



Ohio Administrative Code

Rule 5101:2-16-02 Application and qualification process for receipt of publicly funded child care benefits.

Effective: December 11, 2022

(A) How does a caretaker apply for publicly funded child care (PFCC) benefits?

(1) The caretaker is to complete a PFCC application and submit the application to the county agency that serves the caretaker's county of residence.

(a) A valid PFCC application includes any of the following forms with the applicant's name, address and signature on the form:

(i) The JFS 07200 "Application for Supplemental Nutrition Assistance Program (SNAP), Cash Assistance, Medical Assistance or Child Care Assistance" or its electronic or telephonic equivalent.

(ii) The JFS 01121 "Early Childhood Education Eligibility Screening Tool" or the JFS 01122 "Publicly Funded Child Care Supplemental Application".

(iii) If the PFCC application does not include, at a minimum, the applicant's name, address, and signature, the application is not valid.

(b) Valid PFCC application signatures include the following:

(i) Handwritten signatures (including handwritten signatures that are transmitted by facsimile or other electronic submission). When the signatory cannot sign with a name, an 'X' is a valid signature. The county agency may require a witness to attest to an 'X' signature. An employee of the county agency may serve as a witness.

(ii) Electronic signatures through the online application; and

(iii) Telephonic signatures obtained in accordance with procedures approved by the Ohio department of job and family services (ODJFS). A telephonic signature is an audio recording of the caretaker or



authorized representative's verbal assent and summary of the information to which the family assents.

(c) The application received date shall be the date the county agency receives a valid PFCC application as described in paragraph (A)(1)(a) of this rule. When the valid application is received after business hours, the application received date is to be the next business day. If the caretaker is found eligible, the beginning date of benefits is the application received date.

(2) The application shall be considered complete when the caretaker has submitted all of the following:

(a) The JFS 07200 or the JFS 01121 and the JFS 01122 with the required information for all family members. A family is any of the following:

(i) One or more caretaker(s) and all minor children who reside with the caretaker(s) in the same household.

(ii) A caretaker, a minor parent and the child of the minor parent when all reside in the same household, unless the minor parent is participating in the learning, earning and parenting (LEAP) program. If the minor parent is participating in LEAP, the caretaker is not included in the household.

(iii) A minor parent and the child of a minor parent if the minor parent has a high school diploma.

(iv) A caretaker with shared custody of minor children and all children who reside with the caretaker in the same household. Minor children with more than one residence due to shared custody agreements are counted in the caretaker's household during the time periods they reside with the caretaker.

(v) A caretaker who is a foster parent and/or stepparent and all of the minor children who reside with the caretaker in the same household.

(vi) Married caretakers and all minor children who reside with the caretakers in the same household.



(vii) Unmarried caretakers who live in the same household with a common child and all of the minor children who reside with them. Both caretakers shall be considered caretakers for all the children in the family.

(b) Complete information about the work, school, training or other activity for every caretaker in the household who is participating in an activity that necessitates child care.

(i) If the county agency determines that the caretaker is participating in a qualifying activity, verification of that activity is required for the application to be complete.

(ii) If the county agency determines that the caretaker is not participating in a qualifying activity, verification of a qualifying activity is not required for the application to be complete.

(iii) If there is more than one caretaker in the family, and a second caretaker is not participating in a qualifying activity but is unable to provide care for the child, written verification from a licensed physician, licensed psychologist, licensed psychiatrist or public children services agency (PCSA) that the caretaker cannot provide care for the child is required for the application to be complete.

(c) Verification of income for all household members pursuant to rule 5101:2-16-03 of the Administrative Code. When there is no income, a statement of how the family is meeting basic living expenses is required pursuant to rule 5101:2-16-03 of the Administrative Code.

(d) Verification of citizenship or qualified alien status for children in need of care as listed in appendix B to this rule.

(e) The name and address of an eligible provider chosen for each child in need of care.

(3) The caretaker is to complete the application process within thirty calendar days from the date the county agency receives a valid PFCC application as described in paragraph (A)(1) of this rule.

