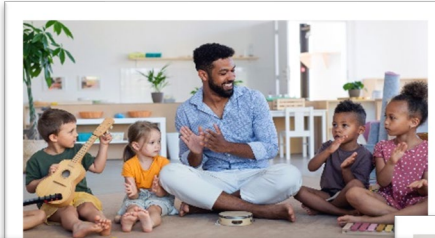




COLORADO

Department of Early Childhood



Colorado Child Care Assistance Program PROVIDER HANDBOOK

Colorado Department of Early Childhood
Colorado Child Care Assistance Program Division



COLORADO
Department of Early Childhood

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Introduction to the Handbook

The purpose of this handbook is to inform Colorado Child Care Assistance Program (CCCAP) providers of program policies and procedures as well as provider responsibilities. This Handbook provides the most current information on CCCAP.

Unless specifically stated, all information is directed to both Licensed and Qualified Exempt-from-Licensing CCCAP providers, who will be referred to as “CCCAP providers” in this handbook. Also in this handbook, adult caretakers, teen parents and guardians will be referred to as “parents.”

Section 1 About the Colorado Child Care Assistance Program

Colorado Child Care Assistance Program Overview

The Colorado Child Care Assistance Program (CCCAP) is a program administered by Colorado counties for the Colorado Department of Human Services. County Departments of Human/Social Services administer the CCCAP locally. Families can access child care assistance through the following options:

1. Low-Income Child Care—a child care component within CCCAP for households with a parent who is in a low-income eligible activity or income eligible and not receiving Colorado Works, Child Welfare, or Protective Services Child Care; or
2. Colorado Works Child Care—a child care component within CCCAP for Colorado Works households with a parent who is determined to be work-eligible per Colorado Works Program rules and have been referred for child care by the county Colorado Works worker; or
3. Protective Services Child Care—a child care component within CCCAP for children that have been placed by the county in foster home care, kinship foster home care or non-certified kinship care; have an open child welfare case; and the county has chosen to provide child care services utilizing the Child Care Development Fund (CCDF) rather than the Child Welfare Block Grant; or
4. Child Welfare Child Care—a child care component within CCCAP in which less than 24-hour child care assistance is needed to maintain children in their own homes or in the least restrictive out-of-home care when there are no other child care options available.

Families need access to high quality, affordable child care to continue their employment, higher education and/or job search activities. CCCAP child care providers work in partnership with counties to assist families with child care services that meet the needs of the family and support healthy development and school readiness.

How CCCAP Families Select Providers

When families apply for CCCAP, they receive information that outlines their child care choices. They are free to select the child care provider(s) that best meets the needs of their family; this includes both Licensed providers and Qualified Exempt providers. The child care provider may be a licensed child care center or a licensed family care home. The provider can also be a relative, friend or neighbor as long as that person is 18 years of age or older and successfully completes the CCCAP Qualified Exempt from Licensing approval process.

If a family needs help locating child care providers, they can access child care information from the Colorado Shines Child Care Resource and Referral line at Mile High United Way. In addition, resource and referral agencies across the State maintain lists of licensed child care providers that include the type of care provided, spaces available, and other relevant information about quality early learning programs to help parents make informed child care choices.

For more information or for referrals:

 Dial 1-877-338-2273 or 211	 Text "child care referrals" to 211	 Use the online chat/intake at www.unitedwaydenver.org or www.coloradoshines.com
 Email childcarereferrals@unitedwaydenver.org	 Providers Child care providers can also indicate their availability by texting "CC Open" to 898-211.	

Once the family has made a child care selection, they notify their county CCCAP eligibility worker to initiate care, which includes ensuring that a Fiscal Agreement is established between the provider and the county. The Fiscal Agreement outlines provider rights and responsibilities and provides information on the maximum county reimbursement rates, also called ceiling rates, that a county can pay for child care services. This includes tiered reimbursement rates based on a provider's Colorado Shines Quality Level. The ceiling rate is the maximum county daily reimbursement rate. Providers may be reimbursed up to the ceiling rate for each county, but not more than what is charged to private pay families. Each provider's daily reimbursement rate is set in a Rate Schedule Notification accompanying the Fiscal Agreement.

Once a family selects a provider and the county has established a Fiscal Agreement and Rate Schedule, the county CCCAP eligibility worker will provide a written authorization for child care services, called an Authorization Eligibility Notice. (CR213). This information will also be updated in the CCCAP Attendance Tracking System (ATS) to identify the child(ren) that are approved for care. This document is required for CCCAP child care services and notifies the provider and family that they are eligible to begin utilizing CCCAP child care.

Providers will not be reimbursed for child care services through CCCAP until a child care authorization has been established. Do not hesitate to contact the family's CCCAP worker at the county to confirm that they have been approved for benefits if there are any questions related to a child's authorization.

If a family requests to have a family member, friend or neighbor (FFN) provide care for their child(ren), and that person does not have a child care license, the county (or State CCCAP as the designee) will begin the process to review the eligibility of the individual to become a Qualified Exempt provider. The process includes completing an initial background check for any founded abuse and/or neglect or incidents which would indicate there may be risk to the safety of children. If the county finds that the person or household member(s) (if applicable) has any founded abuse and/or neglect incidents, has not cleared all background checks or has other areas of concern, the county will refuse to enter into a Fiscal Agreement with the individual. In that case, the family would have to select a different provider to utilize their CCCAP funding.

If the county or State CCCAP designee does not find records of initial county-level abuse and/or neglect, the county or State CCCAP designee will establish that person as a potential Qualified Exempt provider applicant. The applicant and all adult household members (if applicable) will then need to submit to a Colorado Bureau of Investigation (CBI) and Federal Bureau of Investigations (FBI) fingerprint background checks and out-of-state background checks (if applicable). Once all background checks clear and all required paperwork is complete, the applicant will be approved and may be eligible for a Fiscal Agreement with the county as a Qualified Exempt provider. CCCAP will not approve or reimburse child care before the date these clearance checks are completed.

The non-relative Qualified Exempt provider, once approved and then annually, must complete required training, pass a home visit where the care is provided and agree to properly report all accidents or injuries that occur where care is provided to the State CCCAP Office. The individual must repeat these steps annually to remain an approved Qualified Exempt provider.

For more information on licensing, see Section 6, "CCCAP Provider Licensing Requirements."

Section 2 Working with Counties to Become a CCCAP Provider

Child care providers work directly with each county CCCAP office for CCCAP specific needs. Some important terms to understand when working with the county are listed below.

