



Child Care Subsidy Program Guidance Manual

Revised Guidance



Effective Xxxx xx,xxxx

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Section 1. Child Care Subsidy Overview

1.1. Definitions

“Absence” means a day for which a child is expected to be in attendance, but is not.

“Administrative delay” means the local department is unable to complete required actions within the designated timeframe due to circumstances beyond their control.

“Administrative Disqualification Hearing” (ADH) means an impartial review by a state hearing officer of a recipient's actions involving an alleged intentional program violation for the purpose of determining if the individual did or did not commit an intentional program violation.

“Appellant” means any applicant or recipient of child care services, or child care provider who provides child care services who has requested an appeal, or on whose behalf an appeal request has been made.

“Applicant” means a person who has applied for child care services and the disposition of the application has not yet been determined.

“Application date” means the date the signed application is received by the local department. For applications received through CommonHelp after office hours, on weekends or on holidays, the application date is considered to be the next business day. Applications not received through CommonHelp must be date stamped upon receipt.

“Approved” is a case status that means case eligibility has been established.

“Approved activity” means the parent's full-time or part-time employment, the parent's search for employment, the parent's education or training leading to employment, the children's need for child protective services, or the VIEW/SNAP E&T assigned activity.

“Assets” means resources owned by a person or company regarded as having value and available to meet debts and commitments.

“Assigned activity” for VIEW means participation in, but not limited to, job search, employment (subsidized or unsubsidized), Community Work Experience, on-the-job training, job skills training, job readiness training, education, internships, or a practicum in conjunction with work. A list of core work activities is found in Chapter 1000 of the TANF manual. For SNAP E&T this means participation in a component listed on the SNAP E&T Plan of Participation.

“Authorization” means a payment for child care services has been approved and funds have been encumbered.

“Authorization status” means the stage of an authorization in the Virginia Case Management System, such as Authorized, Discontinued, Suspended or Waitlisted.

“Authorized payment” means that a family has been found eligible to receive child care services, a Purchase of Services Order has been initiated and signed by all parties, and payment may be made to the provider for child care provided.

“Background checks” means the checks for barrier crimes and offenses required under Article 5, Chapter 14.1 or Title 22.1 of the Code of Virginia ((§ 22.1-289.034) including the sworn statement or affirmation as is required under Article 3, the Criminal History Record Check, and the Central Registry Child Protective Services check.

“Case status” means the status of a case in the Virginia Case Management System, such as Approved, Pending, Denied or Closed.

“Case management services” means services that include, but are not limited to, application, assessment, eligibility determination, notices of action, consumer education and/or service planning.

“CCDF” means Child Care and Development Fund, the federal block grant for child care authorized by the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 and reauthorized by the Child Care and Development Block Grant Act of 2014.

“Certified preschools” means preschool or nursery school programs operated by private schools that are accredited by a statewide accrediting organization (or another accrediting organization recognized by the Board of Education) and are certified by the Virginia Department of Education, Office of Child Care Health and Safety.

“Child Care Communication form” means the form used to request information from or to disseminate information to child care applicants/recipients for which the Child Care Notice of Action is inappropriate.

“Child Care Program Attendance and Schedule System” (Child Care PASS/PASS) is the electronic system for recording CCSP attendance.

“Child care services” refer to the comprehensive support provided through the Child Care Subsidy Program to help eligible families access safe, affordable, and developmentally appropriate care for their children while parents participate in approved activities such as work, education, training, or job search. These services also encompass related supports such as consumer education, coordination with community resources, and activities that promote parental choice and improve the overall quality and availability of early childhood care and education.

“Child care subsidy” is the financial assistance provided directly to approved child care providers on behalf of eligible families to reduce the cost of care. The subsidy supports families in meeting their child care needs while fulfilling program requirements and participating in approved work or education-related activities.

“Child Care Subsidy Program” (CCSP) means the Department’s program that assists income eligible families with the cost of child care, including the TANF, SNAP E&T, Head Start-Wrap-Around, Fee and Transitional program categories. The program is overseen by the Department and administered by VDSS.

“Child care worker” means the worker designated by a local department of social services who provides case management services to applicants for and recipients of the Child Care Subsidy Program.

“Child day center” means a child day program offered to two or more children under the age of 13 in a facility that is not the residence of the provider or of any of the children in care or 13 or more children at any location.

“Child day program” means a regularly operating service arrangement for children where, during the absence of a parent or guardian, a person or organization has agreed to assume responsibility for the supervision, protection, and well-being of a child under the age of 13 for less than a 24-hour period.

“Child experiencing homelessness” means a child who lacks a fixed, regular, and adequate nighttime residence and includes:

1. A child who is living in a car, park, public space, abandoned building, substandard housing, bus or train station, or similar settings;
2. A child who is sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason (sometimes referred to as 2.1 doubled-up);
3. A child who is living in a motel, hotel, trailer park, or camping grounds due to lack of alternative adequate accommodations;
4. A child who is living in congregate, temporary, emergency or transitional shelters;
5. A child who is abandoned in a hospital;
6. A child who is living in a primary nighttime residence that is a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings; and
7. A child who is a migratory child as defined in §1309 of the Elementary and Secondary Education Act of 1965, P.L. 89-10 (20 USC § 6399) who qualifies as homeless because he is living in circumstances described above.

"Child protective services" (CPS) means the identification of, receipt of, and immediate response to complaints and reports of alleged child abuse or neglect for children under 18 years of age. It also includes assessment, and arranging for and providing necessary protective and rehabilitative services for a child and his family when the child has been found to have been abused or neglected or is at risk of being abused or neglected.

"Child with special needs or disability" means: (i) a child with a disability as defined in § 602 of the Individuals with Disabilities Education Act (20 USC 1401); (ii) a child who is eligible for early intervention services under part C of the Individuals with Disabilities Education Act (20 USC § 1431 et seq.); and (iii) a child who is less than 13 years of age and who is eligible for services under § 504 of the Rehabilitation Act of 1973 (29 USC 794); and (iv) a child with a documented developmental disability, intellectual disability, emotional disturbance, sensory or motor impairment, or significant chronic illness who requires special health surveillance or specialized programs, interventions, technologies, or facilities.

"Closed" is a case status that means authorization has been terminated and the case is no longer eligible to receive child care services beyond the Notice of Action period.

"CommonHelp" means the website through which applicants can screen for potential program eligibility, complete their child care application, and submit a child care application.

"Conditional eligibility" means a family may receive 90 days of child care assistance while they obtain the required documentation. This applies when a family is experiencing homelessness or when a parent or guardian is actively looking for a job at application or redetermination. At redetermination, families may qualify if they can verify job loss within the past 90 days.

"Copayment" means the amount paid to the provider by the parent to contribute toward the cost of child care. Such amount shall be established by the Department. Copayments do not include charges above the maximum reimbursable rate, or charges for registration, activities or transportation.

"Current VIEW Activity and Service Plan or SNAP E&T Plan of Participation" means the form which covers the period of child care service delivery.

"Denial" is a case action used, but not limited to, when an applicant or recipient is found ineligible, when an application is filed in error or voluntarily withdrawn by an applicant, when an applicant moves

from the locality, fails to complete the application process or submits a duplicate application prior to an eligibility determination being made.

"Department" means the Virginia Department of Education.

"Dependent care income disregard" means a certain amount of earned income used to pay for child care, which is not taken into consideration when determining eligibility for TANF benefits.

"Disqualification" means the time period that recipients of child care or provider are barred from participating in the Child Care Subsidy Program due to a finding of fraud, intentional program violation, or due to failure to repay an overpayment according to the repayment schedule entered into with the local department.

"Diversionary assistance" means a one-time lump sum payment to an individual or third party provider to prevent long-term receipt of TANF.

"Division of Early Childhood Care and Education" (DECCE) is the division within the Department of Education that oversees, administers, and/or implements all aspects of Virginia's unified early childhood care and education system, including the Child Care Subsidy Program, the monitoring and regulation of child care programs, and quality measurement and improvement.

"Early Head Start" means a family-focused child development program serving children from birth to three years of age under Section 645A of the Head Start Act.

"Education leading to employment" means the pursuit of basic remedial instruction to achieve a basic literacy level, instruction in English as a second language, preparation for GED or Adult Education, the completion of high school, associate degree or certificate, work at the college level or bachelor degree from a college or university if the course of instruction is limited to a curriculum directly related to the fulfillment of an individual's educational goal to obtain useful employment in a recognized profession or occupation.

"Eligibility period" means the minimum 12-month period an eligible recipient may receive services before eligibility is redetermined, despite any change in residency within the State or any eligible child turning 13 years of age.

"Eligible" means that the family has met all of the criteria to be approved for receipt of child care services.

"Emancipated minor" means a juvenile under the age of 18, but above the age of 16 who has been declared emancipated by a juvenile and domestic relations district court according to the Code of Virginia §§ 16.1-331-334.1.

"Ethnicity" is defined by the Department of Health and Human Services as Hispanic or non-Hispanic.

"Exit eligibility limit" means the maximum gross countable income amount that a family can receive to be considered income eligible at redetermination.

"Family" means any individual, adult or adults and children related by blood, marriage, adoption, or an expression of kinship who function as a family unit.

"Family day home" means a child day program offered in the residence of the provider or the home of any of the children in care for one through 12 children under the age of 13, exclusive of the provider's own children and any children who reside in the home, when at least one child receives care for compensation. The provider of a licensed or registered family day home shall disclose to the parents or guardians of children in their care the percentage of time per week that persons other than the provider will care for the children. Family day homes serving five through 12 children, exclusive of the provider's own children and any children who reside in the home, shall be licensed. However, no family day home shall care for more than four children under the age of two, including the provider's own children and any children who reside in the home, unless the family day home is licensed or voluntarily registered. However, a family day home where the children in care are all related to the provider by blood or marriage shall not be required to be licensed according to Code of Virginia §22.1-289.022.

"Family day system" means an organization that approves family day homes as members of its system; who refers children to available family day homes in that system; and who, through contractual arrangement, may provide central administrative functions including, but not limited to, training of operators of member homes; technical assistance and consultation to operators of member homes; inspection, supervision, monitoring, and evaluation of member homes; and referral of children to available health and social services. Currently, "Infant/Toddler Family Day Care" serving Northern Virginia is the only licensed family day system in the state.

"Federally regulated provider" means a provider regulated by the federal government, such as child care provider operated by the Department of Defense on military bases.

"Federal poverty guidelines" means the income levels by family size, determined by the U.S. Department of Health and Human Services, used as guidelines in determining at what level families in the country are living in poverty.

"Fee" means a charge for a service and may include, but is not limited to, copayments, charges above the Maximum Reimbursable Rate (MRR), or charges for registration, activities or transportation.

"Fee Child Care" means the program category that provides child care subsidy to eligible low-income, non-TANF families from the Child Care Development Fund.

"File clearance" is the process initiated by the Child Care Worker that allows VaCMS to check SPIDeR for basic information to determine if an applicant/recipient is known to any other systems which also publish to SPIDeR.

"Finding of child care fraud" means the disposition of child care fraud by a state hearing officer or a court of appropriate jurisdiction.

"Fiscal year" means the local department financial calendar that begins in June of each calendar year and runs through May of the following calendar year.

"Fraud" means the knowing employment of deception or suppression of truth in order to receive services or payments one is not entitled to receive.

"Full-time employment" means regularly scheduled activities that engage a participant in employment for 30 or more hours per week.

“Funds”, when referring to LDSS allocations, includes the child target and related funding allocated to LDSS for authorizing child care services. Localities may only authorize services up to the allocated child target. Funding is aligned to support the allocated child target.

“FUSION” means the Department of Social Services’ intra-agency website. The intranet web page for Child Care and Early Childhood Development is at: <https://fusion.dss.virginia.gov/ccecd/>.

“HB407” allows any family receiving Medicaid (MA) or the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) to be automatically considered income-eligible for the Child Care Subsidy Program (CCSP).

“Head Start” means the comprehensive federal child development programs that serve children from birth through age five, pregnant women, and their families (as established by the Head Start Act (42 USC § 9840)).

“Head Start Wrap-Around” means the program category that pays for additional hours beyond those provided by Head Start/Early Head Start in order to provide full day/full year child care services for Head Start/Early Head Start enrolled children.

“Improper payment” means any payment that should not have been made or that was made in an incorrect amount. Incorrect amounts include overpayments and underpayments. Overpayments and underpayments may include inappropriate denial of payment or services, any payment made to an ineligible party, any payments made for ineligible services, duplicate payments or payments for services not rendered.

“In loco parentis” means the adult(s) with whom a child is living who has assumed responsibility for the day-to-day care and supervision of the child.

“Income eligible” means that eligibility for child care subsidy is based on income and family size.

“In-home” means child care provided in the home of the child and parent when all the children in care reside in the home and the provider does not live in the home.

“Initial eligibility limit” means the maximum gross countable income amount that a family can receive to be considered income eligible at initial application.

“Intake” is the process of obtaining and of recording the information necessary to determine if a family is eligible to receive child care services.

“Intentional program violation” (IPV) means any action by an individual for the purpose of establishing or maintaining the family’s eligibility for assistance under the Child Care Subsidy Program or for increasing or preventing a reduction in the amount of the assistance by intentionally giving a false or misleading statement or misrepresentation, concealment or withholding of facts or any act intended to mislead, misrepresent, conceal or withhold facts or propound a falsity.

“Job search” means a structured, time-limited period during which the participant is required to search for and/or obtain employment.

“KinderBridge” is an application programming interface (API) that allows providers to connect their eligible Child Care Management System (CCMS) to the KinderConnect portal and transfer attendance data to Child Care PASS.

“KinderConnect” is the customizable provider portal for attendance tracking in Child Care PASS.

“KinderSign” is a KinderSystems app that allows families/sponsors and providers to enter child care attendance in Child Care PASS using a tablet.

“KinderSmart” is a KinderSystems app that allows families/sponsors to enter child care attendance in Child Care PASS using a smartphone.

“KinderSystems” is a suite of applications giving providers a variety of options for attendance tracking in Child Care PASS.

“Learnfare” means child care services provided to a TANF minor parent to enable them to attend school in compliance with compulsory school attendance laws.

“Level 1 Provider” means a child care provider that is not licensed by the Department or is not approved (i) by a licensed family day system, (ii) under a local ordinance in accordance with §§ 15.2-741 and 15.2-914 of the Code of Virginia, or (iii) by the federal government.

“Level 2 Provider” means a child care provider that is licensed by the Department or is approved (i) by a licensed family day system, (ii) under local ordinance in accordance with §§ 15.2-741 and 15.2-914 of the Code of Virginia, or (iii) by the federal government.

“Local Department of Social Services (LDSS)” means the department of social services of any county or city in the Commonwealth of Virginia.

“Local government-approved recreation program” means a program of recreational activities offered by local governments, staffed by local government employees, attended by school-age children, and subject to safety and supervisory standards established by local governments.

“Local ordinance-approved provider” means a child care program approved under local ordinance according to §§ 15.2-741 and 15.2-914 of the Code of Virginia. Currently, three localities (Fairfax, Alexandria, and Arlington) approve providers under local ordinance.

“Maximum Reimbursable Rate” (MRR) means the maximum rate paid for child care services through the Child Care Subsidy Program that is established by the Department and set out in the state Child Care and Development Fund plan filed with the United States Department of Health and Human Services.

“Non-fraud overpayment” means an overpayment that is the result of a local department error, or an inadvertent household or provider error.

“Notice of Action” (NOA) is the form mailed to applicant/recipients providing information related to eligibility, copayment or the amount of services authorized. "Office of Child Care Health and Safety" (OCCHS) is the office at the Virginia Department of Education that is responsible for monitoring child care programs for compliance with health and safety regulations set by the Board of Education.

"On-the-job training" means training that is provided by an employer during the routine performance of a job.

"Parent" means the adult (18 years or older) or emancipated minor, as defined in § 16.1-334 of the Code of Virginia, who acts as the primary caretaker or guardian of a child. A parent may be by blood,

marriage or adoption and also means a legal guardian, or person cohabiting with the natural or adoptive parent of a minor child, or other person standing in loco parentis.

"Participant" means a TANF or TANF-UP recipient who is participating in the VIEW program, or SNAP recipient who is participating in the SNAP E&T program.

"Part-time employment" means any regularly scheduled activity that engages an applicant/recipient in employment for a minimum of eight hours but fewer than 30 hours per week.

"Person cohabitating" means an arrangement in which two people who are not married live together in an emotional or intimate relationship on a long-term or permanent basis.

"Pending" is the case status that means that the eligibility determination is in process.

"Provider" means a person, entity, or organization providing a child care program.

"Provider portal" means the website on which providers can inquire about certain information stored in Child Care PASS relating only to them.

"Purchase of Service Order" (POSO) is the form sent to the provider and the parent to authorize the delivery of services to a recipient.

"Recipient" means a person who has been authorized to receive child care subsidy services as a parent.

"Registration" means the recording of the receipt of an application or waitlist screening in VaCMS.

"Reinstate" is a case action taken to approve a previously closed case.

"Relative provider" means a child care provider related to the parent or child by blood, marriage or adoption.

"Religiously exempt center" means a child day center operated by or conducted under the auspices of a religious institution exempt from licensure.

"Resource and referral" means services that provide assistance to parents in choosing child care; it may include assessment of the family's child care needs, collection and maintenance of information about their needs in the community and efforts to increase the supply and to improve quality of child care.

"Sanction" means to reduce or suspend a participant's TANF grant and/or SNAP allotment for noncompliance with regulations or statutes.

"Satisfactory progress" means that the participant in any educational or training activity is meeting, on a periodically measured basis of less than one year, such as a term, semester or quarter, a consistent standard of progress based on written policy developed by the educational institution or training agency.

"Screening date" means the date on which a family requests to be screened for the waitlist. This date determines a family's position on the waitlist.

"Self-employment" means a business, farming, or commercial enterprise in which the individual receives income earned by his own efforts, including his active engagement in management of property.

“Service period” means the segment of the month for which attendance may be reported and the provider may receive payment. Each month is divided into two segments, the 1st through the 15th and the 16th through the final day of the month.

“Service plan” means the written, mutually agreed upon activities and responsibilities between the local department and the parent in the provision of child care services.

“Supplemental Nutrition Assistance Program Employment and Training” (SNAP E&T) is a multi-component employment and training program that provides job search, job search training, education, training, and work experience to certain SNAP recipients.

“Suspended” is an authorization status that means that the authorization for child care is on hold for up to 90 days with payments and services discontinued at the request of the recipient because there is no need for care.

“Sworn Statement or Affirmation for Child Day Programs” (see Appendix I for form number)) means the statement signed by a child care provider disclosing whether or not he has ever been the subject of a founded case of child abuse or neglect or convicted of a crime or is the subject of pending action within Virginia or any equivalent offense outside the Commonwealth.

“System Partnering In a Demographic Repository” (SPIDeR) is a web-based system which facilitates communication between applications (systems).

“TANF assistance unit” means a household composed of an individual or individuals who meet all categorical requirements and conditions of eligibility for TANF.

“TANF-capped child” means a child who the TANF worker has determined to be ineligible for inclusion in the TANF Assistance Unit because the child was born more than 10 full months after the mother’s initial TANF payment was issued.

“TANF-UP program” means the program that provides aid to dependent children who are deprived of parental support or care by reason of the unemployment of the parents.

“Targets” means the number of funded service slots allocated to each locality for the purpose of authorizing child care services under the Child Care Subsidy Program. A target represents one slot available to serve a child. Targets are used to ensure that local authorizations align with available statewide funding. Services may only be authorized up to the locality’s allocated number of targets.

“Temporarily absent from the home” means a member of the family unit who is away from the family residence for reasons of employment, education, training, hospitalization, shared custody, military deployment, or other temporary absences and who is expected to return as a member of the household.

“Temporary Assistance for Needy Families” (TANF) means the program administered by the Virginia Department of Social Services (VDSS) through which a relative can receive monthly cash assistance for the support of eligible children.

“Temporary change” means (i) any time-limited absence from work for an employed parent due to reasons such as need to care for an immediate family member or an illness, (ii) any interruption in work for a seasonal worker who is not working between regular work seasons, (iii) any student holiday or break for a parent participating in training or education, (iv) any reduction in work, training or education

hours, as long as the parent is still working or attending training or education, and (v) any other cessation of work or training/education program that does not exceed the recipient's eligibility period.

"Training leading to employment" means the development of specific work attitudes, behaviors, or skills leading to job readiness as well as the development of specific technical or vocational skills that lead to employment in a recognized occupation and results in other than a baccalaureate or advanced degree.

"Transitional Child Care" means the Child Care Subsidy Program category which provides child care subsidy to eligible former TANF recipients after the TANF case closes.

"Unit price" means the cost of care for each child. It includes the maximum reimbursable rate specific to: provider level and type, part day or full day care, age of child, and locality.

"Unlicensed provider" means any child care provider who is not state licensed, Department of Defense approved, licensed family day system approved, local ordinance approved, voluntarily registered, religiously exempt, or a certified preschool and is not required to be regulated.

"USDA Child and Adult Care Food Program" (CACFP) means the United States Department of Agriculture program that reimburses participating, eligible child care providers for nutritious meals and snacks served to children in care.

"Vendor agreement" means the agreement between the Department and a child care provider that must be entered into and signed before child care payments under the Child Care Subsidy Program can be authorized.

"Vendor" means a legally operating child care provider who is approved by VDOE to participate in the Child Care Subsidy Program. Multiple facilities/sites operated by the same person, entity or organization are considered separate providers.

"Verifiable act of compliance" means (for VIEW) the beginning of, continuance in, or completion of an assigned activity during a VIEW sanction, as specified in the TANF Manual, Chapter 1000, Section 21, Compliance.

"Verification checklist" is the form provided to applicant/recipients detailing information the applicant/recipient must provide in order to process an application or a redetermination.

"Virginia Initiative for Education and Work" (VIEW) is the program of employment opportunities to assist individuals receiving Temporary Assistance for Needy Families, in attaining the goal of self-sufficiency as implemented in the Commonwealth of Virginia.

"Virginia Case Management System" (VaCMS) is the system of record into which all child care transactions and data related to the Child Care Subsidy Program are entered.

"Voluntarily registered family day home" means any family day home that has met the standards for voluntary registration for such homes pursuant to regulations adopted by the Board and that has obtained a certificate of registration from the Superintendent. Any person who maintains a family day home serving fewer than five children, exclusive of the provider's own children and any children who reside in the home, may apply for voluntary registration. (Code of Virginia §22.1-289.02)

“Waitlist” refers to a list of families who meet the basic eligibility criteria for the Child Care Subsidy Program but cannot be approved for services at the time of application due to a lack of available targets. Families on the waitlist may be offered services as targets becomes available and are prioritized based on program-defined criteria.

“Waitlist screening” means the process of registering and recording basic case information so that an applicant or recipient can be determined to meet the minimal eligibility requirements for receipt of child care services in order to be placed on the waitlist.

“Withdrawal” is a reason for manual case closure, such as applicants who do not wish to complete the application process.

1.2. Program Overview

A. Program Administration

The Child Care Subsidy Program (CCSP) is administered via a partnership by the Virginia Department of Education (VDOE) and the Virginia Department of Social Services (VDSS).

Under §22.1-289.03 of the *Code of Virginia*, VDOE is charged with implementing a statewide unified public-private system for early childhood care and education, overseen by the Board of Education, with the goal of ensuring that every child has the opportunity to enter Kindergarten healthy and ready to learn. VDOE serves as the Lead Agency for the Child Care and Development Block Grant (CCDBG), which sets general policy parameters and provides funding for the CCSP. As Lead Agency, VDOE is responsible for managing federal funds, determining funding and policy priorities, and managing services and supports for providers in the CCSP.

VDSS serves as a subrecipient to the Department and is contracted to administer the CCSP, including providing oversight of the case management activities at the Local Departments of Social Services and managing the contract for Virginia's enterprise case management system, VaCMS. VDSS is subject to all applicable federal, state, and local statutes, rules and regulations, administrative procedures, guides, manuals, program rules, and definitions relevant to administering the CCSP, as established by the Virginia Board of Education and the Department.

B. Program Goals

Nearly 100,000 children enter kindergarten in Virginia schools annually. Only 60% of these children start school with the key literacy, math, and socio-emotional skills that position them to be successful in school. When considering the most vulnerable young learners, the numbers are more concerning; less than half of children from economically-disadvantaged families enter school fully prepared for success — in fact, 61% of students from low-income backgrounds started the 2024-2025 school year with scores below the overall benchmark (Source: Virginia Kindergarten Readiness Program Fall 2024 VKRP Snapshot. Click [here](#) to learn more about VKRP: <https://vkrponline.org/>).

Every Virginia child, regardless of background or zip code, is capable of and deserves to enter school ready so that he or she can achieve his or her full potential. Yet the stark disparities in access to and quality of Virginia's early childhood care and education system limit opportunity for Virginia's children. There is also a strong connection between access to quality early childhood care and education and the health of our families and workforce. Having access to a reliable, safe, nurturing, and affordable early childhood learning environment is key to a parent's ability to be a productive member of the workforce.

The overarching goal of the CCSP is to improve access to high-quality affordable, child care options for eligible families, ultimately improving children's school readiness for kindergarten and enable parents to work and meet the needs of their families. Virginia will accomplish this implementing policies and processes that:

1. Are flexible and responsive to families' needs and realities;
2. Prioritize higher levels of support to families with the fewest resources; and
3. Ensure families have equal access to the broad array of child care options.

Child care services are child-centered, family-focused services that support the family goals of economic self-sufficiency and child development by providing for the supervision, protection and well-being of the child while the parent is participating in an approved activity. The purpose of the Child Care and Development Fund (CCDF) is to increase the availability, affordability, and quality of child care services.

Toward this end, guidance and service strategies are designed to meet the following goals:

1. To provide low-income and otherwise eligible families with the resources to find and afford quality child care, while ensuring subsidy dollars are provided for the neediest families.
2. To promote parental choice in the selection of child care and empower working parents to make decisions that best suits their family's needs.
3. To enhance the quality as defined by VQB5, Virginia's new statewide quality measurement and improvement system, and increase the supply of child care for all families.
4. To provide uninterrupted services to families and providers, to the extent of available funding, to support parental education, training, job search, and employment and continuity of care that minimizes disruptions to children's learning and development.

C. Families and Children to Be Served

Child care services are provided for children who are under 13 years of age and who reside with a parent or person standing in loco parentis who is working, looking for work, or attending a job training or educational program. Services may also be provided for families who are receiving child protective services, and for children up to 18 years of age who are physically or mentally incapable of caring for themselves or subject to court supervision. Child care services are not to be purchased for children who are eligible to attend public school during that portion of a day when appropriate public education is available, unless there are valid and documented reasons why the children must be out of school.

E. Legal Base

The Child Care and Development Block Grant Act of 2014 (Public Law 113-186), as implemented in regulation at 45 CFR Part 98.

Code of Virginia, Sections 22.1-289.035, 22.1-289.040, 22.1-289.046

Food Stamp Act of 1977, as amended.

1.3. Expectations for Local Departments of Social Services

A. Community Coordination

Local departments of social services (LDSS) must coordinate child care services with local child care resource and referral agencies, early childhood programs, public schools, private providers, and other community organizations involved in early childhood development. This coordination supports increased awareness of the Child Care Subsidy Program (CCSP), enhances parental choice, improves the quality and availability of child care, and strengthens local service integration.

LDSS must also engage with their designated Ready Region to align services and improve access to early childhood programs. Ready Regions coordinate quality improvement, coordinated enrollment, and access to services across all publicly funded birth-to-five programs, including the Virginia Preschool Initiative (VPI), Early Childhood Special Education, Head Start/Early Head Start, and CCSP providers. They also support private providers who choose to participate in VQB5.

Local departments should be aware of coordinated enrollment efforts in their Ready Region and be prepared to connect CCSP providers with the appropriate regional contact for support with VQB5 participation.

B. Training Requirements for Child Care Workers and Supervisors

The Virginia Administrative Code (8VAC20-790-130) requires that LDSS staff with responsibilities for implementing the Child Care Subsidy Program complete guidance training and other training as required by the Department.

Child care classroom, webinar and online courses are designed to strengthen the skills of all Child Care Workers. Additional training resources are located on FUSION and the Virginia Learning Center (VLC). The class schedules and registration are available through the VLC.

Workers should refer to FUSION for the current training path.

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Section 2.
Child Care Subsidy
Program Categories

2.1 TANF Child Care Subsidy

A. Eligibility Criteria

Child care subsidy services are made available to recipients of TANF (VIEW and non-VIEW) who meet the non-financial eligibility requirements, found in section 3.3 of this guidance. Recipients of TANF (VIEW and non-VIEW) are considered income eligible for child care subsidy and services without a determination of the family's income eligibility.

Child Care Workers must work closely with VIEW Workers to expedite approvals for these applications. LDSS must establish and implement communication strategies to ensure timely notification to Child Care Workers regarding TANF case closure and reinstatement.

B. Supporting an Approved Activity

Child care is provided to support an approved activity of a TANF recipient including:

1. Full-time and part-time employment;
2. Education or training leading to employment as long as participants show they are making satisfactory progress, to the extent of available funding;

NOTE: Payment for child care services for the attainment of post baccalaureate education or training must not be authorized in VaCMS. This includes any education or training beyond or in addition to a bachelor's degree. LDSS may choose to authorize child care for families in this circumstance only if local-only funding is used.

3. Child care subsidy may be paid for a child whose family is receiving child protective services (CPS), in cases open through the family assessment track, through the investigation track, or as CPS ongoing; or
4. Job search activities, to include networking, searching, and interviewing for a job.

Child care can be provided to support an assigned activity for VIEW participants. A current copy of the VIEW/SNAP E&T ESP Activity and Service Plan must be in the case record to document the need for care. "Current" means that the VIEW forms cover the period of child care service delivery.

EXCEPTION: If the VIEW/SNAP E&T ESP Activity and Service Plan has not been received by the time eligibility must be determined, the Child Care Worker can contact the VIEW worker to confirm the need for child care services. This contact must be documented in the case narrative section of VaCMS and may serve as documentation until the appropriate form is received. The form must be received and made a part of the case record within two weeks of the telephone verification.

TANF recipients who are exempt from VIEW participation may receive child care services to support an approved activity listed above. The services shall be authorized from the TANF Working (non-VIEW) or TANF Education/Training (non-VIEW) budget lines.

If a TANF (non-VIEW) applicant/recipient is both working and in education/training, the Child Care Worker shall authorize payment for the child care from the TANF Working budget line.

C. Dependent Care Disregard for TANF Recipients

TANF recipients may choose to take the dependent care earned income disregard for child care expenses on their TANF case. If they choose this option, child care subsidy services cannot be provided (unless their expenses incurred are above the subsidy payment rate, see exception below). The TANF recipient will be handling their child care expenses on their own with funds from their TANF assistance grant.

Exception: TANF recipients may receive subsidy and claim the TANF disregard for child care expenses incurred that are above the subsidy payment such as when a TANF/VIEW participant is required to pay any amount above the MRR charged by the provider.

D. TANF Child Care for Additional Children (non-TANF recipient children)

Child care subsidy and services are also made available for needed child care for:

1. A TANF-capped child;
2. A child who receives Supplemental Security Income (SSI), if the parent is on the TANF grant and if the child would have been in the public assistance unit were it not for the receipt of SSI;
3. Children who are not in the TANF Assistance Unit but who are financially dependent upon the parent who is in the TANF Assistance Unit; and
4. Children of a parent who is an emancipated minor in a TANF public assistance unit to enable the minor parent to attend school in compliance with compulsory school attendance laws (Learnfare).

E. VIEW Sanction

A VIEW participant who has been sanctioned may receive child care subsidy if such subsidy is necessary to maintain employment or to perform a verifiable act of compliance. The verifiable act of compliance determination is made by the VIEW worker and communicated to the Child Care Worker. The VIEW worker determines the reason for the sanction, the need for child care and when the sanction ends. Written verification of the sanction from the VIEW worker is preferable via the VIEW communication form. If a communication form is not available, the Child Care Worker must record the determination of the VIEW worker in the case narrative to substantiate provision of child care during a VIEW sanction.

F. VIEW Participant in a Non-Active Component

A VIEW participant, who has been placed in a non-active status due to a family crisis beyond his or her own control, may continue to receive child care subsidy in order to assist them in returning to an active status. This determination is made by the VIEW worker and communicated to the child care worker. The VIEW worker determines the reason for non-active status, assigns the participant to non-active status, determines the need for child care and determines the end of the non-active status. Written verification from the VIEW worker is preferable via the VIEW communication form.

If a communication form is not available, the Child Care Worker must record the determination of the VIEW worker in the case narrative to substantiate provision of child care during a VIEW non-active status. NOTE: Payment continues to be authorized using the VIEW child care budget line (BL871). See Child Care Program Budget Lines (Appendix C) and Child Care Program Cost Code Descriptions (Appendix D).

2.2 Supplemental Nutrition Assistance Program Employment and Training (SNAP E&T) Child Care

A. Eligibility Criteria

Child care subsidy and services are made available to children of parents in Virginia's SNAP E&T program if:

1. The family meets the non-financial eligibility requirements in section 3.3 of this guidance;
and
2. The family meets the income eligibility requirements in section 3.4 of this guidance.

B. Supporting Approved Activity

Child care is provided to support the parent's participation in the assigned SNAP E&T component listed on the SNAP E&T Plan of Participation. A current copy of the Plan of Participation must be in the child care file to document the need for care as determined by the SNAP E&T worker. Current means that the plan covers the period of child care service delivery.

EXCEPTION: If the appropriate Plan of Participation has not been received at the time eligibility must be determined, the Child Care Worker can contact the SNAP E&T worker to confirm the need for child care services. This contact must be documented in the case narrative section of VaCMS and may serve as documentation until the appropriate form is received. The form must be received and made a part of the case record within two weeks of the telephone verification.

2.3 TANF Transitional Child Care

A. Eligibility Criteria

Child care subsidy and services are made available to income eligible former TANF recipients for up to 12 consecutive months following TANF case closure if:

1. The family meets the non-financial eligibility requirements in section 3.3 of this guidance;
2. The TANF case is closed; and
3. The family meets the income eligibility requirements in section 3.4 of this guidance.

If a VIEW participant is determined to be ineligible for Transitional Child Care due to income exceeding 85% of state median income, the LDSS may provide child care subsidy for three months immediately following the TANF case closure. VIEW funds (budget line 872), not CCDF funds, are to be used for payment and no copayment is assessed. The recipient will not have to pay a copayment but can be required by the provider to pay any amount over the MRR. These services will not be paid for out of VaCMS.

The VIEW worker is responsible for determining if the former participant meets the VIEW requirements to receive these child care subsidies. The Child Care Worker is responsible for assuring that all other applicable child care guidance is followed, including, but not limited to non-financial eligibility requirements, provider requirements, MRR (Appendices F and G), etc.

Such authorized payments count against the 12-month transitional period if the former VIEW participant is income eligible for Transitional Child Care after this 90-day period. If the former participant is determined to be income eligible for the remainder of the 12-month transitional period, a copayment is assessed.

Eligibility for and authorization of Transitional Child Care must be evaluated in VaCMS prior to approval. Changes must be made to the appropriate sections of VaCMS and eligibility must be run under the category of Transitional child care

B. Supporting Approved Activity

Child care is provided to support an approved activity including:

1. For former recipients of TANF (VIEW or non-VIEW), full-time or part-time employment of parents.
2. For former VIEW participants, enrolled in an accredited public institution of higher education or other postsecondary school licensed or certified by the Board of Education or the State Council of Higher Education for Virginia and taking courses as part of a curriculum that leads to a postsecondary credential, such as a degree or an industry-recognized credential, certification, or license, as long as participants show they are making satisfactory progress.

Programs meeting these requirements may be found at the State Council of Higher Education for Virginia website: <https://www.schev.edu/students/applying-for-college>

Child Care Workers shall refer to the Education Research Guide available on FUSION for guidance on researching programs meeting approved requirements.

3. For former VIEW participants, training as approved and monitored by the VIEW worker as part of VIEW Transitional Employment and Training, or
4. For former recipients of TANF (VIEW or non-VIEW), job search activities, to include networking, searching, and interviewing for a job.

C. Child Care for Children Not in TANF Assistance Unit

Transitional Child Care services include needed child care for children who were not in the TANF assistance unit but who are dependent upon the parent, including:

1. TANF-capped child;
2. A child who receives Supplemental Security Income (SSI), if the parent was on the TANF grant and if the child would have been in the public assistance unit were it not for the receipt of SSI;
3. Children who were not in the TANF Assistance Unit but who are financially dependent upon the parent who was in the TANF Assistance Unit.

D. Notice of Transitional Child Care

The LDSS must inform the former TANF recipient that Transitional Child Care is available. An automated letter is generated by VaCMS and is sent by the LDSS to each parent whose TANF case is closed. The letter informs the parent of potential eligibility for Transitional child care.

E. Transitional Eligibility Period

The Transitional eligibility period for former TANF recipients starts on the first day of the month following closure of the TANF case and ends 12 months later. In situations where notification from the TANF program does not permit the timely change in program category, the case may remain in the TANF program category for one month to give the LDSS time to set up Transitional services. This does not change the transitional period. VaCMS validates that the Transitional period is not greater than 12 months from the begin date.

End of the Transitional Period

Thirty days before the end of the Transitional period, the Child Care Worker will receive an alert in VaCMS. The Child Care Worker must run eligibility no earlier than 30 days before the transitional end date under the Fee or applicable program category. If the locality has a Fee waitlist at this time, the child target and/or funds will transfer from the mandated budget line to Fee. The locality should request an increase in funds and/or targets for the Fee budget line in VaCMS via an allocation request. The request should include the following information:

- Affirmation that the case is currently in approved status,
- The budget line the authorization is transferring from, and
- The budget line the authorization is transferring to.

F. Funding

If parents meet the eligibility criteria for Transitional Child Care, transitional funding must be used except in situations where notification of the TANF case closure does not permit payment to be authorized in a timely manner. In these situations, TANF/Working funding may be used for one month to give the LDSS time to set up transitional funding. This does not change the transitional period.

If there is a delay between the last TANF payment and closure of the TANF case and the family is income eligible, authorized child care subsidy payments are made using TANF child care funds (budget line 871) until the TANF case is closed. Such authorized payments do not count against the 12-month transitional period.

G. Diversionary Assistance

Receipt of diversionary assistance does not qualify an individual for Transitional Child Care.

2.4 Head Start Wrap-Around Child Care

A. Eligibility Criteria

This program category is used for extended day and extended year child care beyond times covered by federally-funded Head Start core hours. References to Head Start include Early Head Start and home-based Head Start.

Head Start Wrap-Around child care subsidy and services are made available to families with Head Start-enrolled children to the extent of available targets/funding if:

1. The family meets the non-financial requirements in section 3.3 of this guidance; and
2. The family meets the income eligibility requirements in section 3.4 of this guidance.

B. Supporting Approved Activity

Child care is provided to support an approved activity for parents of Head Start-enrolled children including:

1. Full-time and part-time employment;
2. Education or training leading to employment as long as participants show they are making satisfactory progress. Verification of satisfactory progress could include a grade report, a letter from the education/training program indicating satisfactory progress or a progress report from the education/training program;

NOTE: Payment for child care for the attainment of post baccalaureate education or training must not be authorized in VaCMS. This includes any education or training beyond or in addition to a bachelor's degree. LDSS may choose to authorize child care for families in this circumstance only if local-only funding is used.

3. Child care subsidy may be paid for a child whose family is receiving child protective services (CPS) in cases open through the family assessment track, through the investigation track, or open as CPS ongoing; or
4. Job search activities, to include networking, searching, and interviewing for a job.

C. Verification of Enrollment

Verification of a child's enrollment in Head Start is required in order to receive Head Start Wrap-Around Child Care. Confirmation by telephone from the program in which the child is enrolled is sufficient verification. Documentation of the confirmation of enrollment must be recorded in VaCMS.

D. Authorization for Siblings

If a child in the family is enrolled in Head Start or Early Head Start, Head Start Wrap-Around funds (budget line 878) may be used to serve all eligible siblings, as long as there are sufficient targets and funds available to serve the children.

E. Authorization During the Summer

Head Start Wrap-Around funds (budget line 878) may be used for child care subsidy while the child remains actively enrolled in a Head Start or Early Head Start program, including during temporary breaks in the program year. Once the child is no longer enrolled in Head Start, targets should be transferred to the Fee Child Care budget line. The locality must request this transfer through the Allocation Request process in VACMS.

F. Waitlist

If Head Start Wrap-Around (BL878) targets are not immediately available to provide services, Head Start families may be placed on the waitlist in VaCMS. Enrollment in a Head Start program is not one of the priorities for placement on the waitlist. The Child Care Worker shall follow the waitlist screening procedures outlined in section 2.6 of this guidance.

When screening a Head Start family for placement on the waitlist, the Child Care Worker will select the eligibility program category of Head Start, if all the children on the case are enrolled in Head Start. A waitlist authorization must then be completed for the Head Start children on the case and Head Start Wrap-Around (BL878) shall be selected as the funding category. Once the waitlist authorization is completed with the Head Start funding category selected, the children will appear on the Waitlist Management screen in VaCMS with the appropriate Head Start indicator reflected. This will allow for easy identification of Head Start families that may be served if additional Head Start Wrap-Around (BL878) targets become available.

Head Start families may be served with Fee program (BL883) funds if requests for Wrap-Around care exceed the LDSS' BL878 target allocation and the LDSS does not have a waitlist for the Fee program.

2.5 Fee Child Care Program

A. Eligibility Criteria

Fee Child Care subsidy and services are made available to income-eligible families to the extent of available targets/funding if:

1. The family meets the non-financial requirements in section 3.3 of this guidance; and
2. The family meets the income eligibility requirements in section 3.4 of this guidance.

Child Care Subsidy and services are made available to children in eligible families that are residing in homeless and domestic violence shelters through the 88305-funding category, if the family is not eligible under another program category, such as TANF, Transitional or Head Start. LDSS are to submit a request in VaCMS for the target needed to provide services for children eligible to use this funding category. Services shall be made available to the extent of available targets/funding. Payment for services shall be made from the 88305-funding category for as long as the family resides in a shelter or until the next redetermination, if the family is no longer residing in a shelter.

B. Supporting Approved Activity

Child care is provided to support an approved activity including:

1. Full-time and part-time employment;
2. Education or training leading to employment as long as the student can verify and document that they are making satisfactory progress by providing, but not limited to, a progress report, a statement from the institution/program, or a grade report; and

NOTE: Payment for child care for the attainment of post baccalaureate education or training must not be authorized in VaCMS. This includes any education or training beyond or in addition to a bachelor's degree. LDSS may choose to authorize child care for families in this circumstance only if local-only funding is used.

3. Child care subsidy may be paid for children whose family is receiving Child Protective Services (CPS) in cases open through the family assessment track, through the investigation track, or as CPS ongoing; or
4. Job search activities, to include networking, searching, and interviewing for a job.

C. Child Care for Children in Foster Care

Child care for children in foster care is supported through distinct foster care funding sources. Children in foster care are not eligible for child care services paid for by the Child Care Subsidy Program.

EXCEPTION: If a LDSS maintains custody of a child, but the child is in the physical custody of his parent(s) and the parent(s) needs child care in order to maintain employment or to attend an approved education/ training program, the parent(s) may apply for Fee Child Care in the locality in which they reside. If a person standing in loco parentis was the primary caretaker prior to a child's placement in foster care, that person may apply for child care assistance when the child is returned to the home.

If a parent is an emancipated minor and has a child who receives TANF benefits, application can be made for TANF child care funds. If the child does not receive TANF benefits, application can be made for Fee Child Care.

If the LDSS has a Fee Child Care waitlist, funding for child care may be available through the Children's Services Act funding.

2.6 Waitlist

Overview

When child targets are not available to serve an eligible family, the family should be placed on the waitlist. The purpose of the waitlist is to capture when the demand for care exceeds the available supply of child targets and funding.

Assignment to the waitlist begins with an application for child care assistance or the submission of a Waitlist Screening form. Applications may be submitted through CommonHelp or by hard copy. The Waitlist Screening form is available for download from FUSION at:

<https://fusion.dss.virginia.gov/ccecd/CCSP-Home/Subsidy-Program/Forms>.

A signature is required to process either the application or Waitlist Screening form. An electronic signature is acceptable for applications, which come through CommonHelp. This electronic signature indicates that the applicant gives permission for placement on the waitlist if there are insufficient targets/funds to approve a case.

A. Screening

If child targets are not immediately available to provide services, the family must be screened in VaCMS prior to being placed on the waitlist. Verification of eligibility criteria is not required to screen a family for the waitlist. The family's declaration regarding eligibility criteria, such as, but not limited to, employment, income, and ages of children, is acceptable.

When an application is submitted and the Child Care Worker determines there are no child targets to serve the family who would otherwise be eligible, the family is placed on the waitlist. The application is registered in VaCMS and processed using the "Waitlist" case action. Once the waitlist screening is completed in VaCMS, the application will be denied due to lack of funds, with the appropriate NOA generated and mailed to the applicant.

The screening process to assign an applicant to the waitlist does not have to be face-to-face. Contact must be made with the applicant/recipient if the screening information is incomplete.

When a Waitlist Screening Form is being registered instead of an application, Child Care Workers must indicate that a waitlist screening is being registered rather than a complete application. Once the waitlist screening is completed in VaCMS, the appropriate Client Communication Form is generated and mailed to the applicant.

When the Child Care Worker selects the case action of "Waitlist", VaCMS queues a shortened set of screens to collect the minimum amount of information necessary to determine if the family qualifies to be placed on the waitlist.

NOTE: The Primary Written Language field on the HH Info (Household Information) screen determines the language in which forms are generated. This field is required when an

application is first registered in VaCMS and defaults to English unless updated manually. For applications submitted through the CommonHelp portal, the language is set automatically based on the applicant's selection. For paper applications entered by the locality, the appropriate language must be selected during registration if it differs from English. This field is not included in the Waitlist case action flow; to make changes, workers must complete an Intake case action.

Once a request is registered as a waitlist screening, evaluation for the waitlist occurs. If the family is potentially eligible, the Child Care Worker will certify the waitlist eligibility results. VaCMS will create a Waitlist authorization for each eligible child on the case. The authorization created by VaCMS will default to five full days of care per week unless the Child Care Worker selects part days of care needed during the Waitlist screening. The Waitlist authorizations can be edited as needed. In addition, the Child Care Worker can update the waitlist case details as needed by entering the case number on the Case Action screen and selecting "Continue with previously selected action."

Once a family is placed on the waitlist, VaCMS calculates the anticipated cost of care for the family to receive services through the end of the current fiscal year. Therefore, the LDSS can determine how many families can be served from the waitlist at any given time. VaCMS accurately reflects the availability of child targets and funds available to serve families on the waitlist in real time.

At the top of the Waitlist Management Information screen, local agencies can find key data points that help determine how many families may be served from the waitlist at any given time. This section provides a snapshot of current funding, capacity, and waitlist status.

KEY DATA FIELDS EXPLAINED

- **As of Date:** Indicates the date the data was last updated.
Available Funds (Codes 878 & 883): Shows how much funding is currently available under each funding source. Additional funding may be requested to support *available* targets at any time.
- **Total Waitlist Families / Children:** Displays the number of families and children currently on the waitlist.
- **FY Estimated Number of Families That Can Be Authorized:** Projects how many families can *potentially* be authorized based on available funds, provided sufficient targets are available.
- **Approved Child Target / Count of Children That Can Be Removed from the Waitlist:** Displays the number of children the locality is approved to serve and how many could be pulled from the waitlist accordingly.

This information helps local departments determine whether they have the target/budget capacity to authorize additional families from the waitlist into child care assistance.

B. Placement on Waitlist

If the waitlist screening indicates the family may be eligible for assistance, they are placed on the waitlist unless the family declines placement. The waitlist screening process must be used for all families placed on the waitlist.

Placement on the waitlist should be limited to families that are seeking assistance but for whom there are not enough child targets to serve them. Delay or failure to select an approved provider would not be an appropriate reason for placement on a waitlist.