(a) When the thirtieth day falls on a weekend or a legal holiday, the completed application, including all verifications, is due on the next business day.



(b) The application shall be denied due to insufficient information if the county agency does not receive all required documentation within the thirty day time frame.

(c) The caretaker may submit a new application with supporting documentation pursuant to paragraphs (A)(2) and (A)(3) of this rule if he or she still wishes to apply for benefits.

(B) What are the eligibility requirements to qualify for publicly funded child care benefits?

(1) The family is to meet the income requirements:

(a) Initially, a caretaker may be eligible for publicly funded child care benefits if the family's gross monthly income is at or below one hundred forty-two per cent of the federal poverty level (FPL).

(b) If a child in need of care has a verified special need pursuant to paragraph (C)(1) of this rule, a caretaker may be eligible for publicly funded child care benefits if the family's gross monthly income is at or below one hundred fifty per cent of the FPL.

(c) Ongoing eligibility may be maintained if the family's gross monthly income is at or below three hundred per cent of the FPL.

(d) These amounts will be published annually in a child care manual procedure letter.

(2) All caretakers in the home shall be participating in one or more of the qualifying activities as listed in appendix A to this rule. If there is more than one caretaker in the family, child care may be approved for the number of hours in which no caretaker is available to provide care for the child(ren) because all caretakers are participating in qualifying activities, unless verification is received that the caretaker cannot provide care for the child, pursuant to paragraph (A)(2)(b) of this rule.

(3) The child in need of care shall:

(a) Be under age thirteen at the time of application and may remain eligible through the end of the eligibility period in which they turn thirteen; or



(b) Be under age eighteen at the time of application if the child meets the definition of special needs pursuant to rule 5101:2-16-01 of the Administrative Code, and may remain eligible through the end of the eligibility period in which they turn eighteen.

(c) Meet the citizenship requirements as listed in appendix B to this rule.

(4) The family shall not have more than one million dollars in cash, checking or savings accounts.

(C) What if a child in need of care has special needs?

(1) If a caretaker indicates on an application that a child in need of care has special needs pursuant to rule 5101:2-16-01 of the Administrative Code, the county shall request verification of the child's special need. If the special need is verified, the provider may receive payment enhancements pursuant to rule 5101:2-16-10 of the Administrative Code for child care services provided for the child.

(2) If the provider must make special accommodations to care for the child, the caretaker and the provider may apply for a special needs payment enhancement so that the provider may receive additional payment enhancements per rule 5101:2-16-09 of the Administrative Code.

(D) What if the caretaker is a minor parent?

A minor parent may be eligible for child care if they meet the eligibility requirements in paragraph B of this rule and the following requirements:

(1) The minor parent received a high school diploma or a high school equivalence diploma; or

(2) The minor parent is participating in the learning, earning and parenting (LEAP) program.

(E) What if a caretaker's qualifying activity ends before the end of a family's eligibility period?

(1) A family will remain eligible for child care if the county agency has documentation that a caretaker's qualifying activity will begin within the next thirty days.



(2) A family may continue to be eligible for child care if a caretaker's qualifying activity ends and a new activity is not scheduled to begin pursuant to paragraph (E)(1) of this rule, if the following requirements are met:

(a) If the county agency is notified about the loss of a qualifying activity, eligibility may continue for at least three months, but not more than four months from the date the qualifying activity ends, not to extend beyond the current eligibility period.

(b) If a new qualifying activity is verified to begin before the end of the three month time period, the family may continue to be eligible for child care, not to extend beyond the current eligibility period.

(3) A child enrolled in a child care program that partners with a federally funded head start program may remain eligible for child care benefits until the end of the current head start program year if the county agency proposes termination of child care due to an unmet eligibility requirement. To remain eligible for continuation of child care benefits until the end of the current head start program year, the caretaker shall meet the following eligibility requirements:

(a) The caretaker shall meet the income eligibility requirements outlined in paragraph (B)(1) of this rule.

(b) The caretaker shall pay the assigned copayment.

