

STATE OF MICHIGAN  
STATE OFFICE OF ADMINISTRATIVE HEARINGS AND RULES  
ADMINISTRATIVE HEARINGS FOR THE  
DEPARTMENT OF HUMAN SERVICES

IN THE MATTER OF:

[REDACTED]

Reg. No: 201052905  
Issue No: 6022  
Case No: [REDACTED]  
Load No: [REDACTED]  
Hearing Date:  
September 30, 2010  
Van Buren County DHS

**ADMINISTRATIVE LAW JUDGE:** Gary F. Heisler

**HEARING DECISION**

This matter is before the undersigned Administrative Law Judge pursuant to MCL 400.9; and MCL 400.37 upon claimant's request for a hearing. After due notice, a hearing was held on September 30, 2010. Claimant appeared and testified.

**ISSUE**

Did the Department of Human Services properly determine Claimant's eligibility for Child Development and Care (CDC)?

**FINDINGS OF FACT**

The Administrative Law Judge, based upon the competent, material and substantial evidence on the whole record, finds as material fact:

- (1) On May 4, 2010 Claimant was sent a Child Day Care Provider Termination Client Notice (DHS-512). The notice stated that Claimant was still eligible for CDC benefits but her current child care provider, [REDACTED], was no longer eligible to receive payment as a relative child care provider or had not completed the Great Start to Orientation training. The notice also stated that Claimant would need to identify a new provider. A Department received the Child Development and Care Provider Verification (DHS-4025) was also sent to Claimant.
- (2) On May 6, 2010 Claimant submitted an application for Child Development and Care (CDC) benefits.

- (3) On May 17, 2010 the Department received the Child Development and Care Provider Verification (DHS-4025) it had mailed to Claimant on May 4, 2010. The verification was filled out for [REDACTED].
- (4) On June 15, 2010 another Child Development and Care Provider Verification (DHS-4025) was mailed out for Claimant.
- (5) On June 22, 2010 the Child Development and Care Provider Verification (DHS-4025) of June 15, 2010 was received by the Department. The verification was filled out for [REDACTED].
- (6) On July 1, 2010 a Child Development and Care Aide Provider Application (DHS-220-A) was mailed to Claimant. This form states that there will be no eligibility for payment prior to completing the Great Start to Quality Orientation training.
- (7) On July 8, 2010 the Child Development and Care Aide Provider Application (DHS-220-A) was received by the Department filled out for [REDACTED]. However, the form was not complete.
- (8) On July 19, 2010 [REDACTED] completed the Great Start to Quality Orientation training and was authorized to receive CDC payments.
- (9) On August 23, 2010 Claimant submitted a request for hearing.

### **CONCLUSIONS OF LAW**

The Child Development and Care program is established by Titles IVA, IVE and XX of the Social Security Act, the Child Care and Development Block Grant of 1990, and the Personal Responsibility and Work Opportunity Reconciliation Act of 1996. The program is implemented by Title 45 of the Code of Federal Regulations, Parts 98 and 99. The Department of Human Services (DHS or department) provides services to adults and children pursuant to MCL 400.14(1) and MAC R 400.5001-5015. Department policies are contained in the Bridges Administrative Manual (BAM), the Bridges Eligibility Manual (BEM) and the Program Reference Manual (PRM).

Department policy provides the following guidance for case workers. The Department's policies are available on the internet through the Department's website.

#### **BEM 703 CDC PROGRAM REQUIREMENTS**

#### **PROGRAM OVERVIEW**

The goal of the Child Development and Care (CDC) program is to preserve the family unit and to promote its economic independence and

self-sufficiency by promoting safe, affordable, accessible, quality child care for qualified Michigan families.

The Department of Human Services (DHS) may provide a subsidy for child care services for qualifying families when the parent(s)/substitute parent(s) is **unavailable** to provide the child care because of employment, participation in an approved activity and/or because of a health/social condition for which treatment is being received **and** care is provided by an eligible provider.

## **INTRODUCTION**

Eligibility for CDC services exists when the department has established **all** of the following:

- There is a **signed application** requesting CDC services.
- Each parent/substitute parent; see Parent/Substitute Parent section in this item is a member of a valid **ELIGIBILITY GROUP**.
- Each parent/substitute parent (P/SP) meets the **NEED** criteria as outlined in this item.
- An eligible provider is providing the care.
- All eligibility requirements are met.

## **BEM 704**

### **CDC PROVIDERS**

### **PARENTAL CHOICE**

Child care may be provided in or out of the child(ren)'s home. Clients have the right to choose where the care will be provided as well as the type of child care provider they wish to use.

### **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; see BEM 205.
- 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 provider who also provides adult home help to any CDC program group member, the CDC applicant or the CDC applicant's spouse for the same period in which child care is provided.

## **ELIGIBLE PROVIDERS**

Care must be provided in Michigan by an eligible provider. Eligible providers are those regulated by DHS, Bureau of Children and Adult Licensing (BCAL), or enrolled by DHS. Those regulated by the BCAL are:

- Child care centers.
- Family child care homes.
- Group child care homes.

**Note:** Certain facilities and child care homes which provide child care do not require licensure under 1973 PA 116; see Centers and Homes Exempt From Licensure in this item.

The department also recognizes two other types of providers who are not required to be regulated. These providers are enrolled by DHS to provide CDC services. They are:

- Aides.
- Relative care providers.

### **Aides/Relative Care Providers**

An **aide** is an individual (including a relative) who provides care in the home where the child lives see PRG In-Home Child Care.

