 2012 through September 30, 2013.

**Appendix 2** The Child Development Fee Scale has been updated to reflect the current participation fees which are effective October 1, 2012 through September 30, 2013.

## What's New - Vol 016 Effective 08.01.12

**Manual Section 1.4** Section has been revised to include a Note which states that child care staff should refer any questionable situations regarding suspected abuse or neglect of a child to a supervisor.

**Manual Section 2.1.1** Section has been revised to include a Note which states that notarized statements from friends or relatives are not acceptable methods for verification of residency.

**Manual Section 2.1.6** Section has been revised to clarify the Note by adding that the loco parentis form or other documentation must be available to verify why a dependent child who is not in the FI or SNAP budget is in the home when determining who is in the family household unit.

**Manual Section 2.1.7** Section has been revised to state that the child care worker may use CHIP information to verify income information when other documentation is not provided.

**Manual Section 2.2.1** Section has been revised to clarify policy regarding the use of internet and social networking sites when researching cases, verifying information and determining eligibility.

**Manual Section 2.2.2** Section has been revised to include a Note which states that notarized statements from friends or relatives are not acceptable methods for verification of an absent parent.

**Manual Section 2.2.7** Section has been revised to state that child care may be denied or closed for a client who has been employed in the same self-employment business for at least one year without any substantial changes and is not making at least minimum wage.

**Manual Section 2.4.1** Section has been revised to state that the ABC Child Care Application, DSS Form 3791, should be completed with the client by the FI CM, and not by the child care worker.

**Manual Section 2.5** Section has been revised to state that an FI parent is responsible for paying the difference in what the ABC Program pays and what the provider charges, if applicable. Likewise, FI child care may be authorized up to 26 weeks at a time; additional weeks may be added up to 52 weeks per application.

**What's New - Vol 016 Effective 08.01.12 (Cont'd.)**

**Manual Section 2.5.1** Section has been revised to state that FI-CARES child care may be authorized up to 26 weeks; additional weeks may be added up to 52 weeks per application.

**Manual Section 2.5.3** Section has been revised to state that in FI/CO two-parent families, both parents/caretakers must be working at least part-time.

**Manual Section 2.8** Section has been revised to include a Note which states that only part-time children may be authorized for the second year of Transitional Child Care (TCC2) regardless of the client's work schedule.

**Manual Section 2.9.2** Section has been revised to include a Note which states that only part-time child care may be authorized for the second year of Transitional Child Care (TCC24-2).

**Manual Section 2.10.2** Section has been revised to include a Note which states that only part-time child care may be authorized for the second year of Transitional Child Care (TCC/FS-2).

**Manual Section 2.13** Section has been revised to state that funding for the criminal domestic violence category is limited and is only for a lifetime maximum of 52 weeks.

**Manual Section 3.2.2** Section has been revised to state that staff should document the memo field as soon as possible once an actual SSN has been received.

**Manual Section 3.2.4** Section has been revised to state that when custody is in question, CHIP screens may be used as verification.

**Manual Section 3.2.5** Section has been revised to indicate that a signed application is not required for a family moving from JUMMP/ACC to JUMMP/FI and JUMMP/TCC1 as these are treated as seamless eligibility.

**Manual Section 3.6** Section has been revised to state that the parent handbook contains the options sheet for choosing a child care provider, a holiday schedule, and a copy of the client's rights and responsibilities.

## What's New - Vol 016 Effective 08.01.12 (Cont'd.)

**Manual Section 4.1** Section has been revised to include the ABC Program website addresses: [childcare.sc.gov](http://childcare.sc.gov), [abcqualitycare.org](http://abcqualitycare.org), and [scchildcare.org](http://scchildcare.org) as resource guides that a client may use to help find quality child care.

**Manual Section 4.1.10** Section has been revised to state that the Authorization/Connection letter includes the client name and the last four digits of the client's SSN.