Fiscal Agreement is a state-approved agreement between counties or their designees and child care provider(s) which defines the maximum daily reimbursement rate based on county ceiling rates and quality rating tiers. The Fiscal Agreement also defines provider rights and responsibilities and defines responsibilities of the counties or their designees to the child care provider(s). The fully executed Fiscal Agreement includes notice of county ceiling rates as well as a copy of the provider's CCCAP reimbursement rates. Fiscal Agreements must be:

- One year for Qualified Exempt child care providers
- Three years for licensed child care providers

Providers can contract with multiple counties at the same time, but a separate Fiscal Agreement with each county is required. For more information on each county's rates, see Section 4, "How to Receive Payment for Services."

Attendance Tracking System (ATS) is the system used by CCCAP parents or designees to access benefits and to record child attendance for the purpose of paying for authorized and provided child care. ATS is the on-line automated attendance and billing system for CCCAP. For more information on the ATS, see Section 4, "How to Receive Payment for Services."

Process for Licensed Providers

The Licensed Provider will receive the Fiscal Agreement packet with information from the county (if not already contracted with the county). The packet includes a cover letter that outlines the process and necessary paperwork, including the draft Fiscal Agreement, W-9 or other documents that include the individual taxpayer identification information, and a request for the provider's private pay information. Counties may also include an optional Payment Option form and CCCAP County Payment Policies. The provider should read over the agreements very carefully, sign them and return the completed packet as soon as possible.

When returning the Fiscal Agreement to the county, Licensed child care providers must include a copy of their private pay rates charged to non-CCCAP families that details the days/hours of operation, ages accepted and rates charged. Once returned, the county will process the agreement within five business days. Providers can be reimbursed up to the county ceiling limit, but not more than what is charged to private pay families. After a review of the provider's established private pay rates

compared to the county's ceiling rates, a Notification of Rate Schedule Reimbursement Rates for Fiscal Agreement (CR707) detailing each provider's daily CCCAP reimbursement rates is created. A copy of the executed Fiscal Agreement with the Rate Schedule is sent to the provider and is also visible in ATS.

Once returned, the county will process the agreement within five business days. Once a Fiscal Agreement is finalized and opened in CHATS by the CCCAP county, the provider receives an automated "ATS Welcome" email to set up the ATS username and password for the provider to begin using ATS. County CCCAP Fiscal Agreements are in place for three years for licensed providers and allow the county to authorize care for CCCAP approved and enrolled families during that time period.

Process for Qualified Exempt Providers

The potential provider will receive a Qualified Exempt-specific packet from the CCCAP county that includes:

- Child Care Standards for Qualified Exempt Providers (SS-31)
- Provider Information Form (PIF)
- Background Investigation Unit (BIU)
- Out-of-State State-Based Background Check Checklist form (for potential provider and all applicable adult household members)

Potential providers will also need to provide acceptable proof of identification. The potential provider should read these forms carefully before signing them. The forms are used for the initial county and state-level background checks before the individual is approved as a Qualified Exempt provider and approved to receive a Fiscal Agreement. Potential providers should keep copies of these documents to refer to in the future.

By signing these forms, the potential provider commits to meeting the standards and expectations set forth for as long as they provide care under the CCCAP program. If the provider is providing non-relative care, the provider must participate in the required training and home health and safety visit as determined by the Qualified Exempt process. Failure to meet the Qualified Exempt standards may result in the county declining to offer the approved Qualified Exempt provider a Fiscal Agreement or terminating the Fiscal Agreement and, in the instance of founded fraud, may include legal and/or financial penalties.

Child care will not be reimbursed to the provider until the CBI and FBI fingerprint background checks and out-of-state background checks (if required) have been cleared by the State Background Investigation Unit (BIU) and State CCCAP. The Qualified Exempt provider must repeat these checks annually via the Fiscal Agreement renewal process.

The Qualified Exempt Provider must also adhere to group size limits pursuant to Colorado Regulations Code 12 CCR 2509-8. Violations of these requirements will be reported to Colorado Department of Early Childhood (CDEC) licensing staff. Care must only be provided using one of the options below at any one time:

Qualified Exempt Providers Caring for Relative Children	OR	Qualified Exempt Providers Caring for Non-Relative Children
Group size limits for Qualified Exempt Providers caring for relative children are any number of children who are directly related to the caregiver by blood, marriage or adoption. <i>“Relative” means a blood or adoptive relative to include, but not limited to: a brother, sister, uncle, aunt, nephew, niece, or persons of preceding generations denoted by grand, great, great-great, or great-great-great; a stepbrother, stepsister; or, a spouse of any person included in the preceding groups even after the marriage is terminated by death or divorce.</i>		Group size limits for Qualified Exempt Providers caring for non-relative children are up to four children, related or unrelated to the provider. Of those four children, no more than two children under the age of two years may be cared for at any one time. If the provider’s own children or any other children are in the provider’s care, they are counted toward the maximum capacity of four.

Other Forms and Documents

The **Authorization Eligibility Notice (CR213)** will be provided to both the child care provider and the CCCAP family when child care for a family has been authorized. The Authorization Eligibility Notice shows the days and amount of time for which care is authorized and also corresponds with the screen display in ATS. This is available for viewing or printing from ATS under Correspondence (CR213). The provider should keep a copy of each Authorization Eligibility Notice for their records.

The provider will receive a new Authorization Eligibility Notice if any of the information changes. The provider should read the Authorization Eligibility Notice carefully to ensure the authorized care aligns with the care provided. The provider should contact the county CCCAP eligibility worker if any discrepancies are identified or if there are any questions regarding authorized child care.

On the back of the Authorization Eligibility Notice is information regarding provider rights and other important information. Do not overlook this information.

Form W-9: All CCCAP child care providers are considered independent contractors with the county, not employees of the county and will be asked to submit a Form W-9 or other appropriate Internal Revenue Services (IRS) form to each county business office holding an executed CCCAP Fiscal Agreement. These are IRS forms that counties are required to have on file before they pay for services. At the end of each year, counties will send providers a Form 1099 with the amount the provider was paid by CCCAP for amounts of \$600 or more. No taxes are withheld from CCCAP payments. The provider will be responsible for paying any taxes due on that income. Providers must also report any applicable portions of the child care paid from the parent directly to the provider and provide families with the appropriate tax identification information to claim payments made to the provider by the families.

