



March 8, 2022

**Child Care Manual Transmittal Letter No. 158**

**TO:** All Child Care Manual Holders

**FROM:** Matt Damschroder, Director

**SUBJECT:** Rule Changes for Publicly Funded Child Care Ohio Benefits Implementation

**Background:**

In 2010, the Ohio Department of Job and Family Services (ODJFS) implemented the Child Care Information and Data Systems (CCIDS) eligibility and authorization system as the statewide automated eligibility system for the Publicly Funded Child Care (PFCC) program.

To simplify the process for Ohioans applying for public benefits, the Ohio Benefits statewide integrated web-based eligibility system was launched. The Ohio Benefits system allows Ohioans to apply for multiple benefit programs at one time, including medical, cash and food assistance.

Child care will begin utilizing the Ohio Benefits system for eligibility processing in early 2022 using a phased-in approach that begins with pilot counties before going statewide. The counties participating in the pilot are Allen, Athens, Butler, Hamilton and Medina.

Additionally, rules have been amended to incorporate changes due to the passage of Amended Substitute House Bill 110 of the 134th General Assembly, and to remove revision dates from all form citations.

**The following rules have been amended:**

**5101:2-16-01 "Definitions for eligibility for publicly funded child care benefits"** has been amended with the following changes:

- Added a definition for "authorized representative"
- Amended the definition for "Head Start" to match federal language and Ohio Revised Code (ORC)
- Added a definition for "statewide automated eligibility system"

**5101:2-16-03 "Income eligibility requirements for publicly funded child care benefits"** has been amended with the following changes:

- Removed "severance pay" and "temporary workers compensation payments" from the earned income list and added them to the unearned income list to align with the SNAP program
- Added that termination/severance payments received as a one-time lump sum are not counted as unearned income to align with the SNAP program
- Added "income from a rental property minus the cost of doing business when an individual is actively engaged in management of the property for at least an average of twenty hours per week" as gross earned income for individuals who are self-employed to align with the SNAP program
- Added "payments from a roomer or boarder, except a boarder for whom foster care, guardianship, or kinship support payments are received" as gross earned income for individuals who are self-employed to align with the SNAP program
- Added more examples of countable unearned income, and changed from a paragraph to a list for clarification and readability
- Added that kinship support payments will not be counted as gross unearned income
- Clarified that documentary evidence of income includes the most recent tax forms for self-employed individuals

**5101:2-16-05 "Copayment for publicly funded child care benefits"** have been amended to add the word "recertification" where the word "redetermination" occurs to reflect language used in Ohio Benefits

**5101:2-16-06 "Authorizations for publicly funded child care services"** have been amended with the following changes:

- Clarified that authorizations always begin on the first day of the eligibility period, even if the qualifying activity starts later to align with ORC
- Removed the exemption for a second provider if a child is attending a part time Step Up To Quality program due to the passage of Amended Substitute House Bill 110 of the 134th General Assembly

**5101:2-16-07 "Caretaker improper payments or misuse of publicly funded child care benefits"** have been amended with the following changes:

- Clarified that the caretaker is responsible for overpayments that occur because of errors on the part of the caretaker's authorized representative
- Clarified that the caretaker is responsible for overpayments that occur because of information withheld or falsified by the caretaker's authorized representative

**5101:2-16-08 "County agency responsibilities for the administration and determination of eligibility for publicly funded child care"** has been amended with the following changes:

- Clarified that the county responsibilities for utilization of the CCIDS system also apply to the Ohio Benefits system

- Clarified that county agencies should terminate eligibility, after providing hearing notice rights, when the caretaker requests discontinuance of child care benefits
- Clarified that payment after denial authorizations are always for full time hours of care
- Clarified that the caretaker is not assigned a copayment for a payment after denial authorization
- Clarified that counties utilizing Ohio Benefits for child care determinations will send the caretaker a summary of information provided on a telephonic application with instructions on how to correct errors or omissions
- Clarified that counties utilizing CCIDS for child care determinations will assign each family a payment code according to the family's programmatic eligibility
- Added the word "recertification" wherever the word "redetermination" occurs to reflect language used in Ohio Benefits
- Clarified that counties utilizing CCIDS for child care determinations will accept the JFS 01124 for redetermination/recertification, and the 01124 will be sent when caretakers requests a copy of the redetermination/recertification application
- Clarified that counties utilizing Ohio Benefits for child care determinations will accept the JFS 07204 or the electronic or telephonic equivalent for redetermination/recertification, and the 07204 will be sent when caretakers request a copy of the redetermination/recertification application
- Clarified county agency responsibilities regarding authorized representatives
- Clarified county agency responsibilities when a caretaker is applying for other benefits

**5101:2-16-09 "Provider Responsibilities for Publicly Funded Child Care"** has been amended with the following changes:

- Removed "Beginning September 1, 2020" from paragraph (A)(1) due to the passage of Amended Substitute House Bill 110 of the 134th General Assembly
- Added "Except as described in paragraph (A)(3) of this rule" for clarification

**5101:2-16-10 "Payment rates and procedures for providers of publicly funded child care services"** has been amended with the following changes:

- Clarified that in-home aides are not eligible for payment enhancements or extra percentages

**Appendix A to rule 5101:2-16-10** has been updated to reflect new provider categories and rates that went into effect on July 4, 2021.

**Implementation:**

As counties begin using the Ohio Benefits statewide automated eligibility system to process PFCC applications, they will follow the OB procedures in rule, including accepting the appropriate OB forms and all other procedures specific to the OB system.

The process will begin with the five pilot counties before statewide conversion to the OB system. When the entire state is live in OB, another package of rule amendments will be submitted for public review.

### **Forms**

Forms contained in these rules will appear in a separate clearance. The manual procedure letter will contain more detailed implementation guidance.

**The JFS 07200 "Application for Supplemental Nutrition Assistance Program (SNAP), Cash assistance, Medical assistance or Child Care assistance"** will be used to apply for child care using the Ohio Benefits system

**The JFS 07204 "Request to Reapply for Cash Assistance, SNAP and/or Child Care"** will be used to redetermine eligibility using the Ohio Benefits system.

**The JFS 07105 "Application/Reapplication Verification Request Checklist"** will be generated via Ohio Benefits when a county is utilizing Ohio Benefits to determine eligibility.

The most recent version of all ODJFS forms referenced in these rules can be accessed through [Forms Central](#).

Please contact the Child Care Policy Helpdesk at [childcarepolicy@jfs.ohio.gov](mailto:childcarepolicy@jfs.ohio.gov) or 1-877-302-2347, option 4, if you have any questions.

5101:2-16-01

**Definitions for eligibility for publicly funded child care benefits.**

(A) "Absent day" means any day that a child is authorized and scheduled to be in the care of the provider, but is not in attendance, and child care would have been provided had the child been present with the provider.

(B) "Adult" means an individual who is age eighteen or older.

(C) "Authorization" means the hours that a county agency determines that a child may receive publicly funded child care from an eligible provider chosen by the caretaker. The authorization shall be reasonably related to the number of hours of the caretaker's qualifying activities.

(D) "Authorized representative" in the Ohio benefits statewide automated eligibility system means an individual other than the caretaker applying for and/or receiving publicly funded child care benefits, who is at least eighteen years of age and is identified in writing by the caretaker to act on their behalf. The authorized representative may do all of the following:

(1) Complete and submit initial and/or recertification applications and verifications for publicly funded child care on behalf of the caretaker.

(2) Report changes which may affect the caretaker's eligibility for publicly funded child care on behalf of the caretaker.

(3) Receive copies of all correspondence sent to the caretaker.

(4) Communicate on behalf of the caretaker.

~~(D)~~(E) "Automated child care system" means the automated electronic child care system that tracks attendance and calculates payments for publicly funded child care.

~~(E)~~(F) "Border state child care provider" means a child care provider who is licensed, certified, or otherwise approved by the border state to provide child care services. A border state child care provider may provide publicly funded child care only to a recipient who resides in an Ohio county.

~~(F)~~(G) "Caretaker" means the father or mother of a child, an adult who has legal custody of a child, an adult who is the guardian of a child, or an adult who stands in loco parentis, as defined in this rule, with respect to a child and whose presence in the home is needed as the caretaker of the child. Caretaker has the same meaning as "caretaker parent" as defined in section 5104.01 of the Revised Code.

~~(G)~~(H) "Child" means an infant, toddler, preschool child, or school-age child up to age eighteen.

~~(H)~~(I) "Child care" per section 5104.01 of the Revised Code means all of the following:

- (1) Administering to the needs of infants, toddlers, preschool-age children and school-age children outside of school hours;
- (2) By persons other than their parents, guardians, or custodians;
- (3) For part of the twenty-four-hour day; and
- (4) In a place other than a child's own home, except that an in-home aide provides child care in the child's own home;
- (5) By a provider required by Chapter 5104. of the Revised Code to be licensed or approved by the Ohio department of job and family services (ODJFS), certified by a county department of job and family services, or under contract with the department to provide publicly funded child care as described in section 5104.32 of the Revised Code.

~~(H)~~(J) "Designee/Sponsor" means the individual designated by the caretaker to record attendance for a child receiving publicly funded child care at an authorized provider.

- (1) The caretaker shall not designate a child who is an infant, toddler or preschool child.
- (2) The caretaker shall not designate the authorized provider or anyone acting in any capacity for the provider.
- (3) A school-age child that is a designee/sponsor may only track attendance for themselves and other school-age children authorized on the same case and to the same provider.

~~(H)~~(K) "Eligibility period" means a period of at least twelve months that a family is determined eligible for publicly funded child care benefits, or the period until the family no longer meets eligibility requirements or requests termination. The family's eligibility period shall end on the last day of the twelfth month of eligibility.

~~(K)~~(L) "Eligible provider" means a child care provider who is eligible to receive public funds in accordance with Chapter 5104. of the Revised Code and rule 5101:2-16-09 of the Administrative Code.

~~(L)~~(M) "Head Start program" means a ~~comprehensive child development program that receives federal funds distributed under the "Head Start Act" 95 Stat. 499 (1981) which includes early head start.~~ school-readiness program that satisfies all of the following:

(1) Is for children from birth to age five who are from low-income families;

(2) Receives funds distributed under the "Improving Head Start for School-Readiness Act of 2007," 42 U.S.C. 9831, as in effect on 10/01/2021, and;

(3) Is licensed as a child care program.

~~(M)~~(N) "Homeless children" as defined in 42 U.S.C. 11434a(2)(2015) means individuals who lack a fixed, regular, and adequate nighttime residence (within the meaning of 42 U.S.C. 11302(a)(1)(2014), and includes all of the following:

- (1) Children who are sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason; are living in motels, hotels, trailer parks, or camping grounds due to the lack of alternative adequate accommodations; are living in emergency or transitional shelters; or are abandoned in hospitals.
- (2) Children who have 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 (within the meaning of 42 U.S.C. 11302(a)(2)(C).
- (3) Children who are living in cars, parks, public spaces, abandoned buildings, substandard housing, bus or train stations, or similar settings.
- (4) Migratory children (as such term is defined in section 1309 of the Elementary and Secondary Education Act of 1965) who qualify as homeless for the purposes of this subtitle because the children are living in circumstances described in paragraphs (M)(1) to (M)(3) of this rule.

~~(N)~~(O) "Income" means gross income, as defined in rule 5101:2-16-03 of the Administrative Code.

~~(O)~~(P) "Infant" means a child under eighteen months of age.

~~(P)~~(Q) "In loco parentis" means an adult who is the caretaker of a child, including a relative, foster parent or stepparent, who is charged with the rights, duties and responsibilities of a parent and whose presence in the home is needed to perform these rights, duties and responsibilities.

~~(Q)~~(R) "Minor parent" means a caretaker who is under age eighteen.

~~(R)~~(S) "Preschool child" means a child who is three years old or older but is not a school child.