**Manual Section 4.1.11** Section has been revised to clarify that the termination policy relating to children who do not connect to a provider also applies to children who do not reconnect to a provider.

**Manual Section 5.2.5** Section has been revised to include a person who is employed by SCDSS within the State, Regional or County offices as an individual who is not eligible to be enrolled in the ABC Program.

**Manual Section 5.6.5** Section has been revised to include a person who is employed by SCDSS within the State, Regional or County offices as an individual who is not eligible to be a Family, Friend, or Neighbor provider in the ABC Program.

**Manual Section 5.16.3** Section has been revised to include the Child Care Enrollment and Agreement Form, DSS Form 3774, as a form that a Level C Family, Friend or Neighbor provider may request from the ABC Child Care Control Center when wishing to increase their rates.

**Manual Section 5.18.2** Section entitled 'Process for Incomplete Applications' has been added to clarify policy regarding the time frame in which a potential client or provider must follow when applying for enrollment in the ABC Program.

**Manual Section 5.18.3** Section entitled 'Denials for Incomplete Applications' has been added to clarify policy regarding the denial of child care services when a client or provider fails to submit a completed application package within the deadline.

**Manual Section 6.3** Section has been renamed from 'Interrupted Activities' to 'Breaks in Work, School or Training' and has been revised to clarify the termination policy relating to when a client stops working or attending school or training.

**Table of Contents** has been updated to include a **Forms** sections.

## What's New - Vol 015 Effective 04.01.12

**Manual Section 2.16** Section has been revised to clarify the policy regarding the Special Needs application process for parents whose child has a documented disability or special need. Child care may only be authorized for the child with the disability or special need; other children who are listed on the application who do not have a documented disability or special need will not be approved for services under the special needs funding.

**Manual Section 2.7** Section has been revised to add a new CHIP closure code for transitional child care (first year).

**Please review Chapter 5, Provider Information, in its entirety for significant revisions, specifically Manual Section 5.6.4, which relates to Central Registry and Sex Offender checks required for Family, Friend and Neighbor providers.**

**Manual Section 5.6.4** Section has been updated to include a Note which clarifies policy regarding the use of internet and social networking sites when researching cases, verifying information and determining eligibility.

**Manual Section 6.1.1** Section has been revised to state that when a waiver has not been granted for an allowable absence, the absence will count and the child will be terminated when the number of allowable absences is exceeded. A second Example is also provided to illustrate what is considered an allowable absence when a parent/child is authorized for half-time care.

**Manual Section 6.1.2** Section has been revised to clarify the policy when a client/child is terminated for excessive absences and the client or the provider wishes to submit documentation which may show that the absences in question should be allowed. Documentation submitted after the termination date will not be reviewed.

**Manual Section 9.1** Section has been updated to clarify the reporting process when potential fraud is suspected.

## What's New - Vol 014 Effective 10.01.11

**Manual Section 2.1.4** Section has been revised to clarify the Note to state that when a child care worker is entering a case for a child(ren) where the parent is not a legal citizen, but the child(ren) is, a pseudo SSN must be created for the parent in order to process the application. The child care worker must no longer use the oldest child's SSN.

**Manual Section 2.10.1** Section has been added to clarify that eligibility for TCC/FS-1 begins the first month of FI benefit ineligibility due to full family sanction.

**Manual Section 2.10.2** Section has been added to clarify that a client who completes TCC/FS-1 may reapply for an additional 12-month period based on the availability of child care funding. The child care category for the second year is TCC/FS-2.

**Manual Section 2.11.4** Section has been revised to state that in a CPS-In case, a family can receive only 26 weeks of child care. An additional 26 weeks may be granted if approved by the County Director (not to exceed 52 weeks). A Note has also been added to state that CPS clients who are not working, in school, or training can receive up to full-time child care as needed. Finally, if the family's income is above the maximum exit income in a CPS-In case, the fee is assessed at a dollar less than the maximum exit amount.

**Manual Section 2.11.5** Section has been revised to state that in a CPS-Out case, a client who is not working, in school, or training can receive up to full-time child care as needed.

**Manual Section 4.1.7** Section has been revised to state that registration fees are automated and paid on a provider's SVL~ after a child has had three consecutive paid weeks of services.

**Manual Section 5.1.4** Section has been retitled and revised to state that Self-Arranged Child Care (SAC) is now referred to as Family, Friend, and Neighbor Care (FFN) and to clarify the two types of FFN care: 1) Child care provided in the home of the *family member, friend or neighbor* is coded as FNO in the ABC Voucher System; 2) Child care provided in the home of the *child* is coded as FNI in the ABC Voucher System. Policy regarding In-home Child Care (IHC), unregulated child care provided in the child's home, now falls under FNI criteria. **All references to SAC have been changed to FFN; all references to IHC have been changed to FNI.**

## What's New - Vol 014 Effective 10.01.11 (Cont'd.)

**Manual Section 5.6.4** Section has been retitled and revised to state that Self-Arranged Child Care (SAC) is now Family, Friend and Neighbor Care (FFN).

**Manual Section 5.6.5** Section has been retitled and revised to reflect that former policy regarding the denial of SAC arrangements applies to the denial of FFN arrangements.

**Manual Section 5.6.6** Section has been retitled and revised to state that policy regarding In-Home Care (IHC) applies to Family, Friend, and Neighbor Care (In the Child's Home) (FNI).

**Manual Section 5.8** Section has been revised to state that when a second child discount is applied, it will remain in effect until the connection ends, the child transfers to another provider, or eligibility ends.

**Manual Section 6.9** Section has been added to clarify termination procedures a child care worker should take when a client moves to another county.

**Manual Section 6.10** Section has been revised to add that when a client moves to another county, a new application is required and a re-determination is necessary.

**Manual Section 6.11.3** Section has been revised to state that when a client or child is no longer eligible for services, the county child care worker must request the termination by documenting the request in the memo field and 67 the case.

**Appendix 1** has been updated to list the current Child Care Income Standards which are effective October 1, 2011 through September 30, 2012.

**Appendix 2** has been updated to list the current Child Development Fee Scale which is effective October 1, 2011 through September 30, 2012.

## What's New - Vol 013 Effective 09.01.11

**Chapter 3, Application Process**, has been reformatted to provide a clearer understanding of the application process and its relevance to the program purpose. Sections are entitled as follows:

- 3.1 Intake and Application
- 3.2 Child Care Application
- 3.3 Applicant Rights and Responsibilities
- 3.4 Child Care Income Standards
- 3.5 Eligibility Worksheet

**Chapter 4, Provider Authorization**, is a new chapter which incorporates policy previously found in Chapter 3. Sections are entitled as follows:

- 4.1 Provider Authorization/Connection
- 4.2 Immunizations

**Chapter 5, Provider Information**, includes policy previously found in Chapter 4. Sections are entitled as follows:

- 5.1 Child Care Provider Definitions
- 5.2 Required Regulatory Status
- 5.3 Grants
- 5.4 ABC Parent/Caretaker/Guardian Who Owns a Child Care Program
- 5.5 Licensing/Registration Requirements
- 5.6 Provider Selections and Types
- 5.7 Maximum Payment Rates
- 5.8 Second Child Discounts
- 5.9 Provider Rate Changes
- 5.10 Records
- 5.11 Termination of a Provider's Enrollment
- 5.12 Re-enrollment
- 5.13 Amendments to a Provider's File

The remaining chapters have been renumbered as follows:

**Chapter 6, Case Management**

**Chapter 7, Payment Information**

**Chapter 8, Fair Hearings**

**Chapter 9, Fraud/Improper Payments**

## What's New - Vol 012 Effective 08.01.11

**Manual Section 3.2** Section has been revised to change the link for Pseudo/Temporary Social Security Numbers.

**Manual Section 2.1.9** Section has been revised to state that children's earnings are excluded when computing gross income for eligibility purposes UNLESS the child is emancipated or is a teen paren with an FI benefit case in his/her own name.