(c) The caretaker shall complete the recertification process pursuant to paragraph (M) of this rule if the head start program year extends beyond the current eligibility period.

(d) The caretaker shall not have been found guilty by a court of law for child care fraud.

(F) What if a caretaker is on temporary leave from employment?

(1) The caretaker will be considered to have a qualifying activity required pursuant to paragraph (B)(2) of this rule if the caretaker has verification from the employer confirming that the caretaker will return after the leave ends.



(2) If the caretaker does not have verification from the employer confirming the caretaker will return after the leave, the caretaker will be eligible for continued eligibility pursuant to paragraph (E) of this rule.

(3) Temporary leave from employment can include but is not limited to the following:

(a) Maternity leave.

(b) Leave taken according to the Family Medical Leave Act of 1993 (FMLA).

(c) Short term disability.

(d) Other leave as approved by the caretaker and employer.

(G) What is transitional child care?

(1) A caretaker shall be eligible for transitional child care benefits for the twelve-month period immediately following the end of participation in Ohio works first (OWF) if the caretaker meets all of the initial and recertification eligibility requirements and all of the following apply:

(a) The caretaker needs child care due to employment.

(b) The caretaker's initial income does not exceed one hundred fifty per cent of the FPL. These amounts shall be published annually in a child care manual procedure letter.

(2) A caretaker who is ineligible to participate in OWF pursuant to section 5101.83 or 5107.16 of the Revised Code is not eligible for transitional child care.

(H) What if a family needs protective care?

(1) Protective child care is publicly funded child care services provided to assist in the care and protection of a child. Caretakers receiving protective child care shall be determined eligible without



regard to income or assets and shall have their copayment waived pursuant to rule 5101:2-16-05 of the Administrative Code.

(2) A case plan, as required in section 2151.412 of the Revised Code shall be prepared and maintained for the child and caretaker. The case plan shall indicate a need for protective child care to permit the caretaker to complete requirements of the case plan. Protective child care may be authorized only for a child who resides in the home of the caretaker for whom the case plan is written.

(I) What if a family is homeless?

(1) The term "homeless children" means individuals who lack a fixed, regular and adequate nighttime residence as defined in rule 5101:2-16-01 of the Administrative Code.

(2) If the homeless caretaker does not meet the eligibility requirements outlined in paragraph (B) of this rule, the family shall be determined eligible for homeless child care without regard to income or activity and the copayment shall be waived. The child in need of care shall still meet the requirements outlined in paragraph (B)(3) of this rule.

(3) If the homeless caretaker does not have a qualifying activity, each child in need of care shall receive a full-time authorization.

(4) Homeless child care shall be approved for ninety calendar days or the period of time that the caretaker and child are homeless, whichever period is shorter.

(5) At the end of the homeless child care eligibility period, the county agency shall re-evaluate eligibility according to the requirements outlined in paragraph (B) of this rule. The maximum monthly income for ongoing eligibility, as defined in paragraph (B)(1)(c) of this rule, shall be used.

(J) What if a second caretaker is temporarily absent from the household, pursuant to rule 5101:2-16-01 of the Administrative Code?

(1) A second caretaker may be considered temporarily absent if they are out of the home for the



following reasons:

- (a) Attendance at school.
- (b) Trip made in connection with current or prospective employment.
- (c) Service in the military when it is the sole reason for the absence.
- (d) Vacationing.
- (e) Serving a jail sentence.

(2) The temporarily absent caretaker is used in the determination of eligibility in the following manner:

- (a) The caretaker is counted in household size.
- (b) The income contributed to the household by the absent caretaker is counted in the determination of eligibility pursuant to rule 5101:2-16-03 of the Administrative Code.
- (c) The caretaker's activity shall not be considered when determining authorizations for child care and the caretaker is not considered available for care.

(K) Can child care be approved if a second caretaker is out of the home for more than forty-five days?

If a second caretaker is out of the home for more than forty-five days, the caretaker shall not be included in the household for determining eligibility for child care.

