Employee Child Care Partnership Program

Information for the Employee

The Employee Child Care Assistance Partnership (ECCAP) program is a public/private partnership between the Employer, their Employee, and the State to contribute to a family's cost of quality child care. The Employer will agree to contribute to the total child care costs and make a payment directly to the Child Care Provider. The State will match the contribution (based on household income and size) and pay the Child Care Provider a matched amount up to 100% but no less than 50%. The Employee will be responsible for any remainder of the child care payment. The Employer and Child Care Provider must operate in the State of Kentucky, but the Employee may live outside Kentucky.

The Employer will initiate the process online at: https://kynect.ky.gov/benefits/s/eccap-program. The first step is to set up a Kentucky Integrated Child Care System (KICCS) portal account and a Kentucky Online Gateway (KOG) account. After the Employer and the Employee have a KICCS and KOG account, the employer will be able to submit Section I of the DCC-600, Employee Child Care Assistance Partnership Application and Contract. After the Employer submits Section I of the application, the Employee will submit Section II, and the Child Care Provider will submit Section III of the DCC-600. After each section is submitted the party responsible for the prior section will need to notify the next party to complete their portion of the DCC-600. The Employee shall be the primary source of information and shall provide verification of employment, and the Employee's income. Employees will be responsible for returning verification of income for other responsible adults in the home. Members of the household who are self-employed will need to submit most recent tax records for income verification.

Once the application is submitted, the State has 30 days to render an eligibility decision. After reviewing the submitted application, if further information is needed the State will return the contract to the Employee for corrections. Upon receiving a returned contract for further information, the Employee has 10 business days to respond. Failure to respond within 10 business days will result in the denial of the application. A DCC-605, Employee Child Care Assistance Partnership Notice of Action, will be sent to all parties notifying of the approval, denial, or termination of an ECCAP application.

The Employee may facilitate the Employer/ Child Care Provider relationship by providing contact information. Each party is responsible for payments established by the contract. The Employee will be responsible for any amount not covered by the Employer/State match. The State is not involved in the payment process outside of the State contribution.

The Child Care Provider must be a licensed/certified child care provider and participate in Kentucky All-STARS. Child care cannot be provided by a parent/step, legal guardian, or a person living in the child's home. Child care including before and after school care, is covered but private school tuition or programs funded by another agency is not.

An individual may not be eligible to apply as more than one party to the contract. One person cannot be the Employer and Employee or be the Employer and be a responsible adult in the Employee's household.

If an Employee's income is below 85% SMI, they will be referred to the Child Care Assistance Program (CCAP) and the ECCAP application will be denied. Employees working in a regulated child care program will also be referred to the CCAP program as they are eligible for CCAP with the child care employee income exclusion. These persons would apply for CCAP at Kynect.ky.gov.

Family Size	85% SMI/Monthly
2	\$4639
3	\$5731
4	\$6822
5	\$7914
6	\$9005
7	\$9210
8	\$9414
Over 8	Add \$205 for each
	household member

The State match amount is based on the Employee's <u>entire</u> household income. All responsible adults' income in the household must be verified. A responsible adult is defined as a natural/adoptive parent, step parent, legal guardian of child, or spouse of an individual caring for a child in loco parentis. Self-employed household members will provide the most recent tax documents. All household members (including the applying employee) will need to be listed in the Employee section, including all children in the home, regardless of their need for child care.

If child care is not needed at the start of the fiscal year, a Child Care Provider may note the date the enrollment will begin thus the date payments will begin. Contracts covering multiple children will have the payments applied to the youngest child first and any remaining match amounts will be applied to the next oldest child. If an Employee utilizes multiple Child Care Providers, the youngest child will have the contribution applied to their Provider first and any remaining funds will be applied to the next oldest child's Provider. Multiple Child Care Providers will result in a contract having multiple Provider sections of the DCC-600. DCC will work out the payment details for multiple children or multiple providers and communicate payment breakdown on the DCC-605 for all parties.

If payments are for a school year (ex. 10 months), the Child Care Provider would reflect the months payments are needed. Otherwise, payments will run from the start date of the contract until June 30th or the contract end date. Tuition changes will not affect the contractual contribution amounts for the duration of the contract.

The Employer, Employee, or Child Care Provider may request the contract be terminated for any reason and must notify all parties with a specific end date that is no sooner than 2 weeks from the date of notice, unless the Child Care Provider gives consent to an earlier termination date. All parties are financially obligated up to the date of termination. A DCC-605 will be sent to all parties upon termination.

All parts of the contract will remain in place for the approved State fiscal year, (July 1- June 30), unless the contract is terminated by one or more parties. The Child Care Provider may contact the State to terminate the contract if the Employer fails to pay the agreed upon contribution or if the Employee fails to pay the remaining costs. The Child Care Provider must notify the State within 5 business days if the Employer fails to make the payment. After receiving the notification, the State will cease providing the State match and will notify the Employer that the contract will be terminated unless the Employer remedies the nonpayment within 5 business days of receipt of the notification. If the Child Care Provider fails to make this notification and receives a State match, the Child Care Provider must reimburse the State for the overpayment. If the Employee fails to pay the Child Care Provider for costs not covered by the Employer/State contributions, the Child Care Provider may give the Employee reasonable time to remedy the nonpayment. The Child Care Provider may notify the State and terminate the contract on the date the notification was issued. If the Child Care Provider voluntarily excuses the Employee's nonpayment or the Child Care Provider does not notify the State within 2 calendar months from the date of the Employee's nonpayment and continues to provide services, then the contract between all parties will reflect the reduction in value.

An ECCAP contract will be terminated if the Child Care Provider ceases to be a licensed/certified provider or ceases to participate in the All-STARS program.

The Employer must terminate the contract if the employee is no longer employed. The Employer must notify the State of the Employee's termination within 3 business days and the contract is terminated on the calendar date provided by the Employer in the notification. If the Employer fails to notify the State and a State match is issued to the Child Care Provider, then the Employer must reimburse the State for the overpayment.

Any changes to the agreed upon terms of the contract will terminate the contract.

Reapplication is needed each year to continue participation in the ECCAP program. The end date on the DCC-605 serves as the notice of discontinuance for the program. Employers with existing ECCAP contracts may apply April 2nd of each year for continued participation for the upcoming State fiscal year beginning July 1st. New Employers may apply May 17th of each year for the upcoming state fiscal year beginning July 1st.

Any party to this contract may request an administrative hearing regarding an eligibility or payment determination within 30 days of adverse action by contacting the Office of the Ombudsman and Administrative Review, Quality Advancement Branch, 209 St. Clair Street, Frankfort, KY 40601.

Questions can be directed to ECCAP staff by contacting <u>PartnershipChildCare@ky.gov</u>

ECC AP Provider Portal User Guide

User Guide for Employers, Employees, and Providers

Employee

Employees participating in the Employee Child Care Assistance Partnership (ECCAP) submit Contracts and receive documentation via the KICCS Provider Portal. Employers start the application process by creating a Contract, followed by the employee and provider submitting the applicable sections.

Pre-Requisites

A Kentucky Online Gateway (KOG) account is required for accessing the KICCS Provider Portal. See the KICCS Portal User Guide for instructions to create an account and request roles if you have not completed this step. Log into the KOG account and open Provider Portal to sync the account with the system. Provide the KOG email address to the employer. This is needed for the employer to create the Contract.

The employee must sign into KOG and open Provider Portal prior to the employer beginning the Contract.

The employer must submit Section I of the Contract before the employee may begin Section II.

Home screen

The Provider Portal Home screen includes a navigation menu on the left with access to the ECCAP My Contracts screen. Messages display in the main portion of the screen followed by a workbasket at the bottom.

	Home			
Billing forms are not yet available for proc	essing.			
Should you have any questions regarding • (502) 564-0104, option 6 (Frankfort are • (866) 231-0003, option 6 (toll free)	this message or any other issues, please contact the KICCS HelpDes a local calls)	k by email at <u>CHFS.KICCSHelpdesk@ky.gc</u>	ov or by phone:	
Best Regards, The KICCS Team				
Beginning December 1, 2022, CCAP payme prefilled on the Provider Billing Form (PBF).	ents will be paid based on Enrollment not Attendance. Children who a	ttend a childcare facility in November will be p	aid based on the enrollment on the CCAP certificate that is	
All providers, Licensed, Certified and Registere the "Flex Schedules" and "ITCS Centers" section	d, will submit the PBF blank, unless the prefilled codes do not accurately ref ns.	lect the child's schedule and an exception need	ds to be made. Exclusions to this rule are listed below in	
Exceptions/Care Schedules • An exception is a change to the preprinted	schedule on the PBF. Exception codes will be used if the prefilled schedule	is different than the child's actual schedule.	Informational messages	: disn
o For example, the prefilled schedule i	s a 1 but the child's actual schedule is part day. The provider will enter a 2	in the Provider Exception box.		
• Exception codes that will be used while pa	ying based on enrollment are:		on the Home screen. M	iany o
o 1= Full Day o 2= Part Day			these are instructions for	or chil
	v 60/65, if center is closed other than one of the 10 holidays allowed, or if c	are schedule is incorrect for child's needs)	care providers.	
o 60= Last Day Attended o 65= Last Day Attended, Non-Payabl	e Day		care bronders.	
Enrollment ending codes 60 (child's last d	av/payment is requested) and 65 (no payment requested) require a	a code 55 to be filled in all boxes after the	e 60 or 65 to prevent overpayment.	
	e certificate, it will be incorrect on the PBF. Parents should be advised to cor tures, do not sign and return the certificate if the care schedule is incorrect		ncorrect care schedules corrected.	
<u>Flex Schedules</u> All flex schedule enrollments will need to be co	ded according to the child's actual attendance using codes 1 and 2. If a Flex	schedule PBF is left blank then a payment wil	ll not occur.	
<u>School Age Enrollments</u> School age children should be on a regular sch	ool schedule (part days when school is open and full day when school is clo	sed) unless they attend 5 or more hours per da	ay or attend during non-traditional hours.	
ITCS Centers Infant/Toddler Contract Slot participants will no	eed to use the special 700 codes when submitting the PBF to ensure correct	payments. The 700 codes will only need to be	e used for those children/slots enrolled in the ITCS program.	
Important Copay Informat	ion			
Previously, the Division of Child Care had state through 2023. Families are still responsible for	d they would stop paying the parent copayments effective January 1, 2023. any overages assessed by the provider.	We're happy to announce that the decision ha	as been made to continue covering the assessed copayment	
If you have further questions, please contact: (CAPProviderPayments@ky.gov.			
	are working remotely and phone coverage is limited. For technical assistan	ce please email the KICCS Helpdesk at <u>CHFS.k</u>	KICCSHelpdesk@ky.gov.	
Assigned Providers				
No Information Found				
Workbasket	Filter By: Pending/Returned DCC-600 Employee V			
Contract No.	Employer Name	Status	Status Date	
10106	Steph C Job	Pending	3/13/2024	

My Contracts

Click My Contracts in the left navigation menu to view existing Contracts. Contracts may be filtered by Contract/Fiscal Year or by selecting All. Click View to display existing Contracts.

Home ECCAP Contracts	
ECCAP	Contract Year : All View Add New Contract
My Contracts	All The Add New Contract button is
Site Map Privacy Disclaimer Individuals with Disabilities	2024 2025 only enabled for Employers.

The ECCAP Contracts grid displays all Contracts associated with the KOG account.

ECCAP Contrac	ts							4
		Contract Year : All	View Add New Contract					
Contract No.	Employer Name	Employee Name	Provider Information	Effective Date	Expiration Date	<u>Status</u>	<u>Status Date</u>	
10106	Steph C Job	Steph EE22		3/13/2024	6/30/2024	Pending	3/13/2024	Correspondence
10070	Steph ECCAP Business	Steph EE22	0	3/7/2024	6/30/2024	Denied	3/8/2024	Correspondence

Click the Contract No. to view the Contract History Details grid or click the Correspondence link to view the Contract Correspondence Details grid.

The Contract History Details grid displays with additional details of the selected Contract. Click the Version link to view the selected Contract or click the DCC-600 link to view the Contract in PDF format.

<u>Versions</u>	<u>Status</u>	<u>Status</u> <u>Date</u>	<u>Employer Section</u> <u>Status</u>	<u>Employer Section Status</u> <u>Date</u>	<u>Employee Section</u> <u>Status</u>	<u>Employee Section Status</u> <u>Date</u>	<u>Provider Section</u> <u>Status</u>	<u>Provider Section Status</u> <u>Date</u>	
Amend 1	Pending	5/23/2024	Submitted	5/23/2024	Pending	5/23/2024	Submitted	5/23/2024	DCC- 600
<u>Initial</u>	Approved	5/23/2024	Approved	5/23/2024	Approved	5/23/2024	Approved	5/23/2024	DCC- 600
						The D	CC COO link in dias	blad if the Contract i	in in

The DCC-600 link is disabled if the Contract is in Amend, Pending, Submitted, or Returned status.

The Contract Correspondence Details grid displays with all notices related to the selected Contract. Click the DCC-605 link to view the notice.

Contract Correspondence Details		
Sent Date	Contract Status	
3/22/2024	Approved	DCC-605

Workbasket

Pending, Returned, and Amend Contracts can be accessed via the My Contracts page (as described above) or the Pending/Returned DCC-600 Employee workbasket. The Workbasket is located at the bottom of the Home page. Select the Pending/Returned DCC-600 Employee workbasket filter to view Contracts associated with your account when the Employee Section is in Pending or Returned status. Click the Contract No. link to open the Contract.

Workbasket				
		Filter By: Pending/Returned DCC-600 Employee ✔		
Cont	tract No.	Employer Name	<u>Status</u>	Status Date
10106		Steph C Job	Pending	3/13/2024

Completing the Contract

DCC-600 displays with Employee section expanded after selecting from the My Contracts page or the workbasket.

DCC-600 Contract Summary	<u> </u>
Contract ID: 10106 Fiscal Year: 2024 Status: Pending Status Date: 3/13/2024 Effective Date: 3/13/2024 Expiration Date: 6/30/2024	
Employer: Steph C Job	
Employee: Steph EE22 Provider(s): View Section Details	
Section 1. To be completed only by the employer	×
Section II. To be completed only by the employee Adult Household	~
No Information Found	
Dependent Household	
No Information Found	
Add Household Member	
How many child care programs are needed?:	
Providers Selected	
No Information Found	
Search Providers Remove Providers	
No Information Found	
Are you or a household member currently working for an employer other than that specified in Section I? Ores No Upload If yes, you must upload proof. Proof could be a check stub from the current month or a written statement from the employer.	
*Employee Details *Employee First Name: Steph *Employee Phone: Employee Email: kiccstest+st	eph.ee22@gmail.com

Employee Physical Address				
			·	
"Street 1:		Street 2	4	*City:
*State:	Select One 🗸	*Zip	:	*County: Select One
		· · · · · · · · · · · · · · · · · · ·		
Employee Mailing Address				
	Same as Employee Physical Address			
*P.O. Box/Street 1		Street 2	:	*City:
*State:	Select One 🗸	*Zip	:	
Warning: Any person who aids and	ther person to obtain assistance (or benefits) fraudulently is subj	ect to penalties provided by s	state law, KRS 199.990(8), including fines, imprisonment, or both.
* 🗌 I certify that the information con	tained in this form is true and correct	to the best of my knowledge.		
Employee Signature: <u>Steph EE22</u>		Date: <u>3/13/2024</u>		
		Save Submit	Clear Cancel	

Employees may view the Employer section by clicking the chevron on the right of the panel heading. Click the chevron again to collapse the panel.

Section I. To be completed only by the employer Section II. To be completed only by the employee

mployee Details					
"First Name: S		"Last Name		Middle Name:	
*Is this	person currently employed by you? • Yes	○ No	Employe	e title:	
*Employee email address: k	iccstest+steph.ee22@gmail.com				
"Date hired: 2		*Date first paid	: 3/15/2024		
*Does your employee h	ave any ownership in the business? Yes	No			
*Employee's share o	f taxes deducted from gross wages? • Yes	○ No			
*Gross monthly income: 7	289				
*Has the employee been	employed for two or more months? • Yes	O No			
If yes, list the wages that have been n	aid during the previous two months or uploa	d two months of paystubs. F	For self-employed individuals, p	lease upload the most recent tax return or recen	t business records.
Employee Wage Details					
	Received	Hours		Gross Wages	Tips
3/1/2024 2/16/2024		80 75	\$1,500.00 \$1,350.75		
2/10/2024		75	\$1,550.75		
Employee Document Upload Deta					
Employee Document Opload Deta	lis				
	ment Name	U	pload Date	User Uploade	d
Docu			pload Date 3/13/2024	User Uploade Steph ER5	ed
Docu	ment Name				d
Docu	ment Name tDoc.docx		3/13/2024	Steph ER5	sd
Docu Tes	ment Name tDoc.docx			Steph ER5	sd
Docu Tes	ment Name tDoc.docx		3/13/2024 yees working more than thirty-	Steph ER5	d
mployer Details	ment Name itDoc.docx *Does the business hav		3/13/2024 yees working more than thirty-	Steph ER5	:d
Employer Details	ment Name <u>tDoc.docx</u> "Does the business hav "Industry type: Industry/Manufacturing Musiness Name: Steph C Job "Email address: kiccstest-steph.er5@gmai	re less than fifty (50) emplo	9/13/2024 yees working more than thirty- "Monthly contribution towa "To	Steph ERS five (35) hours per week? • Yes • No ard employee's child care: 250 Phone: 5024449999 tal number of employees: 42	:d
Employer Details	"Does the business hav "Does the business hav "Industry type: Industry/Manufacturing /Business Name: Steph C Job "Email address: kiccstest-steph.er5@gmai hysical Address: Job L ; Job City KY 78459	re less than fifty (50) emplo	9/13/2024 yees working more than thirty- "Monthly contribution towa "To	Steph ER5	sd
Employer Details	ment Name <u>tDoc.docx</u> "Does the business hav "Industry type: Industry/Manufacturing Musiness Name: Steph C Job "Email address: kiccstest-steph.er5@gmai	re less than fifty (50) emplo	9/13/2024 yees working more than thirty- "Monthly contribution towa "To	Steph ERS five (35) hours per week? • Yes • No ard employee's child care: 250 Phone: 5024449999 tal number of employees: 42	sd
Employer Details Employer Details	"Does the business hav "Does the business hav "Industry type: Industry/Manufacturing /Business Name: Steph C Job "Email address: kicstest+steph.er5@gmai hysical Address: Job J , Job City KY 78459 Mailing Address: Job J - Mail , Job City - Ma	e less than fifty (50) emplo I.com Il KY 8888	3/13/2024 yees working more than thirty- "Monthly contribution towa "To	Steph ER5 five (35) hours per week? • Yes • No ard employee's child care: 250 Phone: 5024449999 tal number of employees: 42 Physical Address County: FLOYD	
Employer Details Employer Details Employer Details	"Does the business hav "Does the business hav "Industry type: Industry/Manufacturing /Business Name: Steph C Job "Email address: Kiccstest-steph.er5@gmai Physical Address: Job 1 , Job City KY 78459 Mailing Address: Job 1 - Mail , Job City - Ma her person to obtain assistance (or bene	ie less than fifty (50) emplo com il KY 88888 fits) fraudulently is subje	3/13/2024 yees working more than thirty- "Monthly contribution towa "To	Steph ERS five (35) hours per week? • Yes • No ard employee's child care: 250 Phone: 5024449999 tal number of employees: 42	
Employer Details Employer Details Employer Details	"Does the business hav "Does the business hav "Industry type: Industry/Manufacturing /Business Name: Steph C Job "Email address: kicstest+steph.er5@gmai hysical Address: Job J , Job City KY 78459 Mailing Address: Job J - Mail , Job City - Ma	ie less than fifty (50) emplo com il KY 88888 fits) fraudulently is subje	3/13/2024 yees working more than thirty- "Monthly contribution towa "To	Steph ER5 five (35) hours per week? • Yes • No ard employee's child care: 250 Phone: 5024449999 tal number of employees: 42 Physical Address County: FLOYD	
Employer Details Employer Details Employer I arring: Any person who aids anot I certify that the information contain	"Does the business hav "Does the business hav "Industry type: Industry/Manufacturing /Business Name: Steph C Job "Email address: Kiccstest-steph.er5@gmai Physical Address: Job 1 , Job City KY 78459 Mailing Address: Job 1 - Mail , Job City - Ma her person to obtain assistance (or bene	ie less than fifty (50) emplo com il KY 88888 fits) fraudulently is subje	3/13/2024 yees working more than thirty- "Monthly contribution towa "To	Steph ER5 five (35) hours per week? • Yes • No ard employee's child care: 250 Phone: 5024449999 tal number of employees: 42 Physical Address County: FLOYD	

Click the Add Household Member button to add details of individuals in your home, including yourself. Set the Household Role radio button to Adult or Dependent, as applicable. Complete all required fields as indicated by asterisks. Gross Monthly Income is required if Source of Income is set to Earned or Unearned. Job Title and Employer are required if Household Role is Adult and Source of Income is set to Earned. Date of Birth and "Is child care needed" are required if Household Role is Dependent. At least one dependent must be marked as Yes for "Is child care needed" to submit the Contract. Individuals should be entered more than once if they have more than one source of income. The individual is added to the appropriate Household grid after clicking the Save button.



Adult Household						
Household Member	Relationship	Employer	JobTitle	Source of Income	Gross Monthly Income	Active
Steph EE22	Self	Steph C Job	Assistant Manager	Earned	\$3,200.00	Y
Steph EE22	Self			Unearned	\$500.00	Y
Dependent Household						
Household Member	Relationship	Date of Birth	Source of Income	Gross Monthly Income	Is child care needed?	Active
	Dependent	8/15/2019	None		Y	Y
Matthew EE22	Dependent	0/13/2019				

At any point, you can save the Contract and return later to complete.

Indicate the number of child care providers needed then click Search Providers. Enter at least CLR#, Business Name, or Last Name and click Search. Search Results display with all providers that match the search criteria. Select the checkbox next to your provider and click Add to Grid. Selected provider displays in the Providers Selected grid. Repeat these steps if you have more than one provider. At least one provider must be selected to submit the Contract.

Providers Selecte		How man	Iny child care programs are needed?:	Providers must be in Approved status and participate in the All STARS program.
Provider Search	CLR#: Last Name: City:		Business Name: cissell - coo First Name: County: Select One v Search Clear Search Cancel Search	Middle Name: State: Select One 🕶
Select	CLR		Provider Name	Providers may have multiple locations or
	L370003 L370056	Cissell - COO Cissell - COO 1	123 Main St, Louisville KY 1000 1 Main St, Louisville KY 1000 Add to Grid Cancel	

Documentation is required if you or a household member is working for an employer other than the employer that submitted Section I of this Contract. If yes is selected, click the Upload button to display the Document Upload panel.

Are you or a household member currently working for an employer other than that specified in Section I? Oyes ONo Upload If yes, you must upload proof. Proof could be a check stub from the current month or a written statement from the employer.

Click Choose File to upload pay stubs or a statement from the employer. A window will open to select a file from your computer. Select the file and click Upload File to add it to the grid. Repeat these steps to include all required pay information. Click the Document Name link to view the uploaded document. Uploaded files cannot be deleted.