**Manual Section 2.1.9** Section has been revised to add the Montgomery GI Bill to the list of loans or grants which are excluded when calculating an undergraduate student's income for eligibility purposes.

**Manual Section 2.6.1** Section has been revised to clarify the criteria a Two-Parent Family must follow in order to qualify for part-time child care assistance.

**Manual Section 2.11** Section entitled **Low-Income Applicant Child Care (LIACC)** has been deleted as the agency no longer has funding available for this eligibility category. Sections 2.12 through 2.17 are now 2.11 through 2.16.

**Manual Section 2.11.6** Section has been revised to state that a foster care case must be entered using the foster child's actual income. If there is no income, then a zero dollar amount (\$0) should be entered.

**Manual Section 3.4.2** Section has been revised to change the acronym for less-than half-time care from LTHT to LHT. The Glossary has also been updated to reflect this change.

**Manual Section 4.6.4** Section has been revised to remove verbiage stating that the ABC Program authorizes services to an eligible client who chooses an SAC provider and that the name, address, and telephone number of the local SCSS office will be given to those clients who are interested in using an SAC provider.

The section has also been revised to include verbiage stating that a client's request for an SAC provider for all funding sources is processed through the ABC Control Center, except CPS/FC cases, unless an exception is approved.

**Manual Section 4.6.5** Section has been revised to state that a potential SAC provider(s) must be denied when he/she resides in the same household as the child approved for child care services. The verbiage stating that if a child care worker cannot validate the need for child care services, the arrangement will not be approved has been removed.

## What's New - Vol 011 Effective 11.01.10

**Please review Chapter 2, specifically Sections 2.5.3 and 2.9, for important changes to the following eligibility categories: FI-Child Only (FI/CO) and Transitional Child Care (TCC24).**

**Manual Section 2.5.3** Item C has been revised to remove verbiage regarding a parent/caretaker relative's temporary or permanent disability and how the disability related to FI/CO child care eligibility.

**Manual Section 2.7** Item A has been revised to state that with regards to TCC1 eligibility, an individual's case must be closed (rather than terminated) from FI due to earned income exceeding FI income guidelines. The CHIP Closure Code chart has also been updated to clarify the CHIP codes and reasons for closure/denial actions.

**Manual Section 2.8** Item A has been revised to state that the eligibility category TCC2 is for an individual whose first year of TCC and TCC/FS (no longer TCC24) is ending.

**Manual Section 2.9** Section has been revised to remove verbiage regarding TCC24 employment criteria and to distinguish between TCC24-1 and TCC24-2.

**Manual Section 3.7** Section has been revised to include information about the use of the DSS Form 3781, Pre-Authorization Notice.

**Manual Section 4.6.6** Section has been revised to clarify that an in-home child care provider must be at least 21 years of age and cannot live in the same household as the child. Additionally, the ABC Program will not pay for child care services to any member of the household in which the child(ren) reside(s).

**DSS Form 3781 has been revised. It is a Pre-Authorization Notice for use by the child care workers in the county, if necessary, to give child care providers a child care start date. Frequently, providers ask for written approval that a child(ren) has been approved for child care services through the ABC Program. If the provider requires written authorization prior to receipt of the official Authorization/Connection Letter generated by the ABC Voucher System, then this notice may be used. This should be helpful when providers need to accept a child(ren) for emergency placement, such as CPS or Foster Care child care arrangements.**

**The new ABC Child Care Application, DSS Form 3791, will be in the master forms index November 1, 2010. This application will be used for all child care categories entered into the ABC Child Care Voucher System.**

**The DSS Form 37110 and DSS Form 37111, Eligibility Worksheets, are being merged into one form. Effective November 1, 2010, all child care staff will use the DSS Form 37110, Client Eligibility Worksheet.**

**DSS Form 3782 is no longer available.**

**What's New - Vol 010      Effective 10.01.10**

References to Protect-In and Protect-Out have been changed throughout the manual to CPS-In and CPS-Out, respectively, to correlate with changes recently made to the ABC Voucher System

**Appendix 1** The Child Care Income Standards chart has been updated to reflect the effective dates of October 1, 2010, through September 30, 2011. Please note the federal government extended the 2010 Federal Poverty Guidelines; therefore, the income guideline amounts did not change this year.