~~(S)~~(T) "Professional development day" means a day in which a provider would normally provide child care for currently enrolled and scheduled children, but has closed to the public so that the provider and/or child care staff may undergo training meant to improve their professional knowledge, competence, skill and effectiveness as child care professionals.

~~(F)~~(U) "Publicly funded child care" is the care of infants, toddlers, preschool children, and school-age children under age thirteen by an eligible provider. Publicly funded child care is paid, wholly or in part, with federal or state funds, including funds available under the child care block grant act Title IV-A, and Title XX, distributed by ODJFS.

~~(U)~~(V) "School-age child" means a child who is enrolled in and attending a grade of kindergarten or above but is less than fifteen years old or, in the case of a child who is receiving special needs child care, is less than eighteen years old.

~~(V)~~(W) "School hours" means the standardized hours of school as defined by the child's school. If the child is homeschooled, school hours are defined by the public school the child would attend if not being homeschooled.

~~(W)~~(X) "School not in session" means a day during the ODJFS defined school year when a school-age child is not able to attend school due to an official school closure, including a delayed start time or an early dismissal time.

~~(X)~~(Y) "School year" is defined by ODJFS as the first Sunday in September through the last Saturday in May.

~~(Y)~~(Z) "Special needs child care" means child care provided to a child who is less than eighteen years of age and either has one or more chronic health conditions or does not meet age appropriate expectations in one or more areas of development, including social, emotional, cognitive, communicative, perceptual, motor, physical, and behavioral development and that may include on a regular basis such services, adaptations, modifications, or adjustments needed to assist in the child's function or development.

(AA) "Statewide automated eligibility system" means the centralized automated system that supports counties utilizing Ohio benefits.

~~(Z)~~(BB) "Step up to quality (SUTQ)" means the tiered quality rating system for licensed child care programs in Ohio.

~~(AA)~~(CC) "Temporary absence" is when a caretaker is out of the home for up to forty-five consecutive days with a definite plan to return to the household.



~~(BB)~~(DD) "Toddler" means a child who is at least eighteen months of age but is less than three years of age.

~~(CC)~~(EE) "Week" is the seven-day period from twelve a.m. Sunday to eleven fifty-nine p.m. Saturday.

Effective: 2/27/2022

Five Year Review (FYR) Dates: 10/20/2024

CERTIFIED ELECTRONICALLY

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Certification

02/17/2022

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Date

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5101:2-16-03

**Income eligibility requirements for publicly funded child care benefits.**

(A) What income is used to determine caretaker eligibility for publicly funded child care benefits?

The county agency shall use gross earned income and gross unearned income to determine child care income eligibility and family copayment. Gross income is the income amount before taxes and other deductions are removed.

(B) What is considered gross earned income?

"Gross earned income" means the total amount of gross earnings received in a month by all of the employed individuals in the family including wages legally obligated to all members of the family but which are diverted to a third party.

(C) What is counted as gross earned income for services performed as an employee?

(1) "Gross earnings for services performed as an employee" means any of the following:

(a) Wages, salary, back pay, bonuses and awards paid by an employer.

(b) Commissions.

~~(c)~~ Severance pay.

~~(d)~~(c) Payments from job corps.

~~(e)~~(d) Earnings from work training programs and/or on-the-job training programs.

~~(f)~~(e) Sick leave paid as wages.

~~(g)~~(f) Annual leave.

~~(h)~~(g) Holiday and vacation pay.

(2) State temporary disability insurance ~~and temporary worker's compensation payments are~~ is considered gross earnings when such payments meet all of the following conditions:

(a) The payment is employer-funded.

(b) The payment is made to an individual who remains employed during recuperation from a temporary illness or injury pending return to the job.

(c) The payment is specifically characterized under state law as temporary wage replacement.

(D) What is counted as gross earned income for individuals who are self-employed?

(1) "Gross self-employment earnings" means the total profit from a business enterprise. The total profit from the self-employment business enterprise is determined by one of the following:

(a) Adding all gross self-employment income, then deducting the self-employment expenses from the total gross income, or

(b) Using a standard fifty per cent deduction from the total gross self-employment income.

(2) Income from a rental property minus the cost of doing business when an individual is actively engaged in management of the property for at least an average of twenty hours per week.

(3) Payments from a roomer or boarder, except a boarder for whom foster care, guardianship, or kinship support payments are received.

~~(2)~~(4) Self-employment expenses are those expenses directly related to producing the goods and services. The following expenses are not allowable deductions:

(a) Net losses from a previous period.

(b) Federal, state and local income tax.

(c) Money set aside for retirement.

(d) Work related personal expenses, such as transportation to and from work.

(e) Entertainment expenses.

(f) Depreciation.

~~(3)~~(5) Individuals who are self-employed and have no countable income shall provide written verification documenting how they are meeting basic living expenses, including, but not limited to, food, housing, utilities and transportation. This documentation shall be used in determining authorized hours in paragraph (E) of this rule. Failure to provide sufficient documentation shall result in the denial or termination of child care benefits.

(E) How are work hours determined for individuals who are self-employed?

- (1) For approved self-employment activities, the work hours used to determine the publicly funded child care category of authorization shall be for no more hours than it would take an individual to earn the same amount of money working at the federal minimum wage. This shall be calculated as follows:
  - (a) Divide the gross self-employment earnings determined in paragraph (D) of this rule by 4.3 weeks.
  - (b) Divide the number determined in paragraph (E)(1)(a) of this rule by the federal hourly minimum wage.
  - (c) Round the number determined in paragraph (E)(1)(b) of this rule up to the nearest whole number.
- (2) The number determined in paragraph (E)(1) of this rule is the maximum weekly hours which can be applied to the child care authorization for the self-employment approved activity.

(F) What income is not counted as gross earned income?

- (1) The gross earnings of a minor child in the family who is a full-time student as defined by the school, unless the minor is a parent.
- (2) Alimony or child support payments paid by a family member. The amount paid, up to the amount ordered, is excluded.
- (3) The verified amount which is being garnished from the income.
- (4) Earnings received under the Domestic Volunteer Service Act of 1973 for participation in the "Americorp Vista" program.
- (5) Federal work study income as referenced in rule 5101:4-4-13 of the Administrative Code.
- (6) All income, including in kind benefits, excluded under the supplemental nutrition assistance program (SNAP) regulations, as set forth in rule 5101:4-4-13 of the Administrative Code.
- (7) Any other income amounts that federal statutes or regulations require be excluded.
- (8) Any income earned by a person receiving supplemental security income (SSI).

(G) What about individuals who are unemployed or on unpaid leave from employment?

- (1) Individuals who are unemployed or on unpaid leave from employment shall provide written verification documenting how they are meeting basic living expenses including, but not limited to, food, housing, utilities and transportation.
- (2) Failure to provide sufficient documentation shall result in the denial or termination of child care benefits.

(H) What income is considered gross unearned income?

- (1) "Gross unearned income" means the total amount of unearned income that is received in the month by all members of the family.
- (2) Unearned income is income that is not gross earned income or is not gross earned income from self-employment, as defined in this rule.
- (3) Unearned income includes ~~cash contributions received by the family from absent caretakers, persons, organizations or assistance agencies; social security administration disability, death or retirement benefits; and child support payments~~ but is not limited to the following:
  - (a) Cash contributions received by the family from absent caretakers, persons, organizations or assistance agencies.
  - (b) Social security administration disability, retirement or survivor's benefits.
  - (c) Railroad disability, retirement or survivor's benefits.
  - (d) Child support and/or alimony payments made to a family member by an individual not living with the family.
  - (e) Temporary worker's compensation payments.
  - (f) Termination/severance pay received as average pay, and not as a non-recurring lump sum.
  - (g) Rental income for properties that are not self-managed.
  - (h) Rental income for properties when the individual manages the properties for less than an average of twenty hours per week.
  - (i) Unemployment benefit payments.
  - (j) Basic assistance payments from Ohio works first (OWF).

(I) What income is not counted as gross unearned income?

- (1) SSI payments.
- (2) Federal, state or local foster care maintenance payments.
- (3) Federal, state or local adoption assistance payments.
- (4) Kinship permanency incentive payments made in accordance with the requirements of rule 5101:2-40-04 of the Administrative Code, and kinship support payments made in accordance with the requirements of rule 5101:2-42-18.2 of the Administrative Code.
- (5) Payments made with county funds to increase the amount of cash assistance an assistance group receives in accordance with section 5107.03 of the Revised Code.
- (6) Child support payments paid by a family member for a child outside the family. The amount paid, up to the amount ordered, is excluded.
- (7) Alimony paid pursuant to a court order.
- (8) Contributions for shared living arrangements.
  - (a) These include cash payments received by a family from an individual who is not a family member but who resides in the household and shares responsibility for the household expenses through an informal arrangement.
  - (b) The cash payment given to the family is not available to the family because the payment represents the non-family member's share of the household expenses.
- (9) Bona fide loans from any source, including rural housing loans made by the federal housing administration.
- (10) Experimental housing allowance program payments made under annual contributions on contracts entered into prior to January 1975, under section 23 of the U.S. Housing Act of 1937.
- (11) HUD community development block grant funds paid under Title I of the Housing and Community Development Act of 1974 (Public Law 93-383).

- (12) Home energy assistance support and maintenance paid in cash or in-kind, Public Laws 97-377 (December 21, 1982), 97-424 (January 6, 1983), and 98-21 (April 20, 1983).
- (13) Income tax refunds received by any of the family members.
- (14) The verified amount which is being garnished from the income.
- (15) Earned income tax credit payments when received as part of an income tax refund.
- (16) The value of surplus commodities donated by the department of agriculture.
- (17) Benefits received under Title VII, nutrition program for the elderly, Older Americans Act of 1965, Public Law 89-73 as amended through Public Law 114-144 (April 19, 2016).
- (18) Retroactive payments made as a result of a state hearing.
- (19) Escrow accounts established or credited as the direct result of the assistance group's involvement in family self-sufficiency on or after May 15, 1992.
- (20) Ohio works first cash payment for support services, pursuant to section 5107.66 of the Revised Code.
- (21) Prevention, retention and contingency (PRC) payments.
- (22) The value of SNAP allotments.
- (23) Money received in the form of a nonrecurring lump sum payment, including, but not limited to:
  - (a) Retroactive lump sum social security, SSI, or pension benefits.
  - (b) Retroactive lump sum insurance settlements.
  - (c) Retroactive lump sum payment of child support arrearage.
  - (d) Refunds of security deposits on rental properties or utilities.
  - (e) Publicly funded child care overpayment reimbursements.
  - (f) PRC payments not defined as cash assistance.
  - (g) Termination/severance payments.



- (24) Income excluded under the SNAP regulations, as set forth in rule 5101:4-4-13 of the Administrative Code, unless the income is included under the provisions of this rule.
- (25) Any other income amounts that federal statutes or regulations require be excluded.

(J) How is the family's gross monthly income calculated?

- (1) When determining eligibility and copayment for child care benefits, the county agency shall calculate the family's gross monthly income.
- (2) Earned and unearned income that is received on a monthly basis shall be rounded down by dropping all cents.
- (3) Earned and unearned income that is received weekly, bi-weekly or semi-monthly shall have all cents dropped before and after being converted into a monthly amount. Amounts shall be converted as follows:
  - (a) Income received on a weekly basis is multiplied by 4.3.
  - (b) Income received biweekly (every two weeks), is multiplied by 2.15.
  - (c) Income received semimonthly (twice a month) is multiplied by two.
- (4) Hourly rates which include cents are not rounded but are converted into monthly figures using the exact amounts.

(K) What if an individual has fluctuating income?

If an individual has fluctuating income, the income shall first be averaged to arrive at a figure to be converted into a monthly amount, according to the following procedures:

- (1) If the employed individual works the same number of hours per pay period, that number of hours shall be used in computing the individual's gross monthly income.
  - (a) The gross monthly income shall be computed by one of the following:
    - (i) Using the gross earnings listed on the individual's pay stubs; or
    - (ii) Multiplying the number of hours per pay period by the hourly rate of pay.