A **relative care provider** is related to the child needing care by blood, marriage or adoption as a:

- Grandparent/step-grandparent/great grandparent/ step great grandparent
- Aunt/step-aunt/great-aunt/step-great-aunt.
- Uncle/step-uncle/great-uncle/step-great-uncle.
- Sibling/step-sibling.

A relative care provider provides care in the relative's home, and does **not** live in the same home as the child. Relative status must be verified if questionable. A divorce severs/terminates a relationship gained through marriage.

**Note:** Aide and relative care providers who are also licensed or registered by BCAL as family or group child care homes, should be paid as family or group child care homes, not as aide or relative care providers.

To determine if a provider is eligible for payment, use Bridges Inquiry. A provider may be searched by provider number, name, service type or license number. Bridges will display the provider begin and end dates.

Providers are active and eligible for payment if there is no end date entry.

### **Aide/Relative Care Provider Enrollment Process**

A new DHS-220-A/R, aide or relative application, must be completed by an already enrolled aide or relative care provider applying to be a different type of DHS enrolled provider. The provider's original ID number will be assigned to the new provider type.

To begin the enrollment process, aide and relative care providers must: Complete the aide or the relative care provider application, certifying that the applicant meets all of the requirements listed on the application. The provider applicant must provide the following verifications within six workdays of the application receipt date:

- Proof of identity.
- Proof of age.
- A copy of a valid Social Security number (the Social Security number must be verified with a copy of the card). The name on the Social Security card must match the name on the DHS-220-A/R. If the Social Security card states that it is not valid for employment, the prospective aide/relative may not be enrolled.

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

- Proof of residence and/or mailing address if requested (specialist must verify if information is unclear, inconsistent or questionable).
- A DHS-4025, Child Care Provider Verification.

Within 6 workdays of receiving the DHS-220-A/R the local office must:

- Review the provider application to determine if the provider applicant has self reported a crime.
- Complete a Bridges address inquiry on the provider's address.
- Complete all background clearances (central registry, ICHAT, OTIS, PSOR, NSOPR, FIL) on the provider and all adult household members at the provider's address.
- Determine eligibility of the provider applicant.

- Enroll the provider in Provider Management. (See the DHS Net for the Provider Management training).
  - If the provider is eligible to be enrolled, Bridges will send a DHS-4481-D, CDC Unlicensed Provider Confirmation, to the provider and a DHS-1605, Notice of Case Action, to the client. Once the provider is authorized to provide care, Bridges will send the DHS-198 Child Development and Care Provider 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 not eligible for payment for care provided prior to the pay period that holds the training completion date.

- If the provider is not eligible, the local office must send the DHS-4807, Notice of Child Care Provider Eligibility, to the client and provider applicant informing the client and applicant of the denial. If the denial is a result of a match on ICHAT, OTIS, PSOR, NSOPR or FIL, the provider must also be sent a DHS-759, Request for Administrative Review of the Denial or Termination of Provider Enrollment and copies of the match or matches. **Do not send central registry information.** If all required verifications are not received by the 6th workday from the application receipt date:

- Deny enrollment.
- Send the DHS-4807, Notice of Child Care Provider Eligibility.
- Create a provider file.
- File the provider application and a copy of the DHS-4807 in the provider file.

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 aide/relative care provider.

### **Effective Date of Enrollment**

If approved, the effective date of enrollment for an aide or relative care provider is the most recent of the following:

- The date care began.
- The client's effective date of eligibility.

- The first day of the pay period beginning after the aide or relative care provider's 18th birthday.
- The date verification is received indicating an adult household member with a criminal conviction or pending criminal charge, no longer resides in the home of the relative care provider.

In this case Claimant was eligible for CDC benefits the whole time as long as child care was being provided by an eligible provider. [REDACTED] was not an eligible provider until she completed the required training on July 19, 2010. Claimant requested a hearing on the issue of [REDACTED] receiving pay for child care she provided prior to completing the required training and becoming eligible for payment from DHS. The fact that [REDACTED] was not an eligible provider until July 19, 2010 does impact whether DHS or Claimant must pay for child care [REDACTED] provided before that date. The fact that Claimant chose to have her children watched by someone who was not an eligible provider, is not a negative action against Claimant's benefit eligibility. Claimant remained eligible to receive CDC benefits during the entire time [REDACTED] provided day care, as long as Claimant used an eligible provider.

### **DECISION AND ORDER**

The Administrative Law Judge, based upon the above findings of fact and conclusions of law, decides the Department of Human Services properly determined Claimant's eligibility for Child Development and Care (CDC).

It is ORDERED that the actions of the Department of Human Services, in this matter, are UPHeld.

/s/ \_\_\_\_\_  
Gary F. Heisler  
Administrative Law Judge  
for Ismael Ahmed, Director  
Department of Human Services

Date Signed: October 7, 2010

Date Mailed: October 8, 2010

**NOTICE:** Administrative Hearings may order a rehearing or reconsideration on either its own motion or at the request of a party within 30 days of the mailing date of this Decision and Order. Administrative Hearings will not order a rehearing or reconsideration on the Department's motion where the final decision cannot be implemented within 90 days of the filing of the original request.

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The Claimant may appeal the Decision and Order to Circuit Court within 30 days of the mailing of the Decision and Order or, if a timely request for rehearing was made, within 30 days of the receipt date of the rehearing decision.

GFH/vc

cc:

