

ELIGIBLE PROVIDERS

Clients have the right to choose the type of child care provider they wish to use.

Care must be provided in Michigan by an eligible provider. Eligible providers are:

- Child care centers.
- Group child care homes.
- Family child care homes.
- License-Exempt facilities.
- Unlicensed providers.

Licensed/ Registered Providers

Child care centers and group child care homes must be licensed and family child care homes must be registered by BCAL, in order to receive department payment.

License-Exempt Providers

Certain child care centers and homes which provide child care do not require licensure under 1973 PA 116. These are facilities where all parents are on site and readily available and centers, group child care homes and family child care homes located on federal land.

License-Exempt Enrollment Process

In order for a license-exempt provider to be enrolled, the DHS-2032, License-Exempt Provider Child Care Application, must be completed and returned to the local office. The local office will fax the application to CDC Policy at 517-241-8679. CDC Policy will:

- Enroll the license-exempt provider using the application receipt date as the service begin date.
- Send notification to the provider and the local office.
- Complete an annual follow-up.

Unlicensed Providers

An unlicensed provider is an adult who is 18 years or older, enrolled by the local office or CDC Policy to provide care for up to four children at a time or up to six children, if all children live at the same address or if all children are siblings, and meets one of the following categories:

- Is providing care where the child lives.
- Is providing care in the provider's home, not the home of the child, and is related to the child by blood, marriage or adoption as a:
 - Grandparent/great-grandparent.
 - Aunt/great-aunt.
 - Uncle/great-uncle.
 - Sibling.

A divorce severs/terminates a relationship gained through marriage.

Note: Unlicensed providers who are also licensed or registered by BCAL as a family or group child care home, should be paid as a family or group child care home, not as an unlicensed provider. A DHS-220, Child Development and Care Unlicensed Provider Application, is only required for a licensed or registered provider who provides care in the home of the child, if the provider does not live with the child.

INDIVIDUALS WHO MAY NOT RECEIVE PAYMENT FOR CARE

Clients are not eligible for CDC services for care provided by any of the following persons:

- A member of the CDC program group.
- The applicant/client.
- The applicant/client's spouse who lives in the home.
- The parent of the child(ren) or a legal guardian who is not a member of the CDC program group.
- A home help provider who is also providing adult home help at the same time as child care is being provided.
- Individuals on central registry determined to be responsible for the neglect or abuse of a child(ren) or convicted of a crime listed in the crime codes exhibit.
- A CDC program group member, applicant or applicant's spouse who owns in whole or part the child care center, group or family child care home where the child care is provided.

INFORMATION SHARED WITH PROVIDERS

Bridges sends a DHS-198, Child Development and Care Provider Certificate/Notice of Authorization, to the provider when CDC services are authorized, or when the authorization changes or ends.

Information may also be shared with the provider when an application is filed, withdrawn, denied or when the CDC case is closed.

The DHS-1171, Assistance Application and the DHS-4583, Child Development and Care (CDC) Application includes a release of information allowing the department to provide this information. All other provider concerns should be directed to the client.

**REQUIRED
VERIFICATIONS
FOR UNLICENSED
PROVIDERS**

Unlicensed providers must complete the DHS-220, Child Development and Care Unlicensed Provider Application. If the application is not completely filled out, it must be returned to the provider for completion prior to beginning the enrollment process.

The following verifications must be provided within ten workdays of the application receipt date:

- Proof of identity. Acceptable verifications are:
 - Current valid driver's license with a photo of the individual.
 - Federal, state or local government issued identification card with the same information included on a driver's license.
 - School-issued identification with a photograph.
 - U.S. military card or draft record.
 - Benefit award letter or other document indicating an individual's receipt of benefits under a program that requires verification of identity, for example, SSI, RSDI.
 - A cross match with a federal or state governmental, public assistance, law enforcement, or correction agency's data system, for example, the SSA cross match in Bridges.
 - A U.S. passport.
 - A Certification of Naturalization (Department of Homeland Security, Forms N-550 or N-570).
 - A Certificate of U.S. Citizenship (Forms N-560 or N-561).
 - Military dependent's identification card.
 - Certificate of Degree of Indian Blood, or other U.S. American/Indian/Alaska Native tribal document.
 - U.S. Coast Guard Merchant Mariner card.
 - Three or more corroborating documents such as marriage licenses, divorce decrees, high school diplomas, college degrees or employer ID cards.
- Proof of age.
- A copy of a valid Social Security card.