- (b) The figure determined in paragraph (K)(1)(a) of this rule is used to convert the income into a monthly amount.
- (2) If the employed individual has fluctuating hours of employment, the income shall be averaged.
  - (a) Cents shall be dropped prior to calculating the average income amount.
  - (b) The average income amount is used in converting the income into a monthly figure.
  - (c) When possible, the county agency shall average the income received in the preceding four weeks.
- (3) When the income from the prior four week period is not representative of current or future income, the county agency shall project income based on a best estimate. The best estimate shall consider the following variables which may affect the determination:
  - (a) More than four weeks of pay stubs, if they are available and the individual states that an average of a longer period of time is more representative because the income received in the most recent four weeks was less or greater than the average. The county agency shall use all available income related information for the immediately preceding three month period.
  - (b) The individual's projection of future earnings, when the individual disagrees with the use of income for the past four weeks period as representative of future income. The county agency shall determine a representative figure using all available income related information, including the individual's projection of future income.
  - (c) Year-to-date earnings, if listed on an individual's pay stub. Year-to-date earnings may be used to determine average income for periods longer than four weeks.
  - (d) All available income related information, which shall be used to determine a representative figure when there are fewer than four weeks of pay stubs available. This includes situations when the employed individual disagrees with the use of earnings from the past four week period as indicative of future earnings.
  - (e) Written documentation from the employer, which shall be required if there are no pay stubs available because the employment is new.

(L) What if an individual's income is sporadic?

- (1) If income is sporadic, the income for a period of one year shall be used to determine an average adjusted monthly income. An example of sporadic income is commission-based income.
- (2) When income is from work that normally involves seasonal periods of unemployment, the family's adjusted monthly income shall be determined from the adjusted annual income of the family divided by twelve months.

(M) How is self-employment income calculated?

For situations in which an individual has self-employment income, the county agency shall determine the gross earnings for the month based on an estimate of the individual's gross annual earnings.

- (1) The self-employed individual shall provide copies of the tax return from the previous year as well as current business records in order to project annual gross income.
  - (a) The income shown on the previous year's tax return shall be used to estimate earnings for the current and future months.
  - (b) The gross monthly earnings shall be determined by dividing the previous year's tax return by the number of months the individual was self-employed the previous year.
  - (c) Estimation of self-employment income shall be used when the individual has been self-employed for some time, the gross earnings have remained fairly constant, and there is no anticipated change in the individual's circumstance.
- (2) If the individual contests the estimate of income from self-employment based solely on information on the previous year's tax return, the individual shall provide a projected estimate of gross earnings for the current taxable year, based upon current business records.
  - (a) When the individual cannot estimate gross earnings for the current taxable year based on current business records, the county agency shall accept the individual's best estimate.
  - (b) Using the individual's best estimate of income for the current taxable year, the county agency shall allocate one-twelfth of the gross annual income equally into each month of the taxable year.

- (3) If the individual contests the county agency estimate of the income from self-employment based solely on information on the previous year's tax return but does not provide a projected estimate of gross earnings for the taxable year based on current business records, the county agency shall project the earnings based on the gross earnings listed on the previous year's tax return.
- (a) If the individual does not have a tax return from the previous year, the county agency shall project an estimate of the individual's annual gross earnings from self-employment based on the individual's current business records. The county agency shall determine that one-twelfth of the projected gross earnings from self-employment shall be allocated monthly.
- (b) In the absence of both previous year's tax return and current business records, the county agency shall require the individual to provide a written best estimate of his or her projected annual income and expenses. The county agency shall then determine that one-twelfth of the projected annual gross earnings from self-employment shall be distributed into all months of the taxable year.

(N) What are acceptable forms of income verification?

All income shall be verified by the best available information from the following list:

- (1) Documentary evidence is written confirmation of the applicant's income. The county agency should include copies of all documents used for verification in the case file. If copies of documents cannot be obtained, a description of the documentary evidence shall be included in the case file. Documentary evidence includes, but is not limited to, the following:
- (a) Pay stubs.
- (b) Income tax returns.
- (c) The most recent W-2 form.
- (d) Self-employment bookkeeping records.
- (e) The most recent ~~W-38 self-employment income verification~~ tax forms for self-employed individuals.
- (f) Data from providers of pension benefits.
- (g) Business records.

- (h) Correspondence or data from the social security administration.
  - (i) Data from the Ohio bureau of worker's compensation.
  - (j) A signed statement from the employer that includes gross income and/or hourly wage and work hours.
- (2) A collateral contact is an oral confirmation by someone that is not a member of the applicant's household, including employers, human resources personnel, social service agencies or migrant service agencies.
- (a) A confirmation may be made in person or over the phone.
  - (b) The collateral contact may be anyone who can provide an accurate third-party verification. The person who will act as the collateral contact may be provided by the applicant or selected by the county.
  - (c) If income received is cash without a receipt, a contact with the employer is required.
  - (d) The county agency is not required to use a collateral contact provided by the applicant if there is reason to believe the contact will not be able to provide accurate third-party verification. In these cases, the county agency may request another collateral contact from the applicant or may select an alternate contact themselves.
  - (e) The county agency may contact individuals or agencies with receipt of a signed application as defined in rule 5101:2-16-02 of the Administrative Code, or other signed written consent by the caretaker, in order to obtain all pertinent information regarding family income.
- (3) A statement from the applicant may be acceptable on a case-by-case basis when no other verification is available. When an applicant statement is used it shall be documented in the case record.

(O) Who is responsible for providing verifications of income?

The caretaker shall provide verification of the source and amount of any income received, unless such information is already available to the county agency.

- (1) The county agency shall assist the caretaker in obtaining verification provided the caretaker has not refused to cooperate in the development of documentation for any source of income received. If it would be difficult or impossible for the caretaker to obtain verification in a timely manner, or if the county agency

can obtain the verification faster, the county agency shall offer assistance in obtaining the verification.

- (2) Failure to cooperate in the development of documentation for any source of income received is acceptable grounds for a delay in the processing of an application or a determination of eligibility.
- (3) If failure to cooperate continues beyond thirty days from the date of application, the application shall be denied.
- (4) Denial of an application does not prohibit the caretaker parent from reapplying for child care benefits.

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5101:2-16-05

**Copayment for publicly funded child care benefits.**

(A) What are the copayment requirements for families receiving publicly funded child care benefits?

- (1) Families shall be assigned a weekly copayment amount based on income level.
- (2) Families shall pay the assigned copayment(s) directly to their child care provider(s).
- (3) Weekly copayment amounts shall be based on the federal poverty guidelines released annually by the United States department of health and human services.
  - (a) Each family with a monthly income of one hundred per cent or less of the federal poverty level (FPL) shall have a weekly copayment of zero dollars.
  - (b) Each family with a monthly income of more than one hundred per cent of the FPL shall have a weekly copayment based on family size and gross monthly income.
  - (c) The family copayment schedule will be published annually in a child care manual procedure letter.

(B) How is the copayment calculated?

To calculate the family's copayment, the county agency shall:

- (1) Determine the family's monthly income pursuant to rule 5101:2-16-03 of the Administrative Code, and multiply by twelve to calculate the family's annual income.
- (2) Divide the family's annual income by one hundred per cent of the FPL that corresponds to the family size to determine the family's FPL. The FPL guidelines are published annually in a child care manual procedure letter pursuant to rule 5101:2-16-02 of the Administrative Code.
- (3) Round the family's FPL determined in paragraph (B)(2) of this rule up to the next five per cent (for example, one hundred two per cent FPL is rounded to one hundred five per cent FPL).
- (4) Using the FPL determined in paragraph (B)(3) of this rule, multiply by one hundred per cent of the FPL that corresponds to the family size and divide by



twelve, rounding up to the nearest dollar to determine the maximum monthly income.

- (5) Using the chart in appendix A to this rule, multiply the maximum monthly income as determined in paragraph (B)(4) of this rule by the appropriate copay multiplier, round to the nearest whole dollar, multiply by twelve, and divide by the number of weeks in the current state fiscal year to determine the family's weekly copay.

(C) If a family has more than one weekly authorization for child care, how is the copayment distributed?

- (1) The copayment amount shall be equally distributed among all authorizations each week.
- (2) The distributed copayments shall be rounded down to the nearest whole dollar.
- (3) The caretaker shall be notified of the copayment amounts for each authorization.

(D) How long is a family copayment effective?

The copayment amount that is assigned to the family upon determination of eligibility shall be in effect for the entire eligibility period unless any of the following occurs:

- (1) The caretaker reports a change in family income, family size, or both, that reduces the amount of the copayment.
- (2) An incorrect copayment was assessed by the county agency as a result of agency error, recipient error, or recipient fraud, resulting in corrective action to reduce or increase the family's copayment.
- (3) The Ohio department of job and family services (ODJFS) requires a change in the copayment.
- (4) The caretaker is no longer receiving protective child care or homeless child care as described in rule 5101:2-16-02 of the Administrative Code.

(E) When can a family copayment increase?

Copayments may increase at the time of redetermination/recertification or reinstatement approval. The new copayment amount is effective on the first day of the new eligibility period.

(F) When can a family copayment be reduced?

A family copayment may be reduced any time a change is reported in income or family size that reduces the copayment, even during the current eligibility period.

(G) When shall the county agency waive the copayment requirement?

The county agency shall waive the copayment requirement for families eligible for protective or homeless child care benefits pursuant to rule 5101:2-16-02 of the Administrative Code.

(H) Is a copayment impacted if the family does not utilize all of the authorized hours for child care in a week?

A family shall be required to pay the copayment assigned for a child's authorization or the child's cost of care for that week, whichever amount is lower.

(I) Is the family required to pay the copayment when only absent days or professional development days are reported for the week?

A family shall not be required to pay the copayment when only absent days and/or professional development days are reported, with no hours of attendance at the child care program during that week.

(J) What is the due date for each copayment?

The family will sign a written agreement with the provider(s) in which a mutually agreed upon due date for each copayment is specified, pursuant to rule 5101:2-16-09 of the Administrative Code.

(K) What happens if the caretaker does not pay the copayment according to the signed agreement with the child care provider?

A caretaker shall be ineligible for child care benefits if a delinquent copayment is owed, unless satisfactory arrangements are made to pay the delinquent copayment. Arrangements to pay a delinquent copayment shall be satisfactory to both the caretaker and the provider.

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Per cent of FPL	Multiplier
0 - 100	0.0000
105	0.0700
110	0.0735
115	0.0770
120	0.0805
125	0.0840
130	0.0875
135	0.0875
140	0.0875
145	0.0875
150	0.0875
155	0.0875
160	0.0875
165	0.0875
170	0.0875
175	0.0875
180	0.0875
185	0.0875
190	0.0875
195	0.0875
200	0.0875
205	0.0900
210	0.1000
215	0.1100
220	0.1200
225	0.1300
230	0.1400
235	0.1500
240	0.1600

245	0.1700
250	0.1800
255	0.1900
260	0.2000
265	0.2100
270	0.2200
275	0.2300
280	0.2400
285	0.2500
290	0.2600
295	0.2700
300	0.2700

5101:2-16-06

**Authorizations for publicly funded child care services.****(A) What is a child care authorization?**

- (1) The child care authorization indicates how many weekly hours have been approved for the child to receive care.
- (2) The child care authorization identifies the provider that the family has chosen to provide care. The chosen provider shall have a provider agreement with the Ohio department of job and family services (ODJFS) to provide publicly funded child care services.
- (3) The child care authorization allows ODJFS to make weekly payments to the authorized provider for child care services for the child.