C. Priority on the Waitlist

Families are placed on the waitlist by priority and screening/application date. There are two tiers of priority groups, which will be grouped and placed at the beginning of the waitlist. Priority is assigned at the family level. The highest priority should be applied to each child and the family will be placed on the waitlist as a whole under the priority group. Within the priority group, families will be listed in order based on their application/screening date.

1. **Tier 1** includes families with at least one child ages 0-5 who is not yet in kindergarten. These families should be placed at the top of the waitlist and ordered based on their application/screening date within this group.

Note: A Task/Reminder will be generated to alert workers that a child in the household no longer meets the criteria for the Tier 1 Group "Child ages 0-5 and not yet in KG." This batch process will run nightly, and Child Care Workers must review the alert for accuracy and update the priority tier group in VaCMS under authorization management accordingly. **2. Tier 2** includes families that do not fall into Tier 1 but meet specific criteria. These families are placed on the waitlist following Tier 1 families, ordered by their application/screening date. Tier 2 families include:

- A family unit with a child who has special needs for whom services are requested.
- A family with a child experiencing homelessness.
- A family involved in CPS or Foster Care Prevention.
- A family that includes a minor parent under the age of 18 and in high school, whose child will be receiving subsidy services.
- An emancipated teen parent younger than 18 and in high school.
- A case discontinued due to lack of funds.

Note that in order to accurately capture the 12-month Cost of Care displayed on the Waitlist Management Information screen, the Special Needs information must be entered on the General Authorization Information Summary screen during the Authorization driver flow. The special needs tiered priority can be applied to all children requesting care in the family, but the rate should only be applied to the child(ren) identified as having special needs.

D. Updating Waitlist

Each LDSS must update its Waitlist at least quarterly within the months of January, April, July, and October. The LDSS must obtain updated family information to assess the family's continued interest in being on the Waitlist, their potential eligibility, as well as their current address and telephone number. VaCMS will generate the Waitlist Update form (032-12-0132-00-eng (11/23)) 45 days prior to the end of the quarterly update month. The Waitlist Update form will be centrally printed unless the LDSS chooses to print the form locally.

The family must complete the update and sign and return the form before the end of the update month. The LDSS is to use this opportunity to remove families who no longer need child care, do not meet eligibility requirements, or do not respond to the LDSS request. Families are not required to submit eligibility verification documents to remain on the waitlist. Families with a waitlist screening date less than 90 days from the current update month will have their information updated during the next quarterly update.

Updated family information may be obtained by the Waitlist Update form, letter, telephone call, email, or in person. The LDSS may not require a face-to-face interview to update a family's waitlist status. Once the updated information is received, the Child Care Worker must make any changes to the family's waitlist screening information and enter the waitlist Update date on the Waitlist Management Details screen in VaCMS.

Completing the update will maintain the family's original screening date on the waitlist. When updating the waitlist, the LDSS shall remove those families who (i) do not respond to the request for updated information; (ii) do not meet eligibility requirements; or (iii) are no longer in need of child care services. A Waitlist Report is available at any time for Child Care Workers to see families who have been on the Waitlist for 90 days or more. The Waitlist Details Report is also available on-demand to assist the LDSS in managing and updating its waitlist.

E. Notification after Waitlist Screening

A NOA or Waitlist Communication Form must be sent to the applicant once assignment to the waitlist is determined in the following circumstances:

- 1. An application was received and there are no child targets available to serve the family.** The application should be processed, denied, and an NOA sent to the family. The family will be added to the waitlist. The family will be advised to contact the Child Care Worker listed on the NOA if they do not want to be placed on the waitlist.
- 2. A family is found ineligible after the Waitlist Screening form is processed.** A NOA should be sent informing the family they are not eligible for assistance.
- 3. A family is placed on the waitlist after the Waitlist Screening form is processed.** A Waitlist Communication Form should be sent to inform the family they have been added to the Waitlist. The Waitlist Communication Form provides the family the opportunity to decline their placement on the waitlist.

F. Family's Right to Apply for Services

Families must be advised that they have the right to apply for services rather than be screened for the waitlist. If they apply and are determined to be eligible for child care assistance but child targets are not available to serve them immediately, they are to be placed on the waitlist. The Child Care Notice of Action to deny the application must advise the applicant that they are being placed on the waitlist and why. Families must be given the opportunity to decline placement on the waitlist.

G. Serving Families from the Waitlist

When the LDSS determines that child targets and funds are available to serve a family on the waitlist, the local department shall contact the family either by phone, mail, or email to request that a new application for services be submitted. The locality should make every effort to contact families using multiple communication methods to maximize the likelihood of response and promote faster placement into available slots.

If there are sufficient targets to serve some—but not all—children on a case that is up for consideration, the locality may submit an Allocation Request in VaCMS including the case number and justification of the number of targets. VDOE/VDSS will continue to closely monitor targets and reserve the right to approve or deny a locality’s target request based on budget considerations.

If the request is denied, the locality must offer the family the opportunity to begin services for the child(ren) of their choice based on the number of targets available.

- If the family declines partial service (i.e., does not wish to enroll some, but not all, eligible children), the family must remain at their current position on the waitlist until enough targets are available to serve all eligible children.
- The locality may then proceed to the next family on the waitlist. However, depending on the number of targets available and the size of that family, the next family may also only be eligible for partial service. In these cases, the same process applies: the family may accept services for some children or choose to wait until all eligible children can be served.

The LDSS should allow 10 calendar days from the date of the request for the family to respond to the request confirming interest when contact is made by phone, email, or text message. In rare cases where postal mail is the only available contact method, the locality should allow 20 calendar days from the date of the request for the family to respond to allow for delivery time. In such instances, letters should instruct families to respond by calling or emailing, rather than replying by mail.

A new application may be submitted through CommonHelp or sent to the locality via email, fax, or scanned document. Upon receipt, the application must be associated with the existing pending waitlist case to ensure accurate processing and tracking. If the family does not respond to the request and no application is received, the LDSS should remove the family from the Waitlist and proceed to contact the next family on the list.

[Intake Process](#)

Case managers should refer to Sections 3.2B (Application Delays) and 3.2D (Intake) to ensure proper completion of the intake process.

H. Reinstating Families to the Waitlist

A family should be reinstated on the waitlist with their original screening date if the family was removed due to a worker’s administrative error, such as misinterpreting eligibility or overlooking an on-time response. Additionally, case workers use their discretion to reinstate families on a case-by-case basis if there is a reasonable justification that the family did not respond within the requested window. Reasonable justifications include mail delivery issues, language accessibility barriers, or technology issues. Workers should document the reason for reinstatement as appropriate.

If reinstatement is warranted, the caseworker must:

1. Re-register the application in VaCMS using the original waitlist screening date to preserve the family's original placement on the waitlist.
 - Important: Select “Yes” for Waitlist Screening at the end of the registration process to ensure the case is processed as a screening, not a full application. This distinction is important for system tracking and reporting.
2. Associate the re-registered application to the previously denied waitlist case.
3. Proceed to data collection and enter the case action of Waitlist.
4. Document the rationale for reinstatement in the case narrative, clearly stating that the removal was due to worker error OR valid family circumstances (e.g., changed contact information, mail delivery issues). Be sure to include any available verification or context.
5. Additional considerations for awareness:
 - Waitlist screenings do not display on the Pending Point In Time (PPIT) report.
 - If a case is re-registered as a full application using the original application date, it will appear as overdue on the PPIT report until resolved. c. This may impact local performance reporting, so staff should take care to follow the waitlist screening pathway when reinstating families in these scenarios.

I. Waitlist Case Transfers

If a waitlist case is pending and the applicant moves to a new locality, the Child Care Worker must transfer the case to the locality where the applicant now resides. The transferring locality is responsible for verifying the accuracy of the case and waitlist authorizations before completing the transfer.

A Notice of Transfer form is not required for pending waitlist cases. Upon receiving the case, the new locality must conduct a desk review within five working days to ensure the family is placed on the waitlist using their original screening date and that waitlist authorizations reflect the new locality.

J. General Information

There is no estimated time frame for how long a family may remain on a waitlist due to the many variables that impact funding and targets. Families should not be given any specific timeline for when they could potentially be served or how long the waitlist might be, whether in months or years.

Localities may, however, provide concrete data, such as the number of available slots (targets) and the number of families on the waitlist. Additionally, localities can explain general guidance, such as 12-month eligibility.

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Section 3. Case Management

3.1. Confidentiality

A. Legal Basis

Federal Privacy Act of 1974

The Federal Privacy Act requires that applicant/recipient information be kept confidential. The LDSS may not release information about the applicant/recipient without their written consent except for purposes directly connected with the administration of social service programs or by court order.

Information from all federal agencies must be kept confidential. LDSS may not release information to any outside source, except as required for purposes of program administration.

Virginia Freedom of Information Act

The legal base for this section of guidance is § 22.1-289.06 of the Code of Virginia, the Virginia Freedom of Information Act (§ 2.2-3700 et seq. of the Code of Virginia), the Government Data Collection and Dissemination Practices Act (§ 2.2-3800 of the Code of Virginia, § 32.1-127.1:03 of the Code of Virginia and by regulation (22VAC40-910) promulgated by the State Board of Social Services.

B. Release of Information to a Non-Government Agency

The Confidentiality Form (032-01-0040-03-eng) must be completed by the applicant/recipient prior to the release of case information to an outside agency other than an agency of federal, state, or local government.

C. Written Permission for Release of Information

With certain exceptions, the applicant/recipient must give written permission before information may be obtained from other sources or given to an individual or agency. The Consent to Exchange Information (032-01-0005-02-eng) should be used.

NOTE: The title of this form is “Authorization to Use and Exchange Information” when it is accessed under forms by a link on FUSION.

Local, state, or federal law enforcement officials may request information to investigate an alleged violation of the child care program by submitting a written request to the LDSS. The written request must include:

1. The identity of the individual requesting the information and the authority to do so;
2. The violation being investigated; and
3. The identity of the person on whom the information is requested.

D. Release of Information without Written Permission

Based on the applicant/recipient’s signature on the Child Care Application and Redetermination form, information related to the child care case may be given out or obtained without separate permission from the applicant/recipient in order to carry out the administration of the program.

If the release of information does not involve program administration, no information about a person should be released by Child Care Workers without written consent of the applicant/recipient. This includes information about applicants and current and former recipients and information regarding individuals with no affiliation with the program.

E. Applicant/Recipient Access to Records

Applicants/recipients, or their representatives, may read information about themselves contained in their own case records except for behavioral health reports when the physician who wrote them recommends against it.

F. Penalty for the Unauthorized Release of Confidential Information

The disclosure, directly or indirectly, of confidential information contained in a case record by any officer, agency, or employee of the LDSS will be considered a Class 1 misdemeanor.

G. Ownership of Records

All information contained in the LDSS' records is the property of the LDSS. Employees of the LDSS must protect and preserve such information from dissemination except as necessary for the administration of the program.

Original records are not to be removed from the premises by individuals other than authorized staff of the state or the LDSS, except by court order. The LDSS may destroy records pursuant to record retention schedules (Library of Virginia Records Management Locality General Schedules).

H. Sending Confidential Information through E-mail

Confidential information is not to be sent through email unless it is encrypted. This includes applicant/recipient specific information. It is never acceptable to send applicant/recipient information such as, but not limited to, name, address, or social security number, through e-mail unless it is encrypted.

All e-mail communication about applicant/recipients must use identifiers such as case numbers and/or client IDs. LDSS should work with local security personnel and VDSS Central Office security personnel to resolve any encryption or security issues.

I. Non-Discrimination

LDSS must ensure that eligibility for and authorization of child care services are determined without discrimination.

J. Correcting Inaccurate Information

LDSS must provide means for inaccurate information to be corrected.

K. Inquiring Applicant/Recipient Information in VaCMS

Child Care Workers may perform client inquiries only if such inquiries are directly related to case management.

3.2. Application and Assessment

A. Application Form

Parents who request child care services must sign a Child Care Subsidy Service Application and Redetermination form (Child Care Application) and cooperate with an assessment by the LDSS. The date of application is the date on which the signed application is received by the LDSS. The date of application must be entered in VaCMS when registering the application. For applications submitted through CommonHelp, an electronic signature is acceptable. Applications submitted through CommonHelp or VIEW referral applications received in My Workspace do not need to be signed by the child care worker or scanned into DMIS.

If an application submitted through CommonHelp is received outside of business hours, the date of receipt is the next business day. If the application is not received through CommonHelp, the LDSS must date stamp the application.

When a child resides with both parents during some portion of the month through a shared-custody arrangement, either formal or informal, and both parents need child care assistance, each parent must apply for the period of time the child resides in his/her home.

B. Submission and Processing of Application

The Child Care Application may be submitted in person at a local office, by mail, by fax, or electronically through CommonHelp. If the applicant submits a duplicate application, the second application must be denied and a NOA sent to that effect. If an applicant submits an application to the wrong LDSS, a denial NOA must be sent informing the applicant to which LDSS they must apply.

TANF/VIEW Child Care Referral Applications

A child care referral application can also be created through an approved TANF/VIEW case. Once a TANF/VIEW activity is selected in the ESP module, the TANF/VIEW worker can select if a Child Care referral shall be created. The Child Care referral date shall be the same date as the APR (Agreement of Personal Responsibility) date. A Child Care referral application will not be created if there is an existing Child Care application or an approved Child Care case.

Applicant Status Changes During Intake

If there is a change in the applicant's status before the application has been processed that would affect their program category eligibility, no new application is needed for the change in program category. If the child care application is pending, and the applicant moves prior to the application being processed, the Child Care Worker must complete the application in the locality in which the application originated and then transfer the case to the client's new locality of residence, once completed.

Processing Timeline

The application must be acted on by the LDSS within 30 calendar days of receipt. This 30-day processing period covers the day following the date of receipt to the date eligibility is determined. Once eligibility is

determined, a NOA must be sent to the applicant to inform them if the application has been approved or denied. When the 30th calendar day following receipt of the application falls on a weekend or holiday, the Child Care Worker must provide a decision on the application on the last working day prior to the 30th day. If the applicant fails to complete their initial interview and does not contact the agency to request another interview the application must be denied on the 30th day. The applicant must be provided the full 30 days to complete an interview and/or provide requested verifications to determine eligibility.

If an initial interview is not conducted and an “Interview Held Date” is not entered in VaCMS, then during the nightly batch process on the 30th day after the application date, VaCMS will automatically deny the application.

The processing of an application may go beyond the 30-day processing standard only if an applicant contacts the agency prior to the 30th day and one of the exceptions listed below applies:

1. The applicant has limitations that hinder them from securing verifications. In this instance, the Child Care Worker must assist the applicant in securing the required verifications. The beginning date of eligibility will be the date of approval of the application.
2. If a LDSS administrative delay occurs, and the applicant was otherwise eligible, the beginning date of eligibility will be no later than the 30th calendar day following the application date.

An application may exceed 30 days due to circumstances beyond the control of the applicant. The reason for the delay and the steps taken by parent/Child Care Worker must be documented on the Program Request screen in VaCMS to support the decision to extend pending past 30 days, but not beyond 60 days after the application receipt date. Examples of circumstances beyond their control may include a medical emergency, weather event, or the selected provider will not have an opening. If a parent has identified a provider and there is reason to believe the child will be able to start with the provider within 60 days of the application receipt date, it would be acceptable to use ‘client delay’ to extend application processing beyond 30 days.

An “Interview Held Date” must be entered in VaCMS to allow an application to go beyond the 30-day processing standard.

If the applicant fails to complete their initial interview and contacts the LDSS prior to the 30th day, a rescheduled appointment shall be offered as soon as possible. If the rescheduled appointment requires processing to go beyond the 30-day processing standard, the Child Care Worker may select client delay as the reason for the delay in processing.

Documentation and Notification Requirements

If action is not taken within the 30-day processing period, the Child Care Worker must document the case record in VaCMS to explain the cause for delay. The applicant must be sent a NOA on the 30th day to notify them of the status of their application, the reason for delay, and their right to appeal.

The applicant must be provided with a checklist of required verifications needed to process the application. If required verifications are not received by the 30th day, and the applicant has been

provided a minimum of 10 days to provide all required verifications, the Child Care Worker must take action to deny the application and certify the eligibility results on the 30th day.

At no time should the application remain pending beyond 60 days after the application receipt date.

If the application was approved, the NOA must indicate the date the application was approved. If the application is denied, the NOA must indicate the reason for denial. Reasons for denying an application include:

1. Applicant under the age of 18 and not emancipated;
2. Applied in wrong locality;
3. Assets/resources exceed \$1million in value;
4. Applicant deceased;
5. Discontinuation of employment or other approved or assigned activity;
6. Does not meet financial eligibility requirements;
7. Duplicate application;
8. Failed to complete application process;
9. Failure to provide information needed to determine eligibility;
10. Failure to make satisfactory arrangements to pay back fees owed when the family was eligible for CCSP;
11. Failure to respond to agency request;
12. Failure to select an approved provider;
13. Filed in error;
14. Fraud or intentional program violation;
15. Lack of target/funds;
16. Moved from locality;
17. Need for Child Care no longer exists;
18. Non-compliance with the repayment agreement;
19. No eligible children in the household;
20. Parent voluntarily withdrew application; and
21. Unable to locate.

C. Intake

Intake is the process of obtaining and recording the information necessary to determine if a family is eligible to be authorized for receipt of child care services. Receipt of required verification and documentation must be recorded in VaCMS.

An interview with the applicant is required at the time of initial application and may be completed in-person or by telephone but shall not unduly disrupt an applicant's work or school schedule. The interview shall be used to obtain verification and to secure information necessary to complete the application/redetermination process. During the interview, the Child Care Application must be reviewed with the applicant. A copy of the signature page and the Responsibilities, Change Reporting, and Penalties section of the application must be given to the recipient.

The Child Care Application must be reviewed with the applicant to ensure they understand their responsibilities and the changes that must be reported. The Child Care Worker must sign the Child Care

Application and notate the applicant's understanding during the telephone interview. An electronic signature of the Child Care Worker is acceptable. The signed original Child Care Application must be scanned into DMIS. Applications submitted through CommonHelp or VIEW referral applications received in My Workspace do not need to be signed or scanned into DMIS.

The Child Care Application may be generated within VaCMS by transmitting from a button on the eligibility screen after running eligibility and certifying the results.

At the initial interview, the Child Care Worker must review the Child Care Application with the applicant to confirm the correctness of the information. The Child Care Worker must review household members' relationships to determine who is to be included in the family unit. Information must be revised as necessary during this initial assessment process. Any changes made to the Child Care Application by the Child Care Worker must be discussed with the applicant, be distinguishable, include the date the change was made and the applicant's understanding notated.

At the end of the Intake process, information has been gathered and verified, and eligibility can be determined. Information recorded during the intake process will include, but is not limited to:

1. Financial information;
2. Non-financial information;
3. Residence/Address;
4. Household status;
5. Alias names;
6. Education;
7. Immunizations; and
8. Other state benefits.

LDSS must explain to applicants for child care:

1. How eligibility is determined;
2. The importance of providing accurate and thorough information;
3. The rights and responsibilities of applicants;
4. The reporting requirements;
5. The characteristics of a quality child care program and the resources available to help parents make informed decisions about child care services;
6. The resources available on the child care website at: www.childcare.virginia.gov
7. Information about the child care provider selected by the parent, including health and safety requirements met by the provider, any licensing requirements met by the provider, date the provider was last inspected, any history of violations of these requirements, and any voluntary quality standards met by the provider. This information may be obtained at: www.childcare.virginia.gov; and
8. Child Care PASS operations, to include the parent's responsibility to record their child's attendance and absent days.

D. Homeless Families Conditional Approval

Families of a child experiencing homelessness that cannot provide the required documentation needed to determine eligibility at the time of application may be conditionally approved for services.

The family shall be given 90 days to provide the documentation needed to determine eligibility. The Child Care Worker shall assist the family in obtaining the required documentation during the conditional approval period. Such documentation may include, but is not limited to, verification of immunizations, child(ren)'s citizenship, income, etc. The Child Care Worker must select "Not Verified" as the verification source in VaCMS.

When families of a child experiencing homelessness are conditionally approved for services, a Child Care Verification Checklist must be sent with the Notice of Action. The Child Care Worker will receive a task/reminder in VaCMS on the 45th day if the verification source has not been updated in VaCMS.

Once all required documentation is received, the Child Care Worker must complete an eligibility determination in VaCMS to determine if the family remains eligible and continue eligibility for the remainder of that 12-month period. The 90 days of conditional eligibility does not extend the recipient's eligibility period.

If the required documentation is not received by the 90th day, the Child Care Worker must take action to close the case and discontinue the authorization; however, payment for services received during the 90-day period is not considered an error or improper payment.

E. Job Search Conditional Approval

[Overview](#)

The Child Care Subsidy Program (CCSP) allows parents and guardians to receive child care assistance for up to 90 days while actively seeking employment. In extraordinary circumstances, families may be approved for one 90-day extension.

The job search requirements outlined below apply to all applicants and their applicable household members who self-attest to job search as their sole activity. Applicants participating in an approved activity in addition to job search are not subject to the 90-day limit.

[Eligibility and Approval](#)

Applicants who report job search as their sole activity at intake will receive conditional approval for child care assistance for a period of 90 days. Conditional approval enables families to secure employment and/or enroll in an education or training program while receiving subsidized child care services, provided they have not received services under the job search activity within 12 months prior to the current eligibility determination. The 12-month period begins on the date the case is approved for child care services under job search as the sole activity.

- **Example:** A family is approved for 90 days of job search on July 1, 2025. The case closes effective October 2025 due to failure to verify employment or participation in an approved education or training activity. Since the 12-month period began on July 1, 2025, this family would not be eligible to receive child care services under job search as the only activity again until July 1, 2026, unless they qualify under a different approved activity.

Localities must evaluate the reason for case closure along with the case approval effective date by reviewing the EDG (Eligibility Determination Group) Summary page in VaCMS and/or the case approval Notice of Action. The case approval date is used to determine the start of the 12-month period during which the family is not eligible to receive services based solely on job search.

Similarly, at redetermination, families may receive a 90-day conditional approval if they report job search as the only activity and can verify that job loss occurred within the past 90 days. To qualify, the job loss must have occurred within 90 days prior to the first day of the redetermination month. Case managers must verify and document the customer's employment termination date and assess their eligibility for the 90-day conditional approval during redetermination.

If, at redetermination, the customer reports a loss of employment that occurred more than 90 days prior to the first day of the redetermination month and the family has not previously participated in conditionally approved job search within the past 12 months, the local department may place the family directly into a 90-day conditional approval for job search rather than ending services, provided all other eligibility requirements are met.

To use this approach, the following conditions must apply:

- The family meets all current eligibility requirements (e.g., income, residency, and household composition).
- There is no waitlist in the locality, or the family is in a priority group for which all families have been served from the waitlist in the locality.

This process may be used to prevent unnecessary breaks in child care and reduce administrative burden for families. Local departments must ensure that eligibility verification and documentation of the customer's participation in job search are completed and recorded at the time the conditional approval is established.

If a waitlist exists in the locality or eligibility cannot be fully verified, standard procedures for waitlist placement or conditional approval must be followed.

The 90-day period for the conditionally approved case will be determined based on the scenarios outlined below. The start date of this 90-day period will be displayed on the Notice of Action (NOA):

- **Intake Case Action:** The 90-day period starts from the case certification date in intake.

- **Redetermination:** The 90-day period starts from the beginning of the next 12-month eligibility period, which is the day after the case redetermination due date.
- **Extension:** The 90-day period for the extension will begin the day after the initial 90-day period ends.

A Request for Verification form is automatically generated upon approval to notify the family of applicable verifications to submit before the 90 days. The applicant must submit proof of employment, education, or training enrollment, such as pay stubs, employer statements, self-employment records, or school/training schedules.

VaCMS will automatically track and alert caseworkers 45 days before the 90-day period expires if no employment or education information has been entered. At this time, a Communication Form will be automatically generated and mailed to the family to notify them of the approaching deadline and remind them to provide verification or request an extension. If an extension is not requested, failure to secure employment and/or enroll in an education or training program by the end of the 90 days will result in case closure with a 30-day closure notice.

Extensions

If families require additional time beyond the initial 90-day period, they may qualify for a job search extension under “extraordinary circumstances,” which generally include:

1. Delays in processing on the part of the local department for any reason (agency delay);
2. An unforeseeable challenge that limited the client’s ability to pursue employment or accept an offer of employment (client delay);
3. Client needs additional time to complete their employment search or secure child care to support their employment (client delay).

Extension requests must include a reason from the drop-down menu in VaCMS. All client-related delays must be verified. Local agencies are responsible for requesting and reviewing appropriate documentation to determine whether the delay is valid.

Further details on extension reasons and acceptable forms of verification are provided below in Table 1. This list is not exhaustive but is intended to assist local departments in evaluating whether an extension is reasonable and whether the request for additional time is valid based on available documentation.

NOTE: While agency delays can justify an extension (up to 90 days), it's important to note that the full extension period will not always be necessary. Localities should aim to act on the case(s) as promptly as possible once the issue is resolved.

Table 1: Summary of Job Search Conditional Approval Extension Reasons in VaCMS and Acceptable Forms of Verification

Delay Reason		Summary	Examples of Acceptable Forms of Verification
Agency Delay	System Delay	A technical issue within VaCMS, SPIDeR, or other related systems prevented the agency from processing the necessary information.	Verification not required
	Agency Outage	The local office experienced an outage, such as loss of power, internet, or other critical resources, which delayed case processing.	
	Natural Disaster	A natural disaster (e.g., hurricane, flood, wildfire) disrupted agency operations, causing delays in case processing or communication with applicants.	
	Administrative Delay	Internal agency processes, such as staff shortages, high workload, or procedural backlogs, resulted in a delay in processing the applicant's information or requests.	
Client Delay	Provider-Related Issue	Applicant is changing caregivers to facilitate employment opportunity, is on wait list or needs additional time to complete enrollment	<ul style="list-style-type: none"> • Email or note from provider • Documented summary of phone call
	Limited in Securing Verifications	Delay in obtaining employment records, proof of school enrollment, etc.	<ul style="list-style-type: none"> • Copies of outreach attempts (e.g., emails, request letters) • Statement from employer/school
	Completing Employment Process	Applicant is in the final stages of the job search process and needs additional time to complete—i.e., is actively interviewing, awaiting a potential offer, has offer contingent on a reference check, background check, or drug screen	<ul style="list-style-type: none"> • Employer letter or email confirming pending employment documentation or start date
	Medical Emergency	Applicant or household member experienced a serious illness or hospitalization	<ul style="list-style-type: none"> • Doctor's note, hospital discharge papers, or other medical documentation
	Weather Event	Community and/or household experienced a natural disaster (e.g., fire, flood, hurricane) that halted search for work	<ul style="list-style-type: none"> • Emergency services documentation • Insurance claim • Statement from disaster relief

Families granted a 90-day extension will receive another system-generated alert 45 days before the end of the extension period. The extended 90 days will automatically be added to the end date of the first 90-day period. At this time, a Communication Form will automatically be generated and mailed to the family to notify them of the approaching deadline and remind them to provide verification.

Failure to secure employment and/or enroll in an education or training program by the end of the extension will result in case closure with a 30-day closure notice.

Closure and Notification

VaCMS will automatically close cases on the 90th day if no employment, education, or valid delay has been entered. A NOA will be generated with a 30-day closure stating: "Failure to secure employment or enroll in an education or training program within the required deadline."

For cases receiving an extension, an additional 90 days is granted, after which auto-closure will occur under the same conditions. The system will auto-discontinue the authorization to align with the case closure date and process these updates in the overnight batch.

F. Assessment of Needs

The primary purpose of the family assessment at application and redetermination is to evaluate the family's current need for child care and ensure the services offered support the well-being, stability, and growth of the child(ren). This assessment must be documented in the Service Plan in VaCMS.

Assessments should be conducted using a strength-based approach that centers the family's goals, priorities, and existing support systems. The Child Care Worker's role is to listen actively, identify child care needs, and partner with the family to build a plan that promotes stability and long-term success.

Key Areas of Focus During the Assessment

- Identifying the best-fit child care setting that supports the child's developmental, emotional, and educational needs, with a focus on continuity of care.
- Understanding the family's work, training, or educational schedules to ensure child care aligns with their daily routines and responsibilities.
- Addressing barriers that may prevent the family from accessing or maintaining child care, such as transportation, documentation, or provider availability.
- Supporting family relationships, including engaging non-custodial parents and extended family members when appropriate.
- Promoting safety and stability in the child's environment, recognizing their impact on child development and well-being.

Strength-Based Engagement to Support Self-Sufficiency

While addressing immediate child care needs, Child Care Workers should also help families recognize their own strengths and connect them with tools to move toward greater independence. Conversations may include:

- Navigating available child care options and understanding program quality.
- Exploring additional supports, including Head Start, Virginia Preschool Initiative, or other local preschool programs.
- Informing families of the broader range of services offered by the LDSS and other community resources.
- Encouraging participation in family-centered initiatives, such as Fatherhood Engagement programs, when appropriate.
- Developing self-advocacy skills, so families feel empowered to seek out community support independently.

G. Opening a Case

A case must be opened in VaCMS for all applicants who are determined eligible for child care services, and appropriate case management procedures defined in this guidance must be followed. An application or waitlist screening is assigned a case number when intake case action is initiated.

H. Electronic Correspondence

Applicants/recipients will be able to enter the Preferred Method of Correspondence (PMOC) as email or text message at application or redetermination. The PMOC is optional for the applicant/recipient but must be entered in VaCMS based on what they provide on the Child Care Application or through CommonHelp.

If an electronic PMOC is selected (text or email), the applicant/recipient will need to case associate and validate the PMOC in CommonHelp using a verification code before any correspondence is available in CommonHelp. Notices will continue to be mailed through U.S. Mail until the applicant/recipient has validated the email address or cell number and service provider.

Once the PMOC is successfully validated as text or email, subsequent correspondence will be displayed in View Pending Forms in VaCMS as having a mode of Text or Email so the Child Care Worker will know the correspondence does not need to be printed or mailed. Correspondence having the mode listed as Text or Email will be moved to View Form History by an overnight batch and the applicant/recipient will receive an electronic notice via the PMOC (email or text) notifying them that the correspondence is available in CommonHelp. Applicants/recipients will not be able to view forms via text or email. The applicant/recipient will receive instructions via text or email that forms are available to view/print in CommonHelp.

Changes in PMOC can be completed at application, redetermination and upon request once per calendar year.

Child Care Workers will record the PMOC under the Correspondence Information Section in VaCMS.

Child Care Workers can change/update the PMOC in VaCMS on the Update PMOC page in RDE or the Household Information page in Data Collection. If the Child Care Worker enters a different PMOC (cell number or email) from the validated cell number or email, the PMOC will default to U.S. Mail, the Notice of Change in PMOC will be generated during the nightly batch and the applicant/recipient will need to validate the updated information in CommonHelp.

3.3. Non-Financial Eligibility Requirements

Child care services are provided to children residing with an eligible family that meets the following criteria:

A. Need for Child Care/Good Cause

Families served must have an established need for child care subsidy to support employment, job-searching activities, education/training, an approved or assigned VIEW or SNAP E&T activity, or receipt of CPS.

Parents who work from home shall be considered employed and shall meet the need for child care requirement. Parents who can verify they are on temporary leave (parental leave, FMLA, etc.) from their approved activity shall meet the need for child care requirement.

In two-parent households, there must be good cause why either parent cannot provide the needed child care before authorization for child care will be initiated. This documentation must be recorded in VaCMS.

B. Identity of Applicant

The applicant must provide verification of their identity at the time of application. The applicant's identity may be verified through readily available documentary evidence, including DMV inquiries through SPIDeR, or through a collateral contact, if no other source is available. Acceptable verification includes, but is not limited to, a driver's license, work or school ID, ID for health benefits/ assistance or social services program, a voter registration card, wage stubs, a Social Security card issued by the Social Security Administration (SSA), or a birth certificate.

The Child Care Worker must accept any document that reasonably establishes the applicant's identity. The source of verification used must be documented in VaCMS and shall be scanned into DMIS under permanent verifications, with the exception of verification obtained from DMV inquiries through SPIDeR. Verification obtained through DMV must be recorded in VaCMS in the case page level comments.

C. Citizen/Qualified Immigrants

Children served must be citizens of the United States or qualified immigrants. The Child Care Worker must deny child care subsidy if the child's citizenship or immigration status cannot be verified. The legal basis for these procedures is set forth in Title IV of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996, Public Law 104-193, as amended. The procedures are found in Federal Register notice 62 FR 61344 (November 17, 1997).

NOTE: The following requirements do not apply to current TANF recipients. Their citizenship or alien status has been determined in order for them to receive TANF. If it is indicated in VaCMS that the child is a current or former TANF recipient, there is no need to view proof of citizenship. Former TANF recipients

must have their alien/immigration status verified at each redetermination. The case file must contain documentation of the child's former receipt of TANF. A VaCMS inquiry or print out of a SPIDeR inquiry can serve as documentation.

There is no requirement to verify the citizenship or immigration status of a parent or person acting in loco parentis who is applying for a child, and verification must not be requested for these individuals.

D. Documentation of U.S. Citizenship

If the child is a U.S. citizen, the source of verification used must be documented in VaCMS and must be scanned into DMIS under permanent verifications. If the child's citizenship was previously verified using one of the documents listed below and scanned into DMIS under permanent verifications, the Child Care Worker shall use the source of verification provided and shall not require additional verification. The Child Care Worker may use the following documents to verify the child is a U.S. citizen:

1. A birth certificate showing birth in one of the 50 states, the District of Columbia, Puerto Rico, Guam, the U.S. Virgin Islands, American Samoa, or the Northern Mariana Islands, (unless the child was born to foreign diplomats residing in such a jurisdiction);
2. A record of birth issued by the hospital showing birth in one of the 50 states, the District of Columbia, Puerto Rico, Guam, the U.S. Virgin Islands, American Samoa, or the Northern Mariana Islands, (unless the child was born to foreign diplomats residing in such a jurisdiction);
3. United States passport;
4. FS-240 form issued by the Department of State to U.S. citizens to verify the birth abroad of a U.S. citizen;
5. FS-545 Certificate of Birth issued by a Foreign Service post or DS-1350 Certification of Report of Birth. Copies are available from the Department of State;
6. Form N-560 or N-561, Certificate of Citizenship;
7. Form N-550 or N-570, Certificate of Naturalization;
8. Statement provided by a U.S. consular official certifying that the individual is a U.S. citizen (This statement is given to an individual born outside the United States who derives citizenship through a parent but does not have an FS-240, FS-545, or DS-1350); or
9. Form I-872 (or prior versions), American Indian Card with a classification code "KIC" and a statement on the back identifying the bearer as a U.S. citizen (issued by the Department of Homeland Security to U.S. citizen members of the Texas Band of Kickapoos living near the U.S./Mexican border).
10. Foreign-born children adopted by a U. S. Citizen. A foreign-born child who has been adopted by a U.S. citizen does not automatically acquire citizenship. If the applicant cannot provide evidence of the child's citizenship, have them contact the local U.S. Citizenship and Immigration Service office for a determination of U.S. citizenship.

[Processing Legal Name Changes for Children With Previously Verified Citizenship](#)

A legal name change does not impact a child's U.S. citizenship status. If the child's citizenship has previously been verified and scanned into DMIS under permanent verifications, re-verification of citizenship is not required. However, documentation of the legal name change must be obtained and recorded in DMIS.

Requesting the updated birth certificate and/or Social Security card is mandatory to support record accuracy and assist in preventing identity fraud. The following steps must be followed to update the child's legal name:

1. Court Documentation (Required): The customer must provide the official court-issued name change order. The Child Care Worker shall scan this order into DMIS as verification of the legal name change. This documentation must be obtained at the time the name change is reported.

2. Additional Documentation (Required by Redetermination, if available): The Child Care Worker shall request an updated birth certificate and/or Social Security card reflecting the child's new legal name. These documents must be scanned into DMIS to link the previous and current names.

If the updated documents are not immediately available, the customer must provide them no later than their next redetermination. Failure to provide the required verification at redetermination shall result in case closure.

3. Case Narrative Requirements: The Child Care Worker shall document in the case narrative:

- that a legal name change was reported,
- the type(s) of verification received, and
- whether additional documentation is pending or has been requested.

4. Eligibility Impact: A legal name change does not change, invalidate, or require re-verification of a child's citizenship if citizenship has previously been verified and recorded under permanent verifications in DMIS.

E. Documentation for Qualified Alien Status

LDSS must verify that a child falls into one of the qualified alien statuses if they are not a U.S. citizen. The status of qualified aliens must be verified at each redetermination unless they are admitted for permanent residence. If a child's immigration status changes or the child becomes a U.S. citizen, their eligibility must be evaluated in VaCMS under the new status. The source of verification used must be documented in VaCMS and shall be scanned into DMIS under permanent verifications when provided in a format conducive for scanning. Acceptable sources of verification include both physical documents and official online sources, such as electronic printouts or transmissions from verified government systems.

LDSS workers who have access to the Systematic Alien Verification for Entitlements (SAVE) system may use it to verify immigration status. If the worker does not have direct access, they may use current and valid SAVE results obtained by another public benefit program, provided the SAVE record does not indicate that additional or secondary verification is required. If further verification is required, the worker must obtain the appropriate documentation directly.

The methods of verifying the status are listed below:

NOTE: Per 8 CFR 1.4(d) The term "original I-94" includes, but is not limited to, any printout or electronic transmission of information from DHS systems containing the electronic record of admission or arrival/departure

A Lawful Permanent Resident

Accept the following documentation to establish the child is a lawful permanent resident:

1. Form I-551 (Permanent Resident Card, commonly known as a "green card"); or
2. An unexpired Temporary I-551 stamp in foreign passport or on a Form I-94.

An Asylee

Accept the following documentation to establish the child is an asylee:

1. Form I-94 annotated with stamp showing grant of asylum under section 208 of the Immigration and Nationality Act (INA);
2. Form I-766 (Employment Authorization Document) annotated "A5";
3. Grant letter from the Asylum Office of the U.S. Citizenship and Immigration Service; or,
4. Order of an immigration judge granting asylum.

A Refugee

Accept the following documentation to establish the child's status as a Refugee:

1. Form I-94 annotated with stamp showing admission under § 207 of the INA;
2. Form I-766 (Employment Authorization Document) annotated "A3."; or
3. Form I-571 (Refugee Travel Document).

An Alien Paroled Into the U.S. for a Least One Year

Accept the following documentation to establish that the child is an alien paroled into the U.S. for at least one year:

1. Form I-94 with stamp showing admission for at least one year under § 212(d) (5) of the INA.
2. The requirement cannot be met by combined periods of admission that total one year.

An Alien Whose Deportation or Removal Was Withheld

Accept the following documentation to establish that the child is an alien whose deportation or removal was withheld:

1. Form I-766 (Employment Authorization Document) annotated "A10"; or,
2. An Order from an immigration judge showing deportation withheld under § 243(h) of the INA as in effect prior to April 1, 1997, or removal withheld under § 241(b) (3) of the INA.

An Alien Granted Conditional Entry

Accept the following documentation to establish the child is an alien granted conditional entry into the U.S.:

1. Form I-94 with stamp showing admission under § 203(a)(7) of the INA;
2. Form I-766 (Employment Authorization Document) annotated "A3."

A Cuban/Haitian Entrant

Accept the following documentation to establish that the child is a Cuban/Haitian entrant:

1. Form I-551 (Alien Registration Receipt Card, commonly known as a "green card") with the code CU6, CU7, or CH6;
2. An unexpired temporary I-551 stamp in foreign passport or on Form I-94 with the code CU6 or CU7; or,
3. Form I-94 with a stamp showing parole as "Cuba/Haitian Entrant" under Section 212(d) (5) of the INA.

An Alien Declared as a Battered Alien or Alien Subjected to Extreme Cruelty

Accept a U.S. Citizenship and Immigration Service petition and supporting documentation to establish the child has been declared a battered alien or an alien subjected to extreme cruelty.

A Nonimmigrant

Accept a Form I-94 with stamp showing authorized admission as nonimmigrant to establish that the child is a nonimmigrant.

F. Residence

Families served must reside in the locality where application for child care subsidy and services is made.

The applicant must provide verification of residency.

- The source used to verify residency must be indicated in VaCMS in the Household Address Verification dropdown menu.
- This documentation may be, but is not limited to, a lease, a driver's license, a landlord's written statement or utility bills. If the verification source used in VaCMS is "Other Document Source", the worker must indicate the document used to verify residency in the page level comments.
- Residency must be verified at initial application or when the recipient reports a change in residency, but no later than the next redetermination.
 - When an address change is reported during the eligibility period, the worker must request verification; however, the family must not be penalized for failing to provide residency verification prior to the next redetermination.
- The source of verification used must be documented in VaCMS and shall be scanned into DMIS.

If the child care application is pending, and the applicant moves prior to the application being processed, the Child Care Worker must complete the application in the locality in which the application originated and then transfer the case to the client's new locality of residence, once completed.

The LDSS' physical address and mailing address may be entered in VaCMS for families who are experiencing homelessness and, therefore, lack a fixed and regular residence. If the family does not have a mailing address and the LDSS' address is used, the LDSS must develop a plan and arrangements for the recipient to receive all correspondence. The LDSS must document such arrangements in the case narrative. For families experiencing homelessness, the Child Care Worker must change the drop down selection for the question "Is the Primary Applicant Homeless?" to yes when entering the address information onto the household address screen in VaCMS.

G. Age of Children and Special Needs Considerations

Children served must be under age 13 or under the age of 18 if they are physically or mentally incapable of caring for themselves or subject to court supervision. Children turning 13 years of age during the eligibility period will remain eligible through the end of the recipient's current eligibility period.

[Care for Children Over Age 13](#)

Child care services may be approved for a child age 13 or older only when there is documented evidence that the child cannot safely care for themselves without supervision. The parent must demonstrate that supervision is required in order to participate in an approved activity (employment, education/training, or assigned activity).

A child age 13 or older may be approved for care if one of the following applies:

1. **The child has a physical, mental, emotional, behavioral, or developmental condition** that requires ongoing supervision beyond what is age typical.
2. **There is a court order or legal documentation** that requires the child to have supervised care (e.g., court supervision, custody orders, probation requirements, or safety-related directives).

[Approval Requirements](#)

The Child Care Worker must:

- Obtain documentation verifying the child's need for care (e.g., medical/behavioral documentation, IEP, psychological evaluation, safety plan, or court order).
- Record the source of documentation used to verify the child's need for care in the VaCMS case narrative.
- Maintain a copy of the documentation in the case record, scanned into DMIS.
- Document the rationale for approving care for a child age 13 or older, including how the need for care is tied to the parent's participation in an approved activity.
- Verify that the provider is licensed to care for children age 13 or older.
- If the child's need for care over age 13 is temporary, the Child Care Worker must verify and document the need at each annual redetermination. A new request and supporting documentation must be submitted to continue care beyond the current eligibility period.

[Special Needs Rate \(SNR\) Consideration for Children Over Age 13](#)

- Families are not required to apply for the Special Needs Rate in order to receive care for a child age 13 or older.

- If the child’s eligibility for care is based on a diagnosed condition or disability, the Child Care Worker should inform the family of the option to apply for the SNR.
- Eligibility for care and approval for the SNR are separate decisions.
 - A child may be approved for care (age 13 or older) without a SNR.
 - A child may receive a SNR without needing care past age 13.
- Workers should ensure the family understands which process is required and what documentation applies to each.

Special Needs Rate (SNR) - Centralized Request Process

The purpose of the centralized SNR Centralized Request Process is to ensure consistency, standardization, and timely decisions for families and providers requesting the Special Needs Rate. Payment of up to two times the maximum reimbursement rate (MRR) may be approved when a child has a verified special need or disability, and additional accommodations are required for the provider to serve the child.

If the special need is temporary, the Child Care Worker must verify and document the need at each annual redetermination. A new request and supporting documentation must be submitted to continue care beyond the current eligibility period.

Submission of the SNR Request

Only the local DSS caseworker completes the SNR Request Form, available on Fusion. Cooperation from the family and provider is necessary to obtain all required documentation.

Required documentation includes:

- Verification of the child’s diagnosis, condition, or special need, such as:
 - Individualized Education Program (IEP)
 - Individualized Family Service Plan (IFSP)
 - Medical or clinical documentation from a qualified professional
- Provider accommodations information, describing the supports, materials, staffing, or adjustments needed to serve the child. Providers may use the optional Provider Accommodation Form.
- All supporting documents must be uploaded to DMIS using:
 - Document Type: Medical Information
 - Document Subtype: Special Needs Documentation

Centralized Review and Decision

Once the request and documents are submitted:

- The request will be reviewed by the VDOE Office of Access and Enrollment.
- Additional information will be requested if documentation is incomplete.
- A determination (approved or denied) will be issued within one week of receiving a complete request.
- Complex cases may be reviewed by the SNR Request Committee (VDOE and VDSS staff, including special education expertise).

The decision is emailed to the LDSS caseworker, supervisor, and Regional Practice Consultant.

Actions Required When a SNR Request Is Approved

Within five business days of receiving the decision:

- Update the Special Needs/Good Cause Details section on the Client Demographic page in VaCMS.
 - Indicate the child has a special need or disability.
 - Select the appropriate category of special need.
 - Record the verification source.
 - Enter the effective date, which must be the date VDOE approved the SNR.
- Rerun eligibility and certify to generate the Notice of Action (NOA) and remove the case from Case Change/Closure status.
 - If special needs information was previously entered, the begin date must still be updated to the VDOE approval date, and eligibility must be rerun.
- Update Authorization Management:
 - Add new General Information, Special Needs Rate.
 - Generate a new POSO using the VDOE approval date as the effective date.
 - Mail the NOA and POSO to the family; mail the POSO to the provider.
- Upload the decision letter and the completed SNR request form to DMIS.
- Document all actions in the case narrative.

Actions Required When a SNR Request Is Denied

Within five business days:

1. Complete a Communication Form to notify the family and provider of the denial, including the reason provided by VDOE.
2. Upload the request form and decision letter to DMIS.
3. Document all actions in the case narrative.
4. No changes are made to the existing authorization or eligibility.

Families or providers may reapply if additional documentation is obtained that addresses the reason for denial.

Children Over Age 13 With Special Needs

When care is required for a child older than age 13 due to special needs or disability:

- The worker must record in the VaCMS case narrative the source of documentation used to verify the child's need for continued care.
 - Acceptable verification may include a court order, medical documentation, IEP, or other professional evaluation that substantiates the child's special needs or required supervision.
- A copy of the court order or other documentation used for verification must be maintained in the case record and uploaded to DMIS using the categories listed above.
- Verify that the provider is licensed to care for children age 13 or older.

Provider Classification as a Special Needs Provider

Providers that want to be identified as serving children with disabilities and/or special needs must email providerservices@doe.virginia.gov stating their intent to update their classification.

General Information

For general questions on the process or technical issues with the form reach out to childcaresubsidy@doe.virginia.gov

H. Age of Parent/Guardian

An applicant for child care services must be at least 18 years of age.

If a minor child has been emancipated from their parents and is requesting services for their child, services may be approved, if they meet all other eligibility criteria.

- Verification of emancipation is required prior to approval of the case.
- The status may be verified by viewing the court order granting emancipation or the Emancipated Minor ID Card issued by the Virginia Department of Motor Vehicles.
- The verification source should be recorded in the page level comments of VaCMS.

NOTE: Because the parent/guardian of a minor parent is legally responsible for the minor parent but not their child, the income of the parent/guardian of a minor parent will be counted as an in loco parentis head of household. Both the adult and the minor parent must be participating in an approved activity.

I. School Attendance

Child care must not be purchased for children who are eligible to attend public kindergarten or for older children during that portion of a day when appropriate public education is available, unless there are valid and documented reasons the children must be out of school.

J. Immunization Requirements for Children

All children receiving services under the CCDF must be immunized according to requirements of the State Board of Health before child care services can be authorized. The Virginia Immunization Information System (VIIS) is available to assist Child Care Workers in verifying a child's immunizations. When the VIIS has returned no results, or when the applicant/recipient disagrees with the VIIS results, the Child Care Worker shall use the current form required by the Virginia Department of Health, ("School Entrance Health Form" MCH-213G, Rev 03/14), a physician's form, the Department of Social Services Childhood Immunization Certification form (032-03-0960-03-eng) or other Health Department documentation. The source of verification used must be documented in VaCMS and shall be scanned into DMIS, if applicable.

[Initial Documentation](#)

Parents must provide documentation of immunizations at the time of application or redetermination for child care subsidy and services unless the child is exempt from this requirement. Documentation must include the date the immunizations were received and must be signed by a physician, his/her designee, or an official of a local health department. Copies of this verification must be maintained by the Child Care Worker to assist in verifying that children continue to be age-appropriately immunized.

[Exemptions from Immunization Requirement](#)

Documentation of immunization is not required for any child:

1. Whose parent submits an affidavit to the provider, on the "Certificate of Religious Exemption" (CRE) stating that the administration of immunizing agents conflicts with the parent's or child's religious tenets or practices.
2. Whose physician or a local health department states on the "Childhood Immunization Certification" form that one or more of the required immunizations may be permanently or

temporarily detrimental to the child's health. If temporary, the statement must include an estimated date for when immunizations can be safely administered.

3. Who receives TANF, if the child's immunizations have been verified by TANF, and for as long as that TANF eligibility continues. Children not on the TANF grant are required to provide proof of immunization prior to authorization for child care services unless another exemption exists.
4. Who is enrolled in an early childhood care and education program that requires proof of immunization as a condition of enrollment, including:
 - a. Head Start/Early Head Start, for as long as that enrollment continues;
 - b. A state licensed child day center;
 - c. A licensed family day system-approved family day home;
 - d. A licensed or voluntarily registered family day home;
 - e. A religiously exempted child day center; or
 - f. A local ordinance-approved provider.

Immunization documentation requirements for these children are waived as of the date enrollment is verified and remain waived for as long as the child is cared for by this provider or another provider type listed above.

5. Who attends a public school in Virginia or a private school that is accredited by the Virginia Department of Education.

Child Experiencing Homelessness

Families of a child experiencing homelessness that cannot provide documentation of their child's immunizations at the time of application may be conditionally approved for services for a period not to exceed 90 days. The Child Care Worker will select, Not Verified, as the verification source in VaCMS. The Child Care Worker will receive a task/reminder in VaCMS on the 45th day if the verification source has not been updated in VaCMS.

Immunization Form

The current form required by the Virginia Department of Health ("School Entrance Health Form" MCH-213G) may be downloaded from the Virginia Department of Health website. The Certificate of Religious Exemption Form (CRE-1) may also be downloaded from the Virginia Department of Health website. Instructions for both forms can be found at the Virginia Department of Health website. The Childhood Immunization Certification Form may be downloaded from the Virginia Department of Health website.

Subsequent Documentation

Parents must provide documentation of additional immunizations once every six months for children under the age of two years, once between each child's fourth and sixth birthday, and as indicated by a physician or designee.

K. Children of Owners/Operators of Family Day Home

An owner or operator of a family day home is not eligible to receive a child care subsidy payment for their own child if that child will be cared for in the home of the owner or operator.

3.4. Income and Assets Eligibility Requirements

A. Income Eligibility Requirements

For the Transitional, Fee, SNAP E&T, and Head Start Wrap-Around child care programs, families that have at least one child who is five years of age or younger and has not yet started kindergarten are financially eligible if their incomes do not exceed 85 percent of the state median income as identified in Appendix A. A family described in this subdivision shall be eligible for assistance for each age-eligible child (age eligibility outlined in subsections 3.3. G of this guidance). Eligibility is based on the child's age and school status at the time of application, regardless of anticipated changes to age/school enrollment during the 12-month period.

The income eligibility scale established by the Department must be used for determining financial eligibility for all other families in the Transitional, Fee, SNAP E&T, and Head Start Wrap-Around child care programs. See State Income Eligibility Scale for Child Care – Appendix A.

B. Metropolitan Statistical Area Groupings

Localities are grouped by local median income with some adjustments made for actual cost of care. In using the State Income Eligibility Scale, VaCMS will determine into which group the LDSS falls.

C. Determining Family Unit

The applicant is considered the head of the household. If the applicant in a two-parent household leaves the household, a new application must be processed to determine eligibility for the new family unit. If determined to be eligible, this family maintains current services and should not be placed on the waitlist.

Household Members

The following individuals living in the household must be included in the family unit and shall be entered as household members in VaCMS:

1. Parents including:
 - i) Biological parents including the father of a child born out-of-wedlock, if paternity can be established;
 - ii) Adoptive parents;
 - iii) Stepparent;
 - iv) Legal guardian(s);
 - v) Adult(s) standing in loco parentis for children under age 18; and
 - vi) Persons cohabiting with the natural or adoptive parent of a child under age 18.
2. All the parents' children under age 18.
3. Spouses of an adult standing in loco parentis.

Household Members Temporarily Absent from the Home

A parent, guardian, or child who is temporarily absent from the home shall be included in the family unit unless the absence period is expected to exceed 60 consecutive days.

A parent who is absent from the home due to active duty in the military services is considered part of the family unit and will be counted as a household member even if they are expected to be out of the household for more than 60 days.

D. Determining Income Eligibility

VaCMS will determine income eligibility by measuring the family unit's countable gross monthly income and family size against the percentage of the federal poverty guidelines for their locality listed in Appendix A OR against 85% of State Median Income, for those families with a child who is five years of age or younger and has not yet started kindergarten (see Section 3.4 A).

Families whose countable gross monthly income for their family size is at or below the applicable income parameters are income eligible for child care subsidy.

For families that qualify under HB407 criteria:

- The case manager will utilize the income entered into VaCMS under the Medicaid case, regardless how old it is.
- Families receiving WIC will use a self-attestation form completed by the client.
- Families will be assessed at the 250% Federal Poverty Guidelines for all program categories. (See Section 3.4L).

EXCEPTION: If the applicant or current recipient is an individual who is not financially responsible for the child under Virginia law, income eligibility is determined in VaCMS by measuring the family unit's countable gross monthly income and family size against 250% of the federal poverty guidelines OR 85% State Median Income with a child who is five years of age or younger and has not yet started kindergarten. Biological parents (including the father of a child born out-of-wedlock, if paternity can be established), adoptive parents, stepparents, and a person cohabiting with a natural or adoptive parent are financially responsible for the child under Virginia law.

E. Countable Income

Income is considered countable if it is not on the list of disregarded incomes or deductions.

In determining income eligibility, VaCMS will include all gross earned and unearned income received by the family unit and entered into the system by the Child Care Worker except certain types of disregarded income, deductions and payments listed in subsections F and G below.

Verification of Income

Parents are required to provide verification of income. If pay stubs are the type of verification, the most recent pay stubs available must be used, unless the client is out of work on temporary leave, then the most recent 90 days of pay stubs prior to the leave beginning may be used. On-line pay stubs or letters from employers are acceptable.

In order to establish income eligibility, verification of all income received or anticipated to be received monthly by the family unit is required at the time of application/redetermination. For initial applications and reapplications, the income generally to be counted is the income verified for the calendar month prior to the month of application. For redeterminations, the income generally to be counted is the income verified for the month prior to the month of redetermination.

The reason for using pay stubs or income verifications received over two months prior to the month of application must be documented in VaCMS. Accept an applicant/recipient's written statement that there is no income unless there is reason to doubt the statement. When verification is required, the LDSS must notify the applicant/recipient of the necessary verification and allow the applicant/recipient 10 days to provide the required verification.

Although there is no provision allowing the use of a client statement to verify income when income is known to exist, workers may exercise discretion in rare and sensitive situations such as when the applicant reports domestic violence and is unable to safely obtain documentation. In these circumstances, the agency must demonstrate due diligence and clearly document:

1. The applicant's disclosure of domestic violence (without requiring specific proof or endangering the client);
2. The reason income verification could not be safely or reasonably obtained; and
3. The basis for accepting the client statement as the best available information.

Documentation should include case notes summarizing the situation, the applicant's statement, and the worker's rationale for accepting it.

Indirect Payments

When an applicant or recipient appears to be working but is not paid directly, the Child Care Worker must determine whether there is an identifiable amount that must be considered as income. Such arrangements must be evaluated using the following criteria:

If the applicant/recipient performs services but receives no pay directly, and there is an identifiable amount of income that could be paid directly to the applicant/recipient, count the identifiable amount as income.

- If the applicant/recipient performs services but is not paid directly, and there is no identifiable amount of income that could be paid to the applicant/recipient, no income is counted.

Example

An applicant/recipient works for a hotel chain and, in lieu of wages paid directly to the applicant/recipient; the employer pays for room and board on behalf of the applicant/recipient. In this situation, there is an identifiable wage. The cost of the room is \$200.00 per week and, even though it is not paid to the applicant/recipient, it must be counted as earned income.

Self-Employment

If the applicant/recipient indicates that they are self-employed, they must provide documentation to show they are legitimately engaged in self-employment, preferably tax return information. The proof could include, but is not limited to, income tax records or other proof of earnings, a business license, or rent receipts for office space.

The applicant/recipient must earn at least minimum wage for actual hours worked, based on gross income. If the applicant/recipient has been self-employed for less than a year, they must provide proof of earnings equivalent to federal minimum wage for actual hours worked at the time of their next scheduled redetermination. If they are unable to provide such proof of earnings, they will no longer be eligible for child care subsidy.

VaCMS will count net income from self-employment, farm, or non-farm. The Child Care Worker should not count the value of goods consumed by the family.

Profit, or net income, from self-employment is the total income received, less the business expenses directly related to producing the goods or services and without which the goods or services could not be produced. The applicant/recipient must provide verification of their business expenses as documented on their federal tax return. If the applicant/recipient has been self-employed for less than a year, they may use business receipts or other sources to provide proof of business expenses until their next scheduled redetermination. If the applicant/recipient cannot provide documentation of their business expenses, the individual's gross income shall be used.

If an individual who was self-employed incorporates their business, either by himself or with another individual, he/she is no longer considered self-employed. His/her wages or salary will be paid by the corporation and will be considered regular earned income, not self-employment income. Limited liability companies (LLC) are not incorporated so the income may be considered as self-employment.

If obtaining verification of business expenses will delay the eligibility determination, the LDSS must advise the applicant/recipient that the family's eligibility and copayment amount may be determined without providing a deduction for these costs. If these costs or a portion of them cannot be verified within 30 days of the date of application, the LDSS must determine the family's eligibility without providing a deduction for the unverified portion. The applicant/recipient must be given at least 10 days to provide the verification.

Averaging of Self-Employment Income

1. Self-employment income which represents a household's annual support must be averaged over a 12-month period, even if the income is received in a shorter period of time. For example, income from a farmer's crop that represents the farmer's annual support must be averaged over a 12-month period, even though the income is received in a shorter period. In addition, self-employment income that represents a household's annual support must be averaged even if the household has income from other sources.
2. Self-employment income that does not represent a household's annual support must be averaged over the period of time the income is intended to cover. This type of seasonal self-employment includes providers who receive their income in the summer or during the tourist season and supplement it through another source during the rest of the year.
3. Households with newly formed enterprises that have been in existence less than a year must have their self-employment income averaged over the amount of time the business has been in operation, and the monthly amount projected for the coming year.

Contract Income

Contract earnings are defined as wages guaranteed by a contract. This does not include work on an hourly or piecework basis or self-employment. A guaranteed wage is one which is received by an individual employed on a contractual basis and paid over a period of time. Earnings of this nature will be prorated according to the procedures outlined in subsection I of this section.

Child Support

Child support is considered income belonging to the child and shall be entered in VaCMS as unearned income for the child for whom the support is being received. If child support is received for multiple children with the same absent parent, the total amount of support received shall be divided by the number of children and the amount entered in VaCMS for each child.

F. Disregarded Income

The following types of income received by any member of the family unit shall be disregarded in determining income eligibility and copayment amounts for Transitional, Head Start Wrap-Around, SNAP E&T, and Fee Child Care subsidies:

1. Supplemental Security Income;
2. TANF benefits;
4. Transitional payments of \$50.00 per month to former VIEW participants;
5. Diversionary Assistance payments;
6. General Relief benefits;
7. Value of SNAP benefits;
8. Value of USDA donated food;
9. Any benefits received under Title VII, Nutrition Program for the Elderly, of the Older Americans Act of 1965, as amended;
10. Value of supplemental food assistance under the Child Nutrition Act of 1966 and lunches provided under National School Lunch Act;
11. Earnings of a child under the age of 18 years;
12. Earned income tax credit (EITC);
13. All lump sum payments;
14. Any scholarships, loans, or grants for education except any portion specified for child care, if any portion of educational benefits are set-aside for child care, this should be entered in VaCMS as "Other" unearned income and noted in the page level comments;
15. Payment to AmeriCorps volunteers;
16. Tax refunds;
17. Monetary gifts for identifiable one time occasions or normal annual occasions;
18. Provider payments made by non-financially responsible persons, unless this payment is made in lieu of wages;
19. Loans and other money borrowed;
20. Money received from sale of property such as stocks, bonds, a house, or a car (unless the person was engaged in the business of selling such property in which case the net proceeds would be counted as income from self-employment);
21. Earnings of less than \$25.00 a month;
22. Capital gains;
23. Withdrawals of bank deposits;
24. GI Bill benefits;

25. Reimbursement, such as for mileage;
26. Foreign government restitution payments to Holocaust survivors;
27. Payments from the Agent Orange Settlement Fund or any other fund established for settlement of Agent Orange product liability litigation;
28. Monetary benefits provided to the children of Vietnam Veterans as described in 38 U.S.C. 1823 (c); and
29. Earnings from temporary census taker positions;

G. Disregarded deductions or payments are:

1. Garnisheed wages – those wages not received as a result of garnishment;
2. Basic Allowance for Housing (BAH) for military personnel if the individual is living on base and the entire BAH is deducted on the leave and earning statement;
3. Clothing Maintenance Allowance for military; and
4. Child support paid to another household (verification could be by written statements from the other parent/household or cancelled checks).

H. Converting Income to a Monthly Amount

VaCMS will convert recorded income to a monthly amount by multiplying:

- Weekly income by 4.3,
- Bi-weekly income by 2.15, or
- Semi-monthly income by 2.

The Child Care Worker must ensure that bi-weekly or semi-monthly income is entered correctly in VaCMS.

- Income received every two weeks, such as every other Friday, will be recorded as bi-weekly.
- Income received twice per month, such as on the 15th and final day of the month, will be recorded as semi-monthly.

When earned income is verified by and documented with pay stubs, the calculations outlined above are used. The Child Care Worker must identify any income documented by the applicant/recipient that is not used in the calculation and the reason for disregarding it in VaCMS.

Example

The recipient provides four pay stubs. One of the pay stubs covers a period of time when the employer was closed so the recipient either was not paid or the pay stub reflected a reduced pay amount. This pay stub is not indicative of the applicant/recipient's usual income. Therefore, the Child Care Worker only uses the three pay stubs which are indicative of the applicant/recipient's usual income in the income calculation. The Child Care Worker must record, in the page level comments on the pay details screen, why all four pay stubs were not used.

I. Income Averaging

The following methods are to be used to anticipate the family unit's countable income when the prior month's income does not reflect the income anticipated to be received on an ongoing basis:

1. The Child Care Worker shall take into account the income already received by the family unit during the application process and any anticipated income the family unit and LDSS are reasonably certain will be received during the eligibility period. The Child Care Worker shall use the converted monthly income which has been received by the family unit, unless the income is for a partial month.
2. If income fluctuates so much that the prior calendar month cannot by itself provide an accurate indication of anticipated income, a longer period of past time may be used if it will provide a more accurate indication of fluctuations in future income. If income is ongoing, anticipate by averaging income from the past pay periods.
 - a. The Child Care Worker shall select a projection period in VaCMS to average the income received in any number of pay periods immediately prior to application/redetermination, sufficient to take the fluctuations into consideration. The Child Care Worker should select only the pay periods that will yield the most realistic estimate of income to be received. Usually, the monthly gross income received in the three (3) months immediately prior to application/redetermination is sufficient.
 - b. For child support, farm income or seasonal employment, it may be necessary to average income over a period of up to 12 months.

Guaranteed salaries paid under a contract that represent the individual's annual income will be averaged over 12 months, even if the employee chooses to receive payments in fewer months. If payments extend beyond the contract period, the earnings must be prorated based on the expected number of months.

Example

A contract period is September 2017 – August 2018 (12 months). The individual chooses to receive the contract income over a 10-month period. The contract amount is divided by the contract period of 12 months to arrive at the monthly gross income.

A contract period is November 2017 – June 2018 (8 months). The individual chooses to receive the contract income over the period of 12 months. The contract amount is divided by the 12 months to arrive at the monthly gross income.

J. Temporary Increases

Temporary increases in income will not be included in the income calculation and will not affect the applicant/recipient's eligibility or copayment amount. These fluctuations, when taken in isolation, may incorrectly indicate that an applicant/recipient's income exceeds the income eligibility limit or 85% of state median income. Types of temporary increases may include, but are not limited to, sporadic overtime pay, commissions, bonus pay, and recognition pay, not indicative of a permanent increase in income, or income that is not expected to be received on a regular ongoing basis.

Income that is included as part of the applicant/recipient's annual wages/salary, such as holiday pay, sick leave, or annual leave would not be disregarded. The Child Care Worker must document why any type of income was excluded from the calculation for determining income eligibility and the family's copayment amount.

K. Asset/Resource Limit

The applicant/recipient must certify that their family assets/resources do not exceed \$1 million in value. This requirement can be met solely through self-certification on the Child Care Subsidy Service Application and Redetermination form. Assets/resources may include, but are not limited to: money in accounts, stocks or bonds, lump sum payments, cash on hand, or funds in a trust.

The Child Care Worker must accept the applicant/recipient's declaration and must not require verification or documentation of the family's assets/resources. The Child Care Worker will document the applicant/recipient's certification on the resources screen in VaCMS.

L. Verifications for Recipients of Medicaid and WIC

Legislation passed in 2024 (House Bill 407) deems recipients of Medicaid (MA) and the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) income-eligible for the Child Care Subsidy Program without further verification of income. Families must meet all non-financial eligibility requirements.

Eligibility for these families will be determined using the appropriate program category and authorized with the appropriate budget line based on the program category.

While further verification is not required, income must be documented and assessed for two reasons:

- To ensure the family's income does not exceed the federally established maximum of 85% SMI; and
- To appropriately assign per-child and family copayments.

Families receiving MA or WIC will have their income assessed at 250% Federal Poverty Guideline (FPG) across all program categories. Income will be assessed at 85% SMI for:

- Families with a child 0–5 not yet enrolled in kindergarten, and all families at redetermination.

[Eligibility and Approval](#)

Eligibility should be documented for families in the following ways:

- For MA families:
 - Conduct a SPIDER/VaCMS search to verify someone in the CCSP family unit is receiving MA.
- For WIC families:
 - Direct contact with a WIC worker
 - Completion of the WIC Verification Form by a WIC representative
 - Submission of an approval letter from the WIC office

NOTE: verifications received over the phone must include the WIC employee's name and date of contact in the case narrative. A self-attestation form completed by the applicant will be used for income verification and entered into VaCMS.

In addition, a self-attestation form completed by the applicant must be used for income verification and entered into VaCMS. If the self-attestation form does not support the level of care requested, additional verification would be needed that clearly supports why additional hours of care are needed.

If the required self-attestation form is not submitted within the 30-day (or 60-day, if placed on delay) application processing timeframe and there is no other verified income source available in VaCMS, the application must be denied.

The WIC Verification and Self-Attestation forms are available on FUSION:

<https://fusion.dss.virginia.gov/ccecd/CCSP-Home/LDSS-Learning-and-Development/Case-Management>

Enrollment, Waitlist, and Verification

All other standard verification documents (e.g., proof of residency, identification) required for child care subsidy cases must still be provided for HB407 cases.

Cases that qualify under MA or WIC are still subject to the waitlist, if applicable.

Demonstrated Need for Care

Families must still demonstrate a valid need for the level of care requested. For example, full-time care requires documentation of a work schedule or school enrollment.

Use of Income Information

For CCMA cases, the worker will use the verified income recorded in VaCMS, even if it is older than 12 months. Verified income entered in VaCMS for the MA case will not be used when the client states the MA income is no longer accurate, the client reports income not included in the MA case, the client voluntarily turns in more current pay verification, or recorded income in the MA case does not support the level of care requested for the approved activity. Updated income must be used to determine CCSP eligibility in these instances.

Similarly, during redetermination, if the client submits current income verification, it should take precedence over older MA income in VaCMS.

In cases where WIC recipients are also receiving SNAP, and no MA is present, a self-attestation form must still be obtained to verify income. Workers should not override existing verified SNAP income with unverified information from the self-attestation form. If both Child Care Medicaid (CCMA) and Child Care WIC (CCWIC) are listed on the Other In State Benefits (OISB) page, income from the CCMA record will be used and a self-attestation form is not required.

For relative caregivers, such as grandparents applying on behalf of a child who receives MA, the adult caregiver's income must be verified. This is because their income is not included in the child's MA record, and eligibility for CCSP must be determined using the relative's verified income.

Verification at Redetermination

Eligibility under HB407 requires verification of continued program participation at each redetermination. For CCMA cases, workers must confirm that at least one member of the household is still receiving MA. Similarly, for CCWIC cases, the worker must verify that the household continues to participate in WIC. These checks ensure compliance with HB407 eligibility requirements.

Categorizing Cases in VaCMS

In VaCMS, staff must accurately select the appropriate benefits received (CCMA, CCWIC, or both) for each household member receiving income (adults and children) on the Other In-State Benefits (OISB) screen. If both benefit types are entered, CCMA income will be used for eligibility determination. The self-attestation form should not be used if both benefit types are selected.

Additionally, case managers must ensure the corresponding CC MA/CC WIC box is checked on the Eligibility Run page. This step ensures that the case is processed using the correct income threshold (250% Federal Poverty Guidelines or 85% State Median Income, as applicable). Compliance with these procedural steps is essential to ensure accurate eligibility determinations under HB407.

3.5 Copayments

A. Copayment Scale

Copayment Requirement Under Federal Law

Federal law (CCDBG Act of 2014 658E(c)(5)) requires most CCDF families to contribute to the cost of care through a copayment. The Department establishes and periodically revises a sliding fee scale (based on family size and income) that provides for cost-sharing for families receiving a subsidy accordingly. Families are required to pay a monthly copayment based on household income according to the sliding copayment scale in Appendix B, except TANF recipients.

Monthly Copayment Structure and Calculation

The copayment rates are a flat monthly rate per child receiving assistance up to three participating children. Monthly copayments start at \$5 for families with countable income below the poverty guidelines, and increase as a family's income increases, but are capped at 5% of gross countable income for any family.

VaCMS Copayment Display and Assignment

VaCMS calculates per-child copayment amounts. The copayment will begin the first full month of authorized child care and the full copayment must be assessed for the last month, whether it is a full month or a partial month, of authorized child care. The effective begin date of the copayment is recorded on the POSO, a copy of which the recipient receives.

VaCMS will calculate the total family copayment and display the per child copayment once eligibility is determined. The total family copayment and the per-child copayment(s) will display in the VaCMS authorization screens. If the child has multiple providers, the provider with the most authorized hours of care has a copayment applied. No more than three children should have a copayment applied.

Changes During Eligibility Period

The Child Care Worker must act on changes reported by the recipient that would reduce the family's copayment during the eligibility period. The copayment amount may be increased only at redetermination for an individual child.

Situations That May Increase Total Copayment

A family's total copayment may increase in the following situations:

- An additional child or children are added to the household prior to the redetermination period or
- Child care services are authorized for a child or children that were not initially requested.

No family will pay copayments for more than three children, and copayments will not exceed 5% of income for any family.

Correcting Copayment Errors

If a case is certified with an incorrect copayment at intake or redetermination, the Child Care Supervisor can correct the income and run eligibility to increase a copayment if the correction is made prior to the copayment payment effective date using the “Case Change” case action.

When there is a case change that warrants a change in the copayment amount the Child Care Worker must take appropriate action to validate and update the copayment amount on the authorization(s). During a temporary job disruption (not to exceed 90 days), such as parental leave or a government shutdown, authorized hours of care should remain unchanged, and copayments should not be adjusted based on the temporary loss of income. Documentation of the arrangement must be recorded in the case record.

- If the job disruption exceeds 90 days and there is a potential change to the copayment amount, parents must provide written verification to their child care case manager. The case manager must review this information with their supervisor to make a determination. If further clarification is needed, the locality should consult with their Regional Practice Consultant, who will engage the Home Office as necessary for additional guidance.

If more than one child from a family goes to the same provider, VaCMS will assign a copayment per each child authorized for the provider. Each child’s copayment is deducted from the provider payment for that child. If payment for an individual child’s attendance is less than the amount of the per-child copayment, no payment will be made by the system.

If changes need to be made to the per-child copayment, the worker can override and make changes but should not do so without first discussing with supervisor and documenting justification.

The copayment is assigned to the provider authorized at the first of the month. If the family changes provider providers during the month, the copayment is assigned to the new provider the first of the following month. The copayment is not pro-rated nor split between the two providers during the month the change occurred.

When parents share custody of a child and both parents receive child care services, there will be two separate cases with a per-child copayment assigned to each child in the case, even if the child is authorized with the same provider. When an authorization is removed from a suspended status, the copayment is assigned immediately. The copayment is not pro-rated nor assigned the first of the following month. The per-child copayment and total family copayment amounts are shown on the POSO as of the effective beginning date of the reinstatement.

B. Countable Income

In determining copayments, income that will be used includes all earned and unearned income received by the family unit except certain types of disregarded income listed in subsections 3.4., F and G of this guidance.

Initiation of and changes to copayments must be made effective at the beginning of the month following the month the copayment is initiated or the change is effective. A copayment increase, as a result of a

change at redetermination, will be effective at the beginning of the month following certification of the redetermination eligibility result.

The reduction of a recipient's copayment is not considered an adverse action and may be implemented as soon as the beginning of the month after which the change occurs regardless of the NOA period.

C. Assistance with Copayments

LDSS have the option of assisting parents with the payment of the child care copayment using local-only funds. Local policy for the subsidy of parent copayments must be approved by the Regional Consultant and the local board of social services and recorded in the minutes. Local policy governing subsidy for parent copayments must be applied uniformly.

3.6. Service Plan

A Child Care Subsidy Program Service Plan must be completed for every child care case. The Child Care Service Plan must be completed in VaCMS and a copy must be given to the recipient.

If parents are active in VIEW or are SNAP E&T participants, the Activity and Service Plan (032-02-1000-13-eng (10/22)) will serve as the service plan. Once a client is no longer a VIEW or SNAP E&T participant, a Child Care Service Plan must be completed prior to authorization of Transitional or Fee Child Care.

During the development of the service plan, the Child Care Worker must discuss with the parent the responsibilities outlined in 3.8 and also discuss the agency and provider responsibilities. Service plans must be updated at least annually as part of redetermination. The Child Care Worker must review the service plan with the recipient during their redetermination interview and make updates to the service plan in VaCMS as needed. The LDSS will mail the updated service plan to the recipient after the eligibility redetermination has been completed.

The Service Plan provides a place to record service planning and consumer education information, the family's needs assessment, and parent activity schedule. The Service Plan can be printed by transmitting from a button on the service plan page of VaCMS or by manually generating the form from the left navigation of VaCMS.

3.7. Consumer Education

LDSS must advise families who receive child care subsidy that they have full parental choice of all legally operating child care providers who meet the provider requirements of the subsidy program. Providers who fail to meet all provider requirements are not eligible to receive subsidy payments.

Appropriate consumer education must be provided by the LDSS to applicants and recipients to assist them in gaining needed information about child care services, such as:

1. The Head Start program, the Virginia Preschool Initiative, the Mixed Delivery program, and locally-operated programs that offer scholarships or services based on a sliding fee scale, including YMCA/YWCA programs, church programs and local not-for profit programs;
2. The 2-1-1 helpline;
3. Information about developmental screenings; and
4. Additional programs and resources for which they may be eligible.

Consumer education resources include:

1. VDOE's Child Care VA website: www.childcare.virginia.gov (under "Families");
2. The 2-1-1 helpline;
3. Child Care Aware, Virginia's resource and referral agency, at www.vachildcare.com;
4. The Ready Region supporting the locality;
5. CommonHelp; and
6. Child Care PASS support at <https://vapass.info/>.

LDSS must also provide information about Child Care PASS operations, the availability of providers, and how to identify and monitor quality child care including:

1. Where to access the compliance history of child care providers;
2. Where to report complaints about child care providers;
3. Guiding questions and considerations for families at <https://www.childcare.virginia.gov/families/ask-the-right-questions> ; and
4. Information on quality child care, including Virginia's Unified Measurement and Improvement System, VQB5. Information on VQB5 can be found at [Home | Virginia Quality Birth to Five \(VQB5\)](#)

In response to [state law](#), Virginia has developed the Unified Virginia Quality Birth to Five System (VQB5) to measure and help improve the quality of all [publicly-funded](#) birth-to-five classrooms and support families to choose quality programming across program types. As a result, parents are responsible for determining whether a program meets their family's needs and preferences for quality care. The VQB5 Quality Profile website can serve as a helpful resource, providing information on how programs are rated based on factors such as curriculum and teacher-child interactions. The VQB5 Quality Profiles include information about performance on quality measurements and other topics of interest to families, policymakers, and the general public. View VQB5 Quality Profiles at: EarlyChildhoodQuality.doe.virginia.gov.

If applicants/recipients do not have the ability to access the consumer education resources noted above, the LDSS must provide a copy of any of the required information to the applicant/recipient upon request.

LDSS may refer to the Consumer Education Checklist available on FUSION under Consumer Education Resources to ensure that all required consumer education is provided. Consumer education information will be recorded on the Child Care Service Plan or in the VaCMS case narrative.

3.8. Parental Responsibilities

LDSS must inform parents of the following responsibilities:

A. Responsibility to Report Changes

Parents must be informed of their responsibility to report changes specified on the Child Care Application and Notice of Action to the LDSS within 10 calendar days after they occur.

Parents must also be informed that failure to report changes specified on the Child Care Application may result in an overpayment and that parents are required to repay child care costs for which they are not eligible.

The Child Care Worker must review the Responsibilities, Change Reporting, and Penalties section of the Child Care Application with applicants and provide clarification as needed. A copy of this section must be given to the applicant.

Changes that need to be reported during the eligibility period include:

1. Changes to the family's gross monthly income that would cause the total amount to exceed 85% of state median income for a family of its size;
2. Changes in household members or head of household;
3. Change of address; and
4. Change of provider.

Changes that the recipient may voluntarily report during the eligibility period include:

1. Change in education/training activity (including class days/hours and curriculum);
2. Change in the number of hours children need child care;
3. Change in employment (including schedule, employer and/or income); and
4. Any other reduction in household income.

The Notice of Action form generated by VaCMS will also provide the change reporting requirements and the maximum monthly income level for the family.

B. Responsibility to Cooperate in Eligibility Determination Process

It is the parent's responsibility to cooperate fully in the assessment and eligibility determination process including providing documentation of immunization.

C. Responsibility for Use of Child Care

It is the parent's responsibility to choose a provider and to monitor the care. It is the responsibility of the parent to record attendance and absence hours for their child in Child Care PASS using the method directed by the provider.

D. Responsibility to Pay Fees

It is the parent's responsibility to pay all fees owed directly to the provider. Parental failure to pay copayment or charges above the MRR may result in case closure at redetermination if the provider reports it. The responsibility to collect any additional fees (e.g., non-covered registration fees, activity fees, early termination fees, etc.) is a business arrangement between the recipient and the provider and is not a reason for case closure.

In the event a parent frequently changes providers and there is a documented pattern of unpaid balances, the case should be forwarded to the VDSS Home Office via the RPC. VDSS will consult with VDOE to determine whether the family should be denied at redetermination or intake due to the outstanding balance.

E. Responsibility to Providers

Parents have the following responsibilities to providers:

1. To partner with the provider to ensure recording of complete and accurate attendance records, including absences, in Child Care PASS;
2. Child Care PASS;
3. To pick the child up promptly at the agreed upon time;
4. To inform the provider when the child will not be coming due to illness;
5. To pick up the child during the day if the child becomes ill; and
6. If transportation is being provided, to get the child safely and promptly to the pick-up site and to meet the child promptly at the discharge point.

F. Responsibility to Repay Overpayments

It is the parent's responsibility to repay fraud-related overpayments or non-fraud overpayments according to the repayment schedule entered into with the LDSS. Parental failure to repay overpayments may result in denial of application or case closure at redetermination.

G. Responsibility to Respond to Correspondence

The parent must be told to respond to all agency correspondence within specified timeframes.

3.9. Local Department Contacts/Responsibilities

An interview with the applicant/recipient is required at the initial eligibility determination and each redetermination of eligibility. The interview shall be used to obtain verification, provide service planning, and to secure information necessary to complete the application/redetermination process. During the interview, the Child Care Application must be reviewed with the applicant. A copy of the signature page and the Responsibilities, Change Reporting, and Penalties section of the application must be given to the recipient. Applications submitted through CommonHelp or VIEW referral applications received in My Workspace do not need to be signed by the child care worker or scanned into DMIS.

The interview completed as part of the initial application process and subsequent interviews may be completed in-person or by phone but shall not unduly disrupt a recipient's work or school schedule.

A. Required Verifications

The following, as well as any other information necessary to determine eligibility and verify need, must be verified and recorded during the eligibility determination process:

Income, Employment, and Job Search

- All countable income; income for the last 30-day period must be verified.
 - If this is not available or not reflective of current income, the Child Care Worker must document in VaCMS why and explain what income verification was used and why.
- Parents' employment or documentation of good cause for a parent not providing care in a two-parent household.
- Parent's job search attestation, as recorded on the Client Demographic screen in VaCMS, if this is the reason child care is needed.
- Proof that job loss occurred within the past 90 days at redetermination, if job search is the reason child care is needed.
- WIC Verification Form and Self-Attestation Form completed by the client receiving WIC.

Education and Training Participation

- Enrollment in an education/training program, if this is the reason child care is needed.
 - Acceptable verification includes (but is not limited to):
 - Grade report,
 - Class schedule,
 - Letter from the education/training program,
 - Progress report.
- For VIEW participants with approved education/training as a VIEW activity:
 - The VIEW Worker is responsible for verification.
 - Child Care Worker must document in VaCMS that verification was completed by the VIEW Worker (at both application and redetermination).
- For former VIEW participants receiving Transitional Child Care:
 - Child Care Worker must verify and document that enrollment is in a public institution of higher education or other postsecondary school licensed or certified by the Board of Education or SCHEV.

Child-Specific Verifications

- Head Start enrollment, if any child receiving a subsidy is enrolled.
- Special needs/disability of any child for whom subsidy payment is above the MRR.
- Immunizations for children, if applicable.

Household and Identity

- Residence.
- Identity of the applicant/recipient (at initial eligibility only).
- Citizenship/legal residency of children (at initial eligibility unless admitted only for temporary legal residency).
- Prior receipt of TANF.

B. Required Documentation

LDSS must ensure that case records are maintained accurately in VaCMS in accordance with case management guidance in this chapter. Any required documentation or verification not provided for in VaCMS must be kept in hard copy in the case file or in a scanned file according to departmental guidelines. Documentation must be provided in the case narrative if not included elsewhere in the case record or in the supporting verification.

When documenting verification sources in VaCMS, anytime “Other (Document Source)” is selected as the verification source, the type of verification used should be documented in the page level comments.

The following documentation is required and must be recorded in VaCMS for initial eligibility determination:

Child Care Forms:

Child Care forms are generated from VaCMS and are assigned a correspondence ID number by VaCMS. When a form is provided to the recipient, the Child Care Worker must record the correspondence ID number and date sent to the recipient in the case narrative, if the form is printed locally.

1. Child Care Subsidy Service Application and Redetermination Form.
2. VIEW/SNAP E&T ESP Activity and Service Plan, if needed.
3. Child Care Notice of Action Form.
4. Child Care Communication Form (if applicable).

C. Document Management Imaging System (DMIS) Scanning

The purpose of DMIS is to reduce paper and make workflows more efficient. It is recommended that paper documents be retained for a minimum of 3 days; however, the length of time that paper documents are retained will be at the discretion of the LDSS. LDSS remains responsible for all documentation requirements set out in this guidance.

Documents shall be scanned and indexed using the Client ID unless the document is program specific, such as the Child Care Application, Waitlist Screening, etc., which should be scanned and indexed by

case number. Child Care Workers shall refer to the Documents Required to be Scanned for DMIS available on FUSION for additional guidance on document type and subtype.

The following documents shall be scanned for all Child Care Cases as applicable:

1. Any manual forms sent to the household, not generated by VaCMS;
2. Applicant Identity Verification;
3. Child Care Case Record Transfer Form;
4. Childhood Immunization Certification Form, or other immunization verification form;
5. Citizenship/Legal Resident Verification for the child;
6. Pay Stubs/Employment Forms;
7. Residency Verification;
8. Self-employment Income Verification;
9. Signed Paper Application;
10. Signed Paper Redetermination Application;
11. Signed VIEW/SNAP E&T Activity and Service Plans, if applicable;
12. Waitlist Screening;
13. Waitlist Update;
14. School Enrollment/Satisfactory Participation; and
15. Education/Training Program Verification for former VIEW participants receiving Transitional Child Care.
16. WIC Verification Form and Self-Attestation Form;
17. Forms used in IPV process including;
 - Notice of Disqualification for IPV;
 - Notice of Intentional Program Violation;
 - Signed ADH Waivers, ADH Decisions, Advanced Notice of ADH, Referral for ADH;
 - Signed Repayment Agreements.

D. Reported Changes

LDSS must act on all reported changes as soon as possible but no later than 30 days after receiving such a report. Applicants/recipients shall be required to report only those changes outlined in section 3.8.

Recipients must be afforded the opportunity to voluntarily report changes on an ongoing basis. During the recipient's eligibility period, the LDSS shall record any reported changes in VaCMS, but action will not be taken that would reduce the recipient's authorized child care services or increase their copayment unless:

1. The recipient family's income exceeds 85 percent of state median income;
2. The recipient is no longer a resident of Virginia;
3. The recipient is found to have committed an intentional program violation/fraud;
4. The recipient was conditionally approved due to homelessness and/or job search;
5. The recipient voluntarily withdraws their child from care or requests that their case be closed;
6. A child is added to the household and/or recipient requests services for additional children during the eligibility period.

If a recipient voluntarily requests a change to their child's authorization schedule that would require less care, the LDSS shall adjust the child's authorization accordingly.

When a change is reported, the Child Care Worker must determine if the change impacts current or continuing eligibility and if a recalculation of copayment and/or a change in the amount of services authorized is necessary. The LDSS must act on information provided by the family that would reduce the family's copayment or increase the amount of child care services authorized. When the applicant/recipient reports a reduction in income, the change must be verified prior to the Child Care Worker taking action in VaCMS to enter the change in income.

Copayments shall only be increased at redetermination or if an additional child is added to the household or case in-between redetermination periods.

When adding a person to an ongoing case, the date of application/program request for adding a required member of the family unit will be the date it is reported that the individual is in the household. If a child is added to an ongoing case, or services are requested for a child included in the assistance unit, but not included as an eligible child at initial eligibility determination, the Child Care Worker shall evaluate the following prior to approval:

1. Citizenship/qualified alien status;
2. Need for child care; and
3. Immunizations, if the child does not meet an exemption listed in 3.3.

This change shall not impact any existing child's eligibility. When a new child is added to an ongoing case, the entire family's eligibility period should be extended to coincide with the new child's eligibility period. See 3.15. Eligibility Redetermination for additional guidance.

Revisions to the Child Care Application, the service plan and notations in the child care case narrative must be made accordingly. This is not a redetermination. Regardless of any changes made to the case during the 12 months of eligibility, the full annual redetermination must be conducted.

For reported changes, the Child Care Worker must update the appropriate screens in VaCMS and send the recipient a NOA, if applicable. This action must be recorded in VaCMS, including the correspondence ID number and date, if printed locally. The Child Care Worker must evaluate, when a change is reported, whether or not a change to the authorization is necessary including the need for a new POSO. If a termination POSO and/or a new POSO must be generated, a completed copy of each must be sent to the recipient and a copy of each will be available to the provider in Child Care PASS. The POSO conveys to the recipient the copayment amount and the amount of care authorized.

E. Case Transfers

When a recipient of child care services moves from one locality to live in another locality within the state during their eligibility period, the recipient is entitled to receive continued assistance without a break in services. To assure the continuation of assistance, the following procedures must be used:

1. If the move is the result of the family seeking temporary shelter/housing in another locality within the Commonwealth and the family intends to return to the original locality, the original locality shall keep the case for up to two calendar months. If the recipient family has

not returned to the original locality after the second month of services has been provided, the case must be transferred in accordance with the procedures outlined below.

In making a determination as to whether the original locality should keep the case for the two months, the LDSS should work with the recipient and consider the distance of the move and any hardships that would be encountered by the recipient family in reporting changes, etc.

2. If the move is permanent (i.e., the recipient family does not intend to return to the original locality or if the LDSS determines that the case should be transferred during a temporary move), the locality from which the recipient has moved (the transferring locality) must, within five working days of notification, complete a desk review and forward the child care case record along with a Child Care Case Record Transfer Form (032-25-0148-00-eng (07/18)) to the receiving locality.

The case record must contain all verifications and other documentation substantiating eligibility; this includes the scanning of all required documents in DMIS. The transferring locality must transfer the case in VaCMS and forward the entire case file to the receiving locality. If the transferring locality wishes to maintain a partial or entire case file, they must copy the portion that they wish to keep, and forward all of the original case file contents to the receiving locality.

The Child Care Case Record Transfer Form must be sent by certified mail, or via encrypted email, or by the courier service which is under contract with VDSS home office, signed then uploaded to DMIS by the receiving locality.

NOTE: If the transferring locality maintains any case information outside of VaCMS, the transferring locality must upload the documents to VaCMS prior to transferring the case to the receiving locality.

If the child care application is pending, and the applicant moves prior to the application being processed, the Child Care Worker must process the application in the locality in which the application originated using the applicant's physical address submitted on the application. If the application/case is approved, the Child Care Worker will then transfer the case to the new locality where the client is now residing.

Transferring Locality Responsibility

The transferring locality is responsible for the accuracy of the case and the authorizations at the time of the case transfer and must complete a desk review to assure the correctness of the case and authorizations. The transferring agency will be accountable for any errors that occurred prior to the case transfer that cannot be corrected until the next redetermination.

The desk review entails updating the case in VaCMS to reflect all changes known or reported prior to the recipient's move. The desk review also entails making sure that all redeterminations have been completed. If the case is overdue for redetermination, the transferring locality must complete the

redetermination prior to transferring the case. The transferring locality must make any needed changes/updates to the authorizations to include updating or discontinuing any existing authorization and creating a new one, if a new provider has been selected.

The transferring locality must send the recipient a Notice of Case Transfer (032-25-0149-00-eng (07/18)) providing notice that their case has been transferred and listing the name, address, and telephone number for the receiving locality.

The transferring locality must forward the child care case record along with a Child Care Case Record Transfer Form to the receiving locality.

Receiving Locality Responsibility

The receiving locality is responsible for completing a desk review within five working days of receiving the case and acknowledging receipt to the transferring locality using the Child Care Case Record Transfer form. A copy of the completed and signed Child Care Case Record Transfer Form must be scanned into DMIS.

The desk review entails updating the case in VaCMS to reflect any changes known or reported after the recipient's move. The receiving locality must also complete the review to assure the correctness of the case and to make any needed updates/changes to the authorizations. The Child Care Worker must generate and send the new POSO for the services authorized in the new locality to the recipient and the POSO will be available to the provider in Child Care PASS.

If targets/funding is not available in the receiving locality to cover the full costs associated with the transfer-in case, the LDSS will initially be allowed to over encumber funds to ensure the continued provision of services until the LDSS can fully transition the case into their caseloads. In instances where LDSS have caseloads that cannot be continued within fiscal year allocations due to transfer-in cases, the LDSS may request additional targets and funding following the procedures outlined in section 3.18.

If transfer in cases result in over encumbrance, no new cases can be opened until expenditures are reduced to within the LDSS' fiscal year allocation. Child targets may transfer via an Allocation Request with transferring cases if the receiving locality does not have sufficient targets available to serve all children on the case. If there are sufficient targets to serve all children, the losing locality retains all targets. In either instance, the losing locality may not request additional targets to make up for those transferred.

3.10. Forms Used In Service Planning

A. Required Child Care Forms

The Child Care Service Application and Redetermination Form (032-25-0147-06-eng (07/22)) is used for all applicants for child care services to provide documentation of eligibility requirements for subsidy services and assessment of need. This information must be completed at initial application or at redetermination.

The Child Care Service Plan provides a place to record service planning and consumer education information. This information must be completed/updated as part of the eligibility determination/redetermination process and before authorization for child care services can be initiated. A copy must be given to the recipient. A more detailed description of the form and its uses is found in section 3.6 of this guidance.

The Child Care Notice of Action Form is used to notify applicants and recipients of case actions which affect eligibility for child care, copayment amounts or the amount of service authorized. A more detailed description of the form and its uses is found in section 3.11 of this guidance.

B. Optional Child Care Forms

The Child Care Communication Form is used to notify applicant for or recipient of child care subsidy of a change in their application/case that does not affect eligibility, copayment or the amount of services authorized.

3.11. Notice of Action (NOA)

A. Due Process

Every time a case action affecting eligibility, per-child or total family copayment, or the amount of services authorized is taken a Notice Of Action (NOA) must be sent. Such notice must include the reason for the action and the notice of appeal rights and procedures, including the right to a fair hearing if the applicant or recipient is aggrieved by the LDSS' action or failure to act on an application. The NOA may be sent for more than one reason.

Applicants must receive notice of the case action a minimum of 10 days in advance. The LDSS is responsible for generating and communicating the NOA in a timely manner accordingly. A minimum of 14 days is recommended.

A copy of the NOA will be generated from and retained in VaCMS each time Eligibility is certified.

The Child Care Worker must evaluate whether the case action for which the NOA is sent affects the case authorization. If so, a revised POSO must be generated in VaCMS, and a completed copy must be sent to the recipient. The revised POSO will be available to the provider in Child Care PASS. The POSO conveys to the recipient the amount of their copayment and the amount of child care authorized.

If a NOA is sent to close a case and the recipient takes no steps to comply, the case is closed. If the recipient complies with the action stated as the reason for case closure within the 10-day NOA period, a revised NOA must be provided to the applicant/recipient.

Changes which involve a reduction in services must be made effective as of the first of a month. The change must be made effective at the beginning of the month following the month the change is reported or at the beginning of the month following the 10-day period of notification of the NOA.

The NOA is to be used to communicate official eligibility decisions to the applicant or recipient. This includes information such as approval or denial of benefits, copayment amounts, the level of services authorized, and other determinations that affect eligibility. NOTE: Never send a copy of the applicant/recipient's NOA to the Provider.

B. Child Care Communication Form

The Client Communication Form is to be used to request additional information or documentation from the applicant or recipient. It may also be used to clarify case-specific issues that do not impact eligibility decisions.

Example

It would not be appropriate to use the NOA to request income verification. However, if the applicant/recipient does not provide the requested income verification, it would then be appropriate to send the NOA to deny the application or close the case.

3.12. Eligibility Period

The eligibility period for TANF (non-VIEW), transitional child care, Fee Program, and Head Start begins with the effective date of the approval of the child care application. The eligibility period for VIEW and SNAP E&T participants begins with the date of application/referral from the VIEW or SNAP E&T program. The exceptions to the effective date of the eligibility period described in section 3.2 may apply. Eligibility will be redetermined, as described in section 3.15, in the final month of the eligibility period.

Recipients will be eligible for child care subsidy and services for a minimum of 12 months before eligibility is redetermined unless:

1. The recipient family's countable income exceeds 85% of state median income;
2. There is a finding that the recipient committed fraud or intentional program violation;
3. The recipient is no longer a resident of Virginia;
4. The recipient requests that their case be closed; or
5. The recipient family was conditionally approved under one of the two scenarios described in Section 3.2E and did not provide required verifications within the 90-day period.