County Optional Payment Options Form: Counties may use this document to share information about choices in how providers can receive child care payments. Direct deposit is the only option available for Licensed Center-based providers. Qualified Exempt Providers and Licensed Home Providers have two options: direct deposit if the provider's license or exempt license is registered with their Federal Employer Identification Number (FEIN) or Individual Taxpayer Identification Number (ITIN), or prepaid debit card, if the license or exempt license is registered with the provider's Social Security Number (SSN).

County Optional CCCAP County Payment Policies: Each county may provide this document as part of the Fiscal Agreement packet with county-specific detail about the following:

- Number of absences allowed per month per provider quality level
- Maximum amount for annual fees per child for Activity, Registration and Transportation
- Allowable holiday payment
- Explanations of the service period, the payment method (ATS primary and manual claim secondary), authorized child care, and Parent Fees
- Statement of the process for termination/withdrawal, payment problems, manual claims and ATS or Password/PIN issues

Section 3 CCCAP Provider Responsibilities

As a CCCAP provider, it is important to understand provider responsibilities. These responsibilities are in addition to licensing regulations found in the Colorado Code of Regulations 12 CCR 2509-8. The responsibilities are detailed in the Fiscal Agreement. Failure to adhere to provider responsibilities may result in the termination of the

Fiscal Agreement and, in the instance of founded fraud, may include legal and/or financial penalties.

Provider responsibilities are as follows:

(Provider responsibilities listed below are referenced from both the Licensed Provider Child Care Fiscal Agreement and the [Colorado Secretary of State Code of Colorado Regulations](#).)

- **The provider agrees to maintain an open license or Qualified Exempt-from-Licensing registration in order to authorize and reimburse child care.** It is the responsibility of the provider (Licensed or Qualified Exempt from Licensing) to ensure that the type of license or exempt registration used to provide CCCAP child care is valid and all requirements are followed, including conforming to all applicable state and federal regulations and local law.
- **Allow CCCAP caretakers immediate access to their children at all times.** This includes parents and adult caretakers or teen parents who have legal custody or guardianship.
- **Ensure referrals for child care are accepted without discrimination regarding race, color, national origin, age, sex, religion, marital status, sexual orientation, or physical or mental handicap.** Any additional steps to determine a “good fit” between the provider and family would be completed by both the provider and the family to secure the child care arrangement. Colorado Shines is available to provide resources on searching for a program and finding quality care. See the [Colorado Shines website](#) for more information.
- **Provide adequate food, shelter and rest to children in care as defined by the Division of Early Learning Licensing and Administration as outlined in licensing rule.** Additional resources are available, including the [Child and Adult Food Program \(CACFP\)](#), that provide support to child care providers.
- **Ensure confidentiality of information for CCCAP children and families.** This includes all information concerning children and their families, which must be protected by the provider and all staff and individuals who have access to this information. This includes Health Insurance Portability and Accountability Act (HIPAA), Protected Health Information (PHI), Personally Identifiable Information (PII) and any sensitive legal information (for example, restraining orders).
- **Always protect children in care from abuse and neglect.**
- **Only provide care at the location that is listed on the Fiscal Agreement/Fiscal Agreement Rate Schedule and by people who are authorized to provide child care under that license.** For Qualified Exempt providers, only the individual provider is authorized to provide care. It is the responsibility of the provider to ensure that authorizations for child care are being utilized at the correct location. Child care authorizations are created per license number and location address and

cannot be used for more than one location/license, ensuring that families, the CCCAP county and child care licensing always know the location of the child.

- **Understand the requirements associated with the reimbursement process.** This includes acknowledging that CCCAP child care payments will not begin before the effective begin date of the Fiscal Agreement and/or after the Fiscal Agreement end date. The Begin Date of the Fiscal Agreement is based on when the provider returns the completed Fiscal Agreement to the CCCAP county, which includes completing, signing and returning all required documentation.
- **Utilize ATS as required to track and bill for CCCAP child care.** Attendance Tracking System (ATS) is the primary method of attendance tracking and billing for CCCAP. CCCAP child care providers must use ATS as follows:
 - Ensure CCCAP parents record their child's authorized and utilized attendance at the designated child care provider's location.
 - Ensure that if the parent misses one or more check-ins/outs to record daily attendance, the child care provider must record the missed check-in/out in the ATS. The parent shall confirm, correct or deny the record in the ATS for the prior nine-day period ensuring time is accurate and is for actual time care is provided.
 - Acknowledge that non-cooperation with the use of the ATS may result in nonpayment of the child care subsidy as defined by a state approved county policy, unless non-use of the ATS is approved by the State CCCAP team.
 - Not hold any parent responsible for the cost of care if the transactions are not transmitted within the required timeframe by the provider.
 - Review ATS Information and Resources and complete the ATS Training Video Series at [Colorado Child Care Assistance Program for Providers](#).
 - Contact the ATS Helpdesk immediately to report any issues with ATS sending an email to cdec_ats_helpdesk@state.co.us.
- **Develop an individual care plan if a county chooses to pay the Disability Rate Type and a child care provider is providing child care services for a child with additional care needs related to a disability.** If the child care provider's Fiscal Agreement Rate Schedule is not reimbursing 100% of the provider's private pay rates, the provider can request to be reimbursed up to 100% of their private pay rates by developing an individual care plan for the child. The provider then provides that plan to the CCCAP county with the request. The county will verify the child's additional care needs and will be able to consider the Disability Rate Type to reimburse the provider more than the Regular Rate Type.
- **Ensure all immunization records are up to date and available upon request.** Immunization records must be kept at the licensed provider location and must be up to date. Non-relative out of home Qualified Exempt providers are required to

work with the family to ensure the family has provided the immunization records to the county.