**(B) What is a category of authorization?**

- (1) The category of authorization is based on the number of hours per week that a child is approved to receive publicly funded child care services. The approved hours of care shall be categorized as follows:
  - (a) An hourly authorization is for hours of care totaling fewer than seven hours per week.
  - (b) A part-time authorization is for hours of care totaling seven hours to fewer than twenty-five hours per week.
  - (c) A full-time authorization is for hours of care totaling twenty-five hours to sixty-hours per week.
  - (d) A full-time plus authorization is for hours of care totaling more than sixty-hours per week.
  - (e) A week is defined as the seven-day period from twelve a.m. Sunday to fifty-nine minutes after eleven p.m. Saturday.
- (2) Authorizations for care shall not exceed the maximum category of care that a caretaker is eligible to receive.
- (3) The category of authorization, determined at the time the county agency determines eligibility, shall be maintained for the entire eligibility period unless verification is submitted requiring an increase to the category of authorization.
- (4) Authorizations for approved initial applications shall begin on the date the county received the valid application pursuant to rule 5101:2-16-02 of the

Administrative Code, ~~or the date that the qualifying activity begins, if that date is later than the application received date.~~

(C) How does the county determine the category of authorization?

- (1) The approved hours of care shall be reasonably related to the hours that the caretaker participates in qualifying activities, pursuant to rule 5101:2-16-02 of the Administrative Code.
- (2) If there is more than one caretaker in the household, the hours of care shall be reasonably related to the hours in which neither caretaker is available to care for the child because of participation in qualifying activities.

(D) Can child care be approved for hours in addition to the hours the caretaker is participating in an approved activity?

- (1) Travel time, not to exceed four hours round trip, shall be allowed.
- (2) Sleep time shall be allowed on a case by case basis, not to exceed eight hours, for a caretaker who participates in an activity where at least four hours occur between midnight and six a.m.
- (3) Child care may exceed twenty-four consecutive hours when the caretaker's hours of employment, training or education indicate such a need. Child care shall not exceed forty-eight consecutive hours.

(E) How many weekly authorizations may a county grant for one child?

- (1) A child shall have one authorization for one provider in a week; unless an exemption is met as set forth in paragraph (E)(2) of this rule.
- (2) The county agency may grant an additional part-time or hourly authorization in a week if the family provides documentation showing it meets one of the following exemption criteria:
  - (a) The child needs care during non-traditional hours as defined in rule 5101:2-16-10 of the Administrative Code.
  - (b) The child needs to change providers in the middle of the week and the hours of care provided by the providers do not overlap.
  - (c) The child's provider is closed on scheduled school days off or on calamity days and the child needs care for those days.

~~(d) The child is enrolled in a part-time program participating in step up to quality and needs care from an additional provider.~~

(F) Can an authorization be created if the publicly funded child care application is denied?

A full-time authorization may be created for child care services provided for the period of time between the date the county agency receives the valid application as defined in rule 5101:2-16-02 of the Administrative Code and the date of denial plus five days, if all of the following occur:

- (1) A complete application, as defined in rule 5101:2-16-02 of the Administrative Code, was submitted.
- (2) The child in care is age eligible, as defined in rule 5101:2-16-02 of the Administrative Code.
- (3) The provider had a valid provider agreement pursuant to rule 5101:2-16-09 of the Administrative Code for all or part of the time the child received care. The authorization shall match the period of time the provider had a valid provider agreement.
- (4) The caretaker was not previously approved for paid publicly funded child care services after denial in the previous twelve months.

(G) Are there any publicly funded child care providers that caretakers may not choose to provide care for their children?

- (1) A caretaker shall not receive publicly funded child care services from a provider who resides in the same household as the child and the caretaker.
- (2) If the caretaker is the owner or an owner's representative of a licensed child care center or type A home, the caretaker's children shall not be authorized to that center or type A home.
- (3) If the caretaker is the employee of a licensed type A home or licensed type B home, the caretaker's children shall not be authorized to that licensed type A or type B home.

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5101:2-16-07

**Caretaker improper payments or misuse of publicly funded child care benefits.**

(A) What is a caretaker improper child care payment?

A caretaker improper payment for publicly funded child care (PFCC) means that a PFCC payment was made to a caretaker's provider for services provided to the caretaker's child that were ineligible to be paid by the PFCC program. The caretaker shall repay the county agency for the following improper payments:

- (1) An error on the part of the caretaker or the caretaker's authorized representative, pursuant to rule 5101:2-16-01 of the Administrative Code.
- (2) Payments made to a provider for care provided during a state hearing appeal period when the decision to terminate benefits is upheld at the state hearing.
- (3) An error by the county agency or Ohio department of job and family services.

(B) What is considered caretaker misuse of PFCC benefits or the automated child care system?

Misuse is when the caretaker:

- (1) Intentionally withholds or falsifies information, including information withheld or falsified by the caretaker's authorized representative, as defined in rule 5101:2-16-01 of the Administrative Code.
- (2) Allows the provider to use or possess the caretaker's personal identification information to gain access to the automated child care system.
- (3) Falsifies attendance records.

(C) What are the repayment procedures for a caretaker improper child care payment or an overpayment related to misuse of the automated child care system?

- (1) The county agency shall:
  - (a) Calculate the overpayment resulting from an improper payment.
  - (b) Notify the caretaker of the determined overpayment amount to be repaid using the JFS 01151 "County Notice of Child Care Benefit Repayment Requirements for Caretakers" (~~rev. 10/2019~~).
  - (c) Report payments received from caretakers in the county finance information system (CFIS).

(2) The caretaker shall:

- (a) Sign the JFS 01151 acknowledging the overpayment and agreeing to a repayment plan.
- (b) Make payments in accordance with the signed payment agreement.

(D) What if the caretaker fails to comply with a repayment agreement?

- (1) The county agency shall terminate child care benefits if the caretaker fails to enter into or comply with an agreement to repay a child care overpayment, and shall issue the appropriate hearing notice pursuant to division 5101:6 of the Administrative Code.
- (2) Ineligibility for child care benefits shall continue until the caretaker complies with an agreement to repay the determined amount.

(E) What is considered child care caretaker fraud?

- (1) Child care caretaker fraud is the willful withholding or falsification of information, or the misuse of child care services by the caretaker, or the caretaker's authorized representative, pursuant to rule 5101:2-16-01 of the Administrative Code, with an intent to deceive or defraud, resulting in the acceptance of services to which the caretaker was not entitled, as determined by a court of law or the caretaker's admission.
- (2) The county agency, in cooperation with the county prosecutor, shall develop and implement procedures for the investigation and/or prosecution of alleged child care caretaker fraud and the recovery of child care over payments from caretakers. The county agency shall update these procedures as necessary.

(F) What happens if a caretaker has admitted to caretaker fraud or has been convicted of fraud by a court of law?

- (1) The county agency shall terminate child care benefits.
- (2) The caretaker shall not be eligible for PFCC benefits until full repayment has been made.
- (3) The county agency shall follow all appropriate provisions of the state hearing notice as required in division 5101:6 of the Administrative Code.

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5101:2-16-08

**County agency responsibilities for the administration and determination of eligibility for publicly funded child care.**

- (A) How shall the county agency, in accordance with Chapter 5104. of the Revised Code, manage the publicly funded child care program?
- (1) The county agency shall accept any gift, grant, or other funds from public or private sources offered unconditionally or under conditions which are, in the judgment of the Ohio department of job and family services (ODJFS), proper and consistent with Chapter 5104. of the Revised Code and deposit such funds in the county public assistance fund established by section 5101.161 of the Revised Code.
  - (2) The county agency shall submit a plan to ODJFS for approval that assures the application process is as accessible to the public as possible and complies with section 5104.33 of the Revised Code. The county agency shall submit any revisions of the plan to ODJFS. The plan shall:
    - (a) Assure that alternative methods for application are available to families through telephone, fax, agency computer, the ODJFS child care web site and other means that are convenient and accessible for families. These shall include but are not limited to the following:
      - (i) To the extent permitted by federal law, the county agency may contract with child care providers, resource and referral organizations, or an outside entity to make all or any part of the eligibility determinations.
      - (ii) To the extent permitted by federal law, the county agency may contract with child care providers, resource and referral organizations, or an outside entity to collect information for use by the county agency in determining eligibility for child care benefits.
      - (iii) The county agency may use and accept electronic records and electronic signatures as specified in Chapter 1306. of the Revised Code.
    - (b) Station county agency employees at various sites in the county for the purpose of assisting applicants in completing the application process and for eligibility determinations at those locations.
    - (c) Extend county agency hours and assigning county agency employees to hours of employment outside the normal working hours of the county

agency to collect information relevant to applications for publicly funded child care and to make eligibility determinations.

- (d) Provide training and technical assistance to individuals or agencies so they may assist families in completing the application process and, where applicable, in making eligibility determinations.
- (3) The county agency shall provide caretakers with complete written explanations of the following:
- (a) Instructions on how to apply for publicly funded child care.
  - (b) Factors used in determining eligibility including family income, family size, ages of family members and the caretaker's hours of employment, training or education.
  - (c) The caretaker's responsibility for reporting changes of information that may affect eligibility.
  - (d) The consequences to the caretaker for failure to accurately and completely report information or changes, including:
    - (i) A repayment of child care benefits pursuant to rule 5101:2-16-07 of the Administrative Code.
    - (ii) Termination or denial of child care benefits.
    - (iii) Penalty of fine and/or imprisonment if a court action renders a finding that the caretaker fraudulently received child care benefits for which the caretaker was not eligible.
- (4) The county agency shall report to ODJFS any known or suspected violations of Chapter 5104. of the Revised Code or the rules promulgated pursuant to that chapter regarding licensed child care centers, licensed family child care homes, Ohio department of education licensed preschool or school-age child programs, or approved child day camps.
- (5) The county agency shall cooperate and participate in all reviews including but not limited to, fiscal, programming, records, and other monitoring activities regarding publicly funded child care.
- (6) The county agency shall comply with the National Voter Registration Act of 1993 which requires each state to provide voter registration services at designated government agencies that provide public assistance.

- (a) The county agency shall distribute voter registration applications with applications for publicly funded child care, defined in rule 5101:2-16-02 of the Administrative Code.
  - (b) The county agency shall follow procedures outlined in rule 5101:1-2-15 of the Administrative Code for the acceptance of voter registration applications.
- (7) The county agency shall cooperate with ODJFS for the recruitment of providers to meet the need for publicly funded child care in the county.
- (B) What is the record retention requirement for the county agency?
- (1) The county agency shall maintain records in accordance with Chapter 149. of the Revised Code.
  - (2) Records shall be maintained a minimum of three years or until an audit is completed, if one has been initiated within a three-year period, to document compliance with child care requirements.
- (C) What is the county agency responsibility in the utilization of the child care information data system (CCIDS) or Ohio benefits (OB)?
- The county agency shall limit access to and use of CCIDS or OB, to the extent necessary to meet the requirements of the publicly funded child care program under the Child Care and Development Block Grant Act (CCDBG) of 1990, established in section 5082 of the Omnibus Budget Reconciliation Act of 1990, 104 Stat. 1388-236 (1990), 42 U.S.C. 9858, (11/2014) and reauthorized by the CCDBG Act of 2014.
- (1) Personnel having access to CCIDS or OB shall be limited to those who have been trained in the confidentiality requirements of ODJFS, who are informed of all penalties, who have been trained in security procedures and who have signed the JFS 07078 "Code of Responsibility." ~~(rev. 6/2018)~~.
  - (2) The county agency shall monitor access to and use of CCIDS or OB to prevent and promptly identify any unauthorized use.
  - (3) The county agency shall ensure that all personnel who have access to, may have access to or are required to use CCIDS or OB are informed of applicable requirements and penalties and have been trained in security procedures.
- (D) What is the county agency responsibility to migrant families?

The county agency shall assist migrant families in obtaining appropriate documentation in order to expedite the migrant family's determination of eligibility for child care benefits.