Recipients of TANF, Head Start, or SNAP E&T child care subsidy who subsequently become eligible for Transitional or Fee child care within their 12-month period of eligibility shall have their eligibility program category changed without an increase to any existing copayment amount. Any changes made to the eligibility program category shall not extend the current eligibility period. When there is a change in the eligibility program category, the Child Care Worker must take appropriate action to update the program funding category on any existing authorization(s) and validate the copayment amount on the authorization(s).

A. Changes During Eligibility Period

Aside from the situations described above, changes experienced during the eligibility period do not affect recipients' eligibility. Recipients retain eligibility and should continue to receive services at least at the same level, regardless of:

- Any change in residency within the State (refer to section 3.9 regarding case transfers);
- A any eligible child turning 13 or 18 (child with special needs) years of age;
- A change in family income, if that family income does not exceed 85% of state median income;
- Any temporary change or a cessation of work or attendance at a training or education program.

During the recipient's eligibility period, the LDSS shall record any reported changes in VaCMS, but action will not be taken that would reduce the recipient's authorized child care services or increase their per-child copayment amount. Refer to section 3.9 regarding reported changes.

B. Copayment Changes

During the eligibility period, the Child Care Worker must act on any changes reported by the recipient that would reduce the family's copayment amount. Per-child copayment fees may not be increased for any family during the eligibility period. A family may be assessed an additional per-child copayment if an additional child or children are added to the household, or services are requested for an additional child and the family has not already been assessed a copayment for the maximum three children.

Reported reductions in income must be verified prior to the Child Care Worker taking action in VaCMS to record the change in income. The Child Care Worker must take appropriate action to validate or update the copayment amount on any existing authorization(s).

C. Determining New Eligibility Period

An eligibility redetermination is required at the end of the current eligibility period. After the eligibility redetermination has been completed and if the recipient is determined eligible for a new eligibility period, the new eligibility period will begin the date following the end of the previous eligibility period.

Recipients with a child turning 13 or 18 (child with special needs) years of age within 23 months of the current eligibility determination, shall have their final eligibility period extended beyond the 12 months. The recipient's eligibility period will be extended to coincide with the month the child turns 13 or 18 years of age.

3.13. Authorization

Once a child is determined eligible for child care services, the amount of services the child requires must be recorded in VaCMS and approved. The authorization process allows the Child Care Worker to approve the receipt of child care services for a specific amount from a specific provider.

Prior to initiating a new authorization with an unlicensed provider, the Child Care Worker must review the current authorizations for the provider in VaCMS to ensure that the additional authorization(s) would not cause the provider to exceed the threshold for licensure.

Authorization for child care and the completion of the Child Care POSO are the responsibility of the local Child Care Worker. Calculations are performed by VaCMS based on the information entered by the Child Care Worker. A POSO must be initiated by the local Child Care Worker and approved, to complete the authorization of child care services.

The POSO serves as the contract for payment between the state and the provider. It is used to communicate authorization information to both the provider and the family. The POSO is generated from VaCMS and is available to the provider in Child Care PASS.

The provider should review the POSO and contact their Child Care Worker if there are errors. Formal signature and return of the POSO is not required. The provider's provision of services and acceptance of payment from the Department will constitute their acceptance of the POSO.

The recipient must receive a copy of the completed POSO; the copayment and authorized amount of care appear on the POSO.

The following information is recorded during the authorization process:

1. The child care provider;
2. Whether the special needs rate is authorized or if in home care is provided;
3. The funding program for the services authorized;
4. The authorized copayment;
5. The child care schedule; and
6. The registration fee.

When a case is closed and/or an authorization is discontinued before the POSO termination date, a termination POSO must be generated and sent to the recipient and will be available to the provider in Child Care PASS. The provider does not need to return a signed termination POSO.

If a provider informs the case manager that a child has been unenrolled, the case manager must:

- Discontinue the authorization for that child.
- Generate a Notice of Action (NOA) notifying the parent of the reason for the discontinued authorization.
- Document the action and reason in the case narrative.
- Advise the parent that they may select another approved provider for continued services or request voluntary closure of the case.

The case will remain open, however, if no children are enrolled and utilizing care by the family's next annual redetermination, the case may be closed.

A. Age Range Definitions

In applying the appropriate MRR, the LDSS must use age range definitions used by the Virginia Department of Education (VDOE) Office of Child Care Health and Safety (OCCHS) for child day centers, as outlined in **8VAC20-780-10** of the [Virginia Administrative Code](#).

The age range definitions for child day centers are:

1. Infants - children from birth up to 16 months;
2. Toddlers - children from 16 months up to 24 months;
3. Two-year-olds - children from 24 months up to 36 months;
4. Preschool - children from 36 months up to the age of eligibility to attend public school (five years by September 30). Children turning five after September 30 are considered preschool until they start school the following year; and
5. School age - children eligible to attend public school, age five or older by September 30 of that same year. Children turning five after September 30 are considered preschool until they start school the following year.

NOTE: In VaCMS the school age rate is effective starting the first of August for all children who turn age 5 before September 30th. If the child turns age 5 after September 30th, the school age rate will be effective starting the first of August of the following year.

B. Annual Registration Fee

A single annual registration fee of up to \$100 per child will be paid to Level 2 Providers each local fiscal year (June 1 – May 31). This payment can be made only if the provider charges this as a separate fee to the general public.

An additional registration fee can be paid to a new provider during the fiscal year only if payment is required for reasons beyond the control of the recipient or due to extenuating circumstances, such as a provider closing or the family moving. This decision must be documented in the case record. The provider's decision to charge an additional registration fee or a family's decision to change providers is not an extenuating circumstance.

C. Guidelines for Authorizing Hours and Days of Care

The authorized reimbursement to vendors/providers for the care of a child is based on a daily unit of service (either full-day or part-day). The total cost of care, including any special programs and transportation provided by the vendor, must not exceed the Maximum Reimbursable Rate (MRR) for the

child's age and type of care. Transportation costs cannot be paid separately; they must be included in the overall cost of care recorded on the POSO.

NOTE: Child care subsidy funds may not be used to pay vendor activity fees

Reimbursement may exceed the MRR for children who have documented special needs. For more information, see 3.14.B. Maximum Reimbursable Rates.

Transportation time needed for the parent to travel from the provider to the site of their approved activity and from the activity to the provider will be included in determining the amount of care needed.

In instances where a family only requires part-day care, full-day units may be authorized when all of the following conditions are met:

- The provider is Level 2;
- The provider requires the general public to pay for a full day of care regardless of time used; and
- No part-day care is available within a 30-minute commute one-way for the recipient.

This allowance does not apply to school-age children or young children who are receiving wraparound care for another publicly-funded early childhood care and education (ECCE) program, if only part-day authorizations are required based on the parent's schedule.

The total number of days that may be authorized for a parent who works from home will not exceed the number that is needed for work only.

The maximum number of hours that may be authorized and/or purchased per week is 60. A "week" is the seven-day period from 12:00 a.m. Sunday to 11:59 p.m. Saturday.

EXCEPTION: If a recipient's employment requires them to work more than 60 hours some weeks, such as a corrections officer or firefighter, but the average amount of care for the week does not exceed 60 hours, payment may be made.

Example

A parent works 80 hours a week for two weeks and 40 hours a week for the other two weeks. That amounts to 240 hours for the month. Dividing 240 hours a month by 4.0 weeks equals 60 hours a week.

Providers will be paid for all of the units of care authorized in VaCMS for the period of 1st – 15th and 16th – end of the month. Parents must record attendance daily, including absences. Child Care Workers must only authorize the care needed to meet the needs of the parent.

Care For Non-Traditional Work Hours

Payments will be made while a parent sleeps in situations where the parent works non-traditional hours and must sleep for some of the hours while the children are awake. The total number of hours covered

will not exceed the number that would have been needed for work only. The details of this arrangement must be recorded in the case record.

Care During Classes

For parents enrolled in an approved education/training program, a full day or part day of care may be authorized to ensure successful completion of all activities related to the program and efforts to pursue greater self-sufficiency. Parents shall provide a written estimate of the time needed outside of classes, on average, including to study; do homework; participate in labs, lectures, unpaid internships, or other educational activities; and networking to support job attainment.

Child care may be approved for parents enrolled in education or training activities that total a minimum of 6 credit hours or the equivalent in required in-person instructional hours. For technical or vocational programs that structure coursework differently (e.g., one course of 3 credit hours requiring at least 6 hours per week of on-site or hands-on attendance), workers should treat the program as meeting the minimum enrollment requirement. Verification of instructional hours may be requested from the parent or program.

Web-based or correspondence learning must be offered by accredited universities or colleges. Web-based or correspondence learning does not need to follow a set schedule. Documentation of online course work would include, but not be limited to, a printout of the recipient's class schedule and documentation from the learning institution.

Care During Job Search

Full or part day child care may be approved for job search based on parent discretion. The Child Care Worker must accept the applicant/recipient's declaration that they are participating in job search and must not require verification or documentation at initial eligibility.

A family with a child care need due to job search at redetermination must demonstrate that their job loss occurred or other approved activity ended in the 90 days prior.

The average amount of care authorized for a week cannot exceed 60 hours.

D. Sibling Discounts

If the provider offers a sibling discount that is only available to the general public if payments are made in advance, recipients would not be eligible for the discount as authorized payments are made by reimbursement.

E. Full Day and Part Day Rates

A full day rate is based on care for at least five hours up to 12 hours per day. A part-day rate is based on care needed up to four hours 59 minutes per day.

Payment for more than 12 hours per day must not be authorized except in extenuating circumstances in which the need for care due to the parents' work or school schedule can be documented in the case

record. Additional part day units may need to be authorized for the hours of care over 12 in one day, unless the provider's actual charges are less than the part day MRR. The average amount of care authorized for a week cannot exceed 60 hours.

If the parent's need for before and/or after school care is five or more hours per day, the LDSS will authorize full day care and the provider may receive the full day MRR.

If part day care is needed and no child care provider is available within a commute of a half an hour one way, full day care may be purchased for Level 2 Providers. If part day care is available and the parent chooses to use full day care, the parent must pay the difference.

Examples

1. Extenuating Circumstances

- The parent is required to work 24-hour shifts. More than 12 hours of care a day can be authorized up to 60 hours a week. If a firefighter works 60 hours per week in two 24-hour shifts and one 12-hour shift, 60 hours can be authorized for the week.
- A parent works 8 hours per day, attends school 3 hours per day, and drives 2 hours per day from the provider to work and from school to the provider. This adds up to 13 hours of care needed. Assuming that the provider's rates are greater than the MRR, one full day unit and one part day unit would be authorized.

2. Part Day

- Care is needed one hour before school and two hours after school. Three hours of care are needed. The part day rate would be authorized for the day.

3. Full Day

- Care is needed one hour and thirty minutes before school and three hours and thirty minutes after school. The full day rate would be authorized for the day as a total of five hours of care is needed.

F. Provider Holidays and Planned Closure

Providers may be paid up to 15 days of planned closure for holidays, vacations, and professional development or planning time as identified in the provider agreement.

Expectations for Providers

Planned closures are part of a provider's standard operating schedule and should generally be communicated to sponsors and entered into KinderConnect at least four weeks in advance.

Providers must also keep a record of communications announcing planned closure days to families if they were not part of the schedule at the beginning of the program year, as defined by the provider.

Designated Holiday vs. Non-Holiday Closures

The following 11 designated state holidays will remain pre-populated in VaCMS:

- New Year's Day
- Martin Luther King, Jr. Day
- Presidents' Day
- Memorial Day
- Juneteenth
- Independence Day
- Labor Day
- Veterans Day
- Thanksgiving Day
- Day After Thanksgiving
- Christmas Day

Providers should mark up to 15 planned closure days as non-operating days in PASS.

Providers will be paid for a full day on noted holidays and non-operating days when they are closed, have children authorized for full-day attendance, and have no attendance recorded. If providers are operating for a designated state holiday, attendance for authorized children must be recorded for provider to receive payment.

Providers are still expected to notify local departments of social services in advance of extended periods of closure, defined as five consecutive days or more.

[Zeroing Out Authorizations for Extended Periods of Planned Closure](#)

When a local department receives notice of an extended period of closure, workers should document evidence of the closure and zero out the units for the provider on the fifth day of closure and beyond.

PASS will no longer auto-classify holidays during closures. The correct interpretation is now situational:

- If the provider records a holiday in PASS as a planned closure, the date is treated the same as any other self-selected closure day. It will be included in the sequence of closure days counted toward the five-day limit, and the locality must begin zeroing out units on the fifth reported day of closure and beyond.
- If the provider does not record a holiday as a planned closure, then it is treated as a standard operating day for purposes of the five-day calculation. The holiday would not be counted toward the closure sequence, and the clock for zeroing out units would move accordingly.

This approach ensures consistency, holds providers accountable for recording their closure dates in PASS in a timely manner, and allows localities to apply the five-day rule based solely on what the provider's reported days of planned closure.

G. Provider Unplanned Closures and Sick Days

Unplanned closure days are not part of a program's typical operating schedule. Programs may close unexpectedly due to illness, staffing issues, or other reasons.

The CCSP will make payments for short periods of unplanned closure, defined as 4 or fewer consecutive days. Providers are expected to notify local departments if a period of unplanned closure will extend to five days or more. Local departments should document evidence of the closure and zero out the units for the provider on the fifth day of closure and beyond. Local departments should also

In cases of extended closures (as described above, if a provider is closed five or more consecutive days), the locality can authorize backup or secondary care at another provider. The worker should document rationale and evidence of the primary provider closure and zero out the units for the primary provider on the fifth day of closure and beyond. Examples of evidence of closure include a copy of the provider's schedule or a screenshot of a notification.

Family day home providers in the Child Care Subsidy program may be paid for up to three sick days for themselves or a family member.

H. Absent Days for Children

An absent day means any day that a child is authorized to be in the provider's care, the provider is open and serving children, and the child is not in attendance. Absences must be recorded in Child Care PASS no later than nine days (defined as the current day plus the previous eight calendar days) following an absence. Parents should not enter any attendance (including an absence) when the provider is not in operation, including holidays and other planned and unplanned provider closures.

The Department will pay Level 1 and Level 2 providers for up to 60 absent days per child per fiscal year (June 1 – May 31). The total number of allowable absent days will be available upon case approval and at the beginning of each fiscal year thereafter.

When the child does not attend, as expected, on the first day of authorized care, providers are instructed to:

- 1) Contact the parent/guardian to determine whether the child will attend care and when;
- 2) Record an absence in PASS;
- 3) Contact LDSS to report the no-show.

If the child is unexpectedly absent for 5 days, providers should take the following steps:

- 1) Record absences in PASS for days 1-5;
- 2) Contact the parent or guardian for a reasonable explanation regarding the absences;
- 3) If no response from parent/guardian, stop recording attendance in PASS and contact LDSS to report the 5 consecutive absences.

If, however, the parent/guardian provides a reasonable explanation for the absence (e.g., illness, family emergency, travel) and indicates a reasonable expected return date, it is acceptable for the provider to record absences beyond the 5 days. Providers must retain documentation of this communication.

When a child has extended absences, defined as 30 days of no recorded attendance, indicated in the VaCMS "tasks and reminders" tab alerts, LDSS should contact families to verify that care is needed,

document any outreach attempts in the case narrative, understand if families need additional support to access care, and update authorizations, if needed.

I. Care When Pre-K-12 Schools Are Closed

Local departments should use Snow/Emergency Day(s) for children enrolled in PreK-12 school settings to account for school closures that were not scheduled in the initial school calendar and are therefore not reflected in the family’s authorization for care. Snow/Emergency/Other Closure days should be added to “Snow/Emergency Day(s)” at the bottom of the school calendar in VaCMS to add full days to any calendar month that can be utilized for child care in the event of unexpected school closures. This allows families to record full days for their children who need full day care due to emergency/other school closure days. This does not apply to closure days when providers are closed. This is for care at a provider when public schools are closed.

Local departments may determine the appropriate number of Snow/Emergency Day(s) to bank, based on what is typical in the locality.

J. Authorizing Care for Children Enrolled in Other Publicly-Funded ECCE Programs

Families may be eligible to participate in multiple ECCE programs to meet their care and educational needs and preferences for children. Services should not be authorized for pre-school-aged children (ages 5 and younger, not yet in Kindergarten) during hours that are supported by another public funding source, including but not limited to:

- Virginia Preschool Initiative (VPI)
- Head Start
- Early Head Start
- Mixed Delivery

CCSP services may be authorized for hours and/or days that are not covered by these programs. For VPI, Head Start, and Early Head Start, this may include hours that “wraparound” the instructional day and full days during the summer.

Mixed Delivery payment rates reflect the cost of full-day, year-round care. Children participating in Mixed Delivery should not be authorized for services in the Child Care Subsidy Program unless the parent has child care needs outside of the Mixed Delivery grantee’s operating hours (i.e., overnight or weekend care).

K. Authorizing School-Age Care during Instructional Hours

In general, school-age children should be physically present at school during instructional hours. K-12 schools are responsible for providing a safe learning environment for children. Consequently, as stated in 1.2.C. and 3.3.I., child care services for school-age children should not be authorized during the instructional day when school is in session, including for children participating in virtual learning, unless there are valid and documented reasons why the children must be out of school. These would be extenuating, temporary circumstances as described below.

- Families may request temporary (defined as 4 weeks or less) care during instructional hours while a school-age child participates in virtual learning when the child is experiencing an emergent mental, physical, or emotional health issue that temporarily prohibits their physical presence at school. A note from a qualified health professional is required as documentary evidence.
 - This temporary approval is intended to provide the parent with time to make alternative arrangements with the school division to facilitate a safe learning environment for the child.
 - Local departments may approve no more two instances of temporary care during instructional hours in a 12-month eligibility period per school-age child.
 - If the suspension is not temporary, parents must provide a letter from the school stating the suspension time frame to their child care case manager. The case manager must review this information with their supervisor, then forward the letter to the Regional Consultant, who will route it for review by VDSS/VDOE. A final determination will be provided based on the review.

3.14. Payments

A. Beginning Date of Service Payment

The beginning date of service payment for TANF (non-VIEW), transitional child care, Fee Program, and Head Start Wrap-Around participants is the date the applicant is determined eligible and a provider approved by the Department, is selected.

The beginning date of service payment for VIEW or SNAP E&T participants may begin with the date of application/referral from the VIEW or SNAP E&T program if the applicant is determined eligible and a provider approved by the Department, is selected.

If a case is certified for approval more than 30 days after the signed application is received by the LDSS, payment may begin only from the date of certification; unless it is a result of an agency delay. Agency delay means the LDSS is unable to take action on an application within the 30-day application-processing period due to circumstances beyond their control. Awaiting provider approval is not an example of an agency delay.

B. Maximum Reimbursable Rates

The Department establishes MRR for child care by type of care, age, and region. These rates are estimates to reflect the cost to provide quality care across the Commonwealth. LDSS cannot establish their own MRR.

MRR are stored in VaCMS to perform authorization calculations. VaCMS will calculate the rates automatically based on the MRR information stored in the system.

Providers will be paid the MRR (less any required copayment) based on the provider's locality, even if the rate they charge private pay families is lower than the MRR. Providers may request to be paid less than the MRR (equivalent to the rate they charge private-paying families) by completing the form "Child Care Subsidy Provider Form Request to Be Paid Less Than the Maximum Reimbursable Rate" (032-22-1110-01-eng (12/22), 032-22-1110-01-spa (12/22)). Providers who opt out of receiving the full MRR may update their rates no more than twice per year and will be paid in accordance with the rates charged to the public.

The Department will not pay more than the established MRR. If the provider wishes to collect the amount due over the MRR, the provider will collect this directly from the parent of the child.

EXCEPTION: For children with special needs, payment of up to two times the MRR for the child's age is allowed when it is appropriate as determined by the LDSS in consultation with the parent, provider, and appropriate professional. Details of this consultation must be recorded in the case record. The evaluation by an appropriate professional must be provided in writing.

C. Child Placed at a Provider with Rate above MRR

Providers that have private tuition rates above the MRR have the option to charge CCSP-participating families the difference. Parents are responsible for making these payments directly to the provider,

unless the LDSS elects to pay the additional amount with local-only funds for all parents who must pay a charge above the MRR.

When agencies use local-only funds to subsidize the cost of care above the MRR, this local procedure must be approved by the local board of social services and recorded in the minutes, including the maximum allowable subsidy. A copy of this locally approved procedure must be kept on file at the LDSS and available for review by state monitors and/or auditors. Subsidy decisions must not be made on an individual case basis. Reimbursement cannot be requested by the LDSS for these expenses.

D. Direct Payment to Provider

VDSS will make payments for child care subsidy by means of direct payment to the provider upon submission of time and attendance data recorded in Child Care PASS. This is the standard method of payment to be used.

LDSS must use the Child Care Purchase of Service Order form to authorize direct payment to providers.

E. Payment for In-Home Care

Before authorizing payments for in-home care, LDSS must assure that the definition of in-home child care is met. The cost for in-home care must not exceed the local MRR and must meet state and federal minimum wage requirements. The cost may be above the local MRR only for children with special needs, not to exceed two times the MRR. The LDSS must have the applicant/recipient sign the Authorization to Act as Agent on Customer's Behalf for In-Home Care, because for in-home care, FICA (Social Security and Medicare taxes) and unemployment taxes will be withheld and paid by the Department.

In-home care may be approved when the total child care cost does not exceed the local MRR and still allows authorized payment of at least the Virginia minimum wage. Although the Fair Labor Standards Act (FLSA) requires payment of at least the federal minimum wage, in-home providers fall under Virginia minimum wage provisions due to the IRS's determination that the provider and parent have a common-law employer-employee relationship. Employers of in-home providers should be aware of both federal and state labor laws. Informational resources are available at www.dol.gov/agencies/whd/flsa. The amount paid to the provider for the number of hours per week for child care needed, must not exceed the MRR per individual child. These calculations must be completed outside of VaCMS.

In-Home Care Restrictions:

CCSP funds cannot be used to pay for in-home care provided by an individual who resides in the same household as the child receiving care. For example, if a grandparent lives in the same home as both the child and the parent, that grandparent is not eligible to receive CCSP funding to provide care for the child.

In-Home Care Calculation:

Step 1: Determine the cost of care for each child using the MRR. Total the cost of care for all children.
Step 2: Determine the cost of care for the number of hours per week for which care is needed. Multiply the greater of the federal minimum wage or the Virginia minimum wage by the number of hours per week care is needed.

If the cost of care in Step 1 is less than the cost of care in Step 2, the family is not eligible for in-home care.

If the cost of care in Step 1 is greater than the cost of care in Step 2, the family is eligible for in-home care.

Example

Virginia Minimum Wage

8 hours per day, 5 days per week. 40 hours of care per week.

Step 1: Infant MRR Full Day Rate: \$48 x 5 days = \$240

Preschool MRR Full Day Rate: \$39 x 5 days = \$195

Cost of care at Level 1 MRR: \$435

Step 2: Cost of care at minimum wage: \$12.41 x 40 hours = \$496.40

The cost of care in Step 1 is less than the cost of care in Step 2. In-home care is not an option since the cost of care at minimum wage exceeds the cost of care at MRR.

In-home providers must be paid at the Virginia or federal minimum wage rate, whichever is higher. Those in-home providers will be eligible to receive payment at the minimum wage up until the redetermination date for the case. During redetermination, the guidance outlined above for approving in-home care providers will apply, meaning that in-home care may be approved when the total child care cost does not exceed the local MRR.

In-home care providers will be paid the authorized hours of care for the week that are reflected in the Need for Services Schedule (Calendar). The Child Care Worker must record the authorized hours of care in the Comments section of the POSO so that the parent and provider will know the total number of hours authorized per week. When care is provided for multiple children, payment will be calculated using the authorized hours of care recorded for the child with longest duration of care.

In-home care providers are neither employed by the VDSS nor by any LDSS based solely on their provision of child care subsidy services.

Copayments should be included in the total payment amount when determining if minimum wage requirements were met.

Any time In-home care is approved by the Child Care Worker, the Child Care Supervisor must review the case to ensure that the necessary selections have been made in VaCMS and the necessary paperwork has been completed in order to ensure proper payment and withholdings. The Supervisor should document their review in the Case Narrative section of VaCMS.

When creating an authorization for In-Home care, the Child Care Worker must ensure that In-Home care is noted in the Authorization General Information section of VaCMS. It is only by selecting this option that the required taxes are withheld from these providers.

F. Additional Payments

Payments will be made in the following instances when individuals are participating in an approved activity for any child care program, or in an assigned activity for VIEW or SNAP E&T:

1. For a provider other than the primary provider if the child is sick. A second POSO covering the same time period as the first is allowable. The details of this arrangement must be recorded in the case record.
2. For care while a parent sleeps in situations where the parent works non-traditional hours and must sleep for some of the hours while the children are awake. The total number of hours covered will not exceed the number that would have been needed for work only. The details of this arrangement must be recorded in the case record in addition to the purchase information and clearly identifiable as such.

3.15. Eligibility Redetermination

Redetermination Timing and 12-Month Rule

A full eligibility redetermination is required at the end of the 12-month eligibility period, regardless of any interim changes made to the case. Recipients shall not have their eligibility for child care services redetermined prior to the end of their eligibility period. The 12-month cycle begins with the effective date of the child care case approval and is calculated in VaCMS.

Adding a New Child During an Existing Eligibility Period

Section 98.21(a) of the CCDF rule prohibits eligibility redetermination from occurring earlier than 12 months after initial eligibility. This means that if a family adds a child to the family unit during an existing minimum 12-month eligibility period, the new child's eligibility cannot be redetermined on the same timeline as the family's current eligibility period. The added child should not have their eligibility redetermined prior to 12 months after being determined eligible, even if that is after the family's current redetermination due date. In this situation, the entire family's eligibility period should be extended to coincide with the new child's eligibility period.

Twelve months is only a minimum requirement, and the Department can make the eligibility period longer than 12 months to sync the family's redetermination due date across all children while also ensuring that every child receives the full 12 months of eligibility before redetermination. The redetermination date will need to be manually corrected in VaCMS by completing a redetermination override. Child Care Workers must provide details regarding the reason for the override in the comments field.

Redetermination When a Child Ages Out

The recipient's eligibility period and redetermination date will be extended if the only child receiving services turns 13 or 18 years of age (child with special needs) within 23 months of the current eligibility determination. The recipient's final eligibility period/redetermination date will coincide with the month that the child turns 13 or 18 years of age.

If there is an existing older child (with no special needs) who will age out within 12 months of new redetermination period and a new eligible child needs to be added, then age out child will be changed to "Included" child in VaCMS automatically at the end of their birth month or 12 months, whichever is longer, as long as they have participated in CCSP for 12 months since their last eligibility determination. The family's new redetermination date shall be 12 months from the date when new eligible child has been added.

Interview Requirements and Criteria Review

Eligibility redetermination means that all eligibility criteria must be evaluated and a contact must be made with the recipient. This contact may be in person or by phone and should not unduly disrupt a parent's work schedule. LDSS must offer recipients the option to participate in this interview by phone. Refer to the list under subsection C for criteria that must be evaluated.

Redetermination Notification and Packet

The redetermination process begins when the recipient is sent the Notice of Redetermination form (032-12-0131-00-eng (08/17)) and the Redetermination Application. The Notice of Redetermination

provides notification to the recipient that Child Care Subsidy and Services is about to end and that a new application, interview, and verification of eligibility are required.

The Redetermination Application provides the recipient with the information on file and the opportunity to update that with current information and a generic checklist of required verifications needed to complete their redetermination. VaCMS will generate and central print both the Notice of Redetermination and Redetermination Application 45 days before the redetermination is due. The redetermination packet consists of the Notice of Redetermination, the Child Care Subsidy Redetermination Application, and all applicable verifications required to determine continued eligibility for the household.

Required Documents and Automatic Closure

A Child Care Subsidy Service Redetermination Application must be completed, and the Child Care Service Plan must be updated at redetermination. If the recipient is a participant in VIEW or SNAP E&T and there is a current Activity and Service Plan or Plan of Participation on file, these may serve as the service plan. Current means that the forms cover the period of child care service delivery.

If the recipient does not return the signed redetermination application and all required verifications, or the Child Care Worker does not record the redetermination packet received date by the 15th day of the redetermination month, VaCMS will automatically close the Child Care case effective the first day of the month following the redetermination month and generate a NOA.

If a client submits a redetermination application without all required verifications, the worker must take affirmative steps to document and manage the case appropriately. The following actions are required:

- Document receipt of the submission, clearly identifying what was received (e.g., application only) and which required verifications were missing at the time of review.
- Document all contact with the client regarding outstanding verifications, including the date, method of contact (written notice, phone, VaCMS notice), and the specific documents requested.
- Provide the client an opportunity to submit missing verifications within the current eligibility period and clearly communicate the due date.
 - The worker must send the applicant or recipient a checklist of all required verifications, along with a specified deadline for submission
- Document that eligibility could not be determined when required verifications are not submitted by the deadline.

NOTE: If the case closes and the recipient submits the complete redetermination packet prior to the effective closure date, the Child Care Worker must reinstate the case in VaCMS and then complete the redetermination case action. Reinstatement alone does not complete the redetermination. The reinstatement NOA must be mailed to the recipient and documented in the case narrative.

Prior to reinstating a case, the worker must review all submitted documents to ensure they are accurate, current, and applicable, and that all required verifications to determine continued eligibility have been received.

If additional verifications are identified during or after the interview, the case must not be certified until those documents are received. The worker must manually close the case as close as possible to the eligibility end date and clearly document the reason for closure.

Exception for VIEW or SNAP E&T Participants

EXCEPTION: If the appropriate service plan has not been received at the time authorization must be determined, the Child Care Worker can contact the VIEW or SNAP E&T worker to confirm the need for child care services. This contact must be documented in the case record and may serve as documentation until the appropriate form is received. The form must be received and made a part of the case record within two weeks of the telephone verification.

Timeliness of Redetermination Submission

A completed and signed redetermination application submitted by the first day of the redetermination month will be considered a timely application. The Child Care Worker must approve or deny the application by the last day of the redetermination month as long as the recipient has been given at least 10 days to provide all required verifications.

Temporary Leave During Redetermination Period

When the client's redetermination period begins, if they are on temporary leave from their approved activity (e.g. FMLA, parental leave, etc.), the client should still be deemed eligible for child care subsidy services as long as they still meet the financial and non-financial eligibility requirements. The client must provide the last 90 days of pay stubs prior to the start of their temporary leave.

A. Redetermination Interview

An interview must be completed with the recipient as part of the redetermination.

The interview may be conducted by phone or in person, but a face-to-face interview cannot be required at redetermination. During the redetermination interview, the Child Care Worker will enter the updated service plan details in VaCMS as discussed with the recipient. The updated service plan does not need to be signed by the recipient. A copy of the updated service plan shall be mailed to the recipient after the eligibility redetermination is completed.

The recipient's rights and responsibilities must be reviewed and explained.

B. Changes Prior to Redetermination

If information is received prior to the date of the annual redetermination that affects eligibility, the LDSS must evaluate the information, record it in VaCMS and act on any need for change within 30 days of receipt of that information. This is not a redetermination. During the recipient's eligibility period, action will not be taken that would reduce the recipient's authorized child care services or increase their copayment unless:

- i. The recipient family's income exceeds 85 percent of state median income;

- ii. The recipient is no longer a resident of Virginia;
- iii. The recipient is found to have committed an intentional program violation/fraud;
- iv. The recipient was conditionally approved due to homelessness and/or job search;
- v. The recipient voluntarily withdraws their child from care or requests that their case be closed;
- vi. The child enrolls in kindergarten and requires less child care, as services are not to be purchased for school age children during the portion of a day when public education is available;
- vii. The child enrolls in another publicly-funded early childhood program that covers the cost of all or part of the day for which care is currently authorized; or
- viii. The recipient requests services for additional children added to the household or has child care services authorized for a child(ren) that were not initially requested (a per-child copayment fee may be assessed for up to three children receiving assistance).

C. Documentation at Redetermination

Details of the redetermination must be recorded in VaCMS. This documentation must include, but is not limited to, verification of:

1. All current earned income must be verified using the most recent 30-day period. Do not include income from jobs that have ended prior to the date of application or redetermination. However, if the individual has seasonal employment (such as a teacher on a scheduled break) and is expected to return to work, that income must be included.
 - i. If income verification for the last 30-day period is not available or is not reflective of the recipient's income, the Child Care Worker must document why and must explain what income verification was used and why.
2. Enrollment and satisfactory progress in an education/training program if this is the reason child care is needed. Examples of verification include:
 - i. A copy of the recipient's class schedule;
 - ii. A grade report;
 - iii. A copy of enrollment information from the education/training program;
 - iv. A letter from the education/training program indicating satisfactory progress; or
 - v. A progress report from the education/training program may be used.

NOTE: If the applicant is a VIEW participant and the education/training is an approved VIEW activity, verification of enrollment in education/training is the responsibility of the VIEW worker and does not have to be re-verified for child care. The Child Care Worker must document that the verification was performed by the VIEW worker.

3. Any change in residence from what was reported at initial application;
4. Head Start enrollment if any of the children receiving a subsidy are enrolled in Head Start and funded through the Head Start cost code 87801; and
5. Special needs of any child for whom authorization is above the MRR, unless the original documentation indicates a permanent condition.

6. Verification of job loss within the past 90 days, if job search is the approved activity.
7. Verification of receipt of Other In-State Benefits (TANF, SNAPET, Medicaid, or WIC), when applicable.
8. Good cause in two-parent households must be reverified unless the existing documentation confirms a permanent condition.

D. Notice

A NOA must be sent to the recipient upon completion of the redetermination. All contacts must be recorded either on the screen designed to collect the information or on the case narrative.

If the case closes and the complete redetermination packet is received prior to the effective closure date, the Child Care Worker must reinstate the case in VaCMS, mail a reinstatement NOA, and document both the reinstatement and the completion of the redetermination case action in the case narrative. Reinstatement alone does not complete the redetermination. In this scenario, the recipient will receive two NOAs: one for the reinstatement and one for the redetermination.

If a recipient is determined ineligible at redetermination, an NOA must be sent to the recipient notifying the recipient of the case closure. The case will be scheduled for closure at the end of the current eligibility period, regardless of the number of days remaining in the eligibility period.

EXCEPTION: The standard notice of action period applies within the redetermination month, as it does in any other month, meaning that the case would close after 14 days, even if that extends beyond the end of the current eligibility period for the following reasons:

1. The family's countable income exceeds 85% of state median income;
2. There is a finding that the recipient committed an intentional program violation;
3. The recipient is no longer a resident of Virginia;
4. The recipient requests that their child care subsidy and services be closed;
5. The head of household is deceased; or Children out of the home.

E. Income Limit at Redetermination

Families are eligible at redetermination until their countable income meets or exceeds the exit eligibility limit of 85% of the state median income. See State Income Eligibility Scale for Child Care – Appendix A.

3.16. Suspension

A. Authorization Status

At the discretion of the head of household, authorized child care payments may be suspended for up to 90 days if a temporary interruption in child care is necessary and the reason for the interruption can be resolved within 90 days. No payments are made during the suspension and no copayment is owed during this time. The effective begin date of the suspension must be at least 10 days from the current date to allow for the advance notice.

A child care case for which authorization is temporarily suspended is not considered closed. The family may not be placed on the waitlist. During the suspension period, funds associated with the suspended case are encumbered. A NOA is generated when the authorization status goes to Suspended.

Temporarily suspending care during the eligibility period is fully at the discretion of the parent. A child's authorization may only be suspended at the request of the recipient during the eligibility period. See examples below of possible reasons why a parent may ask to temporarily suspend care:

1. A parent who works for the school system is not actively working during the summer.
2. A parent's place of employment is seasonally closed.
3. A mother is employed, but on temporary maternity leave.
4. The parent(s) remain in an approved activity, but a break in child care is needed due to child's illness.
5. The parent(s) remain in approved activity, but child goes to stay with a relative for a period of time not to exceed 90 days.

If any of these situations apply during a family's redetermination period, workers should base the schedule on anticipated child care need when the parent returns (or the schedule prior to the break, based on the parent's preference). Parents should be reminded that if they need more care based on their schedule when they return they can come back and request additional hours of service.

Parents should also be reminded that it is their responsibility to make arrangements with their child care provider during periods of temporary suspension.

B. End of Suspension Period

To lift the suspension, the head of household may contact the worker, or the worker may initiate contact. The worker must record the contact in the case narrative, including the reason for the suspension and the date it was lifted. This contact is voluntary and does not require verification.

When the suspension period ends, the authorization status in VaCMS is changed from Suspended to Authorized, and a NOA must be sent to the recipient. Since this change is not an adverse action, the authorization may be updated without waiting for the 10-day notice period.

A suspension would not be appropriate in situations such as when a college student exceeds a 90-day break. A new POSO is required if the authorization is revised. A termination POSO will be available to the provider in Child Care PASS to let them know that the previous authorization was terminated.

3.17. Closure

A. Reasons for Case Closure

Recipient's cases will close at any time if any of the following occur:

1. The recipient family's countable income regularly exceeds 85% of state median income;
2. There is a finding that the recipient committed an intentional program violation/fraud;
3. The recipient is no longer a resident of Virginia;
4. The recipient requests that their case be closed; or
5. The recipient is a family of a child experiencing homelessness that was conditionally approved because they could not provide required documentation. If documentation is not provided to the LDSS within 90 days of case approval, or the recipient is determined ineligible after full documentation is provided, the child care case will be automatically closed after 90 days.
6. The recipient did not secure employment or enroll in an education or training program within the designated job search period. If documentation is not provided to the LDSS within the 90-day timeframe, the recipient does not meet the extension criteria, or the recipient is determined ineligible after full documentation is provided, the child care case will be automatically closed after 90 days.
7. When a child does not attend authorized care as outlined in 3.13.H.

Additional reasons for case closure that may occur during the 12-month eligibility period include:

[Appeal – Agency Decision Upheld](#)

Families may request that services are continued while appealing action by a LDSS. If the decision to close the case is upheld by a hearing officer, the LDSS may take action to close the case immediately after being notified of the decision.

[Change in Head of Household](#)

The applicant is considered the head of the household. If the applicant in a two parent household leaves, their case must be closed. The remaining parent, as the new head of household, must submit a new application, which must be processed to determine eligibility for the new family unit. If determined to be eligible, this family must not be placed on the waitlist and a new eligibility period must be established.

If the child's custody arrangement changes (e.g., due to a court order or legal guardianship), the new guardian may apply in their locality. These families should not be subject to the waitlist. If no slots are available to serve the child(ren), the receiving locality may submit an allocation request in VACMS, documenting the new custody arrangement and the need for additional child target and/or funding to accommodate the transfer. The case manager must clearly document the justification for exempting the family from the waitlist in the case record, referencing the custody change.

Only children who are currently being served should continue to receive care on the new case. If additional children are being added, they are subject to the waitlist and must meet the locality's current prioritization criteria before being authorized for care.

No Eligible Child in the Household

If the only eligible child leaves or is removed from the household, the child care case will be closed.

Additional reasons for case closure that may occur only at redetermination include:

1. Need for child care no longer exists;
2. Discontinuation of employment or other approved or assigned activity;
3. The parent no longer meets the non-financial or financial eligibility requirements;
4. Failure to provide necessary verifications/information needed to determine eligibility;
5. Assets/resources exceed \$1 million in value;
6. Discontinuation of employment or other approved or assigned activity;
7. Disqualification;
8. Failure to make satisfactory progress in education/training;
9. Failure to pay required fees or failure to make satisfactory arrangements to pay back fees owed to a child care provider when the family was eligible for CCSP, if the provider notifies the LDSS of the unpaid fees. The Child Care Worker must advise the provider to submit the notification in writing;
10. Failure to use Child Care PASS to record child's attendance;
11. Non-compliance with the repayment agreement with the LDSS;
12. Unable to locate.

B. Documentation of Closure Reasons

Adequate documentation supporting the reasons for closure must be recorded. If the LDSS has insufficient targets/funds to continue services, the recipient must be given the option of being added to the waitlist. An NOA must be sent to notify the recipient of the intent to close a case or an authorization.

C. Planning and Assessment

Case closure should be planned by the LDSS jointly with the parent whenever possible. The LDSS must determine if continued services are needed and assist the family with appropriate referrals. The LDSS must discuss with the parent the importance of preparing the child in advance, if at all possible, for any change in child care. Planning and preparation of the child is especially important when care is terminated for school-age children who are moving from supervised child care into being alone for a portion of the day.

Once child care subsidy is no longer authorized, continuing social services and/or a referral to another service agency may be needed by the family. The LDSS must complete an assessment of need. Details of this planning and assessment must be recorded in the child care case narrative.

3.18. Financial Management

A. Monitoring Child Targets and Expenditures

Effective fiscal year 2024, Child Care Subsidy Program allocations are primarily based on the number of approved child targets (i.e. slots). While funding is allocated to support these targets, localities must not serve more children than the number of approved targets, regardless of available funds. Tracking child targets and expenditures in relation to allocations is the most effective method of managing annual allocations and continuing cases without interruption. The LDSS should regularly monitor available child targets, encumbrances and expenditures in VaCMS to see how billed charges compare to funds encumbered for each case. As case changes occur, unused funds will be unencumbered in VaCMS to maximize the use of allocations. VDOE will routinely adjust funding allocated to the localities to more closely align the available (unencumbered) funds with the number of available targets.

VaCMS will track expenditures and project encumbrances for all child care cases. VaCMS will indicate the projected cost through the end of the fiscal year (June 1 – May 31) for families on the waitlist. Current expenditure details and other statistical reports are available at any time in VaCMS. The LDSS does not need to wait until the end of a month to access this information.

B. Mandated Programs

Payment of child care subsidies for children in the following program is mandated:

Budget line 871: VIEW, Transitional, TANF Working, Learnfare and SNAP E&T.

See Child Care Programs Budget Lines (Appendix C) and Child Care Program Budget Lines' Descriptions (Appendix D).

C. Requesting Additional Funding

In instances where LDSS have caseloads that cannot be continued within fiscal year allocations, LDSS may request additional targets and/or funding.

Requests must be submitted in VaCMS. An Allocation and Target Adjustment Request Guide is located on FUSION under CCECD, Fiscal Support.

Justifiable requests for additional targets/funding in non-mandated budget lines will be approved to the extent of available funds/targets statewide.

D. Funds Recovery

The funds recovery process is designed to compare the authorized and encumbered units for a monthly service period to the actual attendance entered for that same service period. The funds recovery process runs on the evening of the 15th of each month and recovers payments for which no attendance was recorded during either of the two preceding service periods. If any encumbered attendance unit for a prior service month is not utilized, the encumbered amount for that unit will be reduced. However,

recovered funds may only be reused if a target is available, regardless of the LDSS' remaining balance. Budget allocations are now issued by the Virginia Department of Education (VDOE).

When the manual attendance is entered for a prior service period where funds have already been recovered, the days for which attendance is entered are encumbered again and the available balance is reduced accordingly. This can cause a negative available balance, and no authorizations can be created until additional funds are recovered or allocated.

E. Reducing Caseloads

If additional targets are not provided for Fee Child Care or TANF Child Care for (non-VIEW) education and training, LDSS should reduce cases through attrition, if possible, until the appropriate child target and expenditure levels are attained. No new cases should be added during this time.

If a locality exceeds its allocated targets, and requires additional funding, they can request the additional funding only. The locality will remain over the target and unable to authorize any new children until enough cases close through natural attrition, allowing them to return to their allocated target limit. VDOE/VDSS will continue to closely monitor targets and flag when a locality goes over their allocated targets. When this happens, the locality will be flagged for follow-up and will then work with the RPCs on a corrective action plan.

3.19. VaCMS and Child Care PASS

A. Virginia Case Management System

The Virginia Case Management System (VaCMS) is the system of record for information related to child care cases funded through the CCDF grant. This guidance provides the framework around which VaCMS is designed. VaCMS provides for recording of all case information as well as most calculations that must be made.

All case management and authorization information is entered into VaCMS. VaCMS provides information about and tracking for child care case management, child care expenditures and encumbrances and child care accounts receivable.

VaCMS interfaces with Child Care Program Attendance and Schedule System (PASS) to facilitate timely and accurate transmission of child care authorization, attendance and payment data.

The SPIDeR interface helps ensure data accuracy through the file clearance process in VaCMS. As new clients are added to VaCMS, SPIDeR provides a list of potential matching client information from within VaCMS and other state systems.

VaCMS client demographic information is also published to SPIDeR as clients and cases are added to or updated in VaCMS. Authorized SPIDeR users can query VaCMS for detailed client information.

B. Child Care Case Management in VaCMS

Case management activities must be recorded for all categories of child care cases. This information must be completed before an eligibility determination can be made and before authorization for child care services can be initiated.

C. Case Status

Case applications registered and approved in VaCMS are assigned certain case statuses. These are defined in VaCMS on the appropriate screen. These statuses include: approved, pending, denied, or closed.

A case is established and a status is assigned by VaCMS once intake is initiated for an application or waitlist screening. Cases assigned to the waitlist are in pending waitlist status.

D. Authorization Status

Once a case is determined eligible, an Authorization is established and a POSO is generated indicating the amount of care authorized. The Child Care Worker assigns the authorization status. Authorization statuses include: Authorized, Discontinued, Suspended or Waitlist.

E. Registration

Registration is the recording of the receipt of an application or Waitlist Screening form in VaCMS. The registration process consists of entering basic demographic information for the applicant and case members.

1. The Child Care Worker uses VaCMS to verify that the applicant is applying to the correct FIPS through a locality look up system. This feature uses geographical information system (GIS) technology.
2. The Child Care Worker uses VaCMS to complete file clearance to establish whether or not the applicant is known to VaCMS or to any other system published in SPIDeR. This process helps prevent duplicate records and multiple client ID numbers. Child Care Workers can see if the applicant or any family member is part of an active or closed child care case or application. The information is also published to SPIDeR to determine if the applicant is already known to the Department.

F. Child Care Program Attendance and Schedule System (PASS)

Effective December 1, 2025, Child Care PASS, supported by KinderSystems, is the system of record for CCSP electronic attendance tracking for which providers may choose how they link to PASS and record attendance. Providers with a compatible Child Care Management System (CCMS) may sync attendance with PASS through KinderBridge. Providers may utilize KinderSign to record attendance on their own or state-issued tablet, or may direct families to download and record attendance via the KinderSmart app. Providers can also record or update attendance in KinderConnect.

Provider payment calculation is done by VaCMS based on information from PASS. Reported attendance will be accepted in PASS only during the dates of the authorization on the POSO. If a recipient or provider tries to record attendance for child care outside of the authorization period or for an unauthorized time period, the transaction will be denied.

It is the responsibility of the LDSS to ensure that recipients of child care subsidy services have access to PASS resources for training, system troubleshooting, and general questions. Please see the one-pager for family/sponsor distribution:

<https://fusion.dss.virginia.gov/Portals/%5Bcceed%5D/Files/PASS%20Resource.docx> .

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Section 4. Appeals, Fraud & Improper Payments

4.1 Right to Appeals and Fair Hearings

Applicants and recipients of child care subsidy services have the right to appeal and receive a fair hearing on decisions made about their eligibility for and the authorization of child care including, but not limited to, case approval, the determination of an overpayment or the amount of the overpayment. Appeal instructions are included on the Child Care Application and on the NOA. An appeal may be requested orally or in writing to the Division of Appeals and Fair Hearings or to the LDSS. If an applicant/recipient makes an oral request to the LDSS, the Child Care Worker must assist the client by completing an appeal form and forwarding it to the Division of Appeals and Fair Hearings. If the appeal is withdrawn by the applicant/recipient for any reason, the request must be done in writing. The Child Care Worker may also use FUSION (<https://fusion.dss.virginia.gov/ac/Compliance-Home/Appeals-Fair-Hearings-Civil-Rights/Benefits-Services-Appeals/File-an-Appeal-with-Benefits-Services>) to submit the appeal request or they may send an email to appeals@DSS.virginia.gov.

A. Notification of Right to Appeal

Every applicant for and recipient of child care subsidy services shall be informed in writing, at the time of application and at the time of any action, proposed or taken, affecting their services, of the circumstances under which they have a right to a fair hearing, of the method by which they may obtain a hearing, and of the right to be represented by others or to represent himself. At the time assistance is first requested, the Child Care Worker will provide the applicant with information about the program for which they are applying and fair hearing procedures. For recipients, this is accomplished when the recipient receives a written notice at the time of any action, proposed or taken, affecting their child care subsidy services.

B. Local Department of Social Service Conference

In addition to requesting an appeal, the applicant/recipient may request a conference with the LDSS about the decision made on their child care subsidy services. The LDSS conference allows the agency the opportunity to explain why the action was taken on their child care case and allows the applicant/recipient the opportunity to present any information when they disagree with the agency's decision. The LDSS conference may resolve many questions and/or disagreements without the need for a formal hearing. Applicant/recipients should be informed that requesting a LDSS conference does not constitute an appeal request.

C. Fair Hearings

If the parent disputes the decision made by the LDSS on their child care case, they are entitled to a fair hearing. A fair hearing may be requested by an expressed indication by an applicant/recipient or by a person acting as their authorized representative, to the effect that he or she wishes the opportunity to present his or her case to a higher authority because of dissatisfaction with its treatment by a LDSS. An appeal may be requested orally or in writing.

The right to make such a request is not to be limited or interfered with in any way. If an applicant/recipient makes an oral request for a hearing, the LDSS must complete the procedures necessary to start the hearing process. The Appeal to the Virginia Department of Social Services form must be made available to the applicant/recipient to facilitate appeal requests; however, completion of

this form by the applicant/recipient is not required if a clear expression for a hearing has been made by some other method. Information and referral services must be provided to make applicants/recipients aware of any legal services available in the community that can provide legal representation at the hearing.

The freedom to appeal must not be prejudiced or limited in any way; LDSS emphasis must be on helping the applicant/recipient submit their request and on assisting in preparing their case, if necessary.

A written request to the VDSS agency by an applicant/recipient, clearly indicating the wish to present his or her case to a higher authority will be considered a fair hearing request.

Continuation of Services

If a hearing request is received prior to the effective date of any proposed reduction or termination of services, and services had been previously authorized, payment for child care services may be continued in the original amount without interruption until a hearing decision is rendered. The applicant/recipient should make such a request to the LDSS along with their request for an appeal.

EXCEPTION: If services are continued during the appeals process, they may be terminated if (1) the eligibility period ends, (2) a change in circumstance affecting household eligibility occurs, or (3) a programmatic change occurs which impacts eligibility.

Once the Appeals and Fair Hearings Office receives an appeal request, Notification of Appeal form is sent to the LDSS to notify them of the appeal and the hearing officer assignment. If the appeal was received in writing, it will be attached to the form. If the appeal was received verbally or via CommonHelp, the form will contain the information that the client relayed.

Upon receipt of the Notification of Appeal, the LDSS has seven days to inform the assigned hearing officer if the appeal is invalid. Generally, appeals filed within 30 days of the mailing date of the Notice of Action are considered valid and appeals filed outside of this timeframe are considered invalid. If the appeal is valid, no communication with the hearing officer is required. After the seven days has elapsed, the hearing officer will notify the LDSS via email of a hearing date and time. If an appeal is invalid, the LDSS must contact the hearing officer, state why the appeal request is invalid and provide the relevant Notice of Action. An email to the hearing officer is sufficient.

Upon notification by the hearing officer, the LDSS shall inform the recipient in writing that their child care subsidy services are being continued in the same amount pending the hearing decision unless there are subsequent changes in the recipient's situation. The recipient should be given the option to continue services or deny the continuation of services during the appeal process.

If the decision of the hearing officer upholds the LDSS action, the recipient will be required to repay the sum of all services provided from the time of the appeal until case modification or closure.

Time Limits for Requesting Hearing

An appeal of any LDSS action must be made within the 30 days following the date of the LDSS Notice of Action informing the applicant/recipient of the action taken on their application or case.

An appeal based on the failure of a LDSS to accept an application or to act within the specified time limit on the application or written request for a change in the amount, kind, or conditions of assistance must be made within 30 days following such failure to accept the application or to take timely action thereon.

The requirement of filing within the time limit is met if the request for appeal is received in the state or LDSS, or postmarked, by the end of the 31st day following the date of the LDSS' notice unless the applicant/recipient can provide proof that he or she was given fewer than 30 days to make a request for a hearing. Acceptability of the proof rests with the state hearing authority.

If more than 30 days have elapsed in filing the appeal, the state authority may, in the interests of justice, grant an extension of the time period.

The hearing officer will notify the recipient of the date and time for their hearing at the LDSS or at a location agreeable to them and the agency. If the recipient needs transportation, the LDSS will provide it.

D. Decision on Appeals

The hearing officer, following the hearing, prepares a written report of the substance of the hearing embodying his findings, conclusions, decision, and appropriate recommendations. The decision of the hearing officer shall be rendered within 60 days following the date the appeal is received by the LDSS or the Department. An exception to this is when the hearing officer grants the claimant or his/her representative an extension, or otherwise occasions a delay, not to exceed 30 days.

Once the agency receives the decision from the hearing officer, the agency must take action on the case based on the decision received. The LDSS must ensure that administrative action to implement the hearing officer's decision is taken no later than 10 working days following the date of the decision. After corrective action is taken, the LDSS must notify the appellant and the hearing officer in writing that the LDSS has complied with the decision. This information must be recorded in VaCMS.

If the recipient did not request continuation of services during the appeal, and the decision of the hearing officer is in the recipient's favor, the LDSS must take appropriate action to correct any underpayments for services.

LDSS must send copies of all hearing decisions to their appropriate regional child care consultant and/or the Subsidy Provider Services team at VDOE (providerservices@doe.virginia.gov).

For more information about the appeals process, see the Appeals and Fair Hearings Manual on FUSION at: <https://fusion.dss.virginia.gov/ac/Compliance-Home/Appeals-Fair-Hearings-Civil-Rights/Benefits-Services-Appeals>.

4.2 Fraud

The Code of Virginia (§ 63.2-522 & § 63.2-502) deems guilty of larceny any person who obtains assistance or benefits by means of a willful false statement or who knowingly fails to notify of a change in circumstances that could affect eligibility for assistance. Welfare fraud is larceny, and recipients deemed guilty of larceny, upon conviction, are subject to penalties as specified in the Code of Virginia. The Commonwealth's Attorney is responsible for deciding under which section of the Code of Virginia an applicant or recipient will be charged.

A. Intentional Program Violation (IPV)

An intentional program violation consists of any action by which an individual intentionally:

1. Made a false or misleading statement to the LDSS, orally or in writing, to obtain child care services to which the household is not entitled. An IPV may exist for an individual even if the LDSS denies the family's application;
2. Concealed information or withheld facts to obtain services to which the family is not entitled;
or
3. Committed any act that constitutes a violation of the:
 - i. Child Care Development Block Grant Act of 2014, as implemented in regulation at 45 CFR Parts 98 and 99.
 - ii. Code of Virginia, Sections 63.2-217, 63.2-319, 63.2-502, 63.2-510, 63.2-522, 63.2-526, 63.2-611, 63.2-616, 63.2-620.

An IPV is also any action where an individual knowingly, willfully and with deceitful intent uses Child Care PASS to cause payment for child care services to be fraudulently obtained.

Whoever obtains or attempts to obtain or aids or abets any individual in obtaining services by means of a willful statement or misrepresentation, by impersonation or other fraudulent device assistance from child care has committed an IPV.

When it is suspected that there has been deliberate misrepresentation of facts in order to receive child care subsidy, the LDSS must determine whether or not fraud was committed. There must be evidence that demonstrates that the household committed an IPV or fraud in order to refer the case to the Fraud Unit.

Suspected instances of child care fraud must be referred to the fraud staff for investigation. LDSS must send copies of fraud investigation final reports to their appropriate Child Care Regional Consultant and VDOE (childcaresubsidy@doe.virginia.gov).

B. Forms Used in IPV Process

The forms listed below must be used in the IPV process. The forms and instructions for their use may be accessed from FUSION, or by manually generating the forms from the left navigation of VaCMS.

1. Notice of Intentional Program Violation
2. Waiver of Administrative Disqualification Hearing

3. Referral for Administrative Disqualification Hearing
4. Advance Notice of Administrative Disqualification Hearing
5. Administrative Disqualification Hearing Decision
6. Notice of Disqualification for Intentional Program Violation

4.3 Administrative Disqualification Hearing

A. Introduction to the ADH

An Administrative Disqualification Hearing (ADH) is an impartial review by a hearing officer of an individual's actions involving an alleged IPV to determine whether the individual committed an IPV.

In order to request an ADH, there must be clear and convincing evidence that demonstrates that an individual committed or intended to commit an IPV.

Examples of evidence include, but are not limited to, the following:

1. Written verification of unreported income received by the individual;
2. Verification that the individual was informed of the reporting requirements by their signature on the Child Care Service Application and Redetermination form; or
3. Documented contacts with the individual during the period the IPV is alleged to have occurred in which the individual failed to report information in response to LDSS queries about household circumstances.

NOTE: The examples above do not have to be presented to document intentionality; however, it is likely that such deliberateness can only be shown through the presentation of more than one of these types of evidence.

The LDSS must ensure that the evidence against the individual alleged to have committed the IPV is reviewed by either a supervisor or the LDSS Director for purposes of certifying that such evidence warrants the initiation of the ADH process.

A pending ADH does not affect the individual's right to receive child care subsidy. The individual alleged to have committed an IPV cannot be disqualified until a hearing officer finds the individual committed an IPV, or the individual signs a waiver of the hearing or is found guilty by the court of law.

B. Child Care Worker Responsibility

It is the responsibility of the Child Care Worker to refer any case to the local fraud investigator in which there is evidence that an IPV has been committed. The Child Care Worker should use the LDSS Fraud Referral form (032-29-0005-01-eng) or another agency approved form to refer the case to the Fraud Unit.

C. Fraud Investigator Responsibility

The Fraud Investigator must conduct an investigation of an allegation that an individual committed an IPV, regardless of the provider's status with the CCSP. A determination as to whether an IPV has occurred must be based on careful consideration of the circumstances. A determination must be made that there has been a deliberate misrepresentation of information or facts given or a deliberate

misrepresentation by omission on the part of the individual. Consideration should be given to: 1) whether the incorrect or unreported information was known to the individual and 2) whether the individual understood the eligibility and reporting requirements.

The Fraud Investigator is required to proceed against any individual where the evidence supports an IPV by referring the matter to the appropriate authorities for criminal action or initiating the ADH process.

NOTE: The Fraud Investigator may refer a case for prosecution or initiate an ADH regardless of the current eligibility of the individual.

An individual may be charged with an IPV even if the child care application was denied. An over-payment does not have to exist for there to be a determination of an IPV.

The must coordinate LDSS its actions with any corresponding action being taken against the individual under SNAP and/or TANF if the factual issues involved arise out of the same or related circumstances.

D. Notification of ADH

Prior to submitting the “Referral for Administrative Disqualification Hearing” to the State Hearing Authority, the LDSS Fraud Investigator must provide the forms, “Notification of Intentional Program Violation” and “Waiver of Administrative Disqualification Hearing” to the individual accused of committing the IPV. If an individual wishes to waive the ADH, the Waiver of Administrative Disqualification Hearing form must be returned to the LDSS within 10 days from the date notification is sent to the individual in order to avoid submission of the referral for an ADH. If a signed waiver is received, no ADH is conducted and the disqualification period is imposed in accordance with this guidance.

No further administrative appeal procedure exists after an individual waives his/her right to an ADH and a disqualification penalty has been imposed. The disqualification period cannot be changed by a subsequent fair hearing decision; however, the household member is entitled to seek relief in a court having appropriate jurisdiction. The period of disqualification may be subject to stay or other injunctive remedy by a court of appropriate jurisdiction. Allegations of coercion by the household member, household head, or legal representative to VDSS or the LDSS will negate the waiver and the case must be referred for an ADH.

If no waiver to the ADH is received within 10 days, the LDSS must submit the Referral for Administrative Disqualification Hearing to the Hearings Manager by the 15th day following the date notification was sent to the household. The additional five days allows for possible mail delivery delays. The form must include the following information:

1. Identifying information as requested at the top of the form;
2. Summary of the Allegation(s);
3. Summary of the Evidence; and
4. Copies of documents supporting the allegation.

To determine the appropriate disqualification period for the notification form, the LDSS must determine the number of prior disqualifications an individual may have. Information about prior disqualifications must be verified before deciding on the length of the penalty.

E. Scheduling the ADH

The hearing officer will schedule a date for the ADH and provide written notification to the individual suspected of an IPV at least 30 calendar days in advance of the date the ADH has been scheduled. The form, "Advance Notice of Administrative Disqualification Hearing" is used for this purpose. The hearing officer may also send a pamphlet that describes the ADH procedures with the advance notice. The ADH advance notice may be sent by first class mail, certified mail - return receipt requested, or by any other reliable method. If the notice is sent by first class mail, and it is subsequently returned as undeliverable, the hearing may still be held.

Once the ADH has been scheduled, the ADH is to be conducted and a decision made within 90 days of the date the individual is notified in writing that the ADH has been scheduled. A copy of the decision must be provided to the individual and the LDSS.

F. Time and Place of ADH

The time and place of the ADH must be arranged so that the hearing is accessible to the individual suspected of an IPV. The individual or a representative may request a postponement of the ADH if the request for postponement is made at least 10 days in advance of the date of the scheduled hearing. The ADH will not be postponed for more than 30 calendar days and the State Hearing Authority may limit the number of postponements to one. When a hearing is postponed, the time limits for rendering and notifying the individual and the LDSS of the decision are extended for as many days as the hearing is postponed.

G. Attendance at the ADH

The ADH is attended by persons directly concerned with the issue. This normally means a representative of the LDSS and the individual alleged to have committed an IPV and/or the individual's representative. If space is limited, the hearing officer has the right to limit the number of persons in attendance.

H. Failure of Individual to Appear at the ADH

Unless proof of non-receipt of the ADH advance notice has been received, the requirement to notify the individual alleged to have committed the IPV has been met. The ADH must be held even if the individual or a representative subsequently cannot be located or fails to appear without good cause.

The individual has 10 days from the date of the scheduled ADH to present reasons other than non-receipt of the notice that show good cause for failure to appear at the hearing. Good cause reasons based on non-receipt of the notice must be presented within 30 calendar days of the scheduled hearing. Even though the individual is not represented, the hearing officer must carefully consider the evidence and determine if an IPV was committed based on clear and convincing evidence. If the individual is found to have committed an IPV, but a hearing officer later determines there was good cause for not appearing, the previous decision is no longer valid, and a new ADH must be conducted. The hearing officer who originally ruled on the case may conduct the new hearing. The good cause decision must be entered into the hearings record by the hearing officer.

I. Conduct of ADH

The hearing officer presides over the hearing and conducts the hearing informally. Technical rules of evidence are not required. The hearing may be conducted via a teleconference. The hearing may also be recorded.

J. Responsibilities of the Hearing Officer

1. Identify those present for the record.
2. Advise the individual or their representative that they may refuse to answer questions during the hearing.
3. Explain the purpose of the ADH, the ADH procedure, how and by whom a decision will be reached and communicated, and the option of either the LDSS or the individual to request a review of the hearing officer's decision by the Superintendent. The Superintendent's review does not affect the ruling of the Hearing Officer.
4. Consider all relevant issues. Even if the individual is not present, the hearing officer must carefully consider the evidence and determine if an IPV was committed based on clear and convincing evidence.
5. Request, receive and make part of the record all evidence determined necessary to render a decision.
6. Regulate the conduct and course of the hearing consistent with due process to insure an orderly hearing.
7. Advise the LDSS to obtain a medical assessment at the LDSS' expense if the hearing officer considers it necessary.

K. Responsibilities of the Local Department

The LDSS' representative is responsible for presenting the LDSS' case in the ADH. The LDSS representative has the same rights as the individual as listed below.

L. Individual Participation and Procedural Protections in the Hearing Process

1. It is the responsibility of the LDSS representative to help ensure that the individual feels at ease and understands the process, particularly if they are unfamiliar with formal procedures. Staff should take care to guide the conversation in a way that allows the individual to fully present the facts of their case.
2. The individual or their representative may refuse to answer questions during the hearing.
3. The individual and/or their representative must be given adequate opportunity to do the following:
 - i. Examine all documents and records to be used at the ADH at a reasonable time prior to the ADH as well as during the ADH. The contents of the case file, including the application form and documents of verification used by the LDSS to establish the alleged IPV, must be made available, provided that confidential information, such as the names of individuals who have disclosed information about the individual without their knowledge, or the nature and status of pending criminal prosecutions, is protected from release.
 - ii. Present its case or have it presented by legal counsel or another person.

- iii. Bring witnesses.
- iv. Advance arguments without undue interference.
- v. Question or refute any testimony or evidence, including the opportunity to confront and to cross-examine witnesses.
- vi. Submit evidence to establish all pertinent facts and circumstances in the case.

If requested by the individual or their representative, the LDSS must provide a free copy of the portions of the case file that are relevant to the hearing. Confidential information that is protected from release and other documents or records which the individual will not otherwise have an opportunity to contest or to challenge must not be introduced at the hearing or affect the hearing officer's decision.

M. Notification of Decision

The hearing officer is responsible for rendering a decision. The decision must be based on clear and convincing evidence from the hearing record, which is an official report of the hearing, including all papers and requests filed in the proceeding. The hearing officer must substantiate the decision by identifying supporting evidence and applicable guidance and regulations.

Following the ADH, the hearing officer must prepare a written report of the substance of the hearing that must include findings, conclusions, decision and appropriate recommendations. The decision must specify the reasons for the decision, identify the supporting evidence, identify pertinent child care guidance and regulations and respond to reasoned arguments made by the individual or their representative.

The hearing officer must notify the individual and the VDSS of the decision within 90 days of the date of the "Advance Notice of ADH." The form "Administrative Disqualification Hearing Decision" must accompany the findings. The notice must inform the individual of their right to request review of the decision. If the individual is found guilty of an IPV, the decision must advise the individual that disqualification will occur.

The determination of an IPV by the hearing officer cannot be reversed by a subsequent fair hearing decision.

The individual is entitled to seek relief in a court of appropriate jurisdiction. The period of disqualification may be subject to stay by that court or by other injunctive remedy.

If the individual or their representative did not appear at the hearing, and the hearing officer determines that an IPV was committed, the hearing officer will delay notification of the decision until 10 days after the date of the hearing to allow the individual time to present good cause for failing to attend.

N. Implementation of the ADH Decision

Upon receipt of the notice of a decision from the hearing officer finding the individual committed an IPV, the Fraud Investigator must inform the individual of the disqualification by sending a "Notice of Disqualification Due to Intentional Program Violation." The notice must inform the individual of the reason for disqualification and the effective date of the disqualification. The individual who committed the IPV must be disqualified in accordance with the length of time specified in section 4.4. The LDSS must also provide an NOA to the individual detailing information concerning their case closure.

The period of disqualification must begin the first of the month following the date the “Waiver of Administrative Disqualification Hearing” was signed or the first of the month following the end of the NOA giving the 10 day notice.

If it is determined that the individual did not commit an IPV, no disqualification will be imposed and any overpayment must be handled as a non-fraud overpayment as outlined in this guidance.

4.4 Disqualifications

A. Disqualification Period

Applicant/recipients will be disqualified from participating in the child care subsidy program for three months upon the first finding of child care fraud, 12 months upon the second finding, and permanently upon the third finding, unless otherwise mandated by the court.

If an applicant/recipient is found to have committed fraud by the court, the Child Care Worker will use the closure reason of “Fraud” and record the disqualification period in the case narrative. When “Fraud” is selected as the closure reason, the LDSS must manually track the length of the disqualification based on the ruling of the court. Cases closed prior to the implementation date of this guidance must also continue to be tracked manually by LDSS.

If an applicant/recipient is found to have committed fraud through the ADH process, the Child Care Worker should close the case using “Closure due to Fraud 1, 2, or 3.” When this option is selected, VaCMS will alert anyone who attempts to associate a case during the disqualification period of the disqualification. LDSS must continue to manually track cases closed prior to the effective date of this guidance with the closure reason “Fraud.”

B. Failure to Enter into a Repayment Schedule

Applicant/recipients who fail to enter into a written repayment schedule with the LDSS for overpayment due to fraud or for an IPV overpayment will be disqualified from participating in the child care subsidy program until entering into a written repayment schedule. However, if the parent files a valid appeal regarding the overpayment, the parent will not be required to enter into a repayment schedule until the appeal decision is issued.

For non-fraud overpayments that occur within the 12-month eligibility period, applicant/recipients who fail to enter into a written repayment schedule with the LDSS will be disqualified at the next redetermination.

C. Failure to Make Payments

Applicant/recipients who fail to make three consecutive payments according to the written repayment schedule with the LDSS for overpayment due to fraud or for non-fraud overpayment will be disqualified from participating in the child care subsidy program, upon missing the third payment, until all delinquent payments are made. If a recipient agrees to make monthly payments, they are out of compliance the first month a payment is missed.

Upon payment of all delinquent payments according to the written repayment schedule, child care subsidy eligibility will resume for parents who are not otherwise disqualified.

4.5 Improper Payments

A. Overpayment Due to Fraud

Anyone who causes the LDSS to make an improper provider payment by withholding required information or by providing false information will be required to repay the amount of the improper payment.

B. Non-Fraud Overpayment

In cases of non-fraud overpayment, the parent may continue to participate in the subsidy program as long as a repayment schedule is entered into with the LDSS and payments are made according to that schedule. All overpayments must be repaid to the state by the locality according to the procedures outlined in subsections F and G.

C. Overpayment Due to Local Department Error

If an overpayment related to eligibility for services or related to copayment amount was made as a result of an error by the LDSS, the LDSS will not seek to recoup those funds from the parent or the provider. All overpayments must be repaid to the state by the locality.

D. Overpayment Begin Date

The overpayment begins the month following the month the change occurred. The LDSS will determine the overpayment begin date and secure all verifications necessary to calculate the overpayment. Provider payments issued and payment reductions delayed as a result of the advance notice period are not overpayments.

E. Outstanding Overpayments

Outstanding overpayments must be recovered prior to a former recipient being found eligible. The repayment schedule is to be based on the current situation of the individual. The allowable amount of recovery of the overpayment from the individual is limited to the total amount of the overpayments. When Child Care services are overpaid, only the adult(s) included in the family unit at the time the overpayment occurred will be responsible for repayment of the overpayment.

F. Repayment Agreement and Schedule

VaCMS provides a tracking system to ensure that repayments are established and satisfied. Recipients may be required to enter into a repayment agreement for failure to pay required fees; failure to make satisfactory arrangements to pay back fees owed; discontinuation of employment or other approved or assigned activity; failure to report changes to non-financial or financial eligibility requirements; failure to make satisfactory progress in education/training; failure to provide necessary verifications/information; or failure to report changes specified on the Child Care Application and Notice of Action form.

The Child Care Worker or Fraud Worker shall provide the Child Care Repayment Agreement form (032-12-0130-00-eng (08/17)) to the recipient and request that they submit the completed form within 30 days. In establishing the repayment schedule for a parent, LDSS cannot require monthly repayment amounts that exceed 5% of the family's gross monthly income.

Repayment will be in either a lump sum or according to a written repayment schedule between the responsible person and the LDSS. The Child Care Repayment Agreement form must be signed by the responsible person.

The LDSS must determine the correct amount of the payment the provider should have received for those months the provider actually received an overpayment. The overpayment is based on the actual circumstances of the case each month. If, due to a misunderstanding or inadvertent error on the part of the parent, a family failed to report a change in its circumstances within 10 days of the date the change became known to the parent, the first month of an overpayment will be the first month in which the change would have been effective had it been reported in a timely manner.

G. Collection of Improper Payments

A Manual Adjustments Guide is located on FUSION under CCECD, Case Management to guide LDSS through these steps.

Improper payments collected by LDSS must not be sent to the Home Office; instead they must be deposited into local bank accounts according to established local procedures. Home Office staff will make adjusting entries in LASER, based on collection data entered in VaCMS by the LDSS. The adjusting entries made by Home Office staff will reduce local reimbursements in LASER by the amount collected using the appropriate LASER cost codes (88801, 88802, & 88901). This is the mechanism by which the state collects repayments of improper payment received by LDSS.

LDSS staff should not record any information into the new LASER cost codes.

[Pre-VaCMS/ECC or PASS Improper Payment Collections](#)

LDSS should continue to enter improper payment collection details into LASER. A summary adjustment is entered to the appropriate budget line.

[VaCMS/PASS Improper Payment Collections](#)

The payment(s) that caused the overpayment must be identified in VaCMS and a subsequent manual adjustment(s) to that payment(s) must be made before the receivable owed to the Commonwealth can be established. Accounts receivable and collection data must be entered into VaCMS. A series of steps must be followed to set-up the receivable account and to properly record collection activity in VaCMS. To ensure adequate internal controls, one individual (Child Care Worker) identifies the payment, portion of the payment, or payments that caused the overpayment and then makes the manual adjustment(s) to reflect the amount of the overpayment. A second individual, (either a Local Adjustment Approver or Fiscal Manager) reviews the adjustment and then establishes the receivable in VaCMS. The same individual may not create the manual overpayment adjustment and establish the receivable in VaCMS.

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Section 5.
Provider Services

5.1 Provider Services

Provider procedures are included herein so local Child Care Workers understand the expectations and processes related to provider participation in the CCSP.

All child care providers must sign an Attestation Form to indicate they have read and agree to the Subsidy Vendor Agreement in order to receive payment. The Vendor Agreement is the contract between VDSS and the Provider for the provision of child care services by the Provider to child care recipients of LDSS who are eligible for child care assistance. Processing of the Vendor Agreement and Attestation Form are part of the provider coordination process handled by the state.

There are two separate Vendor Agreements based on whether the provider is a center or family day home. The same form is used whether the provider is licensed or unlicensed.

- Child Care Center Vendor Agreement (032-12-0047-02-eng (06/11/2024)).
- Family Day Home Vendor Agreement (032-12-0046-01-eng (06/11/2024)).

Once a provider has submitted a complete application through the Application Portal, the Subsidy Provider Services team will send an Attestation Form to the provider to digitally sign and return. A signed and dated Attestation Form must be received by the state before the provider is approved in VaCMS. The provider's signature confirms their agreement to comply with the terms of the agreement, including payment processes, absences, and attendance tracking.

A new Attestation Form must be completed every 5 years; or more frequently if necessary due to amendments in the agreement; a change in licensure status; a change in ownership; a change in facility address, or other changes as deemed necessary by VDOE and/or VDSS home office staff.

The provider must be approved and entered as an "Open" vendor into VaCMS before a POSO can be issued. The POSO cannot have a begin date prior to the vendor's approval in VaCMS.

Child Care Workers may determine by a vendor inquiry in VaCMS if a provider is approved or needs to complete the approval process. If the provider is approved, VaCMS will have an "Open" facility status. This indicator serves as acceptable documentation. Providers must not be reimbursed for services rendered prior to approval.

NOTE: All providers entered into the Division of Licensing Programs Help and Information Network (DOLPHIN) will automatically appear in VaCMS as "pending subsidy approval." The status of "pending subsidy approval" does not mean the provider has submitted an application to become an approved CCSP provider or that the approval process has been initiated.

5.2 Parental Choice

Families have full parental choice of child care providers. However, authorized payments will be made to only those providers who meet the provider requirements of the subsidy program. LDSS must advise families about the availability of providers and assist them in gaining needed information on how to identify and monitor quality child care and the characteristics that affect program quality.

LDSS must not establish policies that limit parental choice of providers.

A. Relative Care

A child's relative may be paid as a child care provider as long as the individual providing care does not reside in the home where care is being offered and is not legally responsible for the children needing care.

Example: An owner or operator of a family day home is not eligible to receive a child care subsidy payment for their own child when the child is in the home of the owner or operator.

See 5.3 section A for additional details about payment for in-home care.

B. Legally Operating Provider

In order to maintain their eligibility, families must choose a child care provider who meets the subsidy program requirements and is a legally operating provider approved by the Virginia Department of Education, pursuant to [8VAC20-790](#). All providers who participate in the subsidy program must:

1. Be at least 18 years of age;
2. Be operating legally according to the Code of Virginia and local laws and regulations, as applicable;
3. Obtain background checks as required by the regulations for their type of child care;
4. Complete the Virginia Preservice Training for Child Care Staff course and maintain current certification in first aid and cardiopulmonary resuscitation (CPR) as appropriate to the age of the children in care;
5. Maintain substantial compliance with the applicable Subsidy Inspection Requirements for the child day program; and
6. Have a current, signed and dated Provider Agreement or Subsidy Provider Agreement Attestation Form on file.

5.3 Regulatory Oversight of Providers

Payment rates are made according to the provider's level of regulatory oversight. There are two levels of providers: Level 1 and Level 2. There are two categories of Level 1 Providers: Unlicensed and License-Exempt Regulated.

Level 1 Unlicensed Providers are child care providers, including in-home providers, who are neither licensed nor registered; and local government-approved recreation programs.

Level 1 License-Exempt Regulated Providers are child care providers who are voluntarily registered family day homes; religious-exempt child day centers; local school division programs staffed by local school division employees and subject to safety and supervisory standards established by the local school board; and certified preschools.

Level 2 Providers are child care providers who are licensed by the Department, approved by a licensed family day system, or approved under local ordinance according to §§ 15.2-741 and 15.2-914 of the Code of Virginia. An exception has been made for child care centers approved by the Department of Defense to be recognized as Level 2 Subsidy providers.

NOTE: Licensed and license-exempt regulated providers are considered to be operating legally if the regulatory agency received a complete renewal application prior to expiration of their current license, certificate, permit, or exemption.

A. Level 1, Unlicensed Providers

Unlicensed Family Day Home:

An unlicensed family day home can legally provide care for no more than four children, in addition to the provider's own children or children residing in the home, or no more than four children under the age of two, including the provider's own children or children residing in the home, at any one time.

In-Home Child Care:

In-home child care is provided in the home of the child and parent when all the children in care reside in the home and the provider does not live in the home. The person may or may not have credentials or formal training in early childhood education. As the employer, the parent is responsible for finding someone who meets the family's needs.

Under the Code of Virginia, in-home child care providers are considered family day homes. In-home child care providers are subject to the health and safety regulations for family day homes in the Child Care Subsidy Program.

See 3.14 section E for additional details about payment for and restrictions associated with in-home care.

Local Government Approved Recreation Program:

Section 22.1-289.030 of the Code of Virginia allows a program of recreational activities offered by local governments, staffed by local government employees, attended by school-age children, and subject to safety and supervisory standards established by local governments to be exempt from licensure.

B. Level 1, License-Exempt Regulated Providers

Certified Preschool:

Section 22.1-289.030 of the Code of Virginia allows preschool programs operated by private schools that are accredited by a statewide accrediting organization (or another accrediting organization recognized by the Board of Education) to be exempt from licensure. In order for preschool and nursery school programs operated by accredited private schools to be certified, certain information must be filed with the OCCHS before the beginning of the school year or calendar year. That information must be filed annually thereafter.

Local School Division Programs:

Section 22.1-289.030 of the Code of Virginia allows a child day program offered by a local school division, operated for no more than four hours per day, staffed by local school division employees, and attended by children who are at least three years of age and are enrolled in public school or a preschool program within such school division to be exempt from licensure. Such programs shall be subject to safety and supervisory standards established by the local school division offering the program.

Religious Exempt Child Care Center:

Child care centers operated by religious institutions may be exempt from licensure, per § 22.1-289.031 of the Code of Virginia, if the religious institutions submit certain documents to OCCHS prior to opening the child day center and then annually prior to the expiration date of their exemption.

Voluntarily Registered Family Day Home:

A family day home serving fewer than five children, exclusive of the provider's own children and any who reside in the home, that becomes state registered on a voluntary basis using approved standards.

C. Level 2 Providers

Level 2 Providers are child care providers who are licensed by the Department, approved by a licensed family day system, or approved under local ordinance according to §§ 15.2-741 and 15.2-914 of the Code of Virginia. Child Care Centers run by the United States Department of Defense and tribally-licensed programs may be used as a Level 2 Subsidy provider.

Licensed and regulated providers are considered to be operating legally if a complete renewal application was received prior to expiration of their current license, certificate, or permit.

5.4 Provider Approval Process

Providers who are interested in serving children through the CCSP should be directed to <https://www.childcare.virginia.gov/providers/child-care-subsidy/becoming-a-child-care-subsidy-program-provider> for information on the approval process. Providers must be located in Virginia to participate in the CCSP.

Submitting an Application

Interested providers must submit an application packet through the [application portal](#).

Required documents for the Child Care Subsidy Program provider application vary by provider type and may include:

- CCSP Provider Application (English) (Español)
- Subsidy Provider Agreement (After submitting all other required documents, providers will receive an attestation form to sign, verifying that they have read and will adhere to the terms of this agreement.)
 - Child Day Centers (English) (Español)
 - Family Day Homes (English) (Español)
- IRS Form W9
- Supporting documentation for Form W-9, such as a copy of social security card (SSN), IRS Notification Letter 147C, or IRS Notification Letter SS-4
- VA Preservice Training Certificate (available upon completion of the training)
Proof of legal operations issued by the provider's regulatory entity, if not licensed or regulated by the Commonwealth of Virginia.
 - Examples include: Certificate of Registration; Exemption Letter; License; or Permit.
- Current First Aid/ CPR Certification (Age Appropriate/ Pediatric)
- TB Screening Results
- Authorization to Act as Agent on Customer's Behalf for In-Home Care
- Household Information and Staff Listing
- Sworn Statement of Affirmation
- Central Registry Account Information Guide
- National Fingerprint Based Background Check
- Out of State Background Checks

An Application Guide for each provider type can be found at <https://www.childcare.virginia.gov/providers/child-care-subsidy/becoming-a-child-care-subsidy-program-vendor>. All applicants are strongly encouraged to attend the Child Care Subsidy Orientation prior to submitting the application packet.

Subsidy Health and Safety Inspections

Applicants that are not currently licensed by VDOE are required to undergo a subsidy monitoring inspection prior to approval. Subsidy inspections will be conducted by OCCHS staff and will be conducted within 30 days of referral by VDOE CCSP Provider Services.

For currently licensed family day homes and licensed child day centers, the most recent licensing inspection (conducted within the previous 6 months) will be used.

All providers will receive a subsidy monitoring inspection at least once annually. Subsidy inspection requirements can be found at <https://www.childcare.virginia.gov/providers/child-care-subsidy/subsidy-inspection-and-training-requirements>. Subsidy inspection results are posted online <https://www.childcare.virginia.gov/find-care>.

Application Review and Approval

Upon receipt of a completed New Provider Application Packet and the results of the subsidy monitoring inspection (if required), the application will be either approved or denied. Providers will be notified by email of their approval or denial within 60 days of receipt. Regional Consultants will be copied on the notification and will notify the applicable LDSS.

Note that payment may not be made for any services provided before official approval as a Child Care Subsidy Program provider. No retroactive payments will be made, even if the provider has been serving children prior to approval.

Payments may also not be made prior to the effective date of a provider's initial license, registration, certification, or approval, as applicable.

5.5 Background Checks

All providers; any employee; prospective employee; volunteers; agents involved in the day-to-day operation; all agents who are alone with, in control of, or supervising one or more children; and any other adult (18 years of age or older) living in a family day home must obtain satisfactory background checks.

Background checks include:

1. Fingerprint National Criminal History Record Check;
2. Virginia Central Registry Child Protective Services Check;
3. State Child Abuse and Neglect Registry Check from any other state in which the individual has resided in the preceding five years;
4. Criminal History Record Information Check and Sex Offender Registry Check from any state in which the person has resided in the preceding five years; and
5. Sworn Statement or Affirmation as to whether the individual has ever been:
 - i. The subject of a founded complaint of child abuse or neglect; or
 - ii. Convicted of a crime or is the subject of any pending criminal charges within the Commonwealth or any equivalent offense outside the Commonwealth.

The provisions for background checks for licensed and regulated child day programs are provided in 22.1-289.035, 22.1-289.036, 22.1-89.037, 22.1-289.038, 22.1-289.039, 22.1-289.040, 22.1-289.041 of the Code of Virginia.

1. Level 2 Providers are not required to provide documentation of background checks to the Department because the documents have been reviewed by the applicable regulatory agency.
2. Level 1, License-Exempt Regulated Providers are not required to provide documentation of background checks as the license-exempt providers self-certify to the regulatory agency.

Background check requirements for child day centers or family day homes that are not licensed, registered, approved, or exempt from licensure and receive federal, state or local child care funds are provided in §22.1-289.034 22.1-289.035, of the Code of Virginia. Per Code, all Level 1, Unlicensed Providers must obtain satisfactory background checks.

1. Licensed and state-regulated providers will receive directions for completing the applicable background check forms from OCCHS upon initial application for licensure or registration.
2. Local Gov't Approved Recreation Programs, Unlicensed/Unregistered Family Day Homes and In-Home Child Care Providers will receive directions for completing the applicable background check forms from the CCSP Provider Services team upon application. CCSP Provider Services will also provide the provider with instructions to obtain their Field Print Code.
3. Once completed, providers will receive notification from the VDSS Office of Background Investigation stating if the individual is "eligible" or "not eligible" for employment. Newly applying Local Gov't Approved Recreation Programs Unlicensed/Unregistered Family Day Homes and In-Home Child Care Providers (ONLY) should submit the results to CCSP Provider Services.

Any individual who begins employment, service, or residence in the home after the provider coordinator's approval of the provider for child care subsidy must provide the required background checks within 30 days of the individual's beginning date of employment, service, or residence in the home.

Background checks for providers will remain valid for five years as long as the provider provides continuous services under the child care subsidy program. For any other individual required to have background checks according to §22.1-289.035 , the background checks remain valid for five years as long as the individual maintains continuous employment, residence or volunteer status with that provider.

The provider may no longer continue to participate in CCSP if:

1. The Fingerprint National Criminal History Record Check shows that the person checked has been convicted of a barrier crime;
2. The Virginia Central Registry Child Protective Services Check reveals that the person checked is in the CPS Central Registry as "Founded";
3. The State Child Abuse and Neglect Registry Check reveals that the person checked has been convicted of a barrier crime in any other state in which the individual has resided in the preceding five years; or
4. The Criminal History Record Information Check and Sex Offender Registry Check reveals that the person checked has been convicted of a barrier crime in any other state in which the individual has resided in the preceding five years.

A complete listing of child care barrier crimes can be found in Appendix H.

5.6 Participation in Virginia Quality Birth to 5 System (VQB5)

In alignment with Virginia [state law](#), the Unified Virginia Quality Birth to Five System (VQB5) has been fully implemented to enhance early childhood education quality across the Commonwealth. VQB5 assesses program quality using two nationally recognized indicators:

- Teacher-Child Interactions: Measured through the Classroom Assessment Scoring System (CLASS), with both local and external observations conducted annually
- Curriculum Use: While optional, programs are encouraged to implement comprehensive curricula aligned with Virginia’s Early Learning and Development Standards

Participation in VQB5 is mandatory for all publicly-funded birth-to-five programs, including providers that participate in the CCSP. CCSP-approved providers are expected to meet participation requirements each year, including completing the annual fall registration process and receiving local and external CLASS observations for each classroom. Additional information on participation requirements are available at <https://www.doe.virginia.gov/teaching-learning-assessment/early-childhood-care-education/vqb5-participation-requirements>.

As a result of participation in VQB5, sites receive:

- Strengthened Quality: Educators and leaders will receive individualized feedback and support, training, and resources to help improve interactions and access to curriculum.
- Public Recognition: Quality profiles will be posted publicly each fall on the EarlyChildhood.Quality.doe.virginia.gov website. All programs will receive a certificate.

For more information about participating in VQB5 and preparing for observations, sites should contact their local [Ready Region](#).

Questions about VQB5 Participation Requirements may be directed to VQB5@doe.virginia.gov.

5.7 Additional Provider Requirements

A. Telephone

All providers participating in the subsidy program must have a working telephone at each site where child care is provided.

B. Record Retention

The following records must be retained and made available to local, state, or federal staff upon request.

1. Fingerprint National Criminal History Record Checks;
2. Virginia Central Registry Child Protective Services Checks;
3. State Child Abuse and Neglect Registry Checks from any other state in which the individual has resided in the preceding five years;
4. Criminal History Record Information Check and Sex Offender Registry Check from any other state in which the individual has resided in the preceding five years;
5. Certifications for age appropriate first aid and cardiopulmonary resuscitation (CPR);
6. Tuberculosis screening results;
7. Certificate of Voluntary Registration, if applicable; and
8. Child care payment and attendance records, 5 year retention required.

C. English Proficiency

There is no citizenship requirement for providers. The provider, and any caregivers who are left alone with children, shall be capable of communicating effectively both orally and in writing as applicable to the job responsibility and be capable of communicating with emergency personnel.

D. Maintain compliance with the Subsidy Inspection Requirements

Substantial compliance is defined as no frequent or multiple deficiencies or a significant event posing substantial threat to the health and safety of a child that involve supervision, compliance with ratios, or health and safety violations.

E. Employees of the Department

Employees of any division within the Department or an LDSS worker cannot participate in the Child Care Subsidy Program as a provider.

5.8 Child Care PASS and Provider Attendance Tracking

Parents and providers must use Child Care PASS to record time and attendance of children receiving subsidy. LDSS should direct providers to Child Care PASS resources and training so they can select the most appropriate PASS connection method for their business: <https://vapass.info/>. LDSS should direct providers to the KinderSystems Help Desk to request state-issued tablets, and for any system related issues/questions: by emailing supportva@kindersystems.com or by calling 1-888-211-6884 (Mon-Fri, 6am-7pm).

There are multiple ways to record time and attendance in Child Care PASS. Attendance may be recorded directly in KinderConnect using a personal computer. Providers may print a QRC code for families/sponsors to scan and record attendance using the KinderSmart app. Or providers may direct families/sponsors to record attendance via an onsite provider-owned or state-issued tablet. With implementation of electronic attendance recording in Child Care PASS, legacy methods of manual attendance submission and utilization of the Interactive Voice Response (IVR) System are no longer available.

While families/sponsors are expected to record attendance to the maximum extent they are able, providers will have the capability to input attendance and make corrections to records in PASS for their authorized children.

5.9 Complaints in the Child Care Setting

A. Child Abuse or Neglect

All complaints regarding possible child abuse or neglect occurring in a child care setting must be referred to the Child Protective Services (CPS) unit at the LDSS serving the area where the provider is located. Information regarding the complaint must be shared with the agency responsible for licensure or approval.

In situations when parents select a provider for whom there are child protective services concerns, LDSS must weigh the provider's right to confidentiality with the parent's right to be informed and the child protected. If parents have been informed and continue to place their child in an unsafe environment, a referral to CPS may be in order.

B. Other Complaints

All other complaints should be referred to the Office of Child Care Health and Safety. Complaints may be made online at <https://www.childcare.virginia.gov/families/file-a-complaint> or by calling 833-778-0204.

5.10 Provider Fraud, Repayment, Disqualification & Appeals

When it is suspected that there has been a deliberate misrepresentation of facts in order to receive payments, the LDSS must determine whether fraud was committed. There must be clear and convincing evidence that demonstrates that the provider committed or intended to commit fraud.

Suspected instances of child care fraud must be referred to the LDSS' fraud investigation unit, the appropriate regional child care consultant, and the VDOE. LDSS must send copies of fraud investigation final reports to their appropriate regional child care consultant and copy the VDOE (childcaresubsidy@doe.virginia.gov). If there is clear and convincing evidence that fraud has occurred, VDOE will refer the case to the attorney for the Commonwealth to determine if the case will be prosecuted.

A. Overpayment Due to Fraud

In addition to any criminal punishment, anyone who causes the Department to make an improper provider payment by withholding required information or by providing false information will be required to repay the amount of the improper payment.

Providers will be permanently disqualified from participating in the child care subsidy program upon the first finding of child care fraud.

B. Non-Fraud Overpayment

In the case of non-fraud overpayment, the provider will not be disqualified from participating in the subsidy program as long as a repayment schedule is entered into with the LDSS and payments are made according to that schedule.

Providers who fail to enter into a written repayment schedule with the LDSS for non-fraud overpayment will be disqualified from participating in the child care subsidy program until entering into a written repayment schedule.

Providers who fail to make a payment according to the written repayment schedule for non-fraud overpayments will be disqualified from participating in the child care subsidy program until all delinquent payments are made.

Upon payment of all delinquent payments according to the written repayment schedule, child care subsidy payment will resume for providers who are otherwise eligible.

C. Appeals of VDOE and VDSS Actions

Disputes between the provider and the Department regarding the payment for services rendered and decisions to terminate the Vendor Agreement or to disqualify the vendor from future participation in the Program, may be appealed by the Provider. The provider must notify the Department in writing by sending an email to providerservices@doe.virginia.gov that it is appealing the action within 30 days of the date the Department's action occurred. Upon receiving such notification, the Department will hold an informal conference during which the provider may submit additional information or present any additional facts for the Department to reconsider its action. The Department must render a decision after the conclusion of the informal conference and may or may not uphold the original action. The provider may further appeal this decision and request a formal hearing to be presided over by a hearing officer pursuant to the Virginia Administrative Process Act (the "VAPA"; Va. Code § 2.2-4000 et seq.), who will recommend a decision to the Superintendent of VDOE. The provider may seek court review of the Superintendent's decision pursuant to the VAPA. All formal hearings and court review of the Superintendent's decisions are governed by the VAPA. The provider may waive the holding of the informal conference and request the formal hearing directly upon written notice to the Department. This is the sole remedy for disputes under the Vendor Agreement and the parties thereby waive their right for judicial review in the courts of the Commonwealth of Virginia except as provided by the VAPA.

Section 6. APPENDICES

- A. State Income Eligibility Scale for Child Care Subsidy
- B. Family Copayment Scale for Child Care Subsidy
- C. Child Care Program Budget Lines
- D. Child Care Program Cost Code Descriptions
- E. Maximum Reimbursable Rates Per Type Of Provider
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- H. Barrier Crimes for Child Day Programs
- I. Forms Used in Child Care Subsidy Program
- J. Child Care Subsidy Service Application and Redetermination Form (032-25-0147-04-eng (07/18))
Instructions
- K. Child Care Waitlist Screening Form (032-05-0547-02-eng (03/17) Instructions
- L. Child Care Waitlist Update Form (032-12-0132-00-eng (08/17) Instructions
- M. Child Care Notice of Action Form (032-12-0128-01-eng (07/18)) Instructions
- N. Child Care Notice of Redetermination Form (032-12-0131-00-eng (08/17) Instructions
- O. Child Care Communication Form (032-05-0518-02-eng (07/18) Instructions
- P. Child Care Verification Checklist (032-12-0127-00-eng (03/17) Instructions
- Q. Childhood Immunization Certification (032-03-960-03-eng) Instructions
- R. Child Care Purchase of Service Order (032-05-0540-01-eng (07/12) Instructions
- S. Child Care Repayment Agreement Form (032-12-0130-00-eng (08/17) Instructions
- T. Child Care Case Record Transfer Form (032-25-0148-00-eng (07/18) Instructions
- U. Child Care Notice of Case Transfer Form (032-25-0149-00-eng (07/18) Instructions
- V. Authorization to Act as Agent on Customer's Behalf for In-Home Care (032-05-0061-03-eng
(09/20)
- W. Metropolitan Statistical Area Groupings

Appendix A. State Income Eligibility Scale for Child Care Subsidy

Family Size	Annual Federal Poverty Guidelines	100% of Federal Poverty Guidelines (monthly)	Group I 150% of Federal Poverty Guidelines (monthly)	Group II 160% of Federal Poverty Guidelines (monthly)	Group III 185% of Federal Poverty Guidelines (monthly)	250% of Federal Poverty Guidelines (monthly)	85% of Monthly State Median Income (Entry limit for families with young children; Exit Limit for all families)	85% of Annual State Median Income (Entry limit for families with young children; Exit Limit for all families)
1	\$15,060	\$1,255	\$1,883	\$2,008	\$2,322	\$3,138	\$4,936	\$59,230
2	\$20,440	\$1,703	\$2,555	\$2,725	\$3,151	\$4,258	\$6,455	\$77,455
3	\$25,820	\$2,152	\$3,228	\$3,443	\$3,981	\$5,379	\$7,973	\$95,680
4	\$31,200	\$2,600	\$3,900	\$4,160	\$4,810	\$6,500	\$9,492	\$113,904
5	\$36,580	\$3,048	\$4,573	\$4,877	\$5,639	\$7,621	\$11,011	\$132,129
6	\$41,960	\$3,497	\$5,245	\$5,595	\$6,469	\$8,742	\$12,529	\$150,354
7	\$47,340	\$3,945	\$5,918	\$6,312	\$7,298	\$9,863	\$12,814	\$153,771
8	\$52,720	\$4,393	\$6,590	\$7,029	\$8,128	\$10,983	\$13,099	\$157,188
9	\$58,100	\$4,842	\$7,263	\$7,747	\$8,957	— \$12,104	\$13,384	\$160,605
10	\$63,480	\$5,290	\$7,935	\$8,464	\$9,787	— \$13,225	\$13,669	\$164,022
11	\$68,860	\$5,738	\$8,608	\$9,181	\$10,616	—	\$13,953	\$167,439
12	\$74,240	\$6,187	\$9,280	\$9,899	\$11,445	—	\$14,238	\$170,856
13	\$79,620	\$6,635	\$9,953	\$10,616	\$12,275	—	\$14,523	\$174,274
14	\$85,000	\$7,083	\$10,625	\$11,333	\$13,104	—	\$14,808	\$177,691
15	\$90,380	\$7,523	\$11,298	\$12,051	\$13,934	—	\$15,092	\$181,108

Note: Grey cells with “—” indicate that a family size at this income threshold is ineligible for CCSP due to income exceeding 85% of the state median income.