- **Maintain signed attendance records.** The records may be signed and stored on paper or electronically but must be made available upon request. The sign in/out records must include the date, name of child, time child arrives/leaves each day and the signature of the person authorized to drop off or pick up the child. The ATS Parent Sign In/Sign Out Report (RE753) meets this requirement. For approved CCCAP reimbursement, verification of attendance is necessary for proper payment.
- **Charge counties the same rate for CCCAP families as the provider's private pay rates.** Provide the CCCAP county with the private pay rate information that aligns with the private pay rates to ensure that the provider is not charging CCCAP counties more than private pay. This information may be on a separate rate sheet or a part of the provider's parent handbook that is provided to interested parties who are inquiring about the cost of services and the charges for services.
- **Ensure CCCAP families are not charged rates greater than the daily reimbursement rate established on the Fiscal Agreement Rate Schedule.** This includes any Activity, Registration and Transportation Fees. If the CCCAP county does not reimburse for Activity, Registration or Transportation Fees, the provider may not charge these fees to families.
- **Use the CCCAP daily reimbursement rate agreed upon in the Fiscal Agreement for absences.** Each county has a maximum number of absences that can be paid to a provider. Once the maximum number of absences have been paid, if a CCCAP family is absent for agreed upon additional scheduled care and the provider is going to charge for those absences, it must be at the CCCAP reimbursement rate, not the provider's private pay rate.
- **Offer a free age appropriate alternative to voluntary paid activities before being able to charge a CCCAP family for the paid activity.** Example: If the provider is taking the children on a water play adventure and charging \$15, the CCCAP family must be given the option to have the child stay at the provider location and participate in water play activities for no charge. If the family chooses the paid activity, they can be charged. If there is no free age appropriate activity, the family cannot be charged.
- **Submit accurate and complete attendance records and/or requests for payment.** CCCAP payments made to a child care provider who has secured, attempted to secure, or aided or abetted another person in securing public assistance to which they were not eligible by means of willful misrepresentation, withholding of information, or intentional concealment of any essential facts may be considered fraud and will be subject to civil or criminal action in an appropriate state or federal court. Any alleged discrepancy that may be a suspected fraudulent act must be followed up on by the applicable CCCAP

county(ies) or its designee. Counties are required to recover fraudulent payments and report the information to the appropriate legal authority.

- **Submit a manual claim bill directly to the CCCAP county within 60 days of the care month if authorized care is not paid.** If a provider is not paid for authorized and attended days, agreed upon Activity/Registration/Transportation, hold slots, drop-in days or reimbursable absences payments via the use of the Attendance Tracking System (ATS), the secondary method of reimbursement is to submit a manual claim bill directly to the CCCAP county.
- **Submit the state-prescribed Manual Claim Form within 60 days of the care month or forfeit payment for service for the CCCAP care from the county and the CCCAP family.**
- **Bill for reimbursable Activity, Registration and/or Transportation Fees according to the timeframe outlined in the current Fiscal Agreement.** CCCAP counties have the option to reimburse Activity, Registration and Transportation Fees. If the county offers these fees, they will be detailed on the Fiscal Agreement Rate Schedule. The county will look at the provider's charges and whether they are a one-time, annual or monthly charge. The county then has the option to set the frequency of those repayments by taking the entire charge and paying it one time, annually or monthly. For example, a Registration Fee of \$75 could be paid one time on the first day of the child's attendance; or \$75 on the first day of the child's attendance and then annually thereafter on that date or the \$75 could be paid at a monthly rate of \$6.25 for 12 months.
- **NEVER, under any circumstance, hold, transfer, or use a parent's individual attendance credentials.** This includes requesting access to the CCCAP parent's ATS Personal Identification Number (PIN), using the PIN, or having the PIN in the provider's possession or available for use by the provider. Any instance of potential misuse by the provider, employees of the provider, county, and/or the CCCAP family shall be reported immediately to the Department fraud hotline at (877) 934-6361 or (303) 866-7325. If intentional misuse is founded by any county or state agency, the child care provider will be subject to Fiscal Agreement termination, fiscal implications based on the recovery of funds related to the fraudulent behavior, and civil or criminal action in an appropriate state or federal court due to fraudulent activity as outlined in CCCAP regulations.

In addition, providers are required to report certain information to the applicable CCCAP county within the timeframes outlined below. The provider shall contact the CCCAP county within the required time frame to:

- **Immediately report any suspected child abuse and neglect.** The provider must report this information by reporting to the CCCAP county or the Colorado Child Abuse and Neglect Hotline at (1-844-CO-4-KIDS or 1-844-264-5437).

- **Share any information that could impact the provider's ability or eligibility to provide CCCAP child care.** This includes reporting directly to the CCCAP county if the provider's child care license is revoked, suspended or denied within three calendar days of receiving that notice from the Division of Early Learning Licensing and Administration.
- **Report changes to the address where care was approved as outlined in the Fiscal Agreement.** These changes must be reported to the county and the Division of Early Learning Licensing and Administration no less than 30 days prior to the change. This will ensure the county is aware of the change and can take any necessary steps to update the Fiscal Agreement and/or Rate Schedule. This also ensures the county has the correct location and mail address.
- **Report changes to the phone number where care was approved as outlined in the Fiscal Agreement.** Additional communication with the CCCAP county and the Division of Early Learning Licensing and Administration includes reporting any changes in phone numbers within 10 days. CCCAP uses the provider contact information directly from the child care license. The CCCAP county must have updated, valid contact information for the provider to ensure correspondence is sent to the correct address and verbal contacts related to CCCAP can be made as needed. The provider should also inform the CCCAP county if there are other phone numbers or contact information to be used in addition to what is on record with licensing. CCCAP counties have the ability to register provider CCCAP contact information in the Child Care Automated Tracking System (CHATS) that is used by counties to manage CCCAP that can be referenced for manual use.
- **Report unpaid parent fees.** Parent fees are paid directly to the provider by the CCCAP family. If the parent fee is not paid, the provider must report the non-payment to the CCCAP county within 60 calendar days after the month that the parent fee was due. The CCCAP county will take action on the case for unpaid parent fees at redetermination if non-payment is reported within that time frame. The unpaid parent fees can be reported by fax, e-mail or other electronic systems, in writing or on the Manual Claim Billing Form. The county will not take action on a report of unpaid parent fees if it is outside the required reporting timeframe.
- **Report absences to the CCCAP county that are unexplained, frequent and/or consistent to the CCCAP county within 10 calendar days of an established pattern.** The provider must notify the county worker listed on the child care Authorization of Eligibility Notice for the child in question if excessive absences occur.
- **Notify the CCCAP county when an Authorization of Eligibility Notice is received for a child who is not enrolled.**

- **Notify the CCCAP county when a child is no longer enrolled.** The provider shall contact the CCCAP county within two business days to notify them that a child is no longer enrolled.
- **Notify the CCCAP county of any days the provider is closed for service.** Dates of closure must be reported to the County Department before the day of closure or, if due to unforeseen circumstances, the day of the closure or as soon as possible.

Note: The county cannot be billed for any care usage after the parent and/or provider has terminated care.