- If the provider's Social Security card indicates it is valid for work, only with U.S. Citizenship and Immigration Services' (USCIS) authorization, obtain verification of authorization from the USCIS prior to enrollment.
- If the Social Security card states that it is not valid for employment, the unlicensed provider applicant may not be enrolled.

Note: Once enrolled, a provider's Social Security number can only be changed by CDC Policy. Local offices are able to make provider name and address changes or corrections.

- Proof of residence and/or mailing address (at application). Acceptable verifications are:
 - Current valid driver's license with a photo of the individual.
 - Other ID which provides a name **and** address.
 - Mortgage or rent receipt.
 - Utility bill.

Exception: Proof of residency may be waived for providers who claim they are homeless on the DHS-220. If a provider's declaration of homelessness is questionable, a referral to Front End Eligibility should be made. Homeless providers are only eligible to provide child care in the home of the child.

All required verifications must match the provider's name listed on the application and must be copied and maintained in the provider file.

Note: The DHS-4025, Child Development and Care Provider Verification, is **not** required prior to an unlicensed provider's enrollment. The completed form **is** required prior to entering assignments for a particular provider and child in Bridges.

If all required verifications are not received by the tenth workday from the application receipt date, enroll the provider using the current date as the service begin and end date and enter the closure reason **Failure to provide verifications**.

Bridges will send the DHS-4807, Notice of Child Development and Care Provider Ineligibility to the provider. If a client has been identified, manually generate a DHS-4807-C, Client Notice of Child Development and Care Provider Ineligibility, to the client.

If the client has questions about the denial of the provider applicant's enrollment, the client should be told to discuss the issue with the provider.

UNLICENSED PROVIDER FILE

The following must be included in the provider file:

- DHS-220, Child Development and Care Unlicensed Provider Application.
- Proof of identity, age and residence.
- A copy of a valid Social Security card.
- The DHS-4661-P, Request for Criminal History and Central Registry Clearance, and any criminal history matches (for clearances completed prior to (October 17, 2011).
- DHS-4807, Notice of Child Development and Care Provider Ineligibility, if not sent by Bridges.

PROVIDER MANAGEMENT

All child care providers must be enrolled in Provider Management in order to receive payment from the department.

Enrolled providers are assigned an ID number. This number is different from the provider's tax ID or license number.

The provider ID number is used to authorize CDC payments. It is also used by providers to bill for care provided to CDC approved children.

Licensed child care centers, family and group child care homes are enrolled in Bridges automatically at the time they are assigned a license number. The local office cannot enroll these provider types.

Note: In instances where the local office identifies a licensed child care center, family or group child care home that does not have a provider ID number, and one is needed in order to authorize payments to that provider, the local office must send a fax to CDC Policy at 517-241-8679. Faxed requests must include the provider's name, license number and a contact name and phone number.

Before enrolling an unlicensed provider, complete a provider inquiry to see if the provider is already enrolled.

- If the provider is already enrolled or has been enrolled in the past, use the assigned provider ID number.
- If the provider has never been enrolled, proceed with the new enrollment.

UNLICENSED PROVIDER ENROLLMENT

Provider eligibility is treated as a separate process from the determination of client eligibility.

Within ten workdays of receiving the DHS-220 and all required verifications, the local office must:

- Check Provider Management to see if the provider is active. If there is an active segment with a service begin date and a blank end date, the provider is currently enrolled.
 - Check to be sure that all provider and household information is correct by comparing information from the DHS-220 with the information on the Provider Associated Household People screen in Provider Management.
 - If new household members are listed, add these individuals to the Provider Associated Household People screen. Bridges will complete background clearances for these individuals and notify the provider and client if these clearances impact the provider's enrollment.
- If there is not an active segment or if the provider is not in Provider Management, enroll the provider using the appropriate service begin date. Bridges will complete all required background clearances.

SERVICE BEGIN DATE (EFFECTIVE DATE OF ENROLLMENT)

If approved, the service begin date for an unlicensed eligible provider who is 18, would be the date the client or provider application is received in the local office, **whichever is received first**. If a provider's service begin date needs to be corrected, for example, he or she is providing care on a foster care case, fax the client application and the DHS-220 to CDC Policy at 517-241-8679 to have the service begin date modified. Include a cover sheet with the requestor's name and phone number.