(E) What is the county agency responsibility for the determination of eligibility for publicly funded child care?

- (1) The county agency shall document the date a valid application for publicly funded child care, defined in rule 5101:2-16-02 of the Administrative Code, is received.
- (2) The county agency shall determine eligibility no later than thirty calendar days from the date the county agency receives the valid application. The complete application and all required supporting documentation shall be retained in the agency's files.
- (3) The county agency shall not require a face-to-face interview with the caretaker if the information required for determining the caretaker's eligibility for child care is already on file with the county agency and/or the required information can be obtained through other methods.
- (4) If the county agency determines a caretaker is eligible for child care benefits, the eligibility period may begin on the date the county agency received the valid application, pursuant to rule 5101:2-16-02 of the Administrative Code. The county agency shall send the caretaker a notice of approval for child care benefits by the JFS 04074 "Notice of Approval of Your Application for Assistance" (~~rev. 6/2019~~) or its computer-generated equivalent.
- (5) The county agency ~~shall~~ is to deny or terminate a caretaker's eligibility for child care benefits, after providing hearing notice rights as required by applicable rules in division 5101:6 of the Administrative Code, if the caretaker does any of the following:
  - (a) Does not meet current eligibility, unless the caretaker is approved for continuing eligibility pursuant to rule 5101:2-16-02 of the Administrative Code.
  - (b) Has another adult caretaker available in the family who can provide ~~appropriate~~ care for the child, and no written verification has been provided to the county agency from a licensed physician, licensed psychologist, licensed psychiatrist or public children services agency (PCSA) that the caretaker cannot provide ~~appropriate~~ care for the child pursuant to rule 5101:2-16-02 of the Administrative Code.
  - (c) Does not cooperate in determining eligibility for current or for past benefits.

- (d) Does not enter into or comply with an agreement with the county agency or ODJFS to repay a child care overpayment. If an initial application is received from a caretaker who owes an overpayment from a previous PFCC benefit period, the application shall be denied unless the caretaker enters into an agreement with the county agency or ODJFS to repay the overpayment.
  - (e) Does not pay the required child care copayment unless the family makes arrangements to pay delinquent copayments.
  - (f) Owes delinquent copayments to a child care provider, unless satisfactory arrangements are made to pay such delinquent copayments.
  - (g) Requests to discontinue receiving PFCC benefits.
- (6) If the county agency determines a caretaker ineligible for child care benefits the county agency shall deny the application. The county agency shall:
- (a) Provide the caretaker with a notice of denial of an application for child care benefits by the JFS 07334 "Notice of Denial of Your Application for Assistance" (~~rev. 6/2019~~) or its computer-generated equivalent.
  - (b) Authorize child care for a full time category of care pursuant to rule 5101:2-16-06 of the Administrative Code for the period of time between the date the county agency receives the valid application and the date of denial plus five days, not to exceed a full time authorization. Authorization for payment after denial shall not be approved if a caretaker received paid services after denial in the previous twelve months from the date of the valid application. The caretaker is not to be assigned a copayment for a payment after denial authorization.
- (7) The county agency may terminate a caretaker's eligibility for child care benefits, after providing hearing notice rights as required by applicable rules in division 5101:6 of the Administrative Code. The county agency shall propose termination of child care benefits using the JFS 04065 "Prior Notice of Right to a State Hearing" (~~rev. 6/2019~~) or its computer-generated equivalent at least fifteen calendar days prior to the date of the proposed action if any of the following occur:
- (a) The county agency determines the family is no longer eligible, and the family does not qualify for continuing eligibility pursuant to rule 5101:2-16-02 of the Administrative Code.



- (b) The caretaker does not comply with the automated child care system, which includes but is not limited to use of the automated system and approval of edited attendance as necessary.
  - (c) The caretaker does not comply with a review conducted by ODJFS pursuant to rule 5101:2-16-12 of the Administrative Code.
- (8) The county agency shall not terminate child care benefits pursuant to paragraph (E)(5) of this rule if any of the following apply:
- (a) A caretaker has not participated in an education or training activity which prepares the caretaker for paid employment due to a scheduled break in the education or training activity. This scheduled break cannot exceed one quarter or one semester.
  - (b) A caretaker has not utilized child care benefits.
- (9) The county agency shall use the procedures outlined by ODJFS for transferring cases between counties when the caretaker relocates to another county.
- (10) For counties utilizing OB for child care determinations, when the application is signed with a telephonic signature, the county agency is to provide the caretaker a written copy of the summary of the information attested to on the telephonic application along with instructions on how to correct errors or omissions.
- (F) What is the county agency responsibility for informing caretakers of available child care providers?
- (1) The county agency shall allow eligible caretakers a choice from all available child care providers who are certified, licensed or approved to provide publicly funded child care.
  - (2) The county agency shall make available a current list of all certified, licensed or approved providers in the county. The county agency shall provide selected portions of the list or the complete list as requested by the caretaker to facilitate parental choice. Such lists shall include, but are not limited to:
    - (a) Reasonable access to the child's home or school.
    - (b) Reasonable access to the caretaker's place of employment, education or training.
    - (c) Reasonable access to special child care needs as specified by the family.

(G) What is the county agency responsibility for reporting all information required by ODJFS data and payment information systems?

- (1) The county agency shall transmit all data regarding child care eligibility and authorizations on a daily basis as required in the CCIDS or OB or other data systems required by ODJFS.
- (2) The county agency shall provide caretakers with a verification checklist no later than ten calendar days following the receipt of a valid application for publicly funded child care as defined in rule 5101:2-16-02 of the Administrative Code, with notification of the requirements needed to complete the eligibility determination process.
- (3) The county agency shall submit eligibility data no later than five calendar days following the date eligibility is determined or no later than five calendar days following any reported changes to a case that affect eligibility or authorizations.
- (4) The county agency shall assign each family a payment code according to the family's programmatic eligibility for publicly funded child care benefits, if the county agency is utilizing CCIDS for child care determinations.
- (5) The county agency shall issue a notice of change in child care benefits to the caretaker within ten calendar days from the date the change of circumstances was reported by the caretaker.

(H) What is the responsibility of the county agency in the re-determination/recertification process?

- (1) In the event a caretaker requests a copy of the ~~JFS 01124 "Redetermination Application for Child Care Benefits" (rev. 12/2018)~~the re-determination/recertification application, the county agency shall provide both of the following:
  - (a) The JFS 01124 if the county agency is utilizing CCIDS for child care determinations, or the JFS 07204 if the county agency is utilizing OB for child care determinations; and
  - (b) The voter registration application pursuant to this rule.
- (2) The county agency shall ~~re-determine~~determine if eligibility may be recertified for a new eligibility period by the last day of the current eligibility period.
  - (a) If the county agency determines the caretaker is eligible for benefits for a new eligibility period, the new period shall begin on the date following

the last day of the current eligibility period. The county agency shall provide notice of approval for benefits using the JFS 04074 "Notice of Approval of Your Application for Assistance" (~~rev. 6/2019~~) or its computer-generated equivalent.

(b) If the county agency determines the caretaker is ineligible for benefits for a new eligibility period, the county agency shall provide notice of denial of the application for benefits using the JFS 07334 "Notice of Denial of Your Application for Assistance" (~~rev. 6/2019~~) or its computer-generated equivalent. The eligibility shall end on the last day of the current eligibility period.

(c) The county agency ~~shall~~ is to propose termination of benefits using the JFS 04065 or its computer-generated equivalent if the caretaker fails to submit a ~~JFS 01124 and all required supporting documentation~~ any of the following fifteen calendar days prior to the end of the current eligibility period:

(i) The JFS 01124 if the county agency is utilizing CCIDS for child care determinations; or

(ii) The JFS 07204 if the county agency is utilizing OB for child care determinations; and

(iii) Household income verification and any other required supporting documentation.

(I) What is the county agency responsibility regarding the authorized representative as defined in rule 5101:2-16-01 of the Administrative Code?

(1) When the caretaker provides written notification identifying an authorized representative, the county agency is to record the name of the authorized representative in the case file.

(2) The county agency is to inform the caretaker that the family will be held liable for any overpayments issued as a result of erroneous or fraudulent information given by the authorized representative.

(J) How does the county agency process a PFCC application when the caretaker is also applying for food, cash and/or medical assistance?

(1) All PFCC joint applications for county agencies utilizing OB for child care determinations, or separate applications, for all county agencies, are to be

processed in accordance with Chapter 5104. of the Revised Code and Chapter 5101:2-16 of the Administrative Code.

- (2) No caretaker is to have PFCC benefits denied solely on the basis that an application to participate in another program has been denied or benefits under another program have been terminated without a separate determination that the caretaker failed to satisfy a PFCC eligibility requirement.
- (3) The process for a caretaker that simultaneously requests PFCC and another program in OB includes the following:

  - (a) If a caretaker is denied benefits for the other program, the caretaker is not required to resubmit another application for PFCC; and
  - (b) PFCC eligibility is to be determined in accordance with PFCC processing time frames from the date the joint application was initially accepted by the county agency.
- (4) To facilitate participation in the program, the county agency is to notify caretakers who are applying for other types of assistance that they may file a separate application for PFCC benefits independent of the application for benefits of any other program.

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5101:2-16-09

**Provider responsibilities for publicly funded child care.**

(A) Who is eligible to sign an agreement to provide publicly funded child care?

(1) A child care provider who operates a licensed child care center; a licensed type A or type B child care home; an approved Ohio department of education (ODE) licensed program; an approved child day camp; a certified in-home aide; or a regulated border state provider is eligible to sign a provider agreement.

(a) A school child or preschool program licensed by the ODE, pursuant to sections 3301.52 to 3301.59 of the Revised Code, will become eligible to sign a provider agreement after requesting approval to provide publicly funded child care services. All requests shall be made by:

(i) Submitting the JFS 01140 "Request to Provide Publicly Funded Child Care for Ohio Department of Education Programs" (~~10/2017~~) with a copy of the ODE license or the Ohio child licensing and quality system (OCLQS) generated equivalent to ODJFS.

(ii) Complying with background check requirements pursuant to rule 5101:2-12-09 of the Administrative Code.

(b) A border state provider shall register in OCLQS prior to signing a provider agreement.

(2) ~~Beginning September 1, 2020~~ Except as described in paragraph (A)(3) of this rule, a provider who operates a licensed child care program is eligible to provide publicly funded child care only if the program is rated through the step up to quality program established pursuant to section 5104.29 of the Revised Code.

(3) A provider is exempt from paragraph (A)(2) of this rule if the provider operates any of the following:

(a) A program that operates only during the summer and not for more than fifteen consecutive weeks.

(b) A program that operates only during school breaks.

(c) A program that operates only on weekday evenings, weekends, or both.

(d) A program that holds a provisional license issued under section 5104.03 of the Revised Code.

(e) A program that had its step up to quality program rating removed by the department of job and family services within the previous twelve months.

- (f) A program that is the subject of a revocation action initiated by the department, but the license has not yet been revoked.
- (4) Child care providers with a signed provider agreement shall maintain compliance with all requirements of the Child Care and Development Block Grant Act of 2014, P.L. 113-186 (11/19/2014), 128 Stat. 1971 (2014) 42 U.S.C. 9858 (CCDBG Act of 2014).
- (B) What are the provider requirements to sign an agreement for publicly funded child care services?
- (1) Providers are eligible for payment after they complete the provider agreement with the Ohio department of job and family services (ODJFS) and have entered all required information in the automated system.
    - (a) The provider agreement is effective on the date it is signed and submitted by the provider or the date the provider becomes an eligible provider pursuant to paragraph (A) of this rule, whichever is later.
    - (b) The provider agreement as entered into with ODJFS may be terminated if ODJFS determines misuse of publicly funded child care or the automated child care system.
    - (c) The provider agreement as entered into with ODJFS, may be terminated in accordance with the terms contained in the agreement.
    - (d) The provider agreement shall be terminated if the eligible provider fails to maintain approval as an eligible provider.
    - (e) Providers of publicly funded child care with a valid provider agreement shall not be considered employees of ODJFS but shall be considered independent contractors who are responsible for the requirements of self-employment.
  - (2) ODJFS shall pay eligible child care providers for publicly funded child care services provided to eligible caretakers authorized to that provider.
    - (a) An eligible child care provider who provides child care services for a caretaker who is potentially eligible for publicly funded child care benefits shall be paid for child care services if an authorization is created by the county agency pursuant to rule 5101:2-16-06 of the Administrative Code.

(b) Payment for publicly funded child care services shall be contingent upon the availability and appropriation of state and federal funds.

(C) How shall a provider track attendance for publicly funded child care services?

- (1) Child care providers shall utilize the automated child care system to track attendance data for caretakers who have applied or have been determined eligible for publicly funded child care, in accordance with procedures outlined by ODJFS.
- (2) Child care providers or a person acting in any capacity for the provider shall not use the personal identification information created by the caretaker or a caretaker's designee/sponsor to track or approve attendance in the automated child care system.
- (3) The provider shall be responsible for the cost of replacement or repair of the hardware required for use of the automated child care system. Recoupment may occur through the payment adjustment process.

(D) How are school hours deducted in the automated system for school-age children being cared for by a provider?

- (1) The provider shall enter each school-age child's current school schedule in the automated system on or before the first day of the school year as defined in rule 5101:2-16-01 of the Administrative Code or the child's first week of attendance if authorization is after the first day of the school year. Each school schedule shall include all of the school year, but may begin earlier and/or end later.
- (2) The schedule set by the provider for each school-age child shall be used to deduct the hours in which that child is in school and not at the child care program.

(E) How shall a provider submit attendance data for child care services provided?

A child care provider shall submit all data for the calculation of payments in accordance with instructions provided by ODJFS.

- (1) Attendance data shall be submitted for payment after the close of the service week and no later than four weeks from the last day of the service week or four weeks from the last day of the week the authorization is provided to the automated system, whichever is later.
- (2) Only complete data (days with both an in and out time for the child receiving care) may be submitted.



- (3) Each school-age child shall have an associated school schedule set by the provider pursuant to paragraph (D) of this rule before the child's attendance may be submitted for payment.
  - (4) Changes to attendance data shall be submitted with caretaker approval.
  - (5) The provider may track attendance or make changes to attendance data in the automated child care system without caretaker approval if all of the following apply:
    - (a) There has been a loss of contact with the caretaker for five consecutive calendar days from the last day of attendance.
    - (b) The provider has notified the county agency of the loss of contact.
    - (c) The authorization to the provider has been ended.
    - (d) Any new or changed attendance is limited to no more than five consecutive days.
  - (6) Once attendance has been submitted, the provider has until the following Saturday to recall the submitted attendance in order to make a change to the attendance data. Any changes made shall require caretaker approval pursuant to paragraphs ~~(D)(3) and (D)(4)~~ (E)(4) and (E)(5) of this rule prior to resubmitting the attendance.
  - (7) ODJFS will begin processing the payment on the Sunday following the submission of the attendance data.
  - (8) If the attendance has not been submitted pursuant to the time line in paragraph ~~(D)~~ (E) of this rule, ODJFS shall automatically process any complete attendance data for payment. No new attendance data may be submitted after this date.
  - (9) ODJFS shall not pay for a child's attendance submitted by more than one provider for the same date and time.
- (F) How does a provider receive payment when a caretaker's application for publicly funded child care has been denied?
- (1) Child care providers shall submit attendance data pursuant to paragraphs (C) and ~~(D)~~ (E) of this rule when notification has been received that a caretaker's application for child care has been denied.

- (2) The provider may appeal a denial notice of eligibility for payment after denial within fifteen days from the date of denial if either of the following apply:
    - (a) Payment was denied due to a caretaker's incomplete application.
    - (b) Payment was denied because the provider did not have a valid provider agreement when services were provided.
  - (3) Attendance submitted for payment after denial shall not include absent days or professional development days.
- (G) How does a provider request a payment adjustment after a payment has been issued?
- (1) The provider shall submit a request for payment adjustment in the automated child care system within four weeks of the payment date. No new attendance may be submitted for payment adjustments.
  - (2) If the incorrect payment amount is because of a county agency data entry error, the provider shall contact the county agency to request correction of the error before the provider submits the request for payment adjustment. ODJFS shall not process the request for payment adjustment until the error is corrected by the county agency. The request for adjustment may exceed four weeks from the original payment date.
- (H) What are the provider's responsibilities to collect a copayment?
- (1) The provider shall establish a written and signed agreement with the caretaker for payment of the child's assigned copayment.
  - (2) If an assigned copayment is delinquent more than two weeks from the date established in the written copayment agreement, the provider shall submit a record of the delinquent copayment to the county agency no later than three weeks from the date the copayment was due.
  - (3) If a provider fails to inform the county agency of the delinquent copayment, the caretaker shall be responsible for any delinquent copayments reported by the provider for up to the previous three weeks from the date the county agency was notified.
- (I) What is the process for requesting payment for services provided prior to December 16, 2018?

- (1) Child care providers shall submit to ODJFS the JFS 01261 "Publicly Funded Child Care Manual Claim for Attendance" (~~rev. 9/2014~~) for attendance not recorded in the Ohio electronic child care (Ohio ECC) system for the following reasons:
    - (a) Authorization made prior to the back swipe period.
    - (b) A bureau of state hearings decision.
    - (c) The point of services (POS) device was not installed when services were provided.
    - (d) A caretaker is awaiting a swipe card.
    - (e) A caretaker withdraws without notice.
  - (2) The child care provider shall submit the JFS 01261 no later than seven weeks from the week of service being submitted unless otherwise determined by ODJFS.
  - (3) ODJFS shall reject the JFS 01261 for care provided during the back swipe period.
  - (4) Child care providers shall submit to ODJFS the JFS 01292 "Publicly Funded Child Care Request for Ohio ECC Payment Adjustment" (~~rev. 7/2017~~) when a payment has been issued and needs to be corrected no later than seven weeks from the week of service unless otherwise determined by the bureau of state hearings.
  - (5) Child care providers shall submit to ODJFS the JFS 01211 "Request for Payment of Publicly Funded Child Care Services Provided for a Denial of Application" (~~rev. 9/2014~~) when notification has been received that a caretaker's application for child care has been denied.
- (J) What is the process for requesting a payment enhancement when a provider must make accommodations to care for a child with special needs?
- (1) A child care provider may submit a request for a payment enhancement when accommodations must be made to care for a child who meets the definition of special needs as defined in rule 5101:2-16-01 of the Administrative Code.
    - (a) To request this payment rate, the provider shall submit a completed JFS 01231 "Request for Payment Rate for Special Needs Child Care" (~~rev. 10/2019~~) to ODJFS.
    - (b) ODJFS will notify the provider with verification of the approved amount, the effective date of the change in payment rate, or if the request is denied.

- (c) An approved payment enhancement shall be in effect for twelve months for a child authorized to receive publicly funded child care at the approved provider.
- (2) If state and/or federal funds are not available for the purchase of publicly funded child care services, ODJFS shall reserve the right to deny all requests.
- (3) The granting of this payment rate by ODJFS shall not be construed as constituting precedence for the granting of any other payment changes or the subsequent renewal of a rate. All requests shall be considered on an individual basis.

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5101:2-16-10

**Payment rates and procedures for providers of publicly funded child care services.**

- (A) How are payment rates established in the publicly funded child care program?
- (1) Payment rates are based on a market rate survey completed by the Ohio department of job and family services (ODJFS) to providers in the state of Ohio.
  - (2) Payment rates shall apply to all providers of publicly funded child care.
- (B) What is the payment rate for a provider not participating in step up to quality (SUTQ)?
- (1) The payment rate for a provider not participating in SUTQ shall be the lower of these two:
    - (a) The rate shown in appendix A to this rule for non-rated programs in the provider's county of location.
    - (b) The provider's customary rate to the public.
  - (2) The rate determined in paragraph (B)(1) of this rule shall be the base rate used to calculate any applicable additional payment amounts pursuant to paragraphs (D), (F) and (G) of this rule.
- (C) What is the payment rate for a provider participating in SUTQ?
- (1) The base payment rate for a provider participating in SUTQ shall be the lower of these two:
    - (a) The rate shown in appendix A to this rule for rated programs in the provider's county of location.
    - (b) The provider's customary rate to the public. If the customary rate is used, an additional four per cent will be added, not to exceed the rated appendix.
  - (2) Once the rate is determined in paragraph (C)(1) of this rule, an additional per cent shall be added, as follows:
    - (a) One-star rated programs shall be paid an additional five per cent.
    - (b) Two-star rated programs shall be paid an additional eighteen per cent.
    - (c) Three-star rated programs shall be paid an additional twenty-one per cent.
    - (d) Four-star rated programs shall be paid an additional twenty-nine per cent.

(e) Five-star rated programs shall be paid an additional thirty-five per cent.

(D) What is the payment rate for accredited providers?

(1) Providers who are accredited by an ODJFS approved accrediting body as listed at <http://jfs.ohio.gov/cdc/childcare.stm> shall be paid an additional ten per cent of the applicable payment rate established in paragraph (B)(1) of this rule or paragraph (C)(1) of this rule. This rate shall apply for all children receiving publicly funded child care services.

(2) Providers who are accredited and also participating in SUTQ shall be paid either the per cent additional payment in paragraph (C)(2) of this rule or the per cent additional payment in paragraph (D)(1) of this rule, whichever is higher.

(E) What is the difference between a school-age rate and a summer school-age rate?

(1) School-age rates shall be in effect during the school year as defined in rule 5101:2-16-01 of the Administrative Code.

(2) Summer school-age rates shall be in effect outside of the school year as defined in rule 5101:2-16-01 of the Administrative Code.

(F) What is the compensation for child care services provided during non-traditional hours?

(1) Providers who care for children during non-traditional hours shall be paid an additional five per cent of the applicable payment rate established in paragraph (B)(1) or (C)(1) of this rule.

(2) This rate shall apply to the child for all hours of care during a week when any non-traditional hours of care are provided.

(3) The payment shall not exceed the provider's customary charge to the public.

(4) Non-traditional hours are the hours between seven p.m. and six a.m. on weekdays, and between twelve a.m. Saturday and six a.m. Monday.

(5) Non-traditional hours include any hours of care provided on New Year's day, Martin Luther King Jr. day, Memorial day, Independence day, Labor day, Thanksgiving day and Christmas day.

(G) How are providers compensated for the care of children with special needs?

(1) Providers who care for a child that the caretaker and the county agency have identified as having special needs pursuant to rule 5101:2-16-02 of the

Administrative Code shall be paid an additional five per cent of the applicable payment rate established in paragraph (B)(1) or (C)(1) of this rule. The payment shall not exceed the provider's customary charge to the public.

- (2) Providers who make special accommodations for the care of a child with special needs may receive twice the amount of the applicable payment rate established in paragraph (B)(1) or (C)(1) of this rule if approved pursuant to rule 5101:2-16-09 of the Administrative Code.
- (3) Payment enhancements or additional percentages shall only apply to the hours of care for the child with special needs.

(H) What time increments are used for the payment of publicly funded child care services?

- (1) Time increments are broken down into weekly categories based on the total number of hours per week that each child is authorized to receive publicly funded child care services, pursuant to rule 5101:2-16-06 of the Administrative Code. The categories of payment are as follows:
  - (a) An hourly payment is for hours of care totaling less than seven hours per week.
  - (b) A part-time payment is for hours of care totaling seven hours to less than twenty-five hours per week.
  - (c) A full-time payment is for hours of care totaling twenty-five hours to sixty hours per week.
  - (d) A full-time plus payment is for hours of care totaling more than sixty hours per week.
  - (e) A week is defined as the seven-day period from twelve a.m. Sunday to fifty-nine minutes after eleven p.m. on Saturday.
- (2) Payment shall be calculated using the total number of child care hours per week, that have been approved by the caretaker, if applicable, and submitted by the provider in the automated child care system.
  - (a) The total number of weekly hours of care received will be matched with the associated category and the provider will receive the payment rate for that category of care, up to the child's category of authorization.
  - (b) Payment shall not be made for hours that exceed the child's category of authorization.



(I) Are providers compensated for registration fees?

Providers may receive registration fees for children receiving publicly funded child care according to the following criteria:

- (1) Annually, a provider with a valid provider agreement as of January first shall receive a twenty-five dollar registration fee for each child who received publicly funded child care from the provider in the previous calendar year. For approved day camps, the camp shall have had a valid provider agreement as of August thirtieth of the previous year.
- (2) The child must have received publicly funded child care from the provider for at least one day during January through December of the previous year.

(J) Is a provider compensated when a child is absent from the program?

- (1) A child is eligible for a maximum of twenty absent days during each six-month period of January through June and July through December of each state fiscal year.
- (2) Absent days are defined in rule 5101:2-16-01 of the Administrative Code.
- (3) A provider may be paid for an absent day for which a child is eligible. An absent day shall not be paid prior to actual attendance at the authorized program. The attendance shall be documented by a recorded in time and a recorded out time, and shall have occurred on any day in the previous rolling twelve months.
- (4) The value of an absent day is based on the child's authorized hours for care, as follows:
  - (a) For a full-time or a full-time plus authorization, the value of an absent day is eight hours.
  - (b) For a part-time or an hourly authorization, the value of an absent day is five hours.

(K) Are providers compensated for staff professional development days?

- (1) Providers are eligible for two professional development days per state fiscal year. A fiscal year is defined as July first through June thirtieth.
- (2) Professional development days are defined in rule 5101:2-16-01 of the Administrative Code.

- (3) Professional development days cannot be used on two consecutive calendar days or in two consecutive calendar months.
- (4) Professional development days shall not be used on any holiday listed in paragraph (F)(5) of this rule.
- (5) The value of a professional development day is based on a child's authorized hours for care, as follows:
  - (a) For a full-time or a full-time plus authorization, the value of a professional development day is eight hours.
  - (b) For a part-time or an hourly authorization, the value of a professional development day is five hours.

(L) What is not included in the payment for publicly funded child care services?

The provider's publicly funded child care payment shall not include:

- (1) A child's copayment amount pursuant to rule 5101:2-16-05 of the Administrative Code.
- (2) Payment for services provided during the hours that a child is in care in another federal or state funded program (including, but not limited to, head start, early head start, or the early childhood education program).
- (3) Payment for services provided during the hours that a school-age child would typically be in attendance at a primary or secondary school.
  - (a) Payment will include time that a school-age child is participating in remote learning, including the remote portion of a hybrid school model, while in child care.
  - (b) Payment will not include time that the child is participating in instructional services which supplant or duplicate the academic program of any school.
  - (c) Payment will not include care during the school-day if the parent has the option to send the school-age child to in-person learning, including a hybrid school model, and instead opted for only remote learning.

(M) What are the requirements regarding fees that a provider may charge to the caretaker?

- (1) A provider shall make a caretaker aware of fees not covered by publicly funded child care payments for which the caretaker may be responsible.

- (a) A provider shall have a signed agreement with the caretaker for the payment of these fees.
  - (b) Such fees may include:
    - (i) Late fees.
    - (ii) Activity fees.
    - (iii) Transportation fees.
    - (iv) Charges for absent days which exceed those eligible for payment from ODJFS.
    - (v) Charges for hours of care that exceed those authorized.
  - (2) A provider shall not ask a caretaker to pay the difference between the provider's payment rate and the provider's customary charge to the public when the customary charge is higher.
  - (3) A provider shall not ask a caretaker to pay the difference between the registration fee paid for the child by ODJFS and the provider's customary registration fee charge to the public when the customary registration fee is higher.
- (N) What are the payment rates for in-home aides that provide publicly funded child care services?

An in-home aide is the only provider of publicly funded child care services who may provide child care in the child's own home. Payment rates for in-home aides ~~shall~~ to be determined according to the following:

- (1) An in-home aide shall be paid an hourly rate that is equal to the state minimum wage for forty or fewer hours in a week. An in-home aide pilot program may be operated in participating counties detailed in a child care letter published by ODJFS.
  - (a) An in-home aide in a participating county may be paid an enhanced hourly rate of thirteen dollars for forty or fewer hours in a week when at least one child qualifies for special needs child care as determined pursuant to this chapter or at least one child needs care during non-traditional hours is served.
  - (b) A rate of one and one-half times the rate in paragraph (N)(1)(a) of this rule will be paid for hours in excess of forty in a week.

- (c) This pilot will exist for the time period specified in a child care letter published by ODJFS or until funding is no longer available, whichever is sooner.
  - (2) A rate of one and one-half times the state minimum wage shall be paid for hours in excess of forty in a week.
  - (3) The total payment shall include child care services provided to all of the authorized child(ren) in the caretaker's home.
  - (4) An in-home aide shall not claim absent days or professional development days for children receiving publicly funded child care services.
  - (5) An in-home aide is not eligible for any payment enhancements or additional percentages to the payment rate.
- (O) Are providers compensated for pandemic days?
- (1) A pandemic day means a day in which the provider would normally provide child care for currently enrolled children, but were advised to close by the Ohio department of health (ODH) or the local health department or closed in compliance with guidance from ODH and the United States centers for disease control and prevention (CDC) as a result of the COVID-19 pandemic.
  - (2) Providers are eligible for thirty-five pandemic days per fiscal year.
  - (3) The provider will provide ODJFS written documentation of the advisory to close. Failure to provide the documentation may result in the pandemic days not being paid.
  - (4) The value of a pandemic day is based on a child's authorized hours for care, as follows:
    - (a) For a full-time or a full-time plus authorization, the value of a pandemic day is eight hours.
    - (b) For a part-time or an hourly authorization, the value of a pandemic day is five hours.

Effective: 2/27/2022

Five Year Review (FYR) Dates: 10/20/2024

CERTIFIED ELECTRONICALLY

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Certification

02/17/2022

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Date

Promulgated Under:	119.03
Statutory Authority:	5104.30, 5104.38, 5104.39
Rule Amplifies:	5104.30, 5104.35, 5104.38, 5104.39
Prior Effective Dates:	07/01/1989 (Emer.), 09/28/1989, 04/01/1990 (Emer.), 07/01/1990 (Emer.), 09/30/1990, 05/01/1991 (Emer.), 07/01/1991, 11/01/1991 (Emer.), 01/20/1992, 07/06/1992 (Emer.), 10/01/1992, 01/01/1994, 10/01/1997 (Emer.), 12/30/1997, 05/08/1998 (Emer.), 08/01/1998, 06/10/2000, 01/01/2001, 02/22/2002, 06/09/2003, 07/01/2005 (Emer.), 09/26/2005, 01/13/2006 (Emer.), 04/13/2006, 01/01/2007, 03/30/2007 (Emer.), 06/28/2007, 07/01/2008, 07/23/2009 (Emer.), 08/12/2009 (Emer.), 11/08/2009, 03/28/2010, 05/01/2011, 07/29/2011 (Emer.), 10/27/2011, 10/01/2013, 07/10/2015, 06/26/2016, 12/31/2016, 12/16/2018, 10/20/2019, 03/13/2020 (Emer.), 05/29/2020 (Emer.), 08/25/2020 (Emer.), 12/11/2020 (Emer.), 04/01/2021

# Category 1 - Non-Rated

Weekly Payment Rates for Providers of Publicly Funded Child Care Not Participating in SUTQ

<b>Center, Day Camps, Type A Homes, ODE Programs</b>			
	Full Time	Part Time	Hourly
Infant	\$146.25	\$94.40	\$6.56
Toddler	\$134.99	\$85.13	\$5.55
Pre-School	\$125.00	\$70.00	\$4.18
School Age	\$65.00	\$44.61	\$4.11
School Age Summer	\$110.99	\$65.00	\$4.19

<b>Licensed Type B Homes</b>			
	Full Time	Part Time	Hourly
Infant	\$140.00	\$77.78	\$4.47
Toddler	\$130.00	\$85.48	\$3.50
Pre-School	\$120.00	\$78.93	\$3.71
School Age	\$104.00	\$71.69	\$3.25
School Age Summer	\$120.03	\$75.00	\$3.69

BROWN

CHAMPAIGN

FAYETTE

FULTON

GALLIA

GUERNSEY

HOCKING

MERCER

MUSKINGUM

PAULDING

PUTNAM

ROSS

SCIOTO

VAN WERT

VINTON

WILLIAMS

WYANDOT

BORDER STATE PROVIDERS

# Category 1 - Rated

Weekly Payment Rates for Providers of Publicly Funded Child Care Participating in SUTQ

<b>Center, Type A Homes, ODE Programs</b>			
	Full Time	Part Time	Hourly
Infant	\$152.10	\$98.18	\$6.82
Toddler	\$140.39	\$88.54	\$5.77
Pre-School	\$130.00	\$72.80	\$4.35
School Age	\$67.60	\$46.39	\$4.27
School Age Summer	\$115.43	\$67.60	\$4.36

<b>Licensed Type B Homes</b>			
	Full Time	Part Time	Hourly
Infant	\$145.60	\$80.89	\$4.65
Toddler	\$135.20	\$88.90	\$3.64
Pre-School	\$124.80	\$82.09	\$3.86
School Age	\$108.16	\$74.56	\$3.38
School Age Summer	\$124.83	\$78.00	\$3.84

BROWN

CHAMPAIGN

FAYETTE

FULTON

GALLIA

GUERNSEY

HOCKING

MERCER

MUSKIN

PAULDING

PUTNAM

ROSS

SCIOTO

VAN WERT

VINTON

WILLIAMS

WYANDOT

BORDER STATE PROVIDERS

# Category 2 - Non-Rated

Weekly Payment Rates for Providers of Publicly Funded Child Care Not Participating in SUTQ

Center, Day Camps, Type A Homes, ODE Programs			
	Full Time	Part Time	Hourly
Infant	\$180.00	\$112.01	\$7.81
Toddler	\$165.00	\$99.38	\$7.00
Pre-School	\$145.77	\$82.50	\$5.18
School Age	\$100.00	\$58.48	\$5.00
School Age Summer	\$136.56	\$83.75	\$5.94

Licensed Type B Homes			
	Full Time	Part Time	Hourly
Infant	\$149.71	\$100.00	\$5.44
Toddler	\$149.00	\$97.00	\$5.02
Pre-School	\$130.00	\$94.98	\$5.66
School Age	\$110.00	\$76.74	\$5.00
School Age Summer	\$125.00	\$93.00	\$6.00

ADAMS

ALLEN

ASHLAND

ASHTABULA

CARROLL

CLARK

CLINTON

COLUMBIANA

COSHOCTON

CRAWFORD

DARKE

DEFIANCE

ERIE

HANCOCK

HARDIN

HENRY

HIGHLAND

HOLMES

HURON

JACKSON

LAWRENCE

LICKING

LOGAN

MADISON

MEIGS

MIAMI

PERRY

PICKAWAY

PIKE

PREBLE

RICHLAND

SANDUSKY

SENECA

SHELBY

STARK

TUSCARAWAS

WASHINGTON

WAYNE



# Category 2 - Rated

Weekly Payment Rates for Providers of Publicly Funded Child Care Participating in SUTQ

<b>Center, Type A Homes, ODE Programs</b>			
	Full Time	Part Time	Hourly
Infant	\$187.20	\$116.49	\$8.12
Toddler	\$171.60	\$103.36	\$7.28
Pre-School	\$151.60	\$85.80	\$5.39
School Age	\$104.00	\$60.82	\$5.20
School Age Summer	\$142.02	\$87.10	\$6.18

<b>Licensed Type B Homes</b>			
	Full Time	Part Time	Hourly
Infant	\$155.70	\$104.00	\$5.66
Toddler	\$154.96	\$100.88	\$5.22
Pre-School	\$135.20	\$98.78	\$5.89
School Age	\$114.40	\$79.81	\$5.20
School Age Summer	\$130.00	\$96.72	\$6.24

ADAMS

ALLEN

ASHLAND

ASHTABULA

CARROLL

CLARK

CLINTON

COLUMBIANA

COSHOCTON

CRAWFORD

DARKE

DEFIANCE

ERIE

HANCOCK

HARDIN

HENRY

HIGHLAND

HOLMES

HURON

JACKSON

LAWRENCE

LICKING

LOGAN

MADISON

MEIGS

MIAMI

PERRY

PICKAWAY

PIKE

PREBLE

RICHLAND

SANDUSKY

SENECA

SHELBY

STARK

TUSCARAWAS

WASHINGTON

WAYNE

# Category 3 - Non-Rated

Weekly Payment Rates for Providers of Publicly Funded Child Care Not Participating in SUTQ

Center, Day Camps, Type A Homes, ODE Programs			
	Full Time	Part Time	Hourly
Infant	\$229.32	\$150.00	\$7.28
Toddler	\$200.00	\$135.00	\$11.82
Pre-School	\$180.00	\$113.34	\$6.25
School Age	\$110.00	\$73.11	\$6.00
School Age Summer	\$163.80	\$105.37	\$6.24

Licensed Type B Homes			
	Full Time	Part Time	Hourly
Infant	\$150.00	\$110.73	\$6.00
Toddler	\$150.00	\$100.00	\$6.00
Pre-School	\$135.00	\$96.99	\$5.96
School Age	\$120.00	\$80.00	\$5.75
School Age Summer	\$125.41	\$96.58	\$6.18

ATHENS

AUGLAIZE

BELMONT

BUTLER

CLERMONT

CUYAHOGA

DELAWARE

FAIRFIELD

FRANKLIN

GEAUGA

GREENE

HAMILTON

HARRISON

JEFFERSON

KNOX

LAKE

LORAIN

LUCAS

MAHONING

MARION

MEDINA

MONROE

MONTGOMERY

MORGAN

MORROW

NOBLE

OTTAWA

PORTAGE

SUMMIT

TRUMBULL

UNION

WARREN

WOOD

# Category 3- Rated

Weekly Payment Rates for Providers of Publicly Funded Child Care Participating in SUTQ

Center, Type A Homes, ODE Programs			
	Full Time	Part Time	Hourly
Infant	\$238.49	\$156.00	\$7.57
Toddler	\$208.00	\$140.40	\$12.29
Pre-School	\$187.20	\$117.87	\$6.50
School Age	\$114.40	\$76.03	\$6.24
School Age Summer	\$170.35	\$109.58	\$6.49

Licensed Type B Homes			
	Full Time	Part Time	Hourly
Infant	\$156.00	\$115.16	\$6.24
Toddler	\$156.00	\$104.00	\$6.24
Pre-School	\$140.40	\$100.87	\$6.20
School Age	\$124.80	\$83.20	\$5.98
School Age Summer	\$130.43	\$100.44	\$6.43

ATHENS

AUGLAIZE

BELMONT

BUTLER

CLERMONT

CUYAHOGA

DELAWARE

FAIRFIELD

FRANKLIN

GEAUGA

GREENE

HAMILTON

HARRISON

JEFFERSON

KNOX

LAKE

LORAIN

LUCAS

MAHONING

MARION

MEDINA

MONROE

MONTGOMERY

MORGAN

MORROW

NOBLE

OTTAWA

PORTAGE

SUMMIT

TRUMBULL

UNION

WARREN

WOOD

# Category 1 - Non-Rated

Weekly Payment Rates for Providers of Publicly Funded Child Care Not Participating in SUTQ

Center, Day Camps, Type A Homes, ODE Programs			
	Full Time	Part Time	Hourly
Infant	\$143.31	\$94.40	\$6.56
Toddler	\$123.47	\$81.42	\$5.55
Pre-School	\$109.96	\$60.78	\$3.64
School Age	\$61.50	\$43.17	\$3.23
School Age Summer	\$104.96	\$62.50	\$2.90

Licensed Type B Homes			
	Full Time	Part Time	Hourly
Infant	\$134.28	\$77.37	\$4.42
Toddler	\$124.47	\$85.48	\$3.25
Pre-School	\$114.68	\$78.93	\$3.53
School Age	\$100.75	\$71.69	\$3.00
School Age Summer	\$114.31	\$71.74	\$3.45

BROWN

CHAMPAIGN

CRAWFORD

DEFIANCE

FAYETTE

FULTON

GALLIA

GUERNSEY

HOCKING

MERCER

MUSKINGUM

PAULDING

PUTNAM

ROSS

SCIOTO

TUSCARAWAS

VAN WERT

VINTON

WILLIAMS

WYANDOT

BORDER STATE PROVIDERS

# Category 1 - Rated

Weekly Payment Rates for Providers of Publicly Funded Child Care Participating in SUTQ

<b>Center and Type A Homes</b>			
	Full Time	Part Time	Hourly
Infant	\$149.04	\$98.18	\$6.82
Toddler	\$128.41	\$84.68	\$5.77
Pre-School	\$114.36	\$63.21	\$3.79
School Age	\$63.96	\$44.90	\$3.36
School Age Summer	\$109.16	\$65.00	\$3.02

<b>Licensed Type B Homes</b>			
	Full Time	Part Week	Hourly
Infant	\$139.65	\$80.46	\$4.60
Toddler	\$129.45	\$88.90	\$3.38
Pre-School	\$119.27	\$82.09	\$3.67
School Age	\$104.78	\$74.56	\$3.12
School Age Summer	\$118.88	\$74.61	\$3.59

BROWN

CHAMPAIGN

CRAWFORD

DEFIANCE

FAYETTE

FULTON

GALLIA

GUERNSEY

HOCKING

MERCER

MUSKINGUM

PAULDING

PUTNAM

ROSS

SCIOTO

TUSCARAWAS

VAN WERT

VINTON

WILLIAMS

WYANDOT

BORDER STATE PROVIDERS

# Category 2 - Non-Rated

Weekly Payment Rates for Providers of Publicly Funded Child Care Not Participating in SUTQ

Center, Day Camps, Type A Homes, ODE Programs			
	Full Time	Part Time	Hourly
Infant	\$164.61	\$112.01	\$7.81
Toddler	\$150.51	\$94.44	\$5.89
Pre-School	\$131.57	\$70.04	\$4.33
School Age	\$75.22	\$58.48	\$4.75
School Age Summer	\$120.12	\$83.75	\$5.41

Licensed Type B Homes			
	Full Time	Part Time	Hourly
Infant	\$138.45	\$80.00	\$5.10
Toddler	\$130.00	\$87.74	\$4.60
Pre-School	\$119.50	\$91.31	\$5.23
School Age	\$100.00	\$71.20	\$3.71
School Age Summer	\$118.88	\$79.07	\$5.71

ADAMS

ALLEN

ASHLAND

ASHTABULA

ATHENS

CARROLL

CLARK

CLINTON

COLUMBIANA

COSHOCTON

DARKE

ERIE

HANCOCK

HARDIN

HENRY

HIGHLAND

HOLMES

HURON

JACKSON

LAWRENCE

LICKING

LOGAN

MADISON

MEIGS

MIAMI

MORROW

PERRY

PICKAWAY

PIKE

PREBLE

RICHLAND

SANDUSKY

SENECA

SHELBY

STARK

UNION

WASHINGTON

WAYNE

# Category 2 - Rated

Weekly Payment Rates for Providers of Publicly Funded Child Care Participating in SUTQ

Center and Type A Homes			
	Full Time	Part Time	Hourly
Infant	\$171.19	\$116.49	\$8.12
Toddler	\$156.53	\$98.22	\$6.13
Pre-School	\$136.83	\$72.84	\$4.50
School Age	\$78.23	\$60.82	\$4.94
School Age Summer	\$124.92	\$87.10	\$5.63

Licensed Type B Homes			
	Full Time	Part Time	Hourly
Infant	\$143.99	\$83.20	\$5.30
Toddler	\$135.20	\$91.25	\$4.78
Pre-School	\$124.28	\$94.96	\$5.44
School Age	\$104.00	\$74.05	\$3.86
School Age Summer	\$123.64	\$82.23	\$5.94

ADAMS

ALLEN

ASHLAND

ASHTABULA

ATHENS

CARROLL

CLARK

CLINTON

COLUMBIANA

COSHOCTON

DARKE

ERIE

HANCOCK

HARDIN

HENRY

HIGHLAND

HOLMES

HURON

JACKSON

LAWRENCE

LICKING

LOGAN

MADISON

MEIGS

MIAMI

MORROW

PERRY

PICKAWAY

PIKE

PREBLE

RICHLAND

SANDUSKY

SENECA

SHELBY

STARK

UNION

WASHINGTON

WAYNE

# Category 3 - Non-Rated

Weekly Payment Rates for Providers of Publicly Funded Child Care Not Participating in SUTC

<b>Center, Day Camps, Type A Homes, ODE Programs</b>			
	Full Time	Part Time	Hourly
Infant	\$210.00	\$135.00	\$7.00
Toddler	\$188.05	\$115.00	\$11.82
Pre-School	\$164.51	\$90.00	\$6.00
School Age	\$93.46	\$62.12	\$5.48
School Age Summer	\$150.00	\$95.00	\$6.00

<b>Licensed Type B Homes</b>		
	Full Time	Part Time
Infant	\$143.29	\$106.47
Toddler	\$143.79	\$90.00
Pre-School	\$123.50	\$89.34
School Age	\$100.00	\$66.31
School Age Summer	\$118.00	\$93.70

AUGLAIZE

BELMONT

BUTLER

CLERMONT

CUYAHOGA

DELAWARE

FAIRFIELD

FRANKLIN

GEAUGA

GREENE

HAMILTON

HARRISON

JEFFERSON

KNOX

LAKE

LORAIN

LUCAS

MAHONING

MARION

MEDINA

MONROE

MONTGOMERY

MORGAN

NOBLE

OTTAWA

PORTAGE

SUMMIT

TRUMBULL

WARREN

WOOD



2

Hourly
\$5.24
\$5.00
\$5.44
\$5.53
\$5.94

# Category 3- Rated

Weekly Payment Rates for Providers of Publicly Funded Child Care Participating in SUTQ

Center and Type A Homes			
	Full Time	Part Time	Hourly
Infant	\$218.40	\$140.40	\$7.28
Toddler	\$195.57	\$119.60	\$12.29
Pre-School	\$171.09	\$93.60	\$6.24
School Age	\$97.20	\$64.60	\$5.70
School Age Summer	\$156.00	\$98.80	\$6.24

Licensed Type B Homes			
	Full Time	Part Time	Hourly
Infant	\$149.02	\$110.73	\$5.45
Toddler	\$149.54	\$93.60	\$5.20
Pre-School	\$128.44	\$92.91	\$5.66
School Age	\$104.00	\$68.96	\$5.75
School Age Summer	\$122.72	\$97.45	\$6.18

AUGLAIZE

BELMONT

BUTLER

CLERMONT

CUYAHOGA

DELAWARE

FAIRFIELD

FRANKLIN

GEAUGA

GREENE

HAMILTON

HARRISON

JEFFERSON

KNOX

LAKE

LORAIN

LUCAS

MAHONING

MARION

MEDINA

MONROE

MONTGOMERY

MORGAN

NOBLE

OTTAWA

PORTAGE

SUMMIT

TRUMBULL

WARREN

WOOD