Document Upload		
		Choose File No file chosen Upload File Cancel
Document Name	Upload Date	Upload User
<u>TestImage.jpg</u>	3/13/2024	Steph EE22

Complete all required fields as indicated with as asterisk. Select the "I certify" to indicate the form is completed accurately. Review the Contract prior to clicking the Submit button. Click Submit once no additional changes are needed.

Varning: Any person who aids another person to obtain assistance (o	r benefits) fraudulently is subject to penalties provided by state law, KRS 199.990(8), including fines, imprisonment, or both.
I certify that the information contained in this form is true and correct t	o the best of my knowledge.
imployee Signature: <u>Steph EE22</u>	Date: <u>3/13/2024</u>
	Save Submit Clear Cancel

Red messages will display on Save or Submit if any required fields are missing or if any data is in an invalid format. A red asterisk will display next to any field requiring correction or completion.

Please enter number of child care programs. DCC-600 Contract Summary	How many child care programs are needed?:	*

A successful message displays once the Contract is submitted.

Each provider selected will have a section to complete if more than one provider was added.



The Contract is available for DCC to review once the employer, employee, and provider(s) have submitted each section of the Contract.

Returned Contracts

DCC may determine that more information or corrections are needed on the Contract. DCC has the option to mark a section of the Contract incomplete and return the Contract. Email notifications are sent to the portal users associated with the Contract when the Contract is returned.

Returned Contracts may be selected from the My Contracts page or the Pending/Returned DCC-600 Employee workbasket. The Contract will only display in the Pending/Returned DCC-600 Employee workbasket if the Employee section was marked incomplete.

Click the View Section Details link in the Contract Summary panel after selecting the Contract. The Section Details includes the Review Result and Review Notes when a Contract is in Returned status. The Review Notes will provide instructions from DCC for updating the Contract.

CC-600 Contract Summary		
Contract ID: 10056 Status: Returned Status Date: 3/22/2024 Effective Date: 7/1/2024		Fiscal Year: 2025 Status Reason: Expiration Date: 6/30/2024
Employer: Steph ECCAP Job Employee: Steph Nineteen Provider(5): Cissell 5 Partners (L371615) <u>View Section Details</u>		
© DCC-600 Contract Summary		
Contract ID: 10056 Status: Returned Status Date: 3/22/2024		Fiscal Year: 2025 Status Reason:
Effective Date: 7/1/2024 Employer: Steph ECCAP Job		Expiration Date: 6/30/2024
Employee: Steph Nineteen Provider(5): Cissell 5 Partners (L371615) <u>Hide Section Details</u>		
Section: Clssell 5 Partners (L371615) Review Result: Incomplete Review Notes: correction needed for child's start date	Status: Returned	Status Date: 3/22/2024
Section: Employee Review Result: Incomplete Review Notes: proof of spouse's income needed	Status: Returned	Status Date: 3/22/2024
Section: Employer Review Result: Incomplete Review Notes: Additional wage details or uploaded stubs needed.	Status: Returned	Status Date: 3/22/2024

Complete the requested updates and click the Submit button. The Contract will be resubmitted to DCC after all incomplete sections of the Contract are resubmitted. Sections can be completed in any order when a Contract is in Returned status. For example, if all sections are marked incomplete, the provider may complete their changes and resubmit even if the employer and employee have not completed their updates yet.

Amendments

Amendments are updates to an Approved Contract. Amendment reasons include new dependent, change in household size, provider change, address/phone change or a combination of these reasons. No changes are allowed to the Employer section during an Amendment.

Changes should be reported to DCC, and they will initiate the Amendment process. Email notifications are sent to the portal users associated with the Contract and the Employee Section is available in the Provider Portal for updates.

Submitted Amendments may be returned by DCC if additional information is needed. The Return process works the same as described above for initial Contracts.

Amend Scenarios

Example 1: The Employee reports the birth of a new child. The new child needs to be added to the existing provider. DCC updates the Contract Status to Amend-Pending.

The Employee Section Status updates to Pending and is available in the Provider Portal for updates. Click Add Household Member. Enter the new child's info and click Save. Click Submit after all changes are complete.