Exception: If the unlicensed provider has been denied as a result of a household member and the household member leaves the home, the service begin date cannot be before the date the new DHS-220 is received.

PRE-ENROLLMENT BACKGROUND CLEARANCES

When enrolling an unlicensed provider, the following clearances will be completed:

- A central registry clearance.

Note: Central registry information is confidential and cannot be released.

- Criminal history background clearances.
 - ICHAT (Internet Criminal History Access Tool).
 - OTIS (Offender Tracking Information Service).
 - PSOR (Public Sex Offender Registry).

When the clearances are completed in Bridges, potential matches will be returned. Review the matches and indicate whether a match exists for each name returned.

Bridges will complete the clearances on the provider first. If no provider match is found, clearances will also be completed on any adult household members entered in Bridges on the Provider Associated Household People screen.

Entering the maiden or alias names of all adults listed on the application will ensure that all names used by the applicant/provider and adult household members are cleared.

Background clearances will also be completed whenever a new household member, age 18 and over, is added in Bridges.

Central Registry (CR Check on Provider

Review the potential matches on the Children's Protective Service (CPS) Central Registry Details screen.

If there is a valid match, Bridges will close the provider with the **Provider eligibility revoked-see BEM 704**, closure reason and send the DHS-4807 to the provider.

Note: If a client has been identified, a DHS-4807-C, must be manually generated and mailed to the client.

If a valid central registry match is found, no further clearances (ICHAT, OTIS, PSOR) will be completed.

If there is not a valid match, Bridges will complete the ICHAT, OTIS and PSOR clearances on the provider.

Criminal History Background Clearances on the Provider

Review the potential matches on the Other Criminal History Details screen.

The ICHAT clearance will return a PDF. Click Preview to review the PDF and determine whether the match is valid. The match is not valid unless the crime code is on the terminable crime codes exhibit; see BEM 705 for more information.

Note: If a match is received on a crime code that is not listed and it is believed the crime could impact the health and safety of a child, e-mail the Policy-CDC@Michigan.gov mailbox with all pertinent information. A decision will be made whether this is a terminable crime.

If there is a valid match, Bridges will close the provider with the appropriate closure reason listed below and send the DHS-4807 to the provider.

- Not eligible due to pre-enrollment ICHAT match.
- Not eligible due to OTIS match.
- Not eligible due to PSOR match.

Note: If a client has been identified, a DHS-4807-C must be manually generated and mailed to the client.

If there is not a valid match, Bridges will complete the central registry clearances on any adult members listed on the Provider Associated Household People screen in Bridges.

Central Registry Clearance on Adult Household Members

Review the potential matches on the CPS Central Registry Details screen for all adult household members identified in Bridges.

Identify any household members with a valid central registry match.

Bridges will continue to run all other clearances.

After all clearances are completed and match decisions are indicated, Bridges will close the provider with the closure reason **Provider eligibility revoked. Household member does not meet requirements** and send the DHS-4807 to the provider.

Note: If a client has been identified, a DHS-4807-C must be manually generated and mailed to the client.

Criminal History Background Clearances on Adult Household Members

Review the potential matches on Other Criminal History Details screen.

If there is a valid match, Bridges will close the provider with the appropriate closure reason from the list below and send the DHS-4807 to the provider.

- Not eligible due to pre-enrollment ICHAT match on household member.
- Not eligible due to OTIS match on household member.
- Not eligible due to PSOR match on household member.

Note: If a client has been identified, a DHS-4807-C must be manually generated and mailed to the client.

If there is no valid match, the provider is eligible and the enrollment can be completed.

**NOTICE TO
ELIGIBLE
PROVIDERS**

When an eligible provider is enrolled, Bridges will send a DHS-4481-D, CDC Unlicensed Provider Confirmation, to the provider. Once the provider is authorized to provide care, Bridges will send the DHS-198, Child Development and Care Client Certificate/Notice of Authorization, to the provider. The client will receive a DHS-198-C, Child Development and Care Client Certificate/Notice of Authorization.

Note: Providers are eligible for payment starting with the pay period that holds the Great Start to Quality Orientation training date. Payments for any care provided prior to the training date will not be authorized or paid.