Sources:

Federal Poverty Guidelines: As published in the Federal Register on January 17, 2024: <https://aspe.hhs.gov/topics/poverty-economic-mobility/poverty-guidelines>

State Median Income: Prepared by the Administration for Children and Families, Office of Community Services, Division of Energy Assistance. As published March 29, 2024. See https://www.acf.hhs.gov/sites/default/files/documents/ocs/COMM_LIHEAP_IM%202024-02_Att4SMITable_0.pdf

Appendix B. Per-Child Copayment Scale for Families

Virginia's copayment scale is based on a simple, per-child monthly fee for each child receiving assistance up to three (3) children. The flat per-child monthly fee increases as family income increases. Families with no income are exempt from copayments. Families with income up to 100% of the Federal Poverty Guidelines are assigned a minimal \$5 copayment.

Monthly family copayments reflect the total of fees for each child participating in the CCSP up to three children, not to exceed 5% of family income.

Income Threshold	Copayment Scale
Income = \$0	\$0
>0-100% FPG	\$5
101-150% FPG	\$125
151-200% FPG	\$175
201-250% FPG	\$225
251-300% FPG	\$275
301-350% FPG	\$325
351% FPG - 85% SMI	\$375
Maximum total copayment	5% of family income

Copayment scale in effect as of July 1, 2025

Child Care Subsidy Program Per-Child Copayment Amounts (by monthly income)

Updated Federal Poverty Guidelines and State Median Income estimates effective 07/01/2025

NUMBER OF HOUSEHOLD MEMBERS

Percent of Poverty	2	3	4	5	6	7 *	8 *	9 *	10 *	11 *	12 *	13 *	14 *	15 *	Per-Child Copayment Fee
\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
>\$0 - 100% FPG	\$1,703	\$2,152	\$2,600	\$3,048	\$3,497	\$3,945	\$4,393	\$4,842	\$5,290	\$5,738	\$6,187	\$6,635	\$7,083	\$7,532	\$5
> 100% FPG - 150% FPG	\$1,704	\$2,153	\$2,601	\$3,049	\$3,498	\$3,946	\$4,394	\$4,843	\$5,291	\$5,739	\$6,188	\$6,636	\$7,084	\$7,533	\$125
	\$2,555	\$3,228	\$3,900	\$4,573	\$5,245	\$5,918	\$6,590	\$7,263	\$7,935	\$8,608	\$9,280	\$9,953	\$10,625	\$11,298	
> 150% FPG - 200% FPG	\$2,556	\$3,229	\$3,901	\$4,574	\$5,246	\$5,919	\$6,591	\$7,264	\$7,936	\$8,609	\$9,281	\$9,954	\$10,626	\$11,299	\$175
	\$3,407	\$4,303	\$5,200	\$6,097	\$6,993	\$7,890	\$8,787	\$9,683	\$10,580	\$11,477	\$12,373	\$13,270	\$14,167	\$15,063	
> 200% FPG - 250% FPG	\$3,408	\$4,304	\$5,201	\$6,098	\$6,994	\$7,891	\$8,788	\$9,684	\$10,581	\$11,478	\$12,374	\$13,271	\$14,168	\$15,064	\$225
	\$4,258	\$5,379	\$6,500	\$7,621	\$8,742	\$9,863	\$10,983	\$12,104	\$13,225	\$14,346	\$15,467	\$16,588	\$17,708	\$18,829	
> 250% FPG - 300% FPG	\$4,259	\$5,380	\$6,501	\$7,622	\$8,743	\$9,864	\$10,984	\$12,105	\$13,226	\$14,347	\$15,468	\$16,589	\$17,709	\$18,830	\$275
	\$5,110	\$6,455	\$7,800	\$9,145	\$10,490	\$11,835	\$13,180	\$14,525	\$15,870	\$17,215	\$18,560	\$19,905	\$21,250	\$22,595	
> 300% FPG - 350% FPG	\$5,111	\$6,456	\$7,801	\$9,146	\$10,491	\$11,836	\$13,181	\$14,526	\$15,871	\$17,216	\$18,561	\$19,906	\$21,251	\$22,596	\$325
	\$5,962	\$7,531	\$9,100	\$10,669	\$12,238	\$13,808	\$15,377	\$16,946	\$18,515	\$20,084	\$21,653	\$23,223	\$24,792	\$26,361	
> 350% FPG - 85% SMI	\$5,963	\$7,532	\$9,101	\$10,670	\$12,239	\$13,809	\$15,378	\$16,947	\$18,516	\$20,085	\$21,654	\$23,224	\$24,793	\$26,362	\$375
	\$6,455	\$7,973	\$9,492	\$11,011	\$12,529	\$12,814	\$13,099	\$13,384	\$13,669	\$13,953	\$14,238	\$14,523	\$14,808	\$15,092	

100% of Federal Poverty	\$1,703	\$2,152	\$2,600	\$3,048	\$3,497	\$3,945	\$4,393	\$4,842	\$5,290	\$5,738	\$6,187	\$6,635	\$7,083	\$7,532	
85% of SMI	\$6,455	\$7,973	\$9,492	\$11,011	\$12,529	\$12,814	\$13,099	\$13,384	\$13,669	\$13,953	\$14,238	\$14,523	\$14,808	\$15,092	

*Family income may not exceed 85% of the state median income. Values shaded in red are capped at 85% SMI for that household size.
 +Federal Poverty Guidelines and State Median Income Estimates for Optional Use in FY24 and Mandatory Use in FY25, Publication Date: March 29, 2024.
<https://www.acf.hhs.gov/ocs/policy-guidance/liheap-im-2024-02-federal-poverty-guidelines-and-state-median-income-estimates>.

Appendix C. Child Care Program Budget Lines

COST CODE	COST CODE DESCRIPTION	BUDGET LINE	COPAYMENT	FEDERAL	STATE
87101	VIEW Working (all VIEW cases)	871	No	50%	50%
87102	VIEW Transitional (former VIEW)	871	Yes	50%	50%
87103	TANF Transitional (not a former VIEW case)	871	Yes	50%	50%
87104	TANF Working (non-VIEW)	871	No	50%	50%
87105	Learnfare	871	No	50%	50%
87106	SNAP E&T	871	Yes (if income is above federal poverty guidelines)	50%	50%
87107	VIEW Transitional Education & Training (E & T) (former VIEW)	871	Yes	50%	50%
87801	Head Start Wrap-Around	878	Yes (if income is above federal poverty guidelines or paying for siblings not enrolled in Head Start)	100%	-
88302	Fee Program (100% Federal)	883	Yes	100%	-
88304	TANF Education/Training (non-VIEW)	883	No	100%	-
88305	Fee Program Homeless/Domestic Violence Shelter	883	Yes	100%	-

Note: The following cost codes are no longer active but will still display in VaCMS for historical purposes: 87802 (Early Head Start – Child Care Partnership Grant) and 88306 (Fee Child Care – Expanded Eligibility). Families under the 88306 cost code will roll up under 88302, effective 7/1/2023

Appendix D. Child Care Program Cost Code Descriptions

- Cost Code 87101** VIEW Working Child Care is mandated in the Code of Virginia and all justifiable requests for supplemental funding will be approved. TANF recipients enrolled in VIEW are eligible for child care to support an assigned activity. For VIEW Working Child Care there is no copayment.
- Cost Code 87102** Parents may receive up to 12 months of child care subsidy to support employment (or training when approved by VIEW for Transitional Employment and Training) if they have received TANF (former VIEW case), the TANF case is closed, and they are found to be income eligible. This includes needed child care for children who are not on the assistance unit, but dependent on the parent. For Transitional Child Care there is a copayment for families with household incomes over 100% of the federal poverty guidelines (FPG).
- Cost Code 87103** Parents may receive up to 12 months of Transitional Child Care subsidy to support employment if they have received TANF (not a former VIEW case), the TANF case is closed, and they are found to be income eligible. This includes needed child care for children who are not on the assistance unit, but dependent on the parent. For Transitional Child Care there is a copayment for families with household incomes over 100% of the federal poverty guidelines (FPG).
- Cost Code 87104** TANF Working Child Care subsidy assists (VIEW exempt) working families receiving TANF benefits. If there is a need for child care and all eligibility requirements are met, recipients of TANF are eligible for needed child care to support employment. For TANF Working Child Care there is no copayment.
- Cost Code 87105** Learnfare Child Care is for children of a minor/teen parent in a TANF public assistance unit to enable them to attend school and comply with compulsory school attendance laws. Priority will be given for child care subsidy to teen parents engaged in completing high school. This assumes the parent of the minor teen cannot provide care because of work, education/training, disability, or another hardship exemption. For Learnfare Child Care there is no copayment.
- Cost Code 87106** SNAP Child Care is considered a federally mandated service. This type of child care subsidy is available for children of recipients of Virginia's Supplemental Nutrition Assistance Program Employment and Training (SNAP E&T) program while participating in an activity approved by a SNAP E&T worker. For SNAP E&T Child Care, there is no copayment if the family's income is at or below 100% of the federal poverty guidelines.
- Cost Code 87107** Former VIEW participants may receive up to 12 months of Transitional Child Care services immediately following TANF case closure to support parents enrolled in an accredited public institution of higher education or other postsecondary school licensed or certified by the Board of Education or the State Council of Higher Education for Virginia. Transitional child care services include needed child care for children who were not part of the TANF assistance unit, but who are dependent on

the parent. For Transitional Child Care E & T there will be a copayment assessed for families with household incomes over 100% of the federal poverty guidelines (FPG).

Cost Code 87801 The Head Start Wraparound program pays for additional hours beyond those provided by Head Start in order to provide full day/full year child care services for Head Start enrolled children. There is no copayment for families with income at or below the federal poverty guidelines. Families must pay a copayment if their income exceeds the federal poverty guidelines.

Cost Code 88302 Fee Child Care program provides child care subsidies to income eligible recipients who are employed, in approved education/training activities, or in need of protective services. For Fee Child Care there is a per-child copayment, which is a flat monthly rate per child receiving assistance up to three participating children. The monthly copayment amount is based upon the family's gross income according to the copayment scale (see Appendix B). Fee child care is not mandated by the Code of Virginia.

*Note: Families under the 88306 cost code will roll up under 88302, effective 7/1/2023

Cost Code 88304 The TANF Education and Training Child Care program provides child care services for TANF families in education or training. For TANF Education and Training Child Care there is no copayment.

Cost Code 88305 Fee Child Care program that provides child care subsidies to eligible recipients who are employed, in approved education/training activities, or in need of protective services and are residing in homeless and domestic violence shelters. LDSS shall submit budget requests for children that are eligible to use this program funding. For Fee Child Care there is a copayment assessed for families with household incomes over 100% of the federal poverty guidelines (FPG). Fee child care is not mandated by the Code of Virginia.

Appendix E. Maximum Reimbursable Rates per Type of Provider

Level 1 Home-Based Programs Receive Level 1 Maximum Reimbursable Rate	Level 1 Center-Based Programs Receive Level 2 Maximum Reimbursable Rate	Level 2 Programs which Receive Level 2 Maximum Reimbursable Rate
<p>Unlicensed and Unregulated Home-Based Providers</p> <p>In-Home Providers (In-Home Providers are paid at a rate not less than the greater of the federal minimum wage or the Virginia minimum wage, not to exceed Level 1 MRR for # of children in care)</p> <p>Voluntarily Registered Family Day Homes</p>	<p>Local Government-Approved Recreation Programs</p> <p>Local School Division Programs (if unlicensed)</p> <p>Religiously-Exempt Child Day Centers</p> <p>Certified Preschools</p>	<p>Licensed Family Day Homes</p> <p>Local Ordinance Approved Providers (that meet or exceed <i>Standards for Licensed Family Day Homes</i>)*</p> <p>Licensed Family Day System-Approved Family Day Homes</p> <p>Licensed Child Day Centers (including Short-Term Child Day Centers)</p> <p>Child Care Centers run by the United States Department of Defense</p>

* Localities that approve providers by local ordinances (in accordance §§ 15.2-741 and 15.2-914 of the Code of Virginia) must have guidelines that meet or exceed the Standards for Licensed Family Day Homes to pay at Level 2 MRR.

Appendix F. Level 1 Maximum Reimbursable Rates

ABOUT VIRGINIA'S COST ESTIMATION MODEL FOR SETTING RATES

Under direction from the General Assembly, Virginia uses a federally-approved alternative methodology called a cost estimation model to estimate the cost of delivering high-quality early childhood care and education. Maximum Reimbursement Rates (MRR) in the CCSP are established based on a proportion of modeled costs. For more information about Virginia's model, visit:

<https://www.childcare.virginia.gov/reports-resources/administrative-program-manuals-reports-and-data/subsidy-program-guidance-manual>.

VDSS Central Region | Center Child Care | Maximum Reimbursable Rates – Level 1 | Effective 07/01/2023 | Full Day, Part Day Rate

Note: Shaded cells indicate rates that have been held harmless.

Locality	FIPS	Ready Region	DSS Region	Full Day					Part Day				
				Infant	Toddler	2 year old	Pre-School	School Age	Infant	Toddler	2 year old	Pre-School	School Age
Amelia County	007	Southside	Central	\$64	\$56	\$43	\$39	\$28	\$45	\$40	\$30	\$28	\$20
Buckingham County	029	Blue Ridge	Central	\$70	\$61	\$47	\$42	\$30	\$49	\$43	\$33	\$30	\$21
Caroline County	033	North Central	Central	\$83	\$72	\$55	\$50	\$35	\$59	\$51	\$39	\$35	\$25
Charles City County	036	Central	Central	\$69	\$60	\$47	\$41	\$29	\$49	\$42	\$33	\$29	\$21
Chesterfield County	041	Central	Central	\$69	\$60	\$47	\$41	\$35	\$49	\$42	\$33	\$29	\$25
Colonial Heights City	570	Central	Central	\$69	\$60	\$47	\$41	\$35	\$49	\$42	\$33	\$29	\$25
Cumberland County	049	Southside	Central	\$64	\$56	\$43	\$39	\$28	\$45	\$40	\$30	\$28	\$20
Essex County	057	Chesapeake Bay	Central	\$68	\$59	\$45	\$41	\$29	\$48	\$42	\$32	\$29	\$21
Fluvanna County	065	Blue Ridge	Central	\$70	\$61	\$47	\$42	\$30	\$49	\$43	\$33	\$30	\$21
Goochland County	075	Central	Central	\$69	\$60	\$47	\$41	\$32	\$49	\$42	\$33	\$29	\$22
Hanover County	085	Central	Central	\$69	\$60	\$47	\$41	\$32	\$49	\$42	\$33	\$29	\$22
Henrico County	087	Central	Central	\$69	\$60	\$47	\$41	\$32	\$49	\$42	\$33	\$29	\$22
Hopewell City	670	Central	Central	\$69	\$60	\$47	\$41	\$29	\$49	\$42	\$33	\$29	\$21
King and Queen County	097	Chesapeake Bay	Central	\$68	\$59	\$45	\$41	\$29	\$48	\$42	\$32	\$29	\$21
King William County	101	Chesapeake Bay	Central	\$68	\$59	\$45	\$41	\$29	\$48	\$42	\$32	\$29	\$21
Lancaster County	103	Chesapeake Bay	Central	\$68	\$59	\$45	\$41	\$29	\$48	\$42	\$32	\$29	\$21
Lunenburg County	111	Southside	Central	\$64	\$56	\$43	\$39	\$28	\$45	\$40	\$30	\$28	\$20
Middlesex County	119	Chesapeake Bay	Central	\$68	\$59	\$45	\$41	\$29	\$48	\$42	\$32	\$29	\$21
New Kent County	127	Central	Central	\$69	\$60	\$47	\$41	\$29	\$49	\$42	\$33	\$29	\$21
Northumberland County	133	Chesapeake Bay	Central	\$68	\$59	\$45	\$41	\$29	\$48	\$42	\$32	\$29	\$21
Nottoway County	135	Southside	Central	\$64	\$56	\$43	\$39	\$28	\$45	\$40	\$30	\$28	\$20
Petersburg City	730	Central	Central	\$69	\$60	\$47	\$41	\$29	\$49	\$42	\$33	\$29	\$21
Powhatan County	145	Central	Central	\$69	\$60	\$47	\$41	\$29	\$49	\$42	\$33	\$29	\$21
Prince Edward County	147	Southside	Central	\$64	\$56	\$43	\$39	\$28	\$45	\$40	\$30	\$28	\$20
Richmond City	760	Central	Central	\$69	\$60	\$47	\$41	\$29	\$49	\$42	\$33	\$29	\$21
Richmond County	159	Chesapeake Bay	Central	\$68	\$59	\$45	\$41	\$29	\$48	\$42	\$32	\$29	\$21
Westmoreland County	193	Chesapeake Bay	Central	\$68	\$59	\$45	\$41	\$29	\$48	\$42	\$32	\$29	\$21

VDSS Eastern Region | Center Child Care | Maximum Reimbursable Rates – Level 1 | Effective 07/01/2023 | Full Day, Part Day Rate

Note: Shaded cells indicate rates that have been held harmless.

Locality	FIPS	Ready Region	DSS Region	Full Day					Part Day				
				Infant	Toddler	2 year old	Pre-School	School Age	Infant	Toddler	2 year old	Pre-School	School Age
Accomack County	001	Southeastern	Eastern	\$71	\$61	\$47	\$42	\$30	\$50	\$43	\$33	\$30	\$21
Brunswick County	025	Southside	Eastern	\$64	\$56	\$43	\$39	\$28	\$45	\$40	\$30	\$28	\$20
Chesapeake City	550	Southeastern	Eastern	\$71	\$61	\$47	\$42	\$30	\$50	\$43	\$33	\$30	\$21
Dinwiddie County	053	Central	Eastern	\$69	\$60	\$47	\$41	\$29	\$49	\$42	\$33	\$29	\$21
Emporia	595	Central	Eastern	\$69	\$60	\$47	\$41	\$29	\$49	\$42	\$33	\$29	\$21
Franklin City	620	Southeastern	Eastern	\$71	\$61	\$47	\$42	\$30	\$50	\$43	\$33	\$30	\$21
Gloucester County	073	Chesapeake Bay	Eastern	\$68	\$59	\$45	\$41	\$29	\$48	\$42	\$32	\$29	\$21
Greensville County	081	Central	Eastern	\$69	\$60	\$47	\$41	\$29	\$49	\$42	\$33	\$29	\$21
Hampton City	650	Chesapeake Bay	Eastern	\$68	\$59	\$45	\$41	\$29	\$48	\$42	\$32	\$29	\$21
Isle of Wight County	093	Southeastern	Eastern	\$71	\$61	\$47	\$42	\$30	\$50	\$43	\$33	\$30	\$21
James City County	095	Chesapeake Bay	Eastern	\$68	\$59	\$45	\$41	\$29	\$48	\$42	\$32	\$29	\$21
Mathews County	115	Chesapeake Bay	Eastern	\$68	\$59	\$45	\$41	\$29	\$48	\$42	\$32	\$29	\$21
Newport News City	700	Chesapeake Bay	Eastern	\$68	\$59	\$45	\$41	\$29	\$48	\$42	\$32	\$29	\$21
Norfolk City	710	Southeastern	Eastern	\$71	\$61	\$47	\$42	\$30	\$50	\$43	\$33	\$30	\$21
Northampton County	131	Southeastern	Eastern	\$71	\$61	\$47	\$42	\$30	\$50	\$43	\$33	\$30	\$21
Poquoson	735	Chesapeake Bay	Eastern	\$68	\$59	\$45	\$41	\$29	\$48	\$42	\$32	\$29	\$21
Portsmouth City	740	Southeastern	Eastern	\$71	\$61	\$47	\$42	\$30	\$50	\$43	\$33	\$30	\$21
Prince George County	149	Central	Eastern	\$69	\$60	\$47	\$41	\$29	\$49	\$42	\$33	\$29	\$21
Southampton County	175	Southeastern	Eastern	\$71	\$61	\$47	\$42	\$30	\$50	\$43	\$33	\$30	\$21
Suffolk City	800	Southeastern	Eastern	\$71	\$61	\$47	\$42	\$30	\$50	\$43	\$33	\$30	\$21
Surry County	181	Central	Eastern	\$69	\$60	\$47	\$41	\$29	\$49	\$42	\$33	\$29	\$21
Sussex County	183	Central	Eastern	\$69	\$60	\$47	\$41	\$29	\$49	\$42	\$33	\$29	\$21
Virginia Beach City	810	Southeastern	Eastern	\$71	\$61	\$47	\$42	\$30	\$50	\$43	\$33	\$30	\$21
Williamsburg City	830	Chesapeake Bay	Eastern	\$68	\$59	\$45	\$41	\$29	\$48	\$42	\$32	\$29	\$21
York County	199	Chesapeake Bay	Eastern	\$68	\$59	\$45	\$41	\$29	\$48	\$42	\$32	\$29	\$21

VDSS Northern Region | Center Child Care | Maximum Reimbursable Rates – Level 1 | Effective 07/01/2023 | Full Day, Part Day Rate

Note: Shaded cells indicate rates that have been held harmless.

Locality	FIPS	Ready Region	DSS Region	Full Day					Part Day				
				Infant	Toddler	2-year-old	Pre-School	School Age	Infant	Toddler	2 year old	Pre-School	School Age
Alexandria City	510	Capital Area	Northern	\$94	\$81	\$62	\$58	\$56	\$66	\$57	\$44	\$41	\$39
Arlington County	013	Capital Area	Northern	\$94	\$81	\$70	\$70	\$59	\$66	\$57	\$49	\$49	\$41
Clarke County	043	Blue Ridge	Northern	\$70	\$61	\$47	\$42	\$30	\$49	\$43	\$33	\$30	\$21
Culpeper County	047	North Central	Northern	\$83	\$72	\$55	\$50	\$35	\$59	\$51	\$39	\$35	\$25
Fairfax City	600	Capital Area	Northern	\$94	\$81	\$62	\$59	\$52	\$66	\$57	\$44	\$41	\$36
Fairfax County	059	Capital Area	Northern	\$94	\$81	\$62	\$59	\$52	\$66	\$57	\$44	\$41	\$36
Falls Church	610	Capital Area	Northern	\$94	\$81	\$62	\$59	\$52	\$66	\$57	\$44	\$41	\$36
Fauquier County	061	North Central	Northern	\$83	\$72	\$55	\$50	\$35	\$59	\$51	\$39	\$35	\$25
Frederick County	069	Blue Ridge	Northern	\$70	\$61	\$47	\$42	\$30	\$49	\$43	\$33	\$30	\$21
Fredericksburg City	630	North Central	Northern	\$83	\$72	\$55	\$50	\$35	\$59	\$51	\$39	\$35	\$25
Greene County	079	Blue Ridge	Northern	\$70	\$61	\$47	\$42	\$30	\$49	\$43	\$33	\$30	\$21
Harrisonburg City	660	Blue Ridge	Northern	\$70	\$61	\$47	\$42	\$30	\$49	\$43	\$33	\$30	\$21
King George County	099	North Central	Northern	\$83	\$72	\$55	\$50	\$35	\$59	\$51	\$39	\$35	\$25
Loudoun County	107	North Central	Northern	\$83	\$72	\$56	\$56	\$49	\$59	\$51	\$39	\$39	\$34
Louisa County	109	Blue Ridge	Northern	\$70	\$61	\$47	\$42	\$30	\$49	\$43	\$33	\$30	\$21
Madison County	113	Blue Ridge	Northern	\$70	\$61	\$47	\$42	\$30	\$49	\$43	\$33	\$30	\$21
Manassas City	683	North Central	Northern	\$83	\$72	\$55	\$50	\$35	\$59	\$51	\$39	\$35	\$25
Manassas Park City	685	North Central	Northern	\$83	\$73	\$56	\$56	\$48	\$59	\$51	\$39	\$39	\$34
Orange County	137	Blue Ridge	Northern	\$70	\$61	\$47	\$42	\$30	\$49	\$43	\$33	\$30	\$21
Page County	139	Blue Ridge	Northern	\$70	\$61	\$47	\$42	\$30	\$49	\$43	\$33	\$30	\$21
Prince William County	153	North Central	Northern	\$83	\$72	\$55	\$50	\$43	\$59	\$51	\$39	\$35	\$30
Rappahannock County	157	Blue Ridge	Northern	\$70	\$61	\$47	\$42	\$31	\$49	\$43	\$33	\$30	\$22
Rockingham County	165	Blue Ridge	Northern	\$70	\$61	\$47	\$42	\$30	\$49	\$43	\$33	\$30	\$21
Shenandoah County	171	Blue Ridge	Northern	\$70	\$61	\$47	\$42	\$30	\$49	\$43	\$33	\$30	\$21
Spotsylvania County	177	North Central	Northern	\$83	\$72	\$55	\$50	\$35	\$59	\$51	\$39	\$35	\$25
Stafford County	179	North Central	Northern	\$83	\$72	\$55	\$50	\$35	\$59	\$51	\$39	\$35	\$25
Warren County	187	Blue Ridge	Northern	\$70	\$61	\$47	\$42	\$30	\$49	\$43	\$33	\$30	\$21
Winchester City	840	Blue Ridge	Northern	\$70	\$61	\$47	\$42	\$30	\$49	\$43	\$33	\$30	\$21

VDSS Piedmont Region | Center Child Care | Maximum Reimbursable Rates – Level 1 | Effective 07/01/2023 | Full Day, Part Day Rate

Note: Shaded cells indicate rates that have been held harmless.

Locality	FIPS	Ready Region	DSS Region	Full Day					Part Day				
				Infant	Toddler	2-year-old	Pre-School	School Age	Infant	Toddler	2-year-old	Pre-School	School Age
Albemarle County	003	Blue Ridge	Piedmont	\$70	\$61	\$47	\$42	\$38	\$49	\$43	\$33	\$30	\$27
Alleghany County	005	West	Piedmont	\$67	\$58	\$45	\$41	\$29	\$47	\$41	\$32	\$29	\$21
Amherst County	009	Southside	Piedmont	\$64	\$56	\$43	\$39	\$28	\$45	\$40	\$30	\$28	\$20
Appomattox County	011	Southside	Piedmont	\$64	\$56	\$43	\$39	\$28	\$45	\$40	\$30	\$28	\$20
Augusta County	015	Blue Ridge	Piedmont	\$70	\$61	\$47	\$42	\$30	\$49	\$43	\$33	\$30	\$21
Bath County	017	West	Piedmont	\$67	\$58	\$45	\$41	\$29	\$47	\$41	\$32	\$29	\$21
Bedford County	019	Southside	Piedmont	\$64	\$56	\$43	\$39	\$28	\$45	\$40	\$30	\$28	\$20
Botetourt County	023	West	Piedmont	\$67	\$58	\$45	\$41	\$29	\$47	\$41	\$32	\$29	\$21
Buena Vista City	530	West	Piedmont	\$67	\$58	\$45	\$41	\$29	\$47	\$41	\$32	\$29	\$21
Campbell County	031	Southside	Piedmont	\$64	\$56	\$43	\$39	\$28	\$45	\$40	\$30	\$28	\$20
Charlotte County	037	Southside	Piedmont	\$64	\$56	\$43	\$39	\$28	\$45	\$40	\$30	\$28	\$20
Charlottesville City	540	Blue Ridge	Piedmont	\$70	\$61	\$47	\$42	\$38	\$49	\$43	\$33	\$30	\$27
Covington City	580	West	Piedmont	\$67	\$58	\$45	\$41	\$29	\$47	\$41	\$32	\$29	\$21
Craig County	045	West	Piedmont	\$67	\$58	\$45	\$41	\$29	\$47	\$41	\$32	\$29	\$21
Danville City	590	Southside	Piedmont	\$64	\$56	\$43	\$39	\$28	\$45	\$40	\$30	\$28	\$20
Franklin County	067	West	Piedmont	\$67	\$58	\$45	\$41	\$29	\$47	\$41	\$32	\$29	\$21
Halifax County	083	Southside	Piedmont	\$64	\$56	\$43	\$39	\$28	\$45	\$40	\$30	\$28	\$20
Henry County	089	West	Piedmont	\$67	\$58	\$45	\$41	\$29	\$47	\$41	\$32	\$29	\$21
Highland County	091	West	Piedmont	\$67	\$58	\$45	\$41	\$29	\$47	\$41	\$32	\$29	\$21
Lexington City	678	West	Piedmont	\$67	\$58	\$45	\$41	\$29	\$47	\$41	\$32	\$29	\$21
Lynchburg City	680	Southside	Piedmont	\$64	\$56	\$43	\$39	\$28	\$45	\$40	\$30	\$28	\$20
Martinsville City	690	West	Piedmont	\$67	\$58	\$45	\$41	\$29	\$47	\$41	\$32	\$29	\$21
Mecklenburg County	117	Southside	Piedmont	\$64	\$56	\$43	\$39	\$28	\$45	\$40	\$30	\$28	\$20
Nelson County	125	Blue Ridge	Piedmont	\$70	\$61	\$47	\$42	\$30	\$49	\$43	\$33	\$30	\$21
Pittsylvania County	143	Southside	Piedmont	\$64	\$56	\$43	\$39	\$28	\$45	\$40	\$30	\$28	\$20
Roanoke City	770	West	Piedmont	\$67	\$58	\$45	\$41	\$29	\$47	\$41	\$32	\$29	\$21
Roanoke County	161	West	Piedmont	\$67	\$58	\$45	\$41	\$29	\$47	\$41	\$32	\$29	\$21
Rockbridge County	163	West	Piedmont	\$67	\$58	\$45	\$41	\$29	\$47	\$41	\$32	\$29	\$21
Salem	775	West	Piedmont	\$67	\$58	\$45	\$41	\$29	\$47	\$41	\$32	\$29	\$21
Staunton City	790	Blue Ridge	Piedmont	\$70	\$61	\$47	\$42	\$30	\$49	\$43	\$33	\$30	\$21

Locality	FIPS	Ready Region	DSS Region	Full Day					Part Day				
				Infant	Toddler	2-year-old	Pre-School	School Age	Infant	Toddler	2-year-old	Pre-School	School Age
Waynesboro City	820	Blue Ridge	Piedmont	\$70	\$61	\$47	\$42	\$30	\$49	\$43	\$33	\$30	\$21

VDSS Western Region | Center Child Care | Maximum Reimbursable Rates – Level 1 | Effective 07/01/2023 | Full Day, Part Day Rate

Note: Shaded cells indicate rates that have been held harmless.

Locality	FIPS	Ready Region	DSS Region	Full Day					Part Day				
				Infant	Toddler	2-year-old	Pre-School	School Age	Infant	Toddler	2-year-old	Pre-School	School Age
Bland County	021	Southwest	Western	\$63	\$55	\$42	\$38	\$27	\$45	\$39	\$30	\$27	\$19
Bristol City	520	Southwest	Western	\$63	\$55	\$42	\$38	\$27	\$45	\$39	\$30	\$27	\$19
Buchanan County	027	Southwest	Western	\$63	\$55	\$42	\$38	\$27	\$45	\$39	\$30	\$27	\$19
Carroll County	035	Southwest	Western	\$63	\$55	\$42	\$38	\$27	\$45	\$39	\$30	\$27	\$19
Dickenson County	051	Southwest	Western	\$63	\$55	\$42	\$38	\$27	\$45	\$39	\$30	\$27	\$19
Floyd County	063	Southwest	Western	\$63	\$55	\$42	\$38	\$27	\$45	\$39	\$30	\$27	\$19
Galax City	640	Southwest	Western	\$63	\$55	\$42	\$38	\$27	\$45	\$39	\$30	\$27	\$19
Giles County	071	Southwest	Western	\$63	\$55	\$42	\$38	\$27	\$45	\$39	\$30	\$27	\$19
Grayson County	077	Southwest	Western	\$63	\$55	\$42	\$38	\$27	\$45	\$39	\$30	\$27	\$19
Lee County	105	Southwest	Western	\$63	\$55	\$42	\$38	\$27	\$45	\$39	\$30	\$27	\$19
Montgomery County	121	Southwest	Western	\$63	\$55	\$42	\$38	\$28	\$45	\$39	\$30	\$27	\$20
Norton City	720	Southwest	Western	\$63	\$55	\$42	\$38	\$27	\$45	\$39	\$30	\$27	\$19
Patrick County	141	West	Western	\$67	\$58	\$45	\$41	\$29	\$47	\$41	\$32	\$29	\$21
Pulaski County	155	Southwest	Western	\$63	\$55	\$42	\$38	\$27	\$45	\$39	\$30	\$27	\$19
Radford City	750	Southwest	Western	\$63	\$55	\$42	\$38	\$27	\$45	\$39	\$30	\$27	\$19
Russell County	167	Southwest	Western	\$63	\$55	\$42	\$38	\$27	\$45	\$39	\$30	\$27	\$19
Scott County	169	Southwest	Western	\$63	\$55	\$42	\$38	\$27	\$45	\$39	\$30	\$27	\$19
Smyth County	173	Southwest	Western	\$63	\$55	\$42	\$38	\$27	\$45	\$39	\$30	\$27	\$19
Tazewell County	185	Southwest	Western	\$63	\$55	\$42	\$38	\$27	\$45	\$39	\$30	\$27	\$19
Washington County	191	Southwest	Western	\$63	\$55	\$42	\$38	\$27	\$45	\$39	\$30	\$27	\$19
Wise County	195	Southwest	Western	\$63	\$55	\$42	\$38	\$27	\$45	\$39	\$30	\$27	\$19
Wythe County	197	Southwest	Western	\$63	\$55	\$42	\$38	\$27	\$45	\$39	\$30	\$27	\$19

VDSS Central Region | Family Day Home | Maximum Reimbursable Rates – Level 1 | Effective 07/01/2023 | Full Day, Part Day Rate

Note: Shaded cells indicate rates that have been held harmless

Locality	FIPS	Ready Region	DSS Region	Full Day					Part Day				
				Infant	Toddler	2-year-old	Pre-School	School Age	Infant	Toddler	2-year-old	Pre-School	School Age
Amelia County	007	Southside	Central	\$49	\$49	\$49	\$49	\$49	\$34	\$34	\$34	\$34	\$34
Buckingham County	029	Blue Ridge	Central	\$53	\$53	\$53	\$53	\$53	\$38	\$38	\$38	\$38	\$38
Caroline County	033	North Central	Central	\$53	\$53	\$53	\$53	\$53	\$37	\$37	\$37	\$37	\$37
Charles City County	036	Central	Central	\$53	\$53	\$53	\$53	\$53	\$37	\$37	\$37	\$37	\$37
Chesterfield County	041	Central	Central	\$53	\$53	\$53	\$53	\$53	\$37	\$37	\$37	\$37	\$37
Colonial Heights City	570	Central	Central	\$53	\$53	\$53	\$53	\$53	\$37	\$37	\$37	\$37	\$37
Cumberland County	049	Southside	Central	\$49	\$49	\$49	\$49	\$49	\$34	\$34	\$34	\$34	\$34
Essex County	057	Chesapeake Bay	Central	\$51	\$51	\$51	\$51	\$51	\$36	\$36	\$36	\$36	\$36
Fluvanna County	065	Blue Ridge	Central	\$53	\$53	\$53	\$53	\$53	\$38	\$38	\$38	\$38	\$38
Goochland County	075	Central	Central	\$53	\$53	\$53	\$53	\$53	\$37	\$37	\$37	\$37	\$37
Hanover County	085	Central	Central	\$53	\$53	\$53	\$53	\$53	\$37	\$37	\$37	\$37	\$37
Henrico County	087	Central	Central	\$53	\$53	\$53	\$53	\$53	\$37	\$37	\$37	\$37	\$37
Hopewell City	670	Central	Central	\$53	\$53	\$53	\$53	\$53	\$37	\$37	\$37	\$37	\$37
King and Queen County	097	Chesapeake Bay	Central	\$51	\$51	\$51	\$51	\$51	\$36	\$36	\$36	\$36	\$36
King William County	101	Chesapeake Bay	Central	\$51	\$51	\$51	\$51	\$51	\$36	\$36	\$36	\$36	\$36
Lancaster County	103	Chesapeake Bay	Central	\$51	\$51	\$51	\$51	\$51	\$36	\$36	\$36	\$36	\$36
Lunenburg County	111	Southside	Central	\$49	\$49	\$49	\$49	\$49	\$34	\$34	\$34	\$34	\$34
Middlesex County	119	Chesapeake Bay	Central	\$51	\$51	\$51	\$51	\$51	\$36	\$36	\$36	\$36	\$36
New Kent County	127	Central	Central	\$53	\$53	\$53	\$53	\$53	\$37	\$37	\$37	\$37	\$37
Northumberland County	133	Chesapeake Bay	Central	\$51	\$51	\$51	\$51	\$51	\$36	\$36	\$36	\$36	\$36
Nottoway County	135	Southside	Central	\$49	\$49	\$49	\$49	\$49	\$34	\$34	\$34	\$34	\$34
Petersburg City	730	Central	Central	\$53	\$53	\$53	\$53	\$53	\$37	\$37	\$37	\$37	\$37
Powhatan County	145	Central	Central	\$53	\$53	\$53	\$53	\$53	\$37	\$37	\$37	\$37	\$37
Prince Edward County	147	Southside	Central	\$49	\$49	\$49	\$49	\$49	\$34	\$34	\$34	\$34	\$34
Richmond City	760	Central	Central	\$53	\$53	\$53	\$53	\$53	\$37	\$37	\$37	\$37	\$37
Richmond County	159	Chesapeake Bay	Central	\$51	\$51	\$51	\$51	\$51	\$36	\$36	\$36	\$36	\$36
Westmoreland County	193	Chesapeake Bay	Central	\$51	\$51	\$51	\$51	\$51	\$36	\$36	\$36	\$36	\$36

VDSS Eastern Region | Family Day Home | Maximum Reimbursable Rates – Level 1 | Effective 07/01/2023 | Full Day, Part Day Rate

Note: Shaded cells indicate rates that have been held harmless.

Locality	FIP S	Ready Region	DSS Region	Full Day					Part Day				
				Infant	Toddler	2-year-old	Pre-School	School Age	Infant	Toddler	2-year-old	Pre-School	School Age
Accomack County	001	Southeastern	Eastern	\$54	\$54	\$54	\$54	\$54	\$38	\$38	\$38	\$38	\$38
Brunswick County	025	Southside	Eastern	\$49	\$49	\$49	\$49	\$49	\$34	\$34	\$34	\$34	\$34
Chesapeake City	550	Southeastern	Eastern	\$54	\$54	\$54	\$54	\$54	\$38	\$38	\$38	\$38	\$38
Dinwiddie County	053	Central	Eastern	\$53	\$53	\$53	\$53	\$53	\$37	\$37	\$37	\$37	\$37
Emporia	595	Central	Eastern	\$53	\$53	\$53	\$53	\$53	\$37	\$37	\$37	\$37	\$37
Franklin City	620	Southeastern	Eastern	\$54	\$54	\$54	\$54	\$54	\$38	\$38	\$38	\$38	\$38
Gloucester County	073	Chesapeake Bay	Eastern	\$51	\$51	\$51	\$51	\$51	\$36	\$36	\$36	\$36	\$36
Greensville County	081	Central	Eastern	\$53	\$53	\$53	\$53	\$53	\$37	\$37	\$37	\$37	\$37
Hampton City	650	Chesapeake Bay	Eastern	\$51	\$51	\$51	\$51	\$51	\$36	\$36	\$36	\$36	\$36
Isle of Wight County	093	Southeastern	Eastern	\$54	\$54	\$54	\$54	\$54	\$38	\$38	\$38	\$38	\$38
James City County	095	Chesapeake Bay	Eastern	\$51	\$51	\$51	\$51	\$51	\$36	\$36	\$36	\$36	\$36
Mathews County	115	Chesapeake Bay	Eastern	\$51	\$51	\$51	\$51	\$51	\$36	\$36	\$36	\$36	\$36
Newport News City	700	Chesapeake Bay	Eastern	\$51	\$51	\$51	\$51	\$51	\$36	\$36	\$36	\$36	\$36
Norfolk City	710	Southeastern	Eastern	\$54	\$54	\$54	\$54	\$54	\$38	\$38	\$38	\$38	\$38
Northampton County	131	Southeastern	Eastern	\$54	\$54	\$54	\$54	\$54	\$38	\$38	\$38	\$38	\$38
Poquoson	735	Chesapeake Bay	Eastern	\$51	\$51	\$51	\$51	\$51	\$36	\$36	\$36	\$36	\$36
Portsmouth City	740	Southeastern	Eastern	\$54	\$54	\$54	\$54	\$54	\$38	\$38	\$38	\$38	\$38
Prince George County	149	Central	Eastern	\$53	\$53	\$53	\$53	\$53	\$37	\$37	\$37	\$37	\$37
Southampton County	175	Southeastern	Eastern	\$54	\$54	\$54	\$54	\$54	\$38	\$38	\$38	\$38	\$38
Suffolk City	800	Southeastern	Eastern	\$54	\$54	\$54	\$54	\$54	\$38	\$38	\$38	\$38	\$38
Surry County	181	Central	Eastern	\$53	\$53	\$53	\$53	\$53	\$37	\$37	\$37	\$37	\$37
Sussex County	183	Central	Eastern	\$53	\$53	\$53	\$53	\$53	\$37	\$37	\$37	\$37	\$37
Virginia Beach City	810	Southeastern	Eastern	\$54	\$54	\$54	\$54	\$54	\$38	\$38	\$38	\$38	\$38
Williamsburg City	830	Chesapeake Bay	Eastern	\$51	\$51	\$51	\$51	\$51	\$36	\$36	\$36	\$36	\$36
York County	199	Chesapeake Bay	Eastern	\$51	\$51	\$51	\$51	\$51	\$36	\$36	\$36	\$36	\$36

VDSS Northern Region | Family Day Home | Maximum Reimbursable Rates – Level 1 | Effective 07/01/2023 | Full Day, Part Day Rate

Note: Shaded cells indicate rates that have been held harmless.

Locality	FIPS	Ready Region	DSS Region	Full Day					Part Day				
				Infant	Toddler	2-year-old	Pre-School	School Age	Infant	Toddler	2-year-old	Pre-School	School Age
Alexandria City	510	Capital Area	Northern	\$62	\$62	\$62	\$62	\$62	\$43	\$43	\$43	\$43	\$43
Arlington County	013	Capital Area	Northern	\$62	\$62	\$62	\$62	\$62	\$43	\$43	\$43	\$43	\$43
Clarke County	043	Blue Ridge	Northern	\$53	\$53	\$53	\$53	\$53	\$38	\$38	\$38	\$38	\$38
Culpeper County	047	North Central	Northern	\$53	\$53	\$53	\$53	\$53	\$37	\$37	\$37	\$37	\$37
Fairfax City	600	Capital Area	Northern	\$62	\$62	\$62	\$62	\$62	\$43	\$43	\$43	\$43	\$43
Fairfax County	059	Capital Area	Northern	\$62	\$62	\$62	\$62	\$62	\$43	\$43	\$43	\$43	\$43
Falls Church	610	Capital Area	Northern	\$62	\$62	\$62	\$62	\$62	\$43	\$43	\$43	\$43	\$43
Fauquier County	061	North Central	Northern	\$53	\$53	\$53	\$53	\$53	\$37	\$37	\$37	\$37	\$37
Frederick County	069	Blue Ridge	Northern	\$53	\$53	\$53	\$53	\$53	\$38	\$38	\$38	\$38	\$38
Fredericksburg City	630	North Central	Northern	\$53	\$53	\$53	\$53	\$53	\$37	\$37	\$37	\$37	\$37
Greene County	079	Blue Ridge	Northern	\$53	\$53	\$53	\$53	\$53	\$38	\$38	\$38	\$38	\$38
Harrisonburg City	660	Blue Ridge	Northern	\$53	\$53	\$53	\$53	\$53	\$38	\$38	\$38	\$38	\$38
King George County	099	North Central	Northern	\$53	\$53	\$53	\$53	\$53	\$37	\$37	\$37	\$37	\$37
Loudoun County	107	North Central	Northern	\$53	\$53	\$53	\$53	\$53	\$37	\$37	\$37	\$37	\$37
Louisa County	109	Blue Ridge	Northern	\$53	\$53	\$53	\$53	\$53	\$38	\$38	\$38	\$38	\$38
Madison County	113	Blue Ridge	Northern	\$53	\$53	\$53	\$53	\$53	\$38	\$38	\$38	\$38	\$38
Manassas City	683	North Central	Northern	\$53	\$53	\$53	\$53	\$53	\$37	\$37	\$37	\$37	\$37
Manassas Park City	685	North Central	Northern	\$53	\$53	\$53	\$53	\$53	\$37	\$37	\$37	\$37	\$37
Orange County	137	Blue Ridge	Northern	\$53	\$53	\$53	\$53	\$53	\$38	\$38	\$38	\$38	\$38
Page County	139	Blue Ridge	Northern	\$53	\$53	\$53	\$53	\$53	\$38	\$38	\$38	\$38	\$38
Prince William County	153	North Central	Northern	\$53	\$53	\$53	\$53	\$53	\$37	\$37	\$37	\$37	\$37
Rappahannock County	157	Blue Ridge	Northern	\$53	\$53	\$53	\$53	\$53	\$38	\$38	\$38	\$38	\$38
Rockingham County	165	Blue Ridge	Northern	\$53	\$53	\$53	\$53	\$53	\$38	\$38	\$38	\$38	\$38
Shenandoah County	171	Blue Ridge	Northern	\$53	\$53	\$53	\$53	\$53	\$38	\$38	\$38	\$38	\$38
Spotsylvania County	177	North Central	Northern	\$53	\$53	\$53	\$53	\$53	\$37	\$37	\$37	\$37	\$37
Stafford County	179	North Central	Northern	\$53	\$53	\$53	\$53	\$53	\$37	\$37	\$37	\$37	\$37
Warren County	187	Blue Ridge	Northern	\$53	\$53	\$53	\$53	\$53	\$38	\$38	\$38	\$38	\$38

Winchester City	840	Blue Ridge	Northern	\$53	\$53	\$53	\$53	\$53	\$38	\$38	\$38	\$38	\$38
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VDSS Piedmont Region | Family Day Home | Maximum Reimbursable Rates – Level 1 | Effective 07/01/2023 | Full Day, Part Day Rate

Note: Shaded cells indicate rates that have been held harmless.