Records Maintenance

CCCAP providers must maintain paper or electronic attendance records. The following records must be maintained by the provider for a minimum of the current year plus three years:

- Daily sign-in/sign-out sheets
 - At a minimum, per Child Care Licensing requirements, the sign-in/out sheets must include the following: the date of care, the full name of the child(ren), accurate sign-in time, parent's legible signature for sign-in time, accurate sign-out time and parent's legible signature for sign-out time.
 - The Attendance Tracking System (ATS) provides the required Attendance Sign In/Out (RE803) electronic signature records that can be printed and used as needed.
- Attendance records
- Payment records
- Fee collection records

These records must be made available to county, state, or federal officials upon request. Failure to submit sign-in/sign-out sheets, if requested, may result in the discontinuance of the Child Care Services Fiscal Agreement with the county department of human/social services.

Sign-in/Sign-out sheets submitted with incomplete information could result in a recovery of all of the payment the provider received for the day or days that had incomplete sign-ins or outs for the review month. Sign-in/sign-out sheets submitted with no signature of a parent may result in a total recovery of monies paid to the provider for that day.

Program Integrity and Information Sharing

Providers are expected to work closely with the respective CCCAP counties to ensure that all CCCAP funds are used to the benefit of eligible children and families. For example, it is the provider's responsibility to ensure that payments are accurate.

They can do this by providing adequate training for staff to reduce administrative errors, monitoring attendance records to ensure timely and accurate payments, and ensuring staff are aware of and follow CCCAP requirements. Providers should make sure staff do not have access to the parent's individual attendance credentials and do not request access to the CCCAP parent's ATS Personal Identification Number (PIN), use the PIN, or have the PIN in their possession and/or available for use by the provider.

Providers should also communicate with the CCCAP county if they observe significant changes or questionable behavior. It is better to notify or reach out to county partners for clarification rather than ignore any potential issues. Questionable behavior includes:

- Anything a parent may ask of you as a provider that does not align with guidelines in this handbook.
- Inaccurate reporting of attendance by the family or provider that may be considered a fraudulent act.

Provider Rights

Provider rights are outlined on the Fiscal Agreement, and with each Authorization Eligibility Notice. Under the CCCAP program, providers have the right to request an informal conference with county officials to discuss payment disputes or termination/denial of a Fiscal Agreement.

To request a conference, the provider must put the request in writing to the director or manager of the county department of human/social services within 15 days of the date of the action. The county should schedule the conference to be held within two weeks of the request.

At the conference, the provider will have the opportunity to discuss the issues with county staff. The county staff will provide information to explain their actions and the provider will be able to provide information to the county to explain why the provider thinks they should have acted differently. This conference is limited to discussion of payment issues or termination/denial of a Fiscal Agreement. The county is not required to meet with the provider for any other reason.

After the conference has been held, provider rights have been exhausted. There is no avenue to appeal the outcome of the conference or the county's final decision.

Section 4 How to Receive Payment for Services

There are two methods of billing for reimbursement for CCCAP child care weekly service periods: the CCCAP Attendance Tracking System (ATS) or a manual claim. The information in this section will explain both.

The Payroll System

The Service Period

Weekly service periods start on Monday at 12:00am and end on Sunday at 11:59pm. Payroll runs for each service period on Thursdays at midnight, with funds released to the provider payment option of ACH Direct Deposit or KeyBank Prepaid Debit Card within one to three business days. Payment will be on a weekly basis for one week of care that occurred two weeks prior. The Payroll Run Cycle documents each service period for the year and can be found in ATS under Documents and Resources and on the [CDEC website](#) (Select “For Providers,” then “Colorado Child Care Assistance Program.”)

All CCCAP information, including weekly billing statements, are provided to licensed providers according to the information in the licensing records as registered with ATS. Licensed provider information will be presented exactly as it appears on the license. It will be provided to the mailing or email address on the license or released for viewing in ATS under Correspondence per license number. For any discrepancies in this information, licensed providers must submit the changes in writing to the Division of Early Learning Licensing and Administration, 710 S. Ash St, Denver CO 80246. Reports can also be made electronically via the [Provider Hub](#). For a Qualified Exempt provider, any changes to this information must be reported to the CCCAP county listed on the Fiscal Agreement.

Weekly Payment Summary (CR205): This document is available after each week’s Thursday night payroll. It can be viewed in ATS Correspondence beginning on Friday afternoons. The weekly payment summary will detail each day in the seven-day service period for each child with a current authorization, listing attendance, daily rate of reimbursement, parent fee deduction and total county reimbursement, with detail for each child’s amount and the total weekly reimbursement to the provider. This information is used to reconcile payment and to inform the provider of any payment discrepancies that may require a manual claim. Providers should review the Weekly Payment Summary to ensure that they have received payment for all CCCAP children who were authorized and attended for that week.

The **CCCAP Attendance Tracking System (ATS)** is used by CCCAP parents at the provider location to record child attendance, which determines reimbursement for child care services provided by the child care provider. **Use of the ATS is mandatory**

for payment and should be the primary billing mechanism. Only providers with a state approved waiver for the Attendance Tracking System are allowed to manual claim as primary billing.



The Attendance Tracking System (ATS)

ATS must be used by CCCAP providers with an open Fiscal Agreement and can also be used for their private pay families. The use of ATS requires internet access and a computer, tablet or smartphone at the provider's location.

With the touch of a button in one convenient location, providers and families

can track attendance for automated weekly billing, view authorization and payment correspondence and access resources and case information.

Providers access ATS daily on their device at their location with their username and password. Parents access ATS at the provider location on the provider's device in "Kiosk Mode," accessing only their children via a Personal Identification Number (PIN).

Both parents and providers can record attendance in ATS. If the child was in care and the parent did not record attendance at drop off or pick up, the provider can sign the child into or out of the facility. Providers will also enter attendance when they transport a child to or bring a child back from school, adding the child's name and the time in or out for each child. To verify the accuracy of the attendance records, the parent must confirm any provider or system entries within nine calendar days of care as verification that they are in agreement with the hours the child was in care.

Information on the use of ATS is located within ATS and on the [CDEC website](#), where providers and families can view ATS videos and resources. You will find the link to log in to ATS; Frequently Asked Questions (FAQs); instructions for authorization, payment and parent fee reports; training Quick Reference Guides (QRGs) in English and Spanish; the ATS Training video series; ATS documents including the ATS Waiver of Use request, Manual Claim Form and instructions; Payroll Run Cycle and system updates and supports.

The ATS training video series can be found on the [CDEC website](#). Select "Attendance Tracking System (ATS) Information and Resources" and "ATS Training Video Series."

The Manual Claim Form

When the weekly automated payroll does not include payment for an authorized child who utilized care, a child care Manual Claim Form can be accessed and completed

The Manual Claim Form can be found in ATS under Documents and Resources. It can also be found on the [CDEC website](#). (Select “Attendance Tracking System (ATS) Information and Resources.” Under “Waiver and Manual Claim Resources,” select either the printable version or the fillable PDF. For information on completing the claim, select “Manual Billing with ATS.”)

June 2023

Payment Under CCCAP

After providers submit billing via ATS or a manual claim, the following information is used to determine payment to ensure the correct reimbursement is made for the type of care and amount of care used. CCCAP uses a combination of Units of Care and Rate Types to determine each day's reimbursement rate.

Units of Care

For CCCAP, the period of time authorized for care that is billed by the provider and paid for the CCCAP child are in units. The units are Full-time (FT), Part-time (PT), Full-time plus Part-time (FT/PT) and Full-time plus Full-time (FT/FT).

- **Part-time** is zero hours, zero minutes, and one second through five hours, zero minutes, and zero seconds per day. Part time is paid at 55% of the full-time rate.
- **Full time** is five hours, zero minutes, and one second through 12 hours, zero minutes, and zero seconds.
- **Full-time/part time** is 12 hours, zero minutes, one second through 17 hours, zero minutes, zero seconds of care.
- **Full time/full time** is 17 hours, zero minutes, one second through 24 hours, zero minutes, zero seconds of care.

Setting Rates

In determining what the optional county-set rates will be, county officials may consider a number of factors including local economies, child care availability, market prices/rates and quality. State set rates are factored using market rate survey strategies.

Daily Tiered Reimbursement Rate Maximums (ceiling rates) represent the maximum amount counties can pay for child care for children. When determining the amount they will pay any licensed provider, counties look at the provider's private pay rates. Providers should notify counties if private pay rates are revised during the term of the Fiscal Agreement. False reporting of private pay rates can result in recoveries and termination of the Fiscal Agreement. **Counties cannot pay more than a provider's private client pay rate for the same services and are limited to pay up to the county ceiling.**

If the provider is providing CCCAP child care for more than one county, they may find that the counties pay under different rate limits. This is a result of the decision making in each county and the variation of factors considered by county officials and the state market rates.

View provider reimbursement rates and payment, including how the county decides rates, State-Established Regular Rates and market rate studies here: [Colorado Child](#)

[Care Assistance Program For Providers](#). View each county's [CHATS Payment Policies and County Rate Plans](#).

Rate Types

Each county has rate amounts paid under CCCAP. All counties must use the State-Established Regular Rate Types. County-Established Alternative Rate Types are optional.

State-Established Regular Rate Type: A daily rate used when the majority (more than 50%) of care is provided on a given weekday (Monday through Friday) between 6:00am to 6:30pm or Sunday through Saturday any time of day if the county does not use any other time/day specific rate types.

County-Established Alternative Rate Type Options: Dollar amounts determined by county. Justification for dollar amounts are included in the County Rate Plan to explain how the county determined dollar amounts. Optional rate types listed below.

- **Before School:** A daily rate used when care is provided to school aged children from Monday through Friday before elementary school, such as 6:00am to 9:00 am.
- **After School:** A daily rate used when care is provided to school aged children from Monday through Friday after elementary school, such as 2:30pm to 6:30pm.
- **Before and After School:** A daily rate used when care is provided to school aged children from Monday through Friday elementary school, such as 6:00am to 9:00am and 2:30pm to 6:30pm.
- **Overnight:** A daily rate used when care is provided spans the midnight hours; a functional rate that works with ATS to manage one check in/out per care occurrence. This rate type typically has the same dollar amount as the Regular Rate type.
- **Weekend:** A daily rate used when care is provided from Saturday 12:00am through Sunday 11:59pm and the care does not span the midnight hour. This could cover weekend day care or weekend evening care that the provider charges a higher rate for than weekday care. This rate type typically has a slight increase in pay above the Regular Rate type.
- **Evening:** A daily rate used when most (more than 50%) of the care provided on a given weeknight (Monday through Friday) is between 6:31pm and 5:59am. This does not include overnight care and may also be used for any evening care Monday through Sunday. This rate type typically has a slight differential increase in pay above the Regular Rate type.
- **Disability/Additional Care Needs:** A daily rate used for children with additional care needs based on a physical and/or mental disability and/or who need a higher level of care than peers of the same age. To receive this rate, providers must

submit a request for additional payment that includes a professional or physician's statement provided by the parent verifying the additional care needs (see Rule for reference). The requested rate may be up to twice the regular rate but may not be more than would be charged to the general public for the same care. The request for special needs "disabled/additional care needs" rates must include physician's or other professional's (county health care nurse, psychologist) statement listing and verifying the child's specific special needs. **Providers must develop an individualized care plan for the special needs child indicating what services are necessary beyond that of a similarly aged typical needs child.**

Out-of-County: A daily rate used for care at a provider facility located in a town/city with a higher private pay rate than the towns/cities within the county. This rate can be used by counties to support higher payments for Child Welfare placements outside of the county or by providers outside the county.

Licensed Providers may be paid the following as determined by the county.

Absences (county option to pay above the minimum): Absences that can be reimbursed per month are based on license type and Colorado Shines Quality Level as follows:

- Level 1/Level 2: No fewer than three absences per month
- Level 3/Level 4/level 5: No fewer than four absences per month

School Age Child Care (SACC license): No fewer than three absences per month for a school age child care program that does not have a quality rating through the department's quality rating and improvement system.

Two providers must not receive payment for the same child, on the same day and for the same time period. If a child has two providers, only one of the providers may be reimbursed for an absence.

Reimbursement occurs automatically based upon information entered into the ATS. If the provider decides to directly bill the CCCAP family for additional absences for scheduled days that were not attended, this may be at the CCCAP reimbursement rate only.

Holiday Pay (county option): counties may pay licensed child care providers for holidays. Counties may choose to pay for the following 10 holidays: New Year's Day, Martin Luther King, Jr. Day, President's Day, Memorial Day, Independence Day, Labor Day, Frances Xavier Cabrini Day, Veteran's Day and Christmas Day. Payment will be made at the rate for which each child is normally authorized. CCCAP will only allow payment once for a holiday per child per licensed provider. Two providers must not receive payment for the same child, on the same day and for the same time period. If a child has two providers, only one of the providers may be reimbursed for a holiday.

Hold Slot: (county option): On a case by case basis, Hold Slots are intended to hold a child's slot with a provider when a child is not in care due to extended absences from care, such as children who are absent for holidays, school breaks, hospitalized, or are absent related to COVID-19. Reimbursement requires submission of a manual claim.

Slot Contract: (county option): Slot Contracts means the purchasing of slots at a provider for children enrolled in CCCAP in communities where quality care may not otherwise be available to county-identified target populations and areas or to incentivize or maintain quality. A slot contract is tied to a licensed child care provider and may be filled by any child who is eligible for and receiving CCCAP. Slot contracts are used as a method to increase the supply and improve the quality of child care for county identified target populations and areas through collaborative partnerships that meet family and community needs, support continuity of care for households, funding stability for child care providers and expenditure predictability for counties.

Drop In Day: (county option): A drop in day is an unscheduled reimbursable day that is in addition to the regularly authorized care. This option removes obstacles of weekly or random requests for varied-schedule needs. Counties can choose from one to 23 drop in days per month, per authorization. Days that are not on a child's authorization schedule calendar will be reimbursed if utilized. Example scenario: a CCCAP child is authorized for Monday, Wednesday, and Friday and is in a county that authorizes six drop in days per month. If the child attends care on a Tuesday and checks in and out using ATS, the day will be reimbursed as one of six available drop in days. The system will pay out days utilized but not listed on the authorization calendar as a drop in day until the county-set maximum is used by this child at this provider.

Activity, Registration and Transportation Fees (automated payment from ATS): Activity, Registration and Transportation Fees are automatically billed to the county via use of ATS for the child's recorded attendance, as well as the child care authorization, and the provider's Fiscal Agreement Rate Schedule. The fees represent a maximum allowable annual amount. Providers must include these fees on their publicly posted private pay rates. If the county does not pay Registration and Transportation Fees, those fees may not be charged to CCCAP families.

Activity Fee (county option): Special activity fees can be charged to the family if there is an offer of a free, age appropriate alternative and the family chooses the paid option. Counties may pay for activity fees if the child care provider charges such fees and if the Fiscal Agreement Rate Schedule contains the child care provider's policy on activity fee costs. Counties set their own limit on activity fees in accordance with the County Rate Plan in CHATS and policy that is set by the county and approved by the State Department.

Registration Fees (county option): Counties may pay a registration fee if the provider is licensed and if the Fiscal Agreement Rate Schedule contains the child care

provider's policy on registration costs. Counties set their own limit on registration fees in accordance with the County Rate Plan in CHATS and policy that is set by the county and approved by the State Department. CCCAP parents cannot be billed a Registration Fee.

Transportation Fees (county option): Counties may pay for transportation costs if the child care provider charges such costs and if the Fiscal Agreement contains the child care provider's policy on transportation costs. Allowable costs include the child care provider's charges for transportation from the child care provider's facility to another child care or school facility. Transportation costs do not include travel between a CCCAP parents and the child care provider's facility. Counties set their own limit on transportation fees in accordance with the County Rate Plan in CHATS and policy that is set by the county and approved by the State Department.

Costs Not Covered by CCCAP

The provider may charge CCCAP parents for services that are utilized in periods when care is not authorized. For example, if care is authorized for Monday through Friday and the parent would like care on Saturday while running some errands, the provider can charge the parent directly for Saturday's care.

The provider can also charge parents for expenses not covered by CCCAP regulations. These charges cannot be specific to CCCAP families only. For example some providers may charge all families for expenses below if families are allowed to bring their own and they choose not to:

- Sunscreen
- Toothbrushes
- Toothpaste

The provider may also charge CCCAP parents the same late fees for picking up a child after hours as they do private pay clients.

Parent Fees

Parent fees are listed on the Authorization Eligibility Notice. The family pays the parent fees directly to the provider in the month that they are due. Parent fee dollars are the first dollars used for care. The provider will not receive any payments from the county until the parent fee has been deducted.

Parents who fail to pay their fees or make arrangements with the provider to pay delinquent fees may have their child care benefits terminated if the parent fees are not paid in full or if a satisfactory payment plan is not made by their annual redetermination. Providers must report to the county CCCAP office; failure to pay parent fees or failure to make satisfactory arrangements to pay the fee no later than 60 calendar days after the end of the month the parent fees are due (unless county policy requires earlier).

Below is an example of how parent fees work.

Assume the parent's fee is \$120. In a typical month, the parent pays the \$120 and the CCCAP Program pays \$300 for the child's care. In the month of January, the provider is owed a total of \$420.

Parental fee for January is \$120.

$$\begin{array}{r} \$420 \\ -\$120 \\ \hline \$300 \end{array}$$

CCCAP will pay the provider \$300. This is the amount still owed after the parent pays the parental fee of \$120.00 in January to the provider.

The next month, the family will no longer be receiving benefits under CCCAP as of the 7th of the month because the parent got a promotion and is relocating. From the 1st to the 7th of the month, the child is in care for only four days for a cost of \$95.

Since the parent owes *less* than the total parental fee, the parent would pay the total \$95 owed (*not* the parental fee of \$120). CCCAP would pay nothing because the cost of care was less than the parental fee.

If the cost for those four days was \$125, the parent would pay the \$120 (the amount of their parental fee) and CCCAP would pay \$5.

Reducing Improper Payments

As recipients of CCCAP funds, providers have a responsibility to minimize improper payments made to them. As stated in the Provider Responsibility section, ways to help reduce improper payments include:

- Timely reporting of changes that affect the child's eligibility for care and invalid absences, and keeping complete and accurate sign-in and sign-out records.
- Ensuring children are attending as described in the Authorization of Eligibility Notice.
- Reporting to the county if a child care Authorization of Eligibility Notice is received for a child who is not enrolled.
- Notifying the county if absences are paid for children that are not enrolled or are not attending.
- Reporting to the county if a child is no longer attending.
- Monitoring CCCAP payments to prevent the need for manual billing requests.
- Ensuring that families confirm attendance in ATS within nine days.

Section 5 Preventing Fraud, Waste and Abuse

As a recipient of federal and state funds, it is important to understand the general definition of fraud in the Colorado Department of Human Services Fraud Policy as well as the definition of “Fraud/Fraudulent criminal act” in the CCCAP regulations.

Colorado Department of Early Childhood Fraud Policy

Fraud is broadly defined as, but not limited to:

- The misrepresentation or concealment of information made knowingly for the purpose of deceiving another to gain advantage.
- Acts, such as theft, knowingly making false statements or representations, evasion, purposeful manipulation of information, deception, and/or abuse of State property or time.
- Dishonest activity causing actual or potential financial loss whether deception is used at the time, immediately before, or immediately following the activity. This includes, but is not limited to, the deliberate falsification, concealment, destruction, or use of falsified documentation used or intended for use for a normal business purpose or the improper use of information or position.
- Violating the employees and/or partners' fiduciary duties to the Department.