**ADULT
HOUSEHOLD
MEMBER
CHANGES**

If new household members, age 18 or older, come into the home of the provider, add these individuals on the Provider Associated Household People screen. Bridge will run all required background clearances and require match decisions following the above process.

If an unlicensed provider's enrollment is denied or closed as a result of a criminal conviction, pending criminal charge or central registry match on an adult household member and it is reported the adult no longer resides in the home of the provider:

- Obtain a new DHS-220.
- Request verification such as a lease, ID, utility bill, etc., showing the household member has a new address.
- Fax the DHS-220 and verifications to CDC Policy at 517-241-8679 with a cover sheet listing the requestor's contact information and fax number.

If it is determined that the provider is eligible for enrollment, CDC Policy will remove the closure reason, complete the background clearances and enroll the provider.

The service begin date cannot be before the date the new DHS-220 and verifications are received in the local office and no care can be authorized prior to the provider's service begin date.

If the above conditions are not met, the provider is not eligible to receive payment.

**CENTRAL
REGISTRY
EXPUNGEMENT**

If a closed provider is expunged from central registry, the provider must complete a new DHS-220 to establish a new service begin date after the expungement. Fax a request for the provider to be enrolled along with the new DHS-220, completed after the expungement date, and all required enrollment verifications to CDC Policy at 517-241-8679. CDC Policy will:

- Complete all background clearances.
- Enter a service begin date the first day of the pay period after the expungement date.

Bridges will send the DHS-4481-D to notify the provider that he/she is eligible.

If the local office does not have a new DHS-220 completed after the expungement date, the central registry closure reason will remain in Provider Management until a new DHS-220 is received. No notification will be sent to the provider.

**ADMINISTRATIVE
REVIEW PROCESS**

Provider/provider applicants who have been denied or closed as a result of a criminal conviction or pending charge by the local office may request an administrative review. The DHS-759, Request for Administrative Review of the Denial or Termination of Provider Enrollment, instructs providers to send all documentation to the local office where the denial or closure took place.

When a request for administrative review is received, the local office should:

- Give the administrative review request to the local office person who maintains the provider files.
- The provider file should be pulled and any information regarding the provider's denial or closure, such as the DHS-220, provider identification, criminal history matches (if completed prior to October 17, 2011), etc., should be attached to the administrative review material.
- Fax review material to CDC Policy at 517-241-8679.

CDC Policy will:

- Make a determination to approve or deny the provider.
- Notify the provider/applicant of the approval or denial.
- Remove the closure reason, if applicable.

Providers approved through the administrative review process will need to be enrolled by CDC Policy. A Bridges edit will inform the local office to send the DHS-220 and all required verification to CDC Policy for enrollment, if it is received in the local office. Providers are instructed on the DHS-857, Child Development and Care Administrative Review Decision Notice, to send the completed DHS-220 and all required verifications to:

- Michigan Department of Education
- Child Development and Care
- P O Box 30088
- Lansing, MI 48909

The service begin date to re-open the provider will be the day after the closure date. If the service begin date needs to be earlier, fax a request to CDC Policy at 517-241-8679.

Note: A completed DHS-4025, Child Development and Care Provider Verification, must be obtained prior to the local office assigning the provider to a CDC case.

AUTOMATED BACKGROUND CLEARANCES

For determining continued eligibility, automated clearances are done on providers.

Central Registry

This automated daily process matches central registry to all providers and household members over the age of 18 who are on central registry as perpetrators confirmed by CPS.

For confirmed matches, CDC Policy will:

- Close the provider.
- Enter the closure reason **Provider eligibility revoked-see BEM 704**, if the match is on the provider or **Provider eligibility revoked. Household member does not meet requirements**, if the match is on a household member.

Bridges will send a DHS-4807 to the provider, if the provider is active, and end the authorizations. If the provider is associated with a CDC case, the client will be sent a DHS-4807-C.

If central registry does not indicate that due process was given, CDC Policy will send a completed DHS-835, Central Registry Clearance - No Perpetrator Notification Record Notice, to the CPS supervisor in the county where the CPS case was opened. CPS will then notify the provider of his/her due process rights regarding central registry expungement.

The closure reason entered in Provider Management will prevent re-enrolling of providers closed by this process.

ICHAT, OTIS PSOR

These monthly automated processes match providers and household members.

For confirmed matches, CDC policy will verify the information is correct and close the provider with the appropriate closure reason. Bridges will send the DHS-4807 and the DHS-759 to the provider, if the provider is active. A DHS-994, Michigan State Police Criminal Notice will also be sent, if the match is on ICHAT. The DHS-4807-C will be sent to the client, if the client is associated with a CDC case.

MISREPRESENTATION OF UNLICENSED PROVIDERS

If the local office becomes aware of an unlicensed provider who has misrepresented, falsified or has failed to abide by the conditions as stated on the DHS-220, the DHS-4025 or in the Child Development and Care (CDC) Handbook, fax all information to CDC Policy at 517-241-8679. A determination will be made whether the provider should be closed.

PROVIDER CLOSURES

An unlicensed provider's service is ended in Provider Management if:

- The unlicensed provider has not received a payment for four consecutive months. The closure reason will read **No activity/payments for this provider service type.**
- The unlicensed provider has not completed the basic training requirement within four months of enrollment. The closure reason will read **Failure to complete basic training requirement.**
- The provider does not comply with a request by the CDC Central Reconciliation Unit for time and attendance records. The closure reason will read **Failed to respond to CRU. Call CRU at 866-990-3227 with questions.**
- The provider does not maintain time and attendance records as determined by the CDC Central Reconciliation Unit. The closure reason will read **Failed to maintain Time and Attendance records. Call CRU at 866-990-3227.**
- Undeliverable mail is received. The closure reason **Unable to locate provider** will be entered in Provider Management.

Note: Undeliverable mail for licensed or registered providers will be forwarded to BCAL for processing. This process should also be

followed when undeliverable provider mail is received in the local office and a new address has not been reported.

- Provider fails to submit records requested by the Office of Inspector General. The closure reason **CDC not eligible due to Office of Inspector General review** will be entered in Provider Management.

These closure reasons will not prevent local offices from re-enrolling a provider, however the provider will be required to complete a new DHS-220, and all background clearances must be completed prior to enrollment. The service begin date is the receipt date the DHS-220 is received in the local office. A new DHS-4025 is required prior to establishing provider assignments. The provider is not eligible for care to be authorized during the closure period.

NOTIFICATION OF CLOSURE

When a provider's enrollment is denied or closed, Bridges will automatically send the DHS-4807 to the provider and the DHS-4807-C to the client (if there is an active assignment), listing the reason for denial or closure.

RE-ENROLLING AN UNLICENSED PROVIDER

To re-enroll an unlicensed provider, follow the process in **Unlicensed Provider Enrollment Process**. Use the appropriate service begin date as stated in policy.

Note: If the provider is closed in error, do not require new forms.

PROVIDER ADDRESS CHANGES

It is critical that provider address changes be made promptly to avoid unnecessary closures and disruptions in child care services. When local offices receive a request for an address change from an unlicensed provider, follow policy in [BAM 220](#) regarding acting on changes.

SUSPECTED CHILD ABUSE OR NEGLECT

In instances where there is reasonable cause to suspect child abuse or neglect in a child care setting, make a referral to CPS. CPS will make a determination of whether the CDC children are at risk, as well as the child care provider's own children. If substantiated, Bridges will send the DHS-4807/DHS-4807-C to notify the provider and the client of the closure.

If the client has questions about the closure/denial of the unlicensed provider's enrollment, he/she should be told to discuss the issue with the provider.

**ADMINISTRATIVE
HEARINGS**

Neither child care providers or CDC recipients are entitled to administrative hearings based on provider/applicant denial or closure.

**CHILD CARE
REFERRALS**

Clients who request assistance in finding a licensed or registered provider should be referred to Great Start CONNECT, the online Web-based early learning resource site. The Web address for Great Start CONNECT is www.greatstartconnect.com. All active licensed and registered providers are searchable. If additional assistance is needed, clients can be referred to 1-877-614-7328, to reach the Great Start Regional Child Care Resource Center serving their county. Resource centers can provide personal consultation to families in need of child care.

LEGAL BASE

Child Care and Development Block Grant of 1990, PL 101-508, 42 USC 9858 et. seq.
45 CFR Parts 98 and 99
Social Security Act, as amended. Title IVA (42 USC 601 et seq.); Title IVE (42 USC 670 et seq.); Title XX (42 USC 1397 et seq.)
Child Care Organizations Act, 1973 PA 116, as amended, MCL 722.111 et seq.
R400.5001 - 400.5015, MAC