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| LOCAL COMMISSIONERS MEMORANDUM |
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DSS-4037EL (Rev. 9/89)

Transmittal No: 94 LCM-53

Date: May 12, 1994

Division: Services and
Community
Development

TO: Local District Commissioners

SUBJECT: Child Care: Policy Regarding Face-to-Face Interviews

ATTACHMENTS: Attachment A: Model Letter - Application
(Available On-Line)
Attachment B: Model Letter - Recertification
(Available On-Line)

Over the past few months, several social services districts have asked whether they are required to conduct face-to-face interviews when determining or redetermining eligibility for child care funding for the income eligible programs. These programs include: State Low Income Day Care (LIDC), At-Risk Low Income Child Care (ARLICC), Child Care and Development Block Grant (CCDBG), Transitional Child Care (TCC) and Title XX. The purpose of this Local Commissioners Memorandum (LCM) is to restate and clarify Department policy relative to such interviews.

While a face-to-face interview is required in order to determine eligibility for public assistance, there is no similar requirement pertaining to eligibility determinations for services. In fact, Sections 415.7(d)(1), 415.10(c)(1), and 415.11(c)(1) of the Department's regulations provide that applicants for TCC, ARLICC and CCDBG services, respectively, must be permitted to submit an application by mail. While this same requirement is not stated explicitly for the LIDC and Title XX programs, social services districts may elect to provide the option of mailing in documentation to applicants for and recipients of such services.

Since it is often difficult for employed parents to take time from work during the hours that county offices are typically open, social services districts are encouraged to permit parents to submit applications and recertifications for child care services by mail regardless of funding

source. Some parents may indicate that they prefer to apply or recertify in person. In such instances, social services districts are encouraged to make reasonable efforts to accommodate the schedules of employed parents.

A social services district is required to conduct a face-to-face interview only when it has been unable to solicit the information needed to make a determination or redetermination in any other manner. To determine or redetermine a family's eligibility for child care services and to authorize such services appropriately, the social services district must receive the following documentation from the parent:

- o an application (with pages one and two completed and signed on page six);
- o pay stubs for the last four to twelve weeks (as specified by the social services district) or a statement from the employer verifying gross wages for the specified time period;
- o verification of any other income indicated on the application - such as a copy of unemployment benefits, Social Security check or statement of child support;
- o verification of the need for care - such as the parent's work or school schedule or documentation of the incapacity of the parent, as applicable;
- o the name, address and phone number of the provider caring for each of the children requiring child care services; and
- o an enrollment form for each caregiver of informal child care or legally-exempt group child care utilized by the parent, if any.

Attachment A, "Model Letter - Application" and Attachment B, "Model Letter - Recertification" provide sample letters which social services districts may use to notify applicants of the information needed to make a determination of eligibility. Social services districts may use these models as their own or may develop local equivalents.

Questions regarding this memorandum may be directed to Dee Woolley, Bureau of Early Childhood Services at 1-800-343-8859, ext. 4-9324 or dial direct (518) 474-9324. Ms. Woolley also may be contacted on-line Userid #89A800.

Frank Puig
Deputy Commissioner
Division of Services and Community
Development

ATTACHMENT A
MODEL LETTER - APPLICATION

Date: _____

Dear _____:

You recently called our office requesting assistance paying for child care. In an attempt to better meet your needs, a mail-in application process has been developed.

In order for your application to be processed you must mail the following information:

1. A signed, dated and complete Application;
2. The last ____ weeks pay stubs or a statement from your employer verifying gross wages for the last ____ weeks for you and your spouse, if applicable.
3. Verification of any other income indicated on your application - such as a copy of unemployment benefits, Social Security check or statement of child support.
4. Verification of the need for care - such as the work schedule and/or copies of school/college/training schedule for you and your spouse or proof of the incapacity of a parent, if applicable.
5. The name, address and phone number of the provider caring for each of your children who need care.
6. Other - _____

Please submit the requested documents in the enclosed envelope. If you have any questions or need assistance in completing the application or locating child care, please call _____ at _____.

Sincerely,

ATTACHMENT B
MODEL LETTER - RECERTIFICATION

Date: _____

Case Name: _____

Case Number: _____

Dear _____:

It is time to review your case for continued eligibility for child care assistance. In an attempt to better meet your needs, a mail-in recertification process has been developed.

Your child care services will expire on _____. Therefore, you must fill out the enclosed application and return it no later than _____.

In order for your application to be processed you must also mail the following information:

1. The last ____ weeks pay stubs or a statement from your employer verifying gross wages for the last ____ weeks for you and your spouse, if applicable.
2. Verification of any other income indicated on your application - such as a copy of unemployment benefits, Social Security check or statement of child support.
3. Verification of the need for care - such as the work schedule and/or copies of school/college/training schedule for you and your spouse or proof of the incapacity of a parent, if applicable.
4. The name, address and phone number of the provider caring for each of your children who need care.
5. Other - _____

FAILURE TO SUBMIT THE REQUESTED INFORMATION BY THE SPECIFIED DATE MAY RESULT IN YOUR CASE BEING CLOSED.

Please return the requested documents in the enclosed envelope. If you have any questions or need assistance in completing the application or locating child care, please call _____ at _____.

Sincerely,