The CCCAP Fraud Policy

“Fraud/Fraudulent criminal act” in CCCAP regulations refers to a child care provider who has secured, attempted to secure or aided or abetted another person in securing public assistance to which the parent was not eligible by means of willful misrepresentation or withholding of information or intentional concealment of any essential facts.

CCCAP providers who have committed fraud may be subject to civil or criminal action in an appropriate state or federal court. Penalties may include, but are not limited to, termination of the Fiscal Agreement and/or Agreements if the provider has entered into Fiscal Agreements with multiple counties and/or recovering payments that were received as a result of fraud.

Common Types of Fraud

Examples of Client Fraud:

- Misreporting household composition
- Misreporting household income

Examples of Provider Fraud:

- Billing for ineligible child care services (ex. outside of operating hours)
- Invoice altering
- Receiving payments for the same child at multiple locations
- Falsifying child attendance records

Fraud Prevention and Deterrence

To prevent fraud, providers should understand the rules and regulations of CCCAP and ensure all child care provider staff are aware of these rules and regulations. It is the responsibility of providers and their staff to understand the Department Fraud Policy and CCCAP regulations as they relate to fraud. A best practice is to refresh staff on the rules and regulations on an annual basis so that they know how to recognize questionable occurrences and where to report them.

Duty to Report

Providers have a duty to report suspicious or questionable acts to their respective county partners or call the Department Fraud Hotline, (877) 934-6361 or (303) 866-7325 (maintained by the Department Audit Division) if they wish to remain anonymous. In addition to the fraud hotline, providers can email or mail complaints and concerns relating to actual or suspected instances of fraud directly to the Audit Division (email: cdhsaudits@state.co.us; address: 4126 South Knox Court, Denver, CO 80236).

When reporting complaints and concerns to the Audit Division, providers are encouraged to include their identity so additional information can be obtained if necessary. A provider's anonymity will be protected to the fullest extent possible.

The Audit Division will receive and log all reported instances and then determine whether to investigate the suspected fraudulent activities itself or refer them to the relevant county for investigation. Once reported to the Audit Division, providers should work with the Audit Division staff assigned to the investigation when deciding next steps. The Audit Division may request documentation and continued monitoring by the provider may be warranted.

Section 6 CCCAP Provider Licensing Requirements

Regardless of whether the provider is Licensed or Qualified Exempt, the provider should be aware of the laws that require licensing. In Colorado, Child Care Centers must be licensed if they care for five or more children. A child care center by definition does not include any child in a "place of residence."

Licensed providers that accept CCCAP are paid at a higher rate of reimbursement than Qualified Exempt providers.

When child care occurs in the provider's place of residence, the residence must be approved as either a Licensed Family Child Care Home or a Qualified Exempt Home to be a CCCAP provider. Learn more at [Do I Need a Child Care License](#).

Family child care homes can be licensed if they care for two or more children that are unrelated to each other or the provider at a provider's place of residence, including the provider's own children (Rules Regulating Child Care Homes). (A Family Child Care Home (FCCH) is a type of family care home that provides less than 24-hour care at any time for two or more children that are unrelated to each other or the provider and are cared for in the provider's place of residence.)

A FCCH provider can care for up to four children, related or unrelated to the caregiver, with no more than two children under the age of two years at any one time. Or, if the provider is caring for relative children plus one unrelated family, a license may not be required and the individual could apply to become a CCCAP Qualified Exempt provider.

Providing care outside of these legally exempt care qualifications or without a license could result in fines of up to \$10,000. The State of Colorado considers the violation of these rules to be a very serious offense. Qualified Exempt or Family Friend and Neighbor (FFN) providers who would like to care for additional children are required to be licensed to do so.

A provider does not need to become licensed to provide care in the child's own home. Remember that care can only be provided for children that live in that home. Care cannot be provided for additional children that live outside of the home.

To qualify for a license, the provider must be 18 years of age and must complete the pre-licensing training requirements, submit a completed application, obtain a passing background check for all individuals living in the home and schedule an inspection with a licensing specialist.

Getting a child care license typically takes a few months, so be sure to plan accordingly.

CCCAP Qualified Exempt Providers

What if I'm a relative or friend of the child's family? Will I still need to be licensed?

An individual who is a friend or relative of a CCCAP family may be legally exempt from being licensed as a child care provider, and be approved to contract with the CCCAP program to receive reimbursement for providing care to CCCAP child(ren). This person would be identified as a Qualified Exempt provider.

To be approved as a Qualified Exempt provider, the applicant will need to apply through the CCCAP county office. The applicant and all adult household members (if applicable) will need to meet certain requirements, including clearing child abuse and neglect background checks, state and federal fingerprint background checks, and out-of-state background checks if the individual has lived out-of-state within the last five years. Contact the [county department of human/social services](#) for the county that the CCCAP child resides in for details about becoming a Qualified Exempt provider.

How to Obtain a License

The Division of Early Learning Licensing and Administration (DELLA) licenses family child care homes and non-home child care facilities. DELLA licenses over 5,000 child care facilities in Colorado that provide less than 24-hour care.

Each type of child care facility has its own licensing rules, procedures and fee structure for becoming licensed. If an individual is interested in starting a Family Child Care Home business, a Colorado child care license will allow the individual to operate safely and legally.

To learn how to apply for a child care license, go to the [CDEC website](#) and select “For Providers.” To find your local Early Childhood Council, visit the [ECCLA Web site](#).

Additional Information and Assistance

For help with licensing

Colorado Department of Early Childhood (CDEC)
Division of Early Learning Licensing and Administration (DELLA)
710 S. Ash Street, Denver, CO 80246
Phone: 1-800-799-5876 or 303-866-5948; Fax: 303-866-4453
Email: cdec_eclchildcarelicensing@state.co.us

Contact your Licensing Specialist for information regarding your facility or for technical assistance.

For help with CCCAP

[Colorado Child Care Assistance Program \(CCCAP\) for Providers](#)

[Colorado Child Care Assistance Program \(CCCAP\): How to Obtain a Fiscal Agreement](#)

For help with ATS

ATS Help Desk Email: cdec_ats_helpdesk@state.co.us
[ATS Information](#)