**Appendix 2** The Child Development Fee Scale has been updated to reflect the effective dates of October 1, 2010, through September 30, 2011. Please note the federal government extended the 2010 Federal Poverty Guidelines; therefore, the income guideline amounts did not change this year.

## What's New - Vol 009      Effective 09.01.10

**Manual Section 1.2.1** Section has been revised to clarify the length of time a worker is to maintain client and provider case files.

**Manual Section 2.1.2** Section has been revised to clarify that the age an applicant must be in order to apply for the ABC Program does not apply to FI and FI/CO fund sources.

**Manual Section 2.1.5** Section has been revised to clarify the specific requirements an applicant must meet before being determined eligible to receive child care assistance.

**Manual Section 2.1.6** Section has been revised to clarify family definitions with regards to the following:

- D:** A Note has been added to clarify policy relating to a dependent child(ren) who is in either the FI, FI/CO or TCC category.
- G:** A teen parent living with his/her own parent/caretaker who has his/her own FI benefit case.
- I:** A foster parent's employment status when determining the eligibility of a foster child to receive child care assistance.
- J:** The age a minor may be considered emancipated and that an emancipated minor is not included in the FI or SNAP budget.

**Manual Section 2.12.3** Section has been revised to clarify that in a CPS case, the parent/caretaker is responsible for paying to the provider the difference between what the provider charges and what the ABC Program pays for.

**Manual Section 2.12.4** Section has been revised to clarify that in a CPS-In case, if the parent/caretaker refuses to provide income verification, the child care worker must enter income in the Voucher System at \$1.00 below entrance maximum in order to assess the client fee. Also, the HS CM must sign the application if the parent/caretaker refuses.

**Manual Section 2.12.5** Section has been revised to clarify that in a CPS-Out case, if the parent/caretaker refuses to provide income verification, the child care worker must enter income in the Voucher System at \$1.00 below entrance maximum in order to assess the client fee. Also, the HS CM must sign the application if the parent/caretaker refuses .

**Manual Section 5.4** Section has been revised to clarify which documents in a case file need to be maintained by the child care worker.

**Glossary** The acronym for the Supplemental Nutrition Assistance Program (SNAP) has been added.

## What's New - Vol 008    Effective 06.01.10

**Manual Section 4.4** Section has been revised to clarify that a parent/caretaker or guardian who owns a registered FCCH, licensed GCCH, or center will not receive child care assistance for any child in his/her custody.

## What's New - Vol 007    Effective 03.01.10

**Manual Section 2.1.7** Note has been revised to state that overtime will be counted when it appears on at least half of the paystubs submitted with a child care application, even if the overtime pay amounts vary with each paystub.

**Manual Section 2.2.5** A paragraph has been added to clarify the policy used to determine full-time and part-time child care assistance for a parent/guardian who attends school.

**Manual Section 3.4.2** Section has been revised to state that less-than-half-time care (LTHT) may be used in conjunction with a full-time or half-time care arrangement or it may be used alone; however, it cannot be used to pay the same child care provider.

**Manual Section 7.1.1** Section has been revised to state that an appeal hearing will be dismissed if the reason for the appeal is due to either lack of funding or the natural ending of services at the end of the eligibility period.

**Less than Half-Time Care (LTHT):** A Glossary entry has been added to define less-than-half-time care.

## What's New - Vol 006      Effective 02.01.10

**Manual Section 2.6** Section has been revised to state that an individual whose FI benefit ends due to the 24-month FI time limit may apply for Transitional Child Care (TCC) and if eligible may be authorized for up to two years.

**Manual Section 2.7** Section has been revised to add a Note which states that TCC1 may be authorized for up to 52 weeks. The CHIP closure reason for the CHIP closure code 'TL' has also been changed to 'Closed due to FI time limit'.

**Manual Section 2.9** Section has been revised to state that an individual who qualifies for TCC24 for 12 months may reapply for an additional 12-month period if funding permits.

**Manual Section 2.10** Section has been revised to state that an individual who qualifies may receive TCC/FS for 12 months and may reapply for an additional 12-month period if funding permits.

**Manual Section 2.12.6** Section has been revised to state that employment verification may be provided on company/business letterhead indicating that the foster parent is employed and his/her work hours. Actual wages do not have to be provided.

**Manual Section 3.3.3** Section has been revised to replace Appendix 6 with DSS Form 37117, Guardianship/In Loco Parentis Verification.

**Manual Section 4.4** Section has been updated to reflect that an ABC parent/foster parent who owns a licensed/registered center will not receive assistance to provide care for his/her own child or foster child. This is not a change in policy. The word 'center' was inadvertently omitted in previous volumes.

**Manual Section 4.6.5** Section has been revised to clarify that an SAC arrangement must be denied when the provider is a member of the same FI/FS family household unit as the parent applying for child care, even if a member of the FI/FS household unit has been disqualified and is not in the FI/FS budget.

**What's New - Vol 005      Effective 12.01.09**

**Manual Section 2.1.7** Section has been revised to clarify types of employment defined as income.

**Manual Section 4.12** Sections 4.12 and 4.12.1 have been revised to clarify that a terminated provider may not re-enroll in the ABC Child Care Program at any level.

**What's New - Vol 004      Effective 11.01.09**

**Manual Section 3.3.3** A Note has been added to state that the Guardianship/In Loco Parentis Form must be notarized.

**Manual Section 4.6.4** Section has been revised to clarify that if an SAC provider wants to care for more than one unrelated family, the provider must become licensed or registered in order to continue receiving payments for child care services.

**Manual Section 4.6.5** List has been revised to add that an individual receiving ABC vouchers for his/her own child(ren) cannot become an SAC provider.

**Manual Section 5.10.1** Section has been revised to clarify that a provider has the right to stop serving a client or child, rather than terminating services. Only the ABC Program can terminate child care assistance for a client.

**Appendix 3** The Maximum Payment Allowed chart has been revised to reflect the effective dates from October 1, 2009 to September 30, 2011.

**What's New - Vol 003      Effective 10.01.09**

**Manual Section 2.4.1** Section has been revised to include the application process for Applicant Child Care.

**Manual Section 2.4.2** Section was created to clarify the process used to enroll a provider in the ABC Program.

**Manual Section 2.4.3** Section has been revised to clarify policy regarding determining eligibility for FI for a client receiving ACC.

**Manual Section 2.12** A Note has been added to clarify those children who are not eligible for child care services through the ABC Program.

**Manual Section 2.12.5** Section has been revised to include the specific information the Human Services worker must give to the child care worker.

**What's New - Vol 002      Effective 09.01.09**

**Manual Section 2.1.1** The military identification card listed under Residency (#E) has been removed as acceptable proof of residency for child care applicants.

**Manual Section 2.5.3** The following Exception (under # B) has been added as this verbiage was inadvertently omitted in the initial version of the ABC Policy Manual effective August 1, 2009: **EXCEPTION: A parent(s) who receives SSI may be eligible for child care assistance if he/she is either employed at least part-time or participating in an activity (training or education) that will enable him/her to become employed in the future.**

**Manual Section 2.12.8** Policy regarding child care assistance for the baby of a foster child has been revised to state the following: "The foster parent(s) must be employed and the foster child must be attending school or be employed in conjunction with school attendance."