		ſ					
		l	Add Household Member				
Household Role: (🔾 Adult 🖲 Dependent		Active: 💿 y	es 🔿 No			
*First Name: New Middle Name:				*Last Name: Baby			
*Relationship to Employee: Dependent V Job Title:				Date of Birth: 4/1/2024			
*Source of Income: None Gross Monthly Income:				Employer:			
		5	Save Clear Cancel				
Descendent Usuarhald							
Dependent Household							
Household Member	Relationship	Date of Birth	Source of Income	Gross Monthly Income	Is child care needed?	Active	
	Relationship Dependent	Date of Birth 11/22/2022	Source of Income	Gross Monthly Income \$100.00	Is child care needed? Y	Active Y	
Household Member					Is child care needed? Y Y	Active Y Y	
Household Member <u>Herbert EE17</u>	Dependent	11/22/2022	Unearned	\$100.00	Is child care needed? Y Y Y	Active Y Y Y	

The Provider Section updates to Pending and is available in the Provider Portal for updates. The Contract is available for DCC to review once the provider submits their section.

Example 2: The Employee reports that their spouse has moved out of the home. DCC updates the Contract Status to Amend-Pending.

The Employee Section Status updates to Pending and is available in the Provider Portal for updates. Select the spouse in the Adult Household grid. Change the Active selection from Yes to No and click Save. Click Submit after all changes are complete.

	Relationship	Employer	JobTitle	Source of Income	Gross Monthly Income	Active
Adult Household						
		Save Clear	Cancel			
*Source of Income: Ear	med 🗸	Gross Monthly Incor	ne: \$5,000.00		Employer:	Spouse Job
*Relationship to Employee: Spo	ouse/Partner 🗸	Job Ti	tle: Title	7	Date of Birth:	
*First Name: Spo	Juse	Middle Nar	ne:		*Last Name:	EE17
Housenoid Role:	Adult 🔾 Dependent	Is child care neede	d?: 🔿 Yes 🔿 No		Active:	🔾 Yes 🔍 No

This change does not impact enrollments, so the provider is not included in the Amendment process. The Contract is available for DCC to review after the Employee submits.

Example 3: The Employee reports a provider change from Provider A to Provider B. Enrollment with Provider A is terminated in KICCS Main by DCC. DCC updates the Contract Status to Amend-Pending.

The Employee Section Status updates to Pending and is available in the Provider Portal for updates. Search for and select the new provider. Click Submit after all changes are complete.



The Provider Section for the new provider updates to Pending and is available in the Provider Portal for updates. The Contract is available for DCC to review once the provider submits their section.

Contract Versions

A new version of the Contract creates when an Amendment is started. The Initial version becomes read-only. This allows viewing the Contract with all details when it was initially approved and viewing the current details. The Amend 1 version becomes read-only if a second Amendment is started. Each version may be selected/viewed via ECCAP Search, Contract History Details.

Contract History Details									
<u>Versions</u>	<u>Status</u>	<u>Status</u> <u>Date</u>	<u>Employer Section</u> <u>Status</u>	<u>Employer Section Status</u> <u>Date</u>	<u>Employee Section</u> <u>Status</u>	<u>Employee Section Status</u> <u>Date</u>	<u>Provider Section</u> <u>Status</u>	<u>Provider Section Status</u> <u>Date</u>	
Amend 1	Pending	5/23/2024	Submitted	5/23/2024	Pending	5/23/2024	Submitted	5/23/2024	DCC- 600
<u>Initial</u>	Approved	5/23/2024	Approved	5/23/2024	Approved	5/23/2024	Approved	5/23/2024	DCC- 600

DCC-605 Employee Child Care Assistance Partnership Notice of Action

A DCC-605 generates to notify all parties when a Contract is Approved, Denied, Terminated, or Amended. The notice is mailed to the employer, employee, and provider(s) and is available on the My Contracts page in the Contract Correspondence Details panel. Email notifications are sent to the portal users associated with the Contract when correspondence is available.