Locality	FIPS	Ready Region	DSS Region	Full Day					Part Day				
				Infant	Toddler	2-year-old	Pre-School	School Age	Infant	Toddler	2-year-old	Pre-School	School Age
Albemarle County	003	Blue Ridge	Piedmont	\$53	\$53	\$53	\$53	\$53	\$38	\$38	\$38	\$38	\$38
Alleghany County	005	West	Piedmont	\$51	\$51	\$51	\$51	\$51	\$36	\$36	\$36	\$36	\$36
Amherst County	009	Southside	Piedmont	\$49	\$49	\$49	\$49	\$49	\$34	\$34	\$34	\$34	\$34
Appomattox County	011	Southside	Piedmont	\$49	\$49	\$49	\$49	\$49	\$34	\$34	\$34	\$34	\$34
Augusta County	015	Blue Ridge	Piedmont	\$53	\$53	\$53	\$53	\$53	\$38	\$38	\$38	\$38	\$38
Bath County	017	West	Piedmont	\$51	\$51	\$51	\$51	\$51	\$36	\$36	\$36	\$36	\$36
Bedford County	019	Southside	Piedmont	\$49	\$49	\$49	\$49	\$49	\$34	\$34	\$34	\$34	\$34
Botetourt County	023	West	Piedmont	\$51	\$51	\$51	\$51	\$51	\$36	\$36	\$36	\$36	\$36
Buena Vista City	530	West	Piedmont	\$51	\$51	\$51	\$51	\$51	\$36	\$36	\$36	\$36	\$36
Campbell County	031	Southside	Piedmont	\$49	\$49	\$49	\$49	\$49	\$34	\$34	\$34	\$34	\$34
Charlotte County	037	Southside	Piedmont	\$49	\$49	\$49	\$49	\$49	\$34	\$34	\$34	\$34	\$34
Charlottesville City	540	Blue Ridge	Piedmont	\$53	\$53	\$53	\$53	\$53	\$38	\$38	\$38	\$38	\$38
Covington City	580	West	Piedmont	\$51	\$51	\$51	\$51	\$51	\$36	\$36	\$36	\$36	\$36
Craig County	045	West	Piedmont	\$51	\$51	\$51	\$51	\$51	\$36	\$36	\$36	\$36	\$36
Danville City	590	Southside	Piedmont	\$49	\$49	\$49	\$49	\$49	\$34	\$34	\$34	\$34	\$34
Franklin County	067	West	Piedmont	\$51	\$51	\$51	\$51	\$51	\$36	\$36	\$36	\$36	\$36
Halifax County	083	Southside	Piedmont	\$49	\$49	\$49	\$49	\$49	\$34	\$34	\$34	\$34	\$34
Henry County	089	West	Piedmont	\$51	\$51	\$51	\$51	\$51	\$36	\$36	\$36	\$36	\$36
Highland County	091	West	Piedmont	\$51	\$51	\$51	\$51	\$51	\$36	\$36	\$36	\$36	\$36
Lexington City	678	West	Piedmont	\$51	\$51	\$51	\$51	\$51	\$36	\$36	\$36	\$36	\$36
Lynchburg City	680	Southside	Piedmont	\$49	\$49	\$49	\$49	\$49	\$34	\$34	\$34	\$34	\$34
Martinsville City	690	West	Piedmont	\$51	\$51	\$51	\$51	\$51	\$36	\$36	\$36	\$36	\$36
Mecklenburg County	117	Southside	Piedmont	\$49	\$49	\$49	\$49	\$49	\$34	\$34	\$34	\$34	\$34
Nelson County	125	Blue Ridge	Piedmont	\$53	\$53	\$53	\$53	\$53	\$38	\$38	\$38	\$38	\$38
Pittsylvania County	143	Southside	Piedmont	\$49	\$49	\$49	\$49	\$49	\$34	\$34	\$34	\$34	\$34
Roanoke City	770	West	Piedmont	\$51	\$51	\$51	\$51	\$51	\$36	\$36	\$36	\$36	\$36
Roanoke County	161	West	Piedmont	\$51	\$51	\$51	\$51	\$51	\$36	\$36	\$36	\$36	\$36
Rockbridge County	163	West	Piedmont	\$51	\$51	\$51	\$51	\$51	\$36	\$36	\$36	\$36	\$36

Salem	775	West	Piedmont	\$51	\$51	\$51	\$51	\$51	\$36	\$36	\$36	\$36	\$36
Staunton City	790	Blue Ridge	Piedmont	\$53	\$53	\$53	\$53	\$53	\$38	\$38	\$38	\$38	\$38
Waynesboro City	820	Blue Ridge	Piedmont	\$53	\$53	\$53	\$53	\$53	\$38	\$38	\$38	\$38	\$38

VDSS Western Region | Family Day Home | Maximum Reimbursable Rates – Level 1 | Effective 07/01/2023 | Full Day, Part Day Rate

Note: Shaded cells indicate rates that have been held harmless.

Locality	FIPS	Ready Region	DSS Region	Full Day					Part Day				
				Infant	Toddler	2-year-old	Pre-School	School Age	Infant	Toddler	2-year-old	Pre-School	School Age
Bland County	021	Southwest	Western	\$48	\$48	\$48	\$48	\$48	\$33	\$33	\$33	\$33	\$33
Bristol City	520	Southwest	Western	\$48	\$48	\$48	\$48	\$48	\$33	\$33	\$33	\$33	\$33
Buchanan County	027	Southwest	Western	\$48	\$48	\$48	\$48	\$48	\$33	\$33	\$33	\$33	\$33
Carroll County	035	Southwest	Western	\$48	\$48	\$48	\$48	\$48	\$33	\$33	\$33	\$33	\$33
Dickenson County	051	Southwest	Western	\$48	\$48	\$48	\$48	\$48	\$33	\$33	\$33	\$33	\$33
Floyd County	063	Southwest	Western	\$48	\$48	\$48	\$48	\$48	\$33	\$33	\$33	\$33	\$33
Galax City	640	Southwest	Western	\$48	\$48	\$48	\$48	\$48	\$33	\$33	\$33	\$33	\$33
Giles County	071	Southwest	Western	\$48	\$48	\$48	\$48	\$48	\$33	\$33	\$33	\$33	\$33
Grayson County	077	Southwest	Western	\$48	\$48	\$48	\$48	\$48	\$33	\$33	\$33	\$33	\$33
Lee County	105	Southwest	Western	\$48	\$48	\$48	\$48	\$48	\$33	\$33	\$33	\$33	\$33
Montgomery County	121	Southwest	Western	\$48	\$48	\$48	\$48	\$48	\$33	\$33	\$33	\$33	\$33
Norton City	720	Southwest	Western	\$48	\$48	\$48	\$48	\$48	\$33	\$33	\$33	\$33	\$33
Patrick County	141	West	Western	\$51	\$51	\$51	\$51	\$51	\$36	\$36	\$36	\$36	\$36
Pulaski County	155	Southwest	Western	\$48	\$48	\$48	\$48	\$48	\$33	\$33	\$33	\$33	\$33
Radford City	750	Southwest	Western	\$48	\$48	\$48	\$48	\$48	\$33	\$33	\$33	\$33	\$33
Russell County	167	Southwest	Western	\$48	\$48	\$48	\$48	\$48	\$33	\$33	\$33	\$33	\$33
Scott County	169	Southwest	Western	\$48	\$48	\$48	\$48	\$48	\$33	\$33	\$33	\$33	\$33
Smyth County	173	Southwest	Western	\$48	\$48	\$48	\$48	\$48	\$33	\$33	\$33	\$33	\$33
Tazewell County	185	Southwest	Western	\$48	\$48	\$48	\$48	\$48	\$33	\$33	\$33	\$33	\$33
Washington County	191	Southwest	Western	\$48	\$48	\$48	\$48	\$48	\$33	\$33	\$33	\$33	\$33
Wise County	195	Southwest	Western	\$48	\$48	\$48	\$48	\$48	\$33	\$33	\$33	\$33	\$33
Wythe County	197	Southwest	Western	\$48	\$48	\$48	\$48	\$48	\$33	\$33	\$33	\$33	\$33

Appendix G. Level 2 Maximum Reimbursable Rates

ABOUT VIRGINIA'S COST ESTIMATION MODEL FOR SETTING RATES

Under direction from the General Assembly, Virginia uses a federally-approved alternative methodology called a cost estimation model to estimate the cost of delivering high-quality early childhood care and education. Maximum Reimbursement Rates (MRR) in the CCSP are established based on a proportion of modeled costs. For more information about Virginia's model, visit:

<https://www.childcare.virginia.gov/reports-resources/administrative-program-manuals-reports-and-data/subsidy-program-guidance-manual>.

VDSS Central Region | Center Child Care | Maximum Reimbursable Rates – Level 2 | Effective 07/01/2023 | Full Day, Part Day Rate

Note: Shaded cells indicate rates that have been held harmless.

Locality	FIPS	Ready Region	DSS Region	Full Day					Part Day				
				Infant	Toddler	2-year-old	Pre-School	School Age	Infant	Toddler	2-year-old	Pre-School	School Age
Amelia County	007	Southside	Central	\$64	\$56	\$43	\$39	\$28	\$45	\$40	\$30	\$28	\$20
Buckingham County	029	Blue Ridge	Central	\$70	\$61	\$47	\$42	\$30	\$49	\$43	\$33	\$30	\$21
Caroline County	033	North Central	Central	\$83	\$72	\$55	\$50	\$35	\$59	\$51	\$39	\$35	\$25
Charles City County	036	Central	Central	\$69	\$60	\$47	\$41	\$29	\$49	\$42	\$33	\$29	\$21
Chesterfield County	041	Central	Central	\$69	\$60	\$47	\$45	\$40	\$49	\$42	\$33	\$32	\$28
Colonial Heights City	570	Central	Central	\$69	\$60	\$47	\$45	\$40	\$49	\$42	\$33	\$32	\$28
Cumberland County	049	Southside	Central	\$64	\$56	\$43	\$39	\$28	\$45	\$40	\$30	\$28	\$20
Essex County	057	Chesapeake Bay	Central	\$68	\$59	\$45	\$41	\$29	\$48	\$42	\$32	\$29	\$21
Fluvanna County	065	Blue Ridge	Central	\$70	\$61	\$47	\$42	\$30	\$49	\$43	\$33	\$30	\$21
Goochland County	075	Central	Central	\$69	\$60	\$47	\$42	\$37	\$49	\$42	\$33	\$29	\$26
Hanover County	085	Central	Central	\$69	\$60	\$47	\$41	\$38	\$49	\$42	\$33	\$29	\$27
Henrico County	087	Central	Central	\$69	\$60	\$47	\$46	\$36	\$49	\$42	\$33	\$32	\$29
Hopewell City	670	Central	Central	\$69	\$60	\$47	\$41	\$29	\$49	\$42	\$33	\$29	\$21
King and Queen County	097	Chesapeake Bay	Central	\$68	\$59	\$45	\$41	\$29	\$48	\$42	\$32	\$29	\$21
King William County	101	Chesapeake Bay	Central	\$68	\$59	\$45	\$41	\$29	\$48	\$42	\$32	\$29	\$21
Lancaster County	103	Chesapeake Bay	Central	\$68	\$59	\$45	\$41	\$29	\$48	\$42	\$32	\$29	\$21
Lunenburg County	111	Southside	Central	\$64	\$56	\$43	\$39	\$28	\$45	\$40	\$30	\$28	\$20
Middlesex County	119	Chesapeake Bay	Central	\$68	\$59	\$45	\$41	\$29	\$48	\$42	\$32	\$29	\$21
New Kent County	127	Central	Central	\$69	\$60	\$47	\$41	\$29	\$49	\$42	\$33	\$29	\$21
Northumberland County	133	Chesapeake Bay	Central	\$68	\$59	\$45	\$41	\$29	\$48	\$42	\$32	\$29	\$21
Nottoway County	135	Southside	Central	\$64	\$56	\$43	\$39	\$28	\$45	\$40	\$30	\$28	\$20
Petersburg City	730	Central	Central	\$69	\$60	\$47	\$41	\$29	\$49	\$42	\$33	\$29	\$21
Powhatan County	145	Central	Central	\$69	\$60	\$47	\$41	\$29	\$49	\$42	\$33	\$29	\$21
Prince Edward County	147	Southside	Central	\$64	\$56	\$43	\$39	\$28	\$45	\$40	\$30	\$28	\$20
Richmond City	760	Central	Central	\$69	\$60	\$47	\$41	\$30	\$49	\$42	\$33	\$29	\$22
Richmond County	159	Chesapeake Bay	Central	\$68	\$59	\$45	\$41	\$29	\$48	\$42	\$32	\$29	\$21
Westmoreland County	193	Chesapeake Bay	Central	\$68	\$59	\$45	\$41	\$29	\$48	\$42	\$32	\$29	\$21

VDSS Eastern Region | Center Child Care | Maximum Reimbursable Rates – Level 2 | Effective 07/01/2023 | Full Day, Part Day Rate

Note: Shaded cells indicate rates that have been held harmless.

Locality	FIPS	Ready Region	DSS Region	Full Day					Part Day				
				Infant	Toddler	2-year-old	Pre-School	School Age	Infant	Toddler	2-year-old	Pre-School	School Age
Accomack County	001	Southeastern	Eastern	\$71	\$61	\$47	\$42	\$30	\$50	\$43	\$33	\$30	\$22
Brunswick County	025	Southside	Eastern	\$64	\$56	\$43	\$39	\$28	\$45	\$40	\$30	\$28	\$20
Chesapeake City	550	Southeastern	Eastern	\$71	\$61	\$47	\$42	\$33	\$50	\$43	\$33	\$30	\$24
Dinwiddie County	053	Central	Eastern	\$69	\$60	\$47	\$41	\$29	\$49	\$42	\$33	\$29	\$21
Emporia	595	Central	Eastern	\$69	\$60	\$47	\$41	\$29	\$49	\$42	\$33	\$29	\$21
Franklin City	620	Southeastern	Eastern	\$71	\$61	\$47	\$42	\$30	\$50	\$43	\$33	\$30	\$22
Gloucester County	073	Chesapeake Bay	Eastern	\$68	\$59	\$45	\$41	\$29	\$48	\$42	\$32	\$29	\$21
Greensville County	081	Central	Eastern	\$69	\$60	\$47	\$41	\$29	\$49	\$42	\$33	\$29	\$21
Hampton City	650	Chesapeake Bay	Eastern	\$68	\$59	\$45	\$41	\$29	\$48	\$42	\$32	\$29	\$23
Isle of Wight County	093	Southeastern	Eastern	\$71	\$61	\$47	\$42	\$30	\$50	\$43	\$33	\$30	\$21
James City County	095	Chesapeake Bay	Eastern	\$68	\$59	\$45	\$41	\$31	\$48	\$42	\$32	\$29	\$21
Mathews County	115	Chesapeake Bay	Eastern	\$68	\$59	\$45	\$41	\$29	\$48	\$42	\$32	\$29	\$21
Newport News City	700	Chesapeake Bay	Eastern	\$68	\$59	\$45	\$41	\$29	\$48	\$42	\$32	\$29	\$24
Norfolk City	710	Southeastern	Eastern	\$71	\$61	\$47	\$42	\$30	\$50	\$43	\$33	\$30	\$25
Northampton County	131	Southeastern	Eastern	\$71	\$61	\$47	\$42	\$30	\$50	\$43	\$33	\$30	\$22
Poquoson	735	Chesapeake Bay	Eastern	\$68	\$59	\$45	\$41	\$33	\$48	\$42	\$32	\$29	\$23
Portsmouth City	740	Southeastern	Eastern	\$71	\$61	\$47	\$42	\$30	\$50	\$43	\$33	\$30	\$22
Prince George County	149	Central	Eastern	\$69	\$60	\$47	\$41	\$29	\$49	\$42	\$33	\$29	\$21
Southampton County	175	Southeastern	Eastern	\$71	\$61	\$47	\$42	\$30	\$50	\$43	\$33	\$30	\$22
Suffolk City	800	Southeastern	Eastern	\$71	\$61	\$47	\$42	\$30	\$50	\$43	\$33	\$30	\$24
Surry County	181	Central	Eastern	\$69	\$60	\$47	\$41	\$29	\$49	\$42	\$33	\$29	\$21
Sussex County	183	Central	Eastern	\$69	\$60	\$47	\$41	\$29	\$49	\$42	\$33	\$29	\$21
Virginia Beach City	810	Southeastern	Eastern	\$71	\$61	\$47	\$43	\$34	\$50	\$43	\$33	\$30	\$28
Williamsburg City	830	Chesapeake Bay	Eastern	\$68	\$59	\$45	\$41	\$32	\$48	\$42	\$32	\$29	\$25
York County	199	Chesapeake Bay	Eastern	\$68	\$59	\$45	\$41	\$33	\$48	\$42	\$32	\$29	\$23

VDSS Northern Region | Center Child Care | Maximum Reimbursable Rates – Level 2 | Effective 07/01/2023 | Full Day, Part Day Rate

Note: Shaded cells indicate rates that have been held harmless.

Locality	FIPS	Ready Region	DSS Region	Full Day					Part Day				
				Infant	Toddler	2-year-old	Pre-School	School Age	Infant	Toddler	2-year-old	Pre-School	School Age
Alexandria City	510	Capital Area	Northern	\$94	\$81	\$71	\$71	\$68	\$66	\$57	\$50	\$50	\$48
Arlington County	013	Capital Area	Northern	\$98	\$96	\$85	\$85	\$70	\$68	\$67	\$60	\$60	\$49
Clarke County	043	Blue Ridge	Northern	\$70	\$61	\$47	\$42	\$33	\$49	\$43	\$33	\$30	\$23
Culpeper County	047	North Central	Northern	\$83	\$72	\$55	\$50	\$35	\$59	\$51	\$39	\$35	\$25
Fairfax City	600	Capital Area	Northern	\$94	\$81	\$70	\$70	\$61	\$66	\$57	\$49	\$49	\$43
Fairfax County	059	Capital Area	Northern	\$94	\$81	\$70	\$70	\$61	\$66	\$57	\$49	\$49	\$43
Falls Church	610	Capital Area	Northern	\$94	\$81	\$70	\$70	\$61	\$66	\$57	\$49	\$49	\$43
Fauquier County	061	North Central	Northern	\$83	\$72	\$55	\$50	\$36	\$59	\$51	\$39	\$35	\$25
Frederick County	069	Blue Ridge	Northern	\$70	\$61	\$47	\$42	\$30	\$49	\$43	\$33	\$30	\$24
Fredericksburg City	630	North Central	Northern	\$83	\$72	\$55	\$50	\$35	\$59	\$51	\$39	\$35	\$25
Greene County	079	Blue Ridge	Northern	\$70	\$61	\$47	\$42	\$30	\$49	\$43	\$33	\$30	\$21
Harrisonburg City	660	Blue Ridge	Northern	\$70	\$61	\$47	\$42	\$30	\$49	\$43	\$33	\$30	\$21
King George County	099	North Central	Northern	\$83	\$72	\$55	\$50	\$35	\$59	\$51	\$39	\$35	\$25
Loudoun County	107	North Central	Northern	\$83	\$75	\$68	\$68	\$59	\$59	\$53	\$48	\$48	\$41
Louisa County	109	Blue Ridge	Northern	\$70	\$61	\$47	\$42	\$30	\$49	\$43	\$33	\$30	\$21
Madison County	113	Blue Ridge	Northern	\$70	\$61	\$47	\$42	\$35	\$49	\$43	\$33	\$30	\$25
Manassas City	683	North Central	Northern	\$83	\$72	\$55	\$50	\$40	\$59	\$51	\$39	\$35	\$30
Manassas Park City	685	North Central	Northern	\$83	\$77	\$69	\$69	\$60	\$59	\$54	\$48	\$48	\$42
Orange County	137	Blue Ridge	Northern	\$70	\$61	\$47	\$42	\$30	\$49	\$43	\$33	\$30	\$23
Page County	139	Blue Ridge	Northern	\$70	\$61	\$47	\$42	\$30	\$49	\$43	\$33	\$30	\$21
Prince William County	153	North Central	Northern	\$83	\$72	\$58	\$58	\$50	\$59	\$51	\$40	\$40	\$35
Rappahannock County	157	Blue Ridge	Northern	\$70	\$61	\$47	\$42	\$35	\$49	\$43	\$33	\$30	\$25
Rockingham County	165	Blue Ridge	Northern	\$70	\$61	\$47	\$42	\$30	\$49	\$43	\$33	\$30	\$21
Shenandoah County	171	Blue Ridge	Northern	\$70	\$61	\$47	\$42	\$30	\$49	\$43	\$33	\$30	\$21
Spotsylvania County	177	North Central	Northern	\$83	\$72	\$55	\$50	\$37	\$59	\$51	\$39	\$35	\$29
Stafford County	179	North Central	Northern	\$83	\$72	\$55	\$50	\$35	\$59	\$51	\$39	\$35	\$26
Warren County	187	Blue Ridge	Northern	\$70	\$61	\$47	\$42	\$30	\$49	\$43	\$33	\$30	\$21
Winchester City	840	Blue Ridge	Northern	\$70	\$61	\$47	\$42	\$30	\$49	\$43	\$33	\$30	\$24

VDSS Piedmont Region | Center Child Care | Maximum Reimbursable Rates – Level 2 | Effective 07/01/2023 | Full Day, Part Day Rate

Note: Shaded cells indicate rates that have been held harmless.

Locality	FIPS	Ready Region	DSS Region	Full Day					Part Day				
				Infant	Toddler	2-year-old	Pre-School	School Age	Infant	Toddler	2-year-old	Pre-School	School Age
Albemarle County	003	Blue Ridge	Piedmont	\$70	\$61	\$47	\$45	\$45	\$49	\$43	\$33	\$32	\$32
Alleghany County	005	West	Piedmont	\$67	\$58	\$45	\$41	\$29	\$47	\$41	\$32	\$29	\$21
Amherst County	009	Southside	Piedmont	\$64	\$56	\$43	\$39	\$28	\$45	\$40	\$30	\$28	\$20
Appomattox County	011	Southside	Piedmont	\$64	\$56	\$43	\$39	\$28	\$45	\$40	\$30	\$28	\$20
Augusta County	015	Blue Ridge	Piedmont	\$70	\$61	\$47	\$42	\$30	\$49	\$43	\$33	\$30	\$22
Bath County	017	West	Piedmont	\$67	\$58	\$45	\$41	\$29	\$47	\$41	\$32	\$29	\$21
Bedford County	019	Southside	Piedmont	\$64	\$56	\$43	\$39	\$28	\$45	\$40	\$30	\$28	\$20
Botetourt County	023	West	Piedmont	\$67	\$58	\$45	\$41	\$30	\$47	\$41	\$32	\$29	\$21
Buena Vista City	530	West	Piedmont	\$67	\$58	\$45	\$41	\$29	\$47	\$41	\$32	\$29	\$21
Campbell County	031	Southside	Piedmont	\$64	\$56	\$43	\$39	\$28	\$45	\$40	\$30	\$28	\$20
Charlotte County	037	Southside	Piedmont	\$64	\$56	\$43	\$39	\$28	\$45	\$40	\$30	\$28	\$20
Charlottesville City	540	Blue Ridge	Piedmont	\$70	\$61	\$47	\$45	\$45	\$49	\$43	\$33	\$32	\$32
Covington City	580	West	Piedmont	\$67	\$58	\$45	\$41	\$29	\$47	\$41	\$32	\$29	\$21
Craig County	045	West	Piedmont	\$67	\$58	\$45	\$41	\$29	\$47	\$41	\$32	\$29	\$21
Danville City	590	Southside	Piedmont	\$64	\$56	\$43	\$39	\$28	\$45	\$40	\$30	\$28	\$20
Franklin County	067	West	Piedmont	\$67	\$58	\$45	\$41	\$29	\$47	\$41	\$32	\$29	\$21
Halifax County	083	Southside	Piedmont	\$64	\$56	\$43	\$39	\$28	\$45	\$40	\$30	\$28	\$20
Henry County	089	West	Piedmont	\$67	\$58	\$45	\$41	\$29	\$47	\$41	\$32	\$29	\$21
Highland County	091	West	Piedmont	\$67	\$58	\$45	\$41	\$29	\$47	\$41	\$32	\$29	\$21
Lexington City	678	West	Piedmont	\$67	\$58	\$45	\$41	\$29	\$47	\$41	\$32	\$29	\$21
Lynchburg City	680	Southside	Piedmont	\$64	\$56	\$43	\$39	\$28	\$45	\$40	\$30	\$28	\$20
Martinsville City	690	West	Piedmont	\$67	\$58	\$45	\$41	\$29	\$47	\$41	\$32	\$29	\$21
Mecklenburg County	117	Southside	Piedmont	\$64	\$56	\$43	\$39	\$28	\$45	\$40	\$30	\$28	\$20
Nelson County	125	Blue Ridge	Piedmont	\$70	\$61	\$47	\$42	\$30	\$49	\$43	\$33	\$30	\$21
Pittsylvania County	143	Southside	Piedmont	\$64	\$56	\$43	\$39	\$28	\$45	\$40	\$30	\$28	\$20
Roanoke City	770	West	Piedmont	\$67	\$58	\$45	\$41	\$29	\$47	\$41	\$32	\$29	\$21
Roanoke County	161	West	Piedmont	\$67	\$58	\$45	\$41	\$29	\$47	\$41	\$32	\$29	\$21
Rockbridge County	163	West	Piedmont	\$67	\$58	\$45	\$41	\$29	\$47	\$41	\$32	\$29	\$21

Salem	775	West	Piedmont	\$67	\$58	\$45	\$41	\$29	\$47	\$41	\$32	\$29	\$21
Staunton City	790	Blue Ridge	Piedmont	\$70	\$61	\$47	\$42	\$30	\$49	\$43	\$33	\$30	\$22
Waynesboro City	820	Blue Ridge	Piedmont	\$70	\$61	\$47	\$42	\$30	\$49	\$43	\$33	\$30	\$22

VDSS Western Region | Center Child Care | Maximum Reimbursable Rates – Level 2 | Effective 07/01/2023 | Full Day, Part Day Rate

Note: Shaded cells indicate rates that have been held harmless.

Locality	FIPS	Ready Region	DSS Region	Full Day					Part Day				
				Infant	Toddler	2-year-old	Pre-School	School Age	Infant	Toddler	2-year-old	Pre-School	School Age
Bland County	021	Southwest	Western	\$63	\$55	\$42	\$38	\$27	\$45	\$39	\$30	\$27	\$19
Bristol City	520	Southwest	Western	\$63	\$55	\$42	\$38	\$27	\$45	\$39	\$30	\$27	\$19
Buchanan County	027	Southwest	Western	\$63	\$55	\$42	\$38	\$27	\$45	\$39	\$30	\$27	\$19
Carroll County	035	Southwest	Western	\$63	\$55	\$42	\$38	\$27	\$45	\$39	\$30	\$27	\$19
Dickenson County	051	Southwest	Western	\$63	\$55	\$42	\$38	\$27	\$45	\$39	\$30	\$27	\$19
Floyd County	063	Southwest	Western	\$63	\$55	\$42	\$38	\$27	\$45	\$39	\$30	\$27	\$19
Galax City	640	Southwest	Western	\$63	\$55	\$42	\$38	\$27	\$45	\$39	\$30	\$27	\$19
Giles County	071	Southwest	Western	\$63	\$55	\$42	\$38	\$27	\$45	\$39	\$30	\$27	\$19
Grayson County	077	Southwest	Western	\$63	\$55	\$42	\$38	\$27	\$45	\$39	\$30	\$27	\$19
Lee County	105	Southwest	Western	\$63	\$55	\$42	\$38	\$27	\$45	\$39	\$30	\$27	\$19
Montgomery County	121	Southwest	Western	\$63	\$55	\$42	\$38	\$33	\$45	\$39	\$30	\$27	\$23
Norton City	720	Southwest	Western	\$63	\$55	\$42	\$38	\$27	\$45	\$39	\$30	\$27	\$19
Patrick County	141	West	Western	\$67	\$58	\$45	\$41	\$29	\$47	\$41	\$32	\$29	\$21
Pulaski County	155	Southwest	Western	\$63	\$55	\$42	\$38	\$27	\$45	\$39	\$30	\$27	\$19
Radford City	750	Southwest	Western	\$63	\$55	\$42	\$38	\$27	\$45	\$39	\$30	\$27	\$19
Russell County	167	Southwest	Western	\$63	\$55	\$42	\$38	\$27	\$45	\$39	\$30	\$27	\$19
Scott County	169	Southwest	Western	\$63	\$55	\$42	\$38	\$27	\$45	\$39	\$30	\$27	\$19
Smyth County	173	Southwest	Western	\$63	\$55	\$42	\$38	\$27	\$45	\$39	\$30	\$27	\$19
Tazewell County	185	Southwest	Western	\$63	\$55	\$42	\$38	\$27	\$45	\$39	\$30	\$27	\$19
Washington County	191	Southwest	Western	\$63	\$55	\$42	\$38	\$27	\$45	\$39	\$30	\$27	\$19
Wise County	195	Southwest	Western	\$63	\$55	\$42	\$38	\$27	\$45	\$39	\$30	\$27	\$19
Wythe County	197	Southwest	Western	\$63	\$55	\$42	\$38	\$27	\$45	\$39	\$30	\$27	\$19

VDSS Central Region | Family Day Home | Maximum Reimbursable Rates – Level 2 | Effective 07/01/2023 | Full Day, Part Day Rate

Note: Shaded cells indicate rates that have been held harmless.

Locality	FIPS	Ready Region	DSS Region	Full Day					Part Day				
				Infant	Toddler	2-year-old	Pre-School	School Age	Infant	Toddler	2-year-old	Pre-School	School Age
Amelia County	007	Southside	Central	\$54	\$54	\$54	\$54	\$54	\$38	\$38	\$38	\$38	\$38
Buckingham County	029	Blue Ridge	Central	\$60	\$60	\$60	\$60	\$60	\$42	\$42	\$42	\$42	\$42
Caroline County	033	North Central	Central	\$71	\$71	\$71	\$71	\$71	\$50	\$50	\$50	\$50	\$50
Charles City County	036	Central	Central	\$59	\$59	\$59	\$59	\$59	\$41	\$41	\$41	\$41	\$41
Chesterfield County	041	Central	Central	\$59	\$59	\$59	\$59	\$59	\$41	\$41	\$41	\$41	\$41
Colonial Heights City	570	Central	Central	\$59	\$59	\$59	\$59	\$59	\$41	\$41	\$41	\$41	\$41
Cumberland County	049	Southside	Central	\$54	\$54	\$54	\$54	\$54	\$38	\$38	\$38	\$38	\$38
Essex County	057	Chesapeake Bay	Central	\$57	\$57	\$57	\$57	\$57	\$40	\$40	\$40	\$40	\$40
Fluvanna County	065	Blue Ridge	Central	\$60	\$60	\$60	\$60	\$60	\$42	\$42	\$42	\$42	\$42
Goochland County	075	Central	Central	\$59	\$59	\$59	\$59	\$59	\$41	\$41	\$41	\$41	\$41
Hanover County	085	Central	Central	\$59	\$59	\$59	\$59	\$59	\$41	\$41	\$41	\$41	\$41
Henrico County	087	Central	Central	\$59	\$59	\$59	\$59	\$59	\$41	\$41	\$41	\$41	\$41
Hopewell City	670	Central	Central	\$59	\$59	\$59	\$59	\$59	\$41	\$41	\$41	\$41	\$41
King and Queen County	097	Chesapeake Bay	Central	\$57	\$57	\$57	\$57	\$57	\$40	\$40	\$40	\$40	\$40
King William County	101	Chesapeake Bay	Central	\$57	\$57	\$57	\$57	\$57	\$40	\$40	\$40	\$40	\$40
Lancaster County	103	Chesapeake Bay	Central	\$57	\$57	\$57	\$57	\$57	\$40	\$40	\$40	\$40	\$40
Lunenburg County	111	Southside	Central	\$54	\$54	\$54	\$54	\$54	\$38	\$38	\$38	\$38	\$38
Middlesex County	119	Chesapeake Bay	Central	\$57	\$57	\$57	\$57	\$57	\$40	\$40	\$40	\$40	\$40
New Kent County	127	Central	Central	\$59	\$59	\$59	\$59	\$59	\$41	\$41	\$41	\$41	\$41
Northumberland County	133	Chesapeake Bay	Central	\$57	\$57	\$57	\$57	\$57	\$40	\$40	\$40	\$40	\$40
Nottoway County	135	Southside	Central	\$54	\$54	\$54	\$54	\$54	\$38	\$38	\$38	\$38	\$38
Petersburg City	730	Central	Central	\$59	\$59	\$59	\$59	\$59	\$41	\$41	\$41	\$41	\$41
Powhatan County	145	Central	Central	\$59	\$59	\$59	\$59	\$59	\$41	\$41	\$41	\$41	\$41
Prince Edward County	147	Southside	Central	\$54	\$54	\$54	\$54	\$54	\$38	\$38	\$38	\$38	\$38
Richmond City	760	Central	Central	\$59	\$59	\$59	\$59	\$59	\$41	\$41	\$41	\$41	\$41
Richmond County	159	Chesapeake Bay	Central	\$57	\$57	\$57	\$57	\$57	\$40	\$40	\$40	\$40	\$40
Westmoreland County	193	Chesapeake Bay	Central	\$57	\$57	\$57	\$57	\$57	\$40	\$40	\$40	\$40	\$40

VDSS Eastern Region | Family Day Home | Maximum Reimbursable Rates – Level 2 | Effective 07/01/2023 | Full Day, Part Day Rate

Note: Shaded cells indicate rates that have been held harmless.

Locality	FIPS	Ready Region	DSS Region	Full Day					Part Day				
				Infant	Toddler	2-year-old	Pre-School	School Age	Infant	Toddler	2-year-old	Pre-School	School Age
Accomack County	001	Southeastern	Eastern	\$60	\$60	\$60	\$60	\$60	\$42	\$42	\$42	\$42	\$42
Brunswick County	025	Southside	Eastern	\$54	\$54	\$54	\$54	\$54	\$38	\$38	\$38	\$38	\$38
Chesapeake City	550	Southeastern	Eastern	\$60	\$60	\$60	\$60	\$60	\$42	\$42	\$42	\$42	\$42
Dinwiddie County	053	Central	Eastern	\$59	\$59	\$59	\$59	\$59	\$41	\$41	\$41	\$41	\$41
Emporia	595	Central	Eastern	\$59	\$59	\$59	\$59	\$59	\$41	\$41	\$41	\$41	\$41
Franklin City	620	Southeastern	Eastern	\$60	\$60	\$60	\$60	\$60	\$42	\$42	\$42	\$42	\$42
Gloucester County	073	Chesapeake Bay	Eastern	\$57	\$57	\$57	\$57	\$57	\$40	\$40	\$40	\$40	\$40
Greensville County	081	Central	Eastern	\$59	\$59	\$59	\$59	\$59	\$41	\$41	\$41	\$41	\$41
Hampton City	650	Chesapeake Bay	Eastern	\$57	\$57	\$57	\$57	\$57	\$40	\$40	\$40	\$40	\$40
Isle of Wight County	093	Southeastern	Eastern	\$60	\$60	\$60	\$60	\$60	\$42	\$42	\$42	\$42	\$42
James City County	095	Chesapeake Bay	Eastern	\$57	\$57	\$57	\$57	\$57	\$40	\$40	\$40	\$40	\$40
Mathews County	115	Chesapeake Bay	Eastern	\$57	\$57	\$57	\$57	\$57	\$40	\$40	\$40	\$40	\$40
Newport News City	700	Chesapeake Bay	Eastern	\$57	\$57	\$57	\$57	\$57	\$40	\$40	\$40	\$40	\$40
Norfolk City	710	Southeastern	Eastern	\$60	\$60	\$60	\$60	\$60	\$42	\$42	\$42	\$42	\$42
Northampton County	131	Southeastern	Eastern	\$60	\$60	\$60	\$60	\$60	\$42	\$42	\$42	\$42	\$42
Poquoson	735	Chesapeake Bay	Eastern	\$57	\$57	\$57	\$57	\$57	\$40	\$40	\$40	\$40	\$40
Portsmouth City	740	Southeastern	Eastern	\$60	\$60	\$60	\$60	\$60	\$42	\$42	\$42	\$42	\$42
Prince George County	149	Central	Eastern	\$59	\$59	\$59	\$59	\$59	\$41	\$41	\$41	\$41	\$41
Southampton County	175	Southeastern	Eastern	\$60	\$60	\$60	\$60	\$60	\$42	\$42	\$42	\$42	\$42
Suffolk City	800	Southeastern	Eastern	\$60	\$60	\$60	\$60	\$60	\$42	\$42	\$42	\$42	\$42
Surry County	181	Central	Eastern	\$59	\$59	\$59	\$59	\$59	\$41	\$41	\$41	\$41	\$41
Sussex County	183	Central	Eastern	\$59	\$59	\$59	\$59	\$59	\$41	\$41	\$41	\$41	\$41
Virginia Beach City	810	Southeastern	Eastern	\$60	\$60	\$60	\$60	\$60	\$42	\$42	\$42	\$42	\$42
Williamsburg City	830	Chesapeake Bay	Eastern	\$57	\$57	\$57	\$57	\$57	\$40	\$40	\$40	\$40	\$40
York County	199	Chesapeake Bay	Eastern	\$57	\$57	\$57	\$57	\$57	\$40	\$40	\$40	\$40	\$40

VDSS Northern Region | Family Day Home | Maximum Reimbursable Rates – Level 2 | Effective 07/01/2023 | Full Day, Part Day Rate

Note: Shaded cells indicate rates that have been held harmless.

Locality	FIPS	Ready Region	DSS Region	Full Day					Part Day				
				Infant	Toddler	2-year-old	Pre-School	School Age	Infant	Toddler	2-year-old	Pre-School	School Age
Alexandria City	510	Capital Area	Northern	\$81	\$81	\$81	\$81	\$81	\$57	\$57	\$57	\$57	\$57
Arlington County	013	Capital Area	Northern	\$81	\$81	\$81	\$81	\$81	\$57	\$57	\$57	\$57	\$60
Clarke County	043	Blue Ridge	Northern	\$60	\$60	\$60	\$60	\$60	\$42	\$42	\$42	\$42	\$42
Culpeper County	047	North Central	Northern	\$71	\$71	\$71	\$71	\$71	\$50	\$50	\$50	\$50	\$50
Fairfax City	600	Capital Area	Northern	\$81	\$81	\$81	\$81	\$81	\$57	\$57	\$57	\$57	\$57
Fairfax County	059	Capital Area	Northern	\$81	\$81	\$81	\$81	\$81	\$57	\$57	\$57	\$57	\$57
Falls Church	610	Capital Area	Northern	\$81	\$81	\$81	\$81	\$81	\$57	\$57	\$57	\$57	\$57
Fauquier County	061	North Central	Northern	\$71	\$71	\$71	\$71	\$71	\$50	\$50	\$50	\$50	\$50
Frederick County	069	Blue Ridge	Northern	\$60	\$60	\$60	\$60	\$60	\$42	\$42	\$42	\$42	\$42
Fredericksburg City	630	North Central	Northern	\$71	\$71	\$71	\$71	\$71	\$50	\$50	\$50	\$50	\$50
Greene County	079	Blue Ridge	Northern	\$60	\$60	\$60	\$60	\$60	\$42	\$42	\$42	\$42	\$42
Harrisonburg City	660	Blue Ridge	Northern	\$60	\$60	\$60	\$60	\$60	\$42	\$42	\$42	\$42	\$42
King George County	099	North Central	Northern	\$71	\$71	\$71	\$71	\$71	\$50	\$50	\$50	\$50	\$50
Loudoun County	107	North Central	Northern	\$71	\$71	\$71	\$71	\$71	\$50	\$50	\$50	\$50	\$50
Louisa County	109	Blue Ridge	Northern	\$60	\$60	\$60	\$60	\$60	\$42	\$42	\$42	\$42	\$42
Madison County	113	Blue Ridge	Northern	\$60	\$60	\$60	\$60	\$60	\$42	\$42	\$42	\$42	\$42
Manassas City	683	North Central	Northern	\$71	\$71	\$71	\$71	\$71	\$50	\$50	\$50	\$50	\$50
Manassas Park City	685	North Central	Northern	\$71	\$71	\$71	\$71	\$71	\$50	\$50	\$50	\$50	\$50
Orange County	137	Blue Ridge	Northern	\$60	\$60	\$60	\$60	\$60	\$42	\$42	\$42	\$42	\$42
Page County	139	Blue Ridge	Northern	\$60	\$60	\$60	\$60	\$60	\$42	\$42	\$42	\$42	\$42
Prince William County	153	North Central	Northern	\$71	\$71	\$71	\$71	\$71	\$50	\$50	\$50	\$50	\$50
Rappahannock County	157	Blue Ridge	Northern	\$60	\$60	\$60	\$60	\$60	\$42	\$42	\$42	\$42	\$42
Rockingham County	165	Blue Ridge	Northern	\$60	\$60	\$60	\$60	\$60	\$42	\$42	\$42	\$42	\$42
Shenandoah County	171	Blue Ridge	Northern	\$60	\$60	\$60	\$60	\$60	\$42	\$42	\$42	\$42	\$42
Spotsylvania County	177	North Central	Northern	\$71	\$71	\$71	\$71	\$71	\$50	\$50	\$50	\$50	\$50
Stafford County	179	North Central	Northern	\$71	\$71	\$71	\$71	\$71	\$50	\$50	\$50	\$50	\$50
Warren County	187	Blue Ridge	Northern	\$60	\$60	\$60	\$60	\$60	\$42	\$42	\$42	\$42	\$42
Winchester City	840	Blue Ridge	Northern	\$60	\$60	\$60	\$60	\$60	\$42	\$42	\$42	\$42	\$42

VDSS Piedmont Region | Family Day Home | Maximum Reimbursable Rates – Level 2 | Effective 07/01/2023 | Full Day, Part Day Rate

Note: Shaded cells indicate rates that have been held harmless.

Locality	FIPS	Ready Region	DSS Region	Full Day					Part Day				
				Infant	Toddler	2-year-old	Pre-School	School Age	Infant	Toddler	2-year-old	Pre-School	School Age
Albemarle County	003	Blue Ridge	Piedmont	\$60	\$60	\$60	\$60	\$60	\$42	\$42	\$42	\$42	\$42
Alleghany County	005	West	Piedmont	\$57	\$57	\$57	\$57	\$57	\$40	\$40	\$40	\$40	\$40
Amherst County	009	Southside	Piedmont	\$54	\$54	\$54	\$54	\$54	\$38	\$38	\$38	\$38	\$38
Appomattox County	011	Southside	Piedmont	\$54	\$54	\$54	\$54	\$54	\$38	\$38	\$38	\$38	\$38
Augusta County	015	Blue Ridge	Piedmont	\$60	\$60	\$60	\$60	\$60	\$42	\$42	\$42	\$42	\$42
Bath County	017	West	Piedmont	\$57	\$57	\$57	\$57	\$57	\$40	\$40	\$40	\$40	\$40
Bedford County	019	Southside	Piedmont	\$54	\$54	\$54	\$54	\$54	\$38	\$38	\$38	\$38	\$38
Botetourt County	023	West	Piedmont	\$57	\$57	\$57	\$57	\$57	\$40	\$40	\$40	\$40	\$40
Buena Vista City	530	West	Piedmont	\$57	\$57	\$57	\$57	\$57	\$40	\$40	\$40	\$40	\$40
Campbell County	031	Southside	Piedmont	\$54	\$54	\$54	\$54	\$54	\$38	\$38	\$38	\$38	\$38
Charlotte County	037	Southside	Piedmont	\$54	\$54	\$54	\$54	\$54	\$38	\$38	\$38	\$38	\$38
Charlottesville City	540	Blue Ridge	Piedmont	\$60	\$60	\$60	\$60	\$60	\$42	\$42	\$42	\$42	\$42
Covington City	580	West	Piedmont	\$57	\$57	\$57	\$57	\$57	\$40	\$40	\$40	\$40	\$40
Craig County	045	West	Piedmont	\$57	\$57	\$57	\$57	\$57	\$40	\$40	\$40	\$40	\$40
Danville City	590	Southside	Piedmont	\$54	\$54	\$54	\$54	\$54	\$38	\$38	\$38	\$38	\$38
Franklin County	067	West	Piedmont	\$57	\$57	\$57	\$57	\$57	\$40	\$40	\$40	\$40	\$40
Halifax County	083	Southside	Piedmont	\$54	\$54	\$54	\$54	\$54	\$38	\$38	\$38	\$38	\$38
Henry County	089	West	Piedmont	\$57	\$57	\$57	\$57	\$57	\$40	\$40	\$40	\$40	\$40
Highland County	091	West	Piedmont	\$57	\$57	\$57	\$57	\$57	\$40	\$40	\$40	\$40	\$40
Lexington City	678	West	Piedmont	\$57	\$57	\$57	\$57	\$57	\$40	\$40	\$40	\$40	\$40
Lynchburg City	680	Southside	Piedmont	\$54	\$54	\$54	\$54	\$54	\$38	\$38	\$38	\$38	\$38
Martinsville City	690	West	Piedmont	\$57	\$57	\$57	\$57	\$57	\$40	\$40	\$40	\$40	\$40
Mecklenburg County	117	Southside	Piedmont	\$54	\$54	\$54	\$54	\$54	\$38	\$38	\$38	\$38	\$38
Nelson County	125	Blue Ridge	Piedmont	\$60	\$60	\$60	\$60	\$60	\$42	\$42	\$42	\$42	\$42
Pittsylvania County	143	Southside	Piedmont	\$54	\$54	\$54	\$54	\$54	\$38	\$38	\$38	\$38	\$38
Roanoke City	770	West	Piedmont	\$57	\$57	\$57	\$57	\$57	\$40	\$40	\$40	\$40	\$40
Roanoke County	161	West	Piedmont	\$57	\$57	\$57	\$57	\$57	\$40	\$40	\$40	\$40	\$40
Rockbridge County	163	West	Piedmont	\$57	\$57	\$57	\$57	\$57	\$40	\$40	\$40	\$40	\$40

Salem	775	West	Piedmont	\$57	\$57	\$57	\$57	\$57	\$40	\$40	\$40	\$40	\$40
Staunton City	790	Blue Ridge	Piedmont	\$60	\$60	\$60	\$60	\$60	\$42	\$42	\$42	\$42	\$42
Waynesboro City	820	Blue Ridge	Piedmont	\$60	\$60	\$60	\$60	\$60	\$42	\$42	\$42	\$42	\$42

VDSS Western Region | Family Day Home | Maximum Reimbursable Rates – Level 2 | Effective 07/01/2023 | Full Day, Part Day Rate

Note: Shaded cells indicate rates that have been held harmless

Locality	FIPS	Ready Region	DSS Region	Full Day					Part Day				
				Infant	Toddler	2-year-old	Pre-School	School Age	Infant	Toddler	2-year-old	Pre-School	School Age
Bland County	021	Southwest	Western	\$53	\$53	\$53	\$53	\$53	\$37	\$37	\$37	\$37	\$37
Bristol City	520	Southwest	Western	\$53	\$53	\$53	\$53	\$53	\$37	\$37	\$37	\$37	\$37
Buchanan County	027	Southwest	Western	\$53	\$53	\$53	\$53	\$53	\$37	\$37	\$37	\$37	\$37
Carroll County	035	Southwest	Western	\$53	\$53	\$53	\$53	\$53	\$37	\$37	\$37	\$37	\$37
Dickenson County	051	Southwest	Western	\$53	\$53	\$53	\$53	\$53	\$37	\$37	\$37	\$37	\$37
Floyd County	063	Southwest	Western	\$53	\$53	\$53	\$53	\$53	\$37	\$37	\$37	\$37	\$37
Galax City	640	Southwest	Western	\$53	\$53	\$53	\$53	\$53	\$37	\$37	\$37	\$37	\$37
Giles County	071	Southwest	Western	\$53	\$53	\$53	\$53	\$53	\$37	\$37	\$37	\$37	\$37
Grayson County	077	Southwest	Western	\$53	\$53	\$53	\$53	\$53	\$37	\$37	\$37	\$37	\$37
Lee County	105	Southwest	Western	\$53	\$53	\$53	\$53	\$53	\$37	\$37	\$37	\$37	\$37
Montgomery County	121	Southwest	Western	\$53	\$53	\$53	\$53	\$53	\$37	\$37	\$37	\$37	\$37
Norton City	720	Southwest	Western	\$53	\$53	\$53	\$53	\$53	\$37	\$37	\$37	\$37	\$37
Patrick County	141	West	Western	\$57	\$57	\$57	\$57	\$57	\$40	\$40	\$40	\$40	\$40
Pulaski County	155	Southwest	Western	\$53	\$53	\$53	\$53	\$53	\$37	\$37	\$37	\$37	\$37
Radford City	750	Southwest	Western	\$53	\$53	\$53	\$53	\$53	\$37	\$37	\$37	\$37	\$37
Russell County	167	Southwest	Western	\$53	\$53	\$53	\$53	\$53	\$37	\$37	\$37	\$37	\$37
Scott County	169	Southwest	Western	\$53	\$53	\$53	\$53	\$53	\$37	\$37	\$37	\$37	\$37
Smyth County	173	Southwest	Western	\$53	\$53	\$53	\$53	\$53	\$37	\$37	\$37	\$37	\$37
Tazewell County	185	Southwest	Western	\$53	\$53	\$53	\$53	\$53	\$37	\$37	\$37	\$37	\$37
Washington County	191	Southwest	Western	\$53	\$53	\$53	\$53	\$53	\$37	\$37	\$37	\$37	\$37
Wise County	195	Southwest	Western	\$53	\$53	\$53	\$53	\$53	\$37	\$37	\$37	\$37	\$37
Wythe County	197	Southwest	Western	\$53	\$53	\$53	\$53	\$53	\$37	\$37	\$37	\$37	\$37

Appendix H. Barrier Crimes for Child Day Programs

Including:

- -Licensed Child Day Centers
- -Religiously Exempt Child Day Centers
- -Certified Preschools
- -Licensed Family Day Homes
- -Voluntarily Registered Family Day Homes
- -Licensed Family Day Systems
- -Licensed System-Approved Family Day Homes
- -The Following if Receiving Federal, State, or Local Child Care Funds:
 - Local ordinance – approved family day homes
 - Programs of recreational activities offered by local governments
 - Unregulated family day homes (including in-home care)

Va Code Ann. §§ 19.2-392.02; 22.1-289.031; 22.1-289.035; 22.1-289.039

Child Day Programs cannot hire anyone who has:

- A conviction for an offense in the entire barrier crime definition in Code § 19.2-392.02. Convictions include prior adult convictions and juvenile convictions or adjudications of delinquency based on a crime that would be a felony if committed by an adult within or outside the Commonwealth.
- A founded complaint of child abuse or neglect within or outside the Commonwealth.

The list of barrier crimes is broken into six clauses. All six clauses apply to Child Day Programs.

§ 22.1-289.035 No child day center, family day home, or family day system licensed in accordance with the provisions of this chapter, child day center exempt from licensure pursuant to §2.1-289.031, registered family day home, family day home approved by a family day system, or child day center, family day home, or child day program that enters into a contract with the Department or its agents or designees to provide child care services funded by the Child Care and Development Block Grant shall hire for compensated employment, continue to employ, or permit to serve as a volunteer who will be alone with, in control of, or supervising children any person who (i) has been convicted of any barrier crime as defined in §19.2-392.02 or (ii) is the subject of a founded complaint of child abuse or neglect within or outside the Commonwealth. "Barrier crime" under Code § 19.2-392.02, Clause (i) includes:

Any FELONY violation of:

OFFENSE Or Substantially Similar Offense Under the Laws of Another Jurisdiction	VA CODE SECTION
Aiding prostitution or illicit sexual intercourse, etc.	18.2-348
Brandishing a machete or other bladed weapon with intent to intimidate	18.2-282.1
Criminal Street Gang - Recruitment of persons for criminal street gang	18.2-46.3
Criminal Street Gang – Enhanced punishment for gang activity taking place in a gang-free zone	18.2-46.3:3
Criminal Street Gang - Third or subsequent conviction of criminal street gang crimes	18.2-46.3:1
Criminal Street Gang Participation	18.2-46.2
Discharging firearms or missiles within or at building or dwelling house	18.2-279
Pointing, holding, or brandishing firearm, air or gas operated weapon or object similar in appearance	18.2-282
Prostitution; commercial sexual conduct; commercial exploitation of a minor	18.2-346
Rioting	18.2-405
Setting spring gun or other deadly weapon	18.2-281

Shooting from vehicles so as to endanger persons	18.2-286.1
Stalking	18.2-60.3
Unlawful assembly	18.2-406
Using vehicles to promote prostitution or unlawful sexual intercourse	18.2-349
Violation of a Protective Order	16.1-253.2
Violation of a Protective Order	18.2-60.4
Wearing of body armor while committing a crime	18.2-287.2
Willfully discharging firearms in public places	18.2-280

Any violation of:

OFFENSE Or Substantially Similar Offense Under the Laws of Another Jurisdiction	VA CODE SECTION
Abduction - Threatening, attempting or assisting in such abduction	18.2-49
Abduction (Kidnapping)	18.2-47.A or 18.2-47.B
Abduction with Intent to Extort Money or for Immoral Purposes	18.2-48
Abuse and Neglect of Children	18.2-371.1
Abuse and Neglect of Incapacitated Adults	18.2-369
Advocacy of change in government by force, violence or other unlawful means ["coup" or "coup d'etat"]	18.2-484
Aggressive Use of a Machine Gun	18.2-290
Arson	
Arson – Burning Building or Structure While in Such Building or Structure with Intent to Commit Felony	18.2-82
Arson – Burning or Destroying Any Other Building or Structure	18.2-80
Arson – Burning or Destroying Dwelling House, Etc.	18.2-77
Arson – Burning or Destroying Meeting House, Etc.	18.2-79
Arson – Burning or Destroying Personal Property, Standing Grain, Etc.	18.2-81
Arson – Causing, Inciting, Etc. Threats to Bomb or Damage Buildings or Means of Transportation; False Information as to Danger to Such Buildings, Etc.	18.2-84
Arson – Manufacture, Possession, Use, Etc. of Fire Bombs or Explosive Materials or Devices	18.2-85
Arson – Setting Fire to Woods, Fences, Grass, Etc.	18.2-86
Arson – Setting Off Chemical Bombs Capable of Producing Smoke in Certain Public Buildings	18.2-87.1
Arson – Setting Woods, Etc., on Fire Intentionally Whereby Another is Damaged or Jeopardized	18.2-87
Arson – Threats to Bomb or Damage Buildings or Means of Transportation; False Information as to Danger to Such Buildings, Etc.	18.2-83
Arson- Carelessly Damaging Property by Fire	18.2-88
Assault or Battery by Mob	18.2-42
Assaults and Bodily Wounding	
Assaults and Bodily Wounding – Adulteration of Food, Drink, Drugs, Cosmetics, Etc.	18.2-54.2
Assaults and Bodily Wounding – Aggravated Malicious Wounding	18.2-51.2
Assaults and Bodily Wounding – Allowing Access to Firearms by Children	18.2-56.2
Assaults and Bodily Wounding – Assault and Battery	18.2-57
Assaults and Bodily Wounding – Assault and Battery Against a Family or Household Member	18.2-57.2
Assaults and Bodily Wounding – Attempts to Poison	18.2-54.1
Assaults and Bodily Wounding – Bodily Injuries Caused by Prisoners, State Juvenile Probationers, and State and Local Adult Probationers or Adult Parolees	18.2-55
Assaults and Bodily Wounding – Disarming a Law-Enforcement or Correctional Officer	18.2-57.02
Assaults and Bodily Wounding – Hazing a Youth Gang Members	18.2-55.1

OFFENSE Or Substantially Similar Offense Under the Laws of Another Jurisdiction	VA CODE SECTION
Assaults and Bodily Wounding – Hazing of a Student at Any School, College, or University	18.2-56
Assaults and Bodily Wounding – Maiming, Etc., of Another Resulting From Driving While Intoxicated	18.2-51.4
Assaults and Bodily Wounding – Maiming, Etc., of Another Resulting From Operating a Watercraft While Intoxicated	18.2-51.5
Assaults and Bodily Wounding – Shooting, stabbing, etc. with intent to main, kill, etc. by Mob	18.2-41
Assaults and Bodily Wounding – Malicious Bodily Injury by Means of Any Caustic Substance or Agent or Use of Any Explosive or Fire	18.2-52
Assaults and Bodily Wounding – Malicious Bodily Injury to Law-Enforcement Officers, Firefighters, Search and Rescue Personnel, or Emergency Medical Service Providers	18.2-51.1
Assaults and Bodily Wounding – Pointing Laser at Law-Enforcement Officer	18.2-57.01
Assaults and Bodily Wounding – Possession of Infectious Biological Substances or Radiological Agents	18.2-52.1
Assaults and Bodily Wounding – Reckless Endangerment of Others by Throwing Objects from Places Higher than One Story	18.2-51.3
Assaults and Bodily Wounding – Reckless Handling of Firearms; Reckless Handling While Hunting	18.2-56.1
Assaults and Bodily Wounding – Shooting, Etc. in Committing or Attempting a Felony	18.2-53
Assaults and Bodily Wounding – Shooting, Stabbing, Etc. With Intent to Maim, Kill, Etc.	18.2-51
Assaults and Bodily Wounding – Strangulation of Another	18.2-51.6
Assaults and Bodily Wounding – Use or Display of Firearm in Committing a Felony	18.2-53.1
Burning cross on property of another or public place with intent to intimidate	18.2-423
Burning object on property of another or a highway or other public place with intent to intimidate	18.2-423.01
Carjacking	18.2-58.1
Commercial sex trafficking	18.2-357.1
Commission of certain offenses in county, city or town declared by Governor to be in state of riot or insurrection	18.2-413
Commission of felony by prisoners	53.1-203
Commission of felony while in juvenile facility or detention home	18.2-477.2
Conspiracy or incitement to riot	18.2-408
Conspiring to incite one race to insurrection against another race	18.2-485
Crimes Against Nature Involving Children (involving family member)	18.2-361.B
Delivery of Drugs, Firearms, explosives, etc. to Prisoners or Committed Persons	18.2-474.1
Displaying noose on property of another or a highway or other public place with intent to intimidate	18.2-423.2
Employing or Permitting a Minor to Assist in – Advertising, Etc., Obscene Items, Exhibitions, or Performances (included because of 18.2-379)	18.2-376
Employing or Permitting a Minor to Assist in – Coercing Acceptance of Obscene Articles or Publications (included because of 18.2-379)	18.2-378
Employing or Permitting a Minor to Assist in – Unlawful Creation of an Image of Another	18.2-386.1
Employing or Permitting a Minor to Assist in – Display of Child Pornography or Grooming Video or Materials to a Child	18.2-374.4
Employing or Permitting a Minor to Assist in – Indecent Exposure (included because of 18.2-379)	18.2-387
Employing or Permitting a Minor to Assist in – Obscene Exhibitions and Performances (included because of 18.2-379)	18.2-375

OFFENSE Or Substantially Similar Offense Under the Laws of Another Jurisdiction	VA CODE SECTION
Employing or Permitting a Minor to Assist in – Obscene Sexual Display (included because of 18.2-379)	18.2-387.1
Employing or Permitting a Minor to Assist in – Possession, Reproduction, Distribution, Solicitation, and Facilitation of Child Pornography	18.2-374.1:1
Employing or Permitting a Minor to Assist in – Production, Publication, Sale, Financing Etc., of Child Pornography	18.2-374.1
Employing or Permitting a Minor to Assist in – Production, Publication, Sale, Possession, Etc., of Obscene Items (included because of 18.2-379)	18.2-374
Employing or Permitting a Minor to Assist in – Unlawful Dissemination or Sale of Images of Another	18.2-386.2
Employing or Permitting a Minor to Assist in – Use of Communications Systems to Facilitate Certain Offenses Involving Children	18.2-374.3
Employing or Permitting a Minor to Assist in an Act Constituting an Offense Under Article 5 (18.2-372 et seq.) of Chapter 8 of Title 18.2	18.2-379
Enticing another into a dwelling house with intent to commit certain felonies	18.2-50.3
Escape by persons committed to facility for sexually violent predators	37.2-917
Escape by setting fire to jail	18.2-480
Escape from jail by force or violence without setting fire to jail (post-conviction)	18.2-477
Escape from jail or custody by force or violence without setting fire to jail (pre-conviction)	18.2-478
Escape from juvenile facility	18.2-477.1
Escape without force or violence or setting fire to jail	18.2-479
Extortion of money, property or pecuniary benefit	18.2-59
Failure to Secure Medical Attention for an Injured Child	18.2-314
Sexual intercourse by persons forbidden to marry; Incest	18.2-366
Injury to property or persons by persons unlawfully or riotously assembled	18.2-414
Murder or Manslaughter	
Murder or Manslaughter – Felony Homicide	18.2-33
Murder or Manslaughter – Involuntary Manslaughter	18.2-36
Murder or Manslaughter – Involuntary Manslaughter; Driving a Vehicle While Under the Influence	18.2-36.1
Murder or Manslaughter – Involuntary Manslaughter; Operating a Watercraft While Under the Influence	18.2-36.2
Murder or Manslaughter – Killing a Fetus	18.2-32.2
Murder or Manslaughter – Murder of a Pregnant Woman	18.2-32.1
Murder or Manslaughter – Murder, Capital	18.2-31
Murder or Manslaughter – Murder, First and Second Degree	18.2-32
Murder or Manslaughter – Voluntary Manslaughter	18.2-35
Taking, detaining, etc. person for prostitution, etc. or consenting thereto; human trafficking	18.2-355
Penetration of mouth of child with lascivious intent	18.2-370.6
Placing swastika on certain property with intent to intimidate	18.2-423.1
Possession of firearm while in possession of certain controlled substances	18.2-308.4
Possession or Use of a Sawed-Off Shotgun or Rifle	18.2-300
Providing false information or failing to provide sex offender registration information	18.2-472.1
Receiving money for procuring person	18.2-356
Receiving money from earnings of male or female prostitute	18.2-357
Robbery	18.2-58
Sex offenses prohibiting entry onto school or other property	18.2-370.5

OFFENSE Or Substantially Similar Offense Under the Laws of Another Jurisdiction	VA CODE SECTION
Sex offenses prohibiting proximity to children	18.2-370.2
Sex offenses prohibiting residing in proximity to children	18.2-370.3
Sex offenses prohibiting working on school property	18.2-370.4
Sexual Assault	
Sexual Assault – Aggravated Sexual Battery	18.2-67.3
Sexual Assault – Attempted Aggravated Sexual Battery	18.2-67.5
Sexual Assault – Attempted Forcible Sodomy	18.2-67.5
Sexual Assault – Attempted Object Sexual Penetration	18.2-67.5
Sexual Assault – Attempted Rape	18.2-67.5
Sexual Assault – Attempted Sexual Battery	18.2-67.5
Sexual Assault – Carnal Knowledge of a Child Between 13 and 15 Years of Age	18.2-63
Sexual Assault – Carnal Knowledge of an Inmate, Parolee, Probationer, Detainee, or Pretrial or Post Trial Offender	18.2-64.2
Sexual Assault – Carnal Knowledge of Certain Minors	18.2-64.1
Sexual Assault – Forcible Sodomy	18.2-67.1
Sexual Assault – Infected Sexual Battery	18.2-67.4:1
Sexual Assault – Object Sexual Penetration	18.2-67.2
Sexual Assault – Rape	18.2-61
Sexual Assault – Repeat offender (felony conviction after prior misdemeanor convictions of sexual battery in violation of § 18.2-67.4, attempted sexual battery in violation of § 18.2-67.5.C, a violation of § 18.2-371 involving consensual intercourse, anal intercourse, cunnilingus, fellatio, or anilingus with a child, indecent exposure of himself or procuring another to expose himself in violation of § 18.2-387, or a violation of § 18.2-130)	18.2-67.5:1
Sexual Assault – Repeat offender (life imprisonment for offense based on prior sexual assault convictions)	18.2-67.5:3
Sexual Assault – Repeat offender (maximum sentence for offense based on prior sexual assault convictions)	18.2-67.5:2
Sexual Assault – Sexual Abuse of a Child under 15 Years of Age	18.2-67.4:2
Sexual Assault – Sexual Battery	18.2-67.4
Taking Indecent Liberties with Children	18.2-370
Taking Indecent Liberties with Children (by person in custodial or supervisory position to child)	18.2-370.1
Terrorism - Committing, conspiring and aiding and abetting acts of terrorism	18.2-46.5
Terrorism - Act of bioterrorism against agricultural crops or animals	18.2-46.7
Terrorism - Possession, manufacture, distribution, etc. of weapon of terrorism or hoax device	18.2-46.6
Threats against the Governor or his immediate family	18.2-60.1
Threats of Death or Bodily Injury	18.2-60
Treason	18.2-481
Paramilitary activity prohibited	18.2-433.2
Use of a Machine Gun in a Crime of Violence	18.2-289

"Barrier crime" under Code § 19.2-392.02, Clause (ii) includes:

Any violation of:

OFFENSE Or Substantially Similar Offense Under the Laws of Another Jurisdiction	VA CODE SECTION
Burglary	18.2-89
Burglary – Breaking and Entering Dwelling House with Intent to Commit Other Misdemeanor	18.2-92
Burglary – Entering Bank, Armed, with Intent to Commit Larceny	18.2-93

OFFENSE Or Substantially Similar Offense Under the Laws of Another Jurisdiction	VA CODE SECTION
Burglary – Entering Dwelling House, Etc., with Intent to Commit Larceny, Assault and Battery, or Other Felony	18.2-91
Burglary – Entering Dwelling House, Etc., with Intent to Commit Murder, Rape, Robbery, or Arson	18.2-90
Burglary – Possession of Burglarious Tools, Etc.	18.2-94

"Barrier crime" under Code § 19.2-392.02, Clause (iii) is:

Any FELONY violation of:

OFFENSE Or Substantially Similar Offense Under the Laws of Another Jurisdiction	VA CODE SECTION
Possession or Distribution of Drugs – Allowing a Minor or Incapacitated Person to be Present During Manufacture or Attempted Manufacture of Methamphetamine	18.2-248.02
Possession or Distribution of Drugs – Assisting Individuals in Unlawfully Procuring Prescription Drugs	18.2-258.2
Possession or Distribution of Drugs – Certain Premises Deemed Common Nuisance	18.2-258
Possession or Distribution of Drugs – Distributing Certain Drugs to Persons under 18	18.2-255
Possession or Distribution of Drugs – Maintaining a Fortified Drug House	18.2-258.02
Possession or Distribution of Drugs – Manufacturing, Selling, Giving, Distributing, or Possessing with the Intent to Distribute the Substances Gamma-Butyrolactone or 1, 4-Butanediol When Intended for Human Consumption	18.2-251.3
Possession or Distribution of Drugs – Manufacturing, Selling, Giving, Distributing, or Possessing with the Intent to Manufacture, Sell, Give, or Distribute Any Anabolic Steroid	18.2-248.5
Possession or Distribution of Drugs – Manufacturing, Selling, Giving, Distributing, or Possessing with Intent to Manufacture, Sell, Give, or Distribute a Controlled Substance or an Imitation Controlled Substance	18.2-248
Possession or Distribution of Drugs – Manufacturing, Selling, Giving, Distributing, or Possessing with Intent to Manufacture, Sell, Give, or Distribute Methamphetamine	18.2-248.03
Possession or Distribution of Drugs – Obtaining Drugs, Procuring Administration of Controlled Substances, Etc., by Fraud, Deceit, or Forgery	18.2-258.1
Possession or Distribution of Drugs – Possession and Distribution of Flunitrazepam	18.2-251.2
Possession or Distribution of Drugs – Sale, Gift, Distribution, or Possession with Intent to Sell, Give, or Distribute Marijuana	18.2-248.1
Possession or Distribution of Drugs – Sale or Manufacture of Drugs On or Near Certain Properties	18.2-255.2
Possession or Distribution of Drugs – Transporting Controlled Substances into the Commonwealth	18.2-248.01

"Barrier crime" under Code § 19.2-392.02, Clause (iv) is:

Any FELONY violation of:

OFFENSE Or Substantially Similar Offense Under the Laws of Another Jurisdiction	VA CODE SECTION
Possession or Distribution of Drugs – Possession of Controlled Substances	18.2-250

"Barrier crime" under Code § 19.2-392.02, Clause (v) is:

- Any offense set forth in § 9.1-902 that results in the person's requirement to register with the Sex Offender and Crimes Against Minors Registry pursuant to § 9.1-901, including any finding

that a person is not guilty by reason of insanity in accordance with Chapter 11.1 (§ 19.2-182.2 et seq.) of Title 19.2 of an offense set forth in § 9.1-902 that results in the person's requirement to register with the Sex Offender and Crimes Against Minors Registry pursuant to § 9.1-901; Offenses that require registration can be found at <http://sex-offender.vsp.virginia.gov/sor/statutes.html>.

- Any substantially similar offense under the laws of another jurisdiction; or
- Any offense for which registration in a sex offender and crimes against minors registry is required under the laws of the jurisdiction where the offender was convicted

§ 9.1-902. Offenses requiring registration.

A. For purposes of this chapter:

"Offense for which registration is required" includes:

1. Any offense listed in subsection B;
2. Criminal homicide;
3. Murder;
4. A sexually violent offense;
5. Any offense similar to those listed in subdivisions 1 through 4 under
6. the laws of any foreign country or any political subdivision thereof, the
7. United States or any political subdivision thereof; and
8. Any offense for which registration in a sex offender and crimes against
9. minors registry is required under the laws of the jurisdiction where the offender was convicted.

B. The offenses included under this subsection include any violation of, attempted violation of, or conspiracy to violate:

1. § 18.2-63 unless registration is required pursuant to subdivision E 1; § 18.2-64.1; former § 18.2-67.2:1; § 18.2-90 with the intent to commit rape; former § 18.1-88 with the intent to commit rape; any felony violation of § 18.2-346; any violation of subdivision (4) of § 18.2-355; any violation of subsection C of § 18.2-357.1; subsection B or C of § 18.2-374.1:1; former subsection D of § 18.2-374.1:1 as it was in effect from July 1, 1994, through June 30, 2007; former clause (iv) of subsection B of § 18.2-374.3 as it was in effect on June 30, 2007; subsection B, C, or D of § 18.2-374.3; or a third or subsequent conviction of (i) § 18.2-67.4, (ii) § 18.2-67.4:2, (iii) subsection C of § 18.2-67.5, or (iv) § 18.2-386.1.

If the offense was committed on or after July 1, 2006, § 18.2-91 with the intent to commit any felony offense listed in this section; subsection A of § 18.2-374.1:1; or a felony under § 18.2-67.5:1.

2. Where the victim is a minor or is physically helpless or mentally incapacitated as defined in § 18.2-67.10, subsection A of § 18.2-47, clause (i) of § 18.2-48, § 18.2-67.4, subsection C of § 18.2-67.5, § 18.2-361, § 18.2-366, or a felony violation of former § 18.1-191.

C. § 18.2-370.6.

D. If the offense was committed on or after July 1, 2016, and where the perpetrator is 18 years of age or older and the victim is under the age of 13, any violation of § 18.2-51.2.

- E. If the offense was committed on or after July 1, 2016, any violation of § 18.2-356 punishable as a Class 3 felony or any violation of § 18.2-357 punishable as a Class 3 felony.
- F. "Criminal homicide" means a homicide in conjunction with a violation of, attempted violation of, or conspiracy to violate clause (i) of § 18.2-371 or § 18.2-371.1, when the offenses arise out of the same incident.
- G. "Murder" means a violation of, attempted violation of, or conspiracy to violate § 18.2-31 or § 18.2-32 where the victim is (i) under 15 years of age or (ii) where the victim is at least 15 years of age but under 18 years of age and the murder is related to an offense listed in this section or a violation of former § 18.1-21 where the victim is (a) under 15 years of age or (b) at least 15 years of age but under 18 years of age and the murder is related to an offense listed in this section.
- H. "Sexually violent offense" means a violation of, attempted violation of, or conspiracy to violate:
1. Clause (ii) and (iii) of § 18.2-48, former § 18.1-38 with the intent to defile or, for the purpose of concubinage or prostitution, a felony violation of subdivision (2) or (3) of former § 18.1-39 that involves assisting or aiding in such an abduction, § 18.2-61, former § 18.1-44 when such act is accomplished against the complaining witness's will, by force, or through the use of the complaining witness's mental incapacity or physical helplessness, or if the victim is under 13 years of age, subsection A of § 18.2-63 where the perpetrator is more than five years older than the victim, § 18.2-67.1, § 18.2-67.2, § 18.2-67.3, former § 18.1-215 when the complaining witness is under 13 years of age, § 18.2-67.4 where the perpetrator is 18 years of age or older and the victim is under the age of six, subsections A and B of § 18.2-67.5, § 18.2-370, subdivision (1), (2), or (4) of former § 18.1-213, former § 18.1-214, §18.2-370.1, or § 18.2-374.1; or
 2. § 18.2-63, § 18.2-64.1, former § 18.2-67.2:1, § 18.2-90 with the intent to commit rape or, where the victim is a minor or is physically helpless or mentally incapacitated as defined in § 18.2-67.10, subsection A of § 18.2-47, § 18.2-67.4, subsection C of § 18.2-67.5, clause (i) of § 18.2-48, § 18.2-361, § 18.2-366, or subsection C of § 18.2-374.1:1. An offense listed under this subdivision shall be deemed a sexually violent offense only if the person has been convicted or adjudicated delinquent of any two or more such offenses, provided that person had been at liberty between such convictions or adjudications;
 3. If the offense was committed on or after July 1, 2006, § 18.2-91 with the intent to commit any felony offense listed in this section. An offense listed under this subdivision shall be deemed a sexually violent offense only if the person has been convicted or adjudicated delinquent of any two or more such offenses, provided that the person had been at liberty between such convictions or adjudications; or
 4. Chapter 117 (18 U.S.C. § 2421 et seq.) of Title 18 of the United States Code or sex trafficking (as described in § 1591 of Title 18, U.S.C.).
- I. "Any offense listed in subsection B," "criminal homicide" as defined in this section, "murder" as defined in this section, and "sexually violent offense" as defined in this section includes (i) any similar offense under the laws of any foreign country or any political subdivision thereof, the United States or any political subdivision thereof or (ii) any offense for which registration in a sex offender and crimes against minors registry is required under the laws of the jurisdiction where the offender was convicted.
- J. Juveniles adjudicated delinquent shall not be required to register; however, where the offender is a juvenile over the age of 13 at the time of the offense who is tried as a juvenile and is adjudicated delinquent on or after July 1, 2005, of any offense for which registration is

required, the court may, in its discretion and upon motion of the attorney for the Commonwealth, find that the circumstances of the offense require offender registration...

"Barrier crime" under Code § 19.2-392.02, Clause (vi) is:

- Any other felony not included in clause (i), (ii), (iii), (iv), or (v) unless five years have elapsed from the date of the conviction.

Appendix I. Forms Used in the Child Care Subsidy Program

The forms utilized in the Child Care Subsidy Program are identified below. Forms can be accessed through FUSION at: CCECD Forms or at <https://fusion.dss.virginia.gov/home/fusion-forms-library>.

FORM NAME	FORM NUMBER
Appeal to State Department of Social Services	032-03-0024-10-eng (01/10)
Authorization to Act as Agent on Customer's Behalf for In-Home Care	032-05-0061-03-eng (09/20)
Child Care Case Record Transfer Form	032-25-0148-00-eng (07/18)
Child Care Subsidy Program Communication Form	032-05-0518-02-eng (07/18)
Child Care Subsidy Program Notice of Action	032-12-0128-01-eng (07/18)
Child Care Notice of Case Transfer Form	032-25-0149-00-eng (07/18)
Child Care Notice of Redetermination	032-12-0131-00-eng (08/17)
Child Care Purchase of Services Order (POSO)	032-05-0540-02-eng
Child Care Repayment Agreement	032-12-0130-00-eng (08/17)
Child Care Subsidy Program Service Plan	032-12-0129-02-eng (06/22)
Child Care Subsidy Service Application and Redetermination Form	032-25-0147-06-eng (07/22)
Child Care Subsidy Service Application and Redetermination Form	032-25-0147-06-spa (07/22)
Child Care Provider Demographics	032-05-0548-01-eng (10/16)
Child Care Verification Checklist	032-12-0127-00-eng (03/17)
Child Care Waitlist Screening Form	032-05-0547-03-eng (03/21)
Child Care Waitlist Update Form	032-12-0132-00-eng (08/17)
Child's Emergency Medical Authorization	032-02-057/2 (10/02)
Childhood Immunization Certification TANF and Child Care Subsidy	032-03-0960-03-eng (11/03)
Health and Safety Checklist for Unregulated Providers	032-02-001/2 (10/02)
Sworn Statement or Affirmation for Child Day Programs	032-05-0160-10-eng (05/17)
Subsidy Provider Attestation Form	032-035-0095-eng (06/25)

Forms Used in IPV Process

FORM NAME	FORM NUMBER
Administrative Disqualification Hearing Decision	032-03-0723-10-eng (05/16)
Advance Notice of Administrative Disqualification Hearing	032-03-0724-08-eng (05/16)
Notice of Disqualification for Intentional Program Violation	032-03-0052-13-eng (05/16)
Notice of Intentional Program Violation	032-03-0721-11-eng (04/16)
Referral for Administrative Disqualification Hearing	032-03-0725-05-eng (05/16)
Waiver of Administrative Disqualification Hearing	032-03-0722-03-eng (05/16)

The forms used for providers interested in becoming an approved provider of subsidized child care can be accessed at: www.childcare.virginia.gov

FORM NAME	FORM NUMBER
Child Care Subsidy Program Child Care Center Vendor Agreement	032-12-0047-02-eng (04/19)
Child Care Subsidy Program Family Day Home Vendor Agreement	032-12-0046-01-eng (04/19)

Appendix J. Child Care Subsidy Service Application and Redetermination Form Instructions

NUMBER

032-25-0147-06-eng (07/22)

PURPOSE OF FORM

To record all eligibility related information provided by an applicant for child care subsidy payments in the VaCMS. To be completed by the applicant at application and redetermination Form may be completed by the applicant in CommonHelp or submitted in writing to the LDSS. Information must be recorded in the VaCMS.

USE OF FORM

To provide a record of new applications, redeterminations, the beginning of a transitional case and changes reported by an applicant that would affect their eligibility for child care subsidy in the VaCMS. For reported changes, the worker must record the change(s) in the VaCMS. The revised information will be stored in the VaCMS.

The form is available on the Child Care and Development website and the VDSS public website. Printed copies may be distributed at the LDSS, or the form can be printed from the VDSS public website by the applicant. Applicants may also apply online through CommonHelp.

COPIES

The information will be stored in the VaCMS. The Responsibilities, Change Reporting, and Penalties section and the signature page of the form, signed by the applicant and the worker, must be given to the applicant. The signed application must be scanned into DMIS for the case record.

INSTRUCTIONS FOR PREPARING THE FORM

This form is to be completed by an applicant for child care services. It is the responsibility of the worker to discuss all information with the applicant to ensure accuracy. It is the responsibility of the worker to evaluate all information provided by the applicant and to verify eligibility requirements. If the worker changes information completed by the applicant, both the worker and the applicant must initial the change and indicate the date the change was made.

General Information about the form:

[Applicant's Rights](#)

Outlines for applicants their responsibilities related to their application for child care subsidy or their continued eligibility for child care subsidy.

Outlines the steps an applicant for or recipient of child care services must take to appeal an agency decision.

[Instructions for Completing the Application](#)

Outlines for applicants the instructions for completion of the application for child care subsidy.

Box for Office Use Only

Provides space for the worker to record LDSS and case specific information. Forms submitted to the LDSS must be date stamped.

Section 1

The applicant must provide their contact and demographic information.

The applicant must provide information regarding receipt of prior benefits or services.

Section 2

The applicant must provide general information about all members of their household.

Section 3

The applicant must provide general information about any parent not living in the home.

Section 4

The applicant must provide information on the child(ren) for whom assistance is being requested.

Section 5

The applicant must provide employment or education/training information.

Section 6

The applicant must certify that family assets/resources do not exceed \$1M.

The applicant must provide the income sources and the dollar amounts for all household members.

Section 7

Outlines the applicant's responsibilities and change reporting requirements as well as the penalties associated with an intentional program violation.

Section 8

Consent to exchange information. Captures the applicant's consent to share case information with other state agencies to provide efficient and coordinated services as needed.

Section 9

Acknowledgement of applicant's responsibilities. Provides guidance for the worker and the applicant to discuss the application process, the information provided by the applicant and the responsibilities of the worker and the applicant.

Provides space for the applicant and the worker to sign indicating that all required information has been submitted or requested and that the applicant understands and agrees to their requirements and responsibilities.

Provider Information

Captures the name, address, and phone number of the Child Care Provider (if selected).

ECC Card

N/A. ECC cards are no longer applicable for attendance tracking in Child Care PASS.

Checklist

Provides a checklist for the applicant that includes required verifications that may be needed to process their application for Child Care Subsidy.

Appendix K. Child Care Waitlist Screening Form Instruction

Number

032-05-0547-02-eng (03/17)

Purpose of Form

To screen customers for placement on a child care Waitlist.

USE OF FORM

The LDSS worker will use the information on this form to screen applicants onto the waitlist. Once this screening for the waitlist is complete in the VaCMS, the worker will add the family to the Waitlist.

COPIES/DISPOSITION

Two. File the original in the case record and give a copy to the applicant.

Appendix L. Child Care Waitlist Update Form Instructions

NUMBER

032-12-0132-00-eng (08/00)

PURPOSE OF FORM

To request updated household information from an applicant currently placed on the LDSS waitlist for Child Care Subsidy and Services.

USE OF FORM

To obtain current household demographic and income information from an applicant that is needed to complete a quarterly waitlist update.

COPIES/DISPOSITION

A copy is saved in the VaCMS for the case record.

INSTRUCTIONS FOR PREPARING THE FORM

A Child Care Waitlist Update form is used to gather updated applicant information related to their waitlist screening. This form is used by the Child Care Worker to update the applicant's waitlist information quarterly and to determine the applicant's continued need, eligibility, and desire to be placed on the LDSS waitlist. The Child Care Worker must fill in the amount of the family's gross monthly

income that would cause the total amount to exceed the maximum monthly income level allowed for a family of its size in the locality where the child care services have been requested.

This form is available in VaCMS and generated 45 days prior to the end of the quarterly update month. The form is centrally printed and sent to the applicant.

The form must be completed and signed by the applicant and returned to the LDSS prior to the end of the update month.

Appendix M. Child Care Subsidy Program Notice of Action Form Instructions

NUMBER

032-12-0128-01-eng (07/18)

PURPOSE OF FORM

The purpose of this form is to inform applicants or recipients of child care subsidy and services of the action and the date of the action to be taken on their child care case.

USE OF FORM

To give the applicant/recipient of child care subsidy a ten-day notice before an action is taken. More than one action may be indicated on a single NOA. This form is generated from the VaCMS to be printed by the worker and sent to the applicant. The Correspondence ID # of the form and the mailing date must be recorded in the case narrative, if printed locally, to verify the form was mailed to the applicant/recipient.

COPIES

One copy will be stored in the VaCMS, and one copy must be mailed to the applicant/recipient.

INSTRUCTIONS FOR PREPARING THE FORM

A NOA completed in and generated from the VACMS must be sent 10 days in advance of the action when a case action affecting eligibility, copayment or the amount of services authorized is taken. A copy of the applicant's NOA must never be sent to a provider.

Information will be preprinted on the form that is generated from the VaCMS.

The back of the form provides information on the fair hearings and appeal process.

Appendix N. Child Care Notice of Redetermination Form Instructions

FORM NUMBER

032-12-0131-00-eng (08/17)

PURPOSE OF FORM

The purpose of this form is to inform recipients of child care subsidy and services of the need to renew their eligibility for Child Care Subsidy and Services and that services will end if a redetermination application is not filed or if the application indicates the recipient is no longer eligible.

USE OF FORM

The form notifies the recipient that a redetermination application must be filed to continue eligibility for Child Care Subsidy and Services. If the redetermination application is not completed, Child Care Services will be interrupted and/or discontinued.

COPIES

The original will be mailed to the recipient. A copy of the notice must be filed in the case record.

INSTRUCTIONS FOR PREPARING THE FORM

The Child Care Worker will complete the form and enter the date services will end as well as the date the redetermination application must be returned by (First day of redetermination month). The form must be sent with the Redetermination Application and at least 10 days in advance of the end of the redetermination month.

Information will be preprinted on the form that is generated from VaCMS.

The last page of the form provides information on the fair hearings and appeal process.

Appendix O. Child Care Subsidy Program Communication Form Instructions

NUMBER

032-05-0518-02-eng (07/18)

PURPOSE OF FORM

To notify applicant for/recipient of child care subsidy of a change in their application/case which does not affect eligibility, copayment or the amount of services authorized or to request information from the applicant/recipient.

USE OF FORM

To communicate information to the applicant/recipient of an action to be taken or to request information.

COPIES

One copy for the applicant/recipient. Copy is saved in the VaCMS for the case record.

INSTRUCTIONS FOR PREPARING THE FORM

A Child Care Communication form is used to communicate to an applicant or recipient information related to their child care case that does not affect eligibility, copayment or the amount of services authorized. This form is intended for the applicant/recipient and should not be sent to anyone else.

The VaCMS will pre-fill the identifying information for the applicant/recipient the worker contact information.

The bottom of the form provides space for the worker to type in the information to be communicated.

This form is available in the VaCMS. Completing this form in the VaCMS automatically saves a copy of the form in the case record. The form is printed and sent to the applicant/recipient. The Correspondence ID# and mailing date must be recorded in the case narrative, if printed locally.

The last page of the form provides information on the fair hearings and appeal process.

Appendix P. Child Care Verification Checklist Instructions

NUMBER

032-12-0127-00-eng (03/17)

PURPOSE OF FORM

To notify applicant/recipient as to information they must provide in order for determination/redetermination of eligibility.

USE OF FORM

To provide applicant/recipient with a list of items to be submitted in order to verify and to document required documentation for eligibility to be determined.

COPIES

One copy for the case record. One copy must be sent to the applicant/recipient.

INSTRUCTIONS FOR PREPARING THE FORM

Any time a requirement for determination of eligibility needs to be verified or to be documented, a verification checklist should be provided to the applicant/recipient.

This form will be included in the redetermination package sent to the recipient.

A copy must be generated to send to the applicant/recipient. The worker will complete the form after printing it. A copy must be kept in the case record. The worker must record in the case narrative that the form was provided to the applicant/recipient as documentation.

Appendix Q. Childhood Immunization Certification Instructions

NUMBER

032-03-0960-03-eng

PURPOSE OF FORM

The completed form provides verification necessary to determine compliance with immunization requirements.

USE OF FORM

The form must be given to applicants/recipients to use to supply verification that a child has received required immunizations. The form must be completed by a physician or local health department personnel.

COPIES

One per child. File completed form in the case record.

INSTRUCTIONS FOR PREPARING THE FORM

The worker must complete the case/agency information section at the top of the form and the child's name, social security number, and date of birth in the section completed by the doctor/provider.

Appendix R. Child Care Purchase of Service Order Instructions

NUMBER

032-05-0540-02-eng (07/12)

(Please refer to the Finance Guidelines Manual for LDSS Section 5.20 – Purchase of Service for specific Purchase of Service guidance)

PURPOSE OF FORM

This form is used to order services from a child care provider. If the provider accepts a Purchase of Service Order (POSO), it enters into a contract for a specific purchase. This form is also used for early termination of an existing POSO. A revised POSO will be available to the provider in Child Care PASS any time the information on the POSO needs revision, as revisions change the terms of the contract.

USE OF FORM

This form is prepared by the child care case worker (worker) by entering information into the VaCMS and the fiscal officer, or the director's designee, as noted, and is available to the provider in Child Care PASS.

COPIES

This form is generated from the VaCMS. The form is sent to the recipient. The correspondence ID# and mailing date must be recorded in the case narrative, if printed locally. The form will be available to the provider in Child Care PASS.

DISPOSITION

The form is pre-filled according to the information entered by the child care worker into the VaCMS.

A copy must be sent to the recipient. This copy of the POSO is notification of how many units of care have been authorized, the effective date of the POSO, the family copayment amount and the copayment effective begin date.

A new POSO will be available to the provider in Child Care PASS with the revised information if child care services continue.

INSTRUCTIONS FOR PREPARING THE FORM:

All information is pre-filled by the system.

SIGNATURE OF FISCAL WORKER OR DIRECTOR DESIGNEE

The POSO will be populated with the electronic signature of the Child Care Worker and the Locality Signing Officer listed on the LDSS Profile Screen in VaCMS. “The decision to delegate the fiscal signatory responsibilities to an employee other than the fiscal officer would be made by the LDSS Director. The Director would be responsible for ensuring the designee has the fiscal knowledge required to sign as the authorizing agent while maintaining the appropriate segregation of duties.” (Finance Guidelines Manual for LDSS Section 5.20 – Purchase of Service-Provider Process, Section 3, Purchase of Service Order, Page 5).

Appendix S. Child Care Repayment Agreement Form Instructions

FORM NUMBER

032-12-0130-00-eng (08/17)

PURPOSE OF FORM

The purpose of this form is to inform applicants or recipients of child care subsidy and services of any improper payment for services and to capture the applicant/recipient’s agreement for repayment of any improper payment.

USE OF FORM

The form is used to capture the agreed upon terms for repayment of any improper payment made for Child Care Services. This form is generated from the intranet and shall be printed by the worker and sent to the applicant/recipient. The correspondence ID # and the date the form was mailed must be recorded in the case narrative to verify the form was mailed to the applicant/recipient, if printed locally.

COPIES

The original will be stored in the case record, and one copy must be given to the applicant/recipient. INSTRUCTIONS FOR PREPARING THE FORM – The Child Care Worker must indicate the service months included in the improper payment and the total amount of the improper payment that must be repaid.

The last page of the form provides information on the fair hearings and appeal process.

Appendix T. Child Care Case Record Transfer Form Instructions

FORM NUMBER

032-25-0148-00-eng (07/18)

PURPOSE OF FORM

To communicate between LDSS when transferring responsibility for a case for Child Care Services from one agency to another. The form also serves as confirmation to acknowledge receipt of the case record.

USE OF FORM

The Child Care Worker in the transferring agency must complete the names and addresses of the affected agencies and appropriate parts in Section I of the form. The worker must prepare the case record for transfer to the new locality and send the form and case record to the receiving agency.

COPIES

The transferring agency must keep a copy of the completed form.

Upon receipt of the case record, the receiving agency must complete Section II of the form and scan the signed/completed form, indexed by case number.

INSTRUCTIONS FOR PREPARING THE FORM

Complete the form with identifying information of the case and with the names and addresses of the agency from which the case is being transferred and the agency to which the case is being transferred. Complete Section I to identify the type of assistance, redetermination date, and current authorized services for the household. Add additional comments as needed. A representative of the transferring agency must sign the form.

A representative of the receiving local agency must complete Section II of the form to acknowledge the receipt of the case record.

Appendix U. Child Care Notice of Case Transfer Form Instructions

FORM NUMBER

032-25-0149-00-eng (07/18)

PURPOSE OF FORM

The purpose of this form is to inform recipients of child care services of the transfer of their child care case to a new LDSS.

USE OF FORM

To give the recipient of child care services notice when a case transfer action is taken. The Correspondence ID # of the form and the mailing date must be recorded in the case narrative, if printed locally, to verify the form was mailed to the recipient.

COPIES

The original will be mailed to the recipient, and one copy must be scanned in the case record.

INSTRUCTIONS FOR PREPARING THE FORM

The Child Care Worker in the transferring agency must complete the form and include the address and phone number of the agency to which the case is being transferred.

Information will be preprinted on the form that is generated from VaCMS.

The last two pages of the form provide information on reporting changes, electronic correspondence, nondiscrimination, and the appeal/hearing process.

Appendix V. Authorization to Act as Agent on Customer's Behalf for In-Home Care

NUMBER

032-05-0061-03-eng (09/20)

PURPOSE OF FORM

This form is used to obtain the permission of customers for the Virginia Department of Social Services to act as their fiscal agent when they use in home child care providers. The department can then withhold the proper federal and state work related taxes for the provider such as FICA, SUTA, and FUTA to satisfy all requirements of the Internal Revenue Service.

USE OF FORM

Once this form is signed, the department can then withhold the necessary taxes on behalf of the in-home child care provider. The provider is not the employee of the department, but rather the employee of the customer.

COPIES

The original is mailed to the Child Care Subsidy Provider Coordinator in Home Office. Copies will be given to the customer and the provider, and one copy will be saved in the VaCMS.

INSTRUCTIONS FOR PREPARING THE FORM

Fill in the name, address, phone number, and case number of the customer and the name, address and phone number of the LDSS. The customer signs and dates the form after explanation by the Child Care Worker.

Appendix W. Metropolitan Statistical Area Groupings

FIPS	LOCALITY	INCOME CAP GROUP
001	Accomack	I
005	Alleghany	I
007	Amelia	I
009	Amherst	I
011	Appomattox	I
015	Augusta	I
017	Bath	I
019	Bedford County/City	I
021	Bland	I
023	Botetourt	I
520	Bristol	I
025	Brunswick	I
027	Buchanan	I
029	Buckingham	I
031	Campbell	I
033	Caroline	I
035	Carroll	I
037	Charlotte	I
580	Covington	I
045	Craig	I
049	Cumberland	I
590	Danville	I
051	Dickenson	I
057	Essex	I
063	Floyd	I

FIPS	LOCALITY	INCOME CAP GROUP
067	Franklin County	I
620	Franklin City	I
069	Frederick County	I
640	Galax	I
071	Giles	I
077	Grayson	I
081	Greensville/Empo ria	I
083	Halifax	I
660	Harrisonburg	I
089	Henry	I
091	Highland	I
097	King & Queen	I
101	King William	I
103	Lancaster	I
105	Lee	I
109	Louisa	I
111	Lunenburg	I
680	Lynchburg	I
113	Madison	I
690	Martinsville	I
117	Mecklenburg	I
119	Middlesex	I
121	Montgomery	I
125	Nelson	I
131	Northampton	I

FIPS	LOCALITY	INCOME CAP GROUP
133	Northumberland	I
720	Norton	I
135	Nottoway	I
137	Orange	I
139	Page	I
141	Patrick	I
143	Pittsylvania	I
147	Prince Edward	I
155	Pulaski	I
750	Radford	I
157	Rappahannock	I
159	Richmond County	I
770	Roanoke	I
161	Roanoke County	I
163	Rockbridge/Buena Vista/Lexington	I
165	Rockingham	I
167	Russell	I
169	Scott	I
171	Shenandoah	I
173	Smyth	I
175	Southampton	I
790	Staunton	I
181	Surry	I
183	Sussex	I
185	Tazewell	I
191	Washington	I
820	Waynesboro	I

FIPS	LOCALITY	INCOME CAP GROUP
193	Westmoreland	I
840	Winchester	I
195	Wise	I
197	Wythe	I
003	Albemarle	II
036	Charles City	II
540	Charlottesville	II
041	Chesterfield/Colonial Heights	II
550	Chesapeake	II
053	Dinwiddie	II
065	Fluvanna	II
073	Gloucester	II
075	Goochland	II
079	Greene	II
650	Hampton	II
085	Hanover	II
087	Henrico	II
670	Hopewell	II
093	Isle of Wight	II
095	James City	II
115	Mathews	II
127	New Kent	II
700	Newport News	II
710	Norfolk	II
730	Petersburg	II
740	Portsmouth	II
145	Powhatan	II

FIPS	LOCALITY	INCOME CAP GROUP
149	Prince George	II
760	Richmond City	II
800	Suffolk	II
810	Virginia Beach	II
830	Williamsburg	II
199	York-Poquoson	II
510	*Alexandria	III
013	Arlington	III
043	Clarke	III
047	Culpeper	III
059	*Fairfax City/County	III

FIPS	LOCALITY	INCOME CAP GROUP
061	Fauquier	III
630	Fredericksburg	III
099	King George	III
107	Loudoun	III
683	Manassas City	III
685	Manassas Park	III
153	Prince William	III
177	Spotsylvania	III
179	Stafford	III
187	Warren	III

*Eligibility is set at 250 percent of the Federal Poverty Guidelines for families residing in Fairfax and Alexandria (capped at 85% of SMI).