(L) Can child care benefits be reinstated after termination of child care benefits?

(1) A caretaker may be eligible for reinstatement of child care benefits within sixty days following termination if the termination was due to income, or if the caretaker's employment, training or



education activity was interrupted and the individual did not meet or no longer met the requirements in paragraph (D) of this rule.

(a) The caretaker shall complete either a JFS 01126 "Request for Reinstatement of Child Care Benefits" or the application for publicly funded child care defined in paragraph (A)(1) of this rule. If the most recent period of eligibility will expire at the end of the next month of the request for reinstatement, the caretaker shall complete the application for publicly funded child care defined in paragraph (A)(1) of this rule, or the recertification application defined in paragraph (M) of this rule.

(b) The maximum monthly income limit for ongoing eligibility, as defined in paragraph (B)(1)(c) of this rule, shall be used to determine income eligibility.

(c) The copayment amount shall be based on the current income and household size.

(d) The caretaker shall verify that he or she is engaged in a qualifying employment, education or training activity as required in this rule, and shall verify current income and household size.

(e) The caretaker shall not have an outstanding overpayment or outstanding delinquent copayment unless a repayment plan is in place and the terms of the repayment plan are being met.

(2) The caretaker may be eligible only if the original eligibility period has not ended, and shall be eligible until the end of the original eligibility period.

(3) The caretaker is not eligible for reinstatement if the termination of eligibility was as a result of a recertification of eligibility.

(M) How does a caretaker re-apply for benefits at the end of their eligibility period?

(1) Annually, a caretaker receiving publicly funded child care benefits is to submit the following to their county agency if they wish to continue receiving benefits:

(a) The JFS 07204 "Request to Reapply for Cash Assistance, SNAP, and/or Child Care"; or



(b) The application for publicly funded child care as defined in paragraph (A)(1) of this rule; and

(c) Household income verification and any other required supporting documentation.

(2) When a family is currently receiving child care benefits and decides to apply for SNAP benefits and/or cash assistance at child care recertification, the JFS 07200 for SNAP and/or cash assistance is to be filed.

(N) How will a caretaker know when it is time to submit a recertification application?

On or after the first day of the next-to-last month of eligibility, but before the first day of the last month of eligibility, the caretaker will be sent the JFS 07204.

(O) What shall the caretaker submit to complete the recertification process?

(1) Prior to the end of the current eligibility period, the caretaker is to complete the following:

(a) Verify information on the printed or electronic JFS 07204 and make changes as necessary.

(b) Submit proof of current household income and any other changes to the JFS 07204.

(c) Sign and return the JFS 07204 and necessary documentation to the county agency. Signatures may be handwritten, electronic, or telephonic, pursuant to paragraph (A)(1)(b) of this rule.

(2) If the recertification is completed after the issuance of an expiration notice and prior to the end of the current eligibility period, ongoing eligibility will be determined.

(P) What if a caretaker fails to cooperate with therecertification process?

If the caretaker does not comply with paragraph (O) of this rule, eligibility shall expire effective the last day of the current eligibility period.

(Q) How will a caretaker be notified when eligibility has been recertified?



Upon the receipt of a completed JFS 07204, or application for publicly funded child care as defined in paragraph (A)(1) of this rule, and all supporting verifications, the county agency shall determine if eligibility for publicly funded child care may be recertified for a new eligibility period.

(1) If the county agency determines the caretaker is eligible for benefits for a new eligibility period, the county agency shall provide notice of approval for child care benefits using the JFS 04074 "Notice of Approval of Your Application for Assistance" or its computer-generated equivalent.

(2) If the county agency determines the caretaker is ineligible for benefits for a new eligibility period, the county agency shall provide notice of denial of an application for benefits using the JFS 07334 "Notice of Denial of Your Application for Assistance" or its computer-generated equivalent.

(R) How is a PFCC application processed when a caretaker is also applying for SNAP, cash and/or medical assistance?

(1) All PFCC joint applications are to be processed in accordance with Chapter 5104. of the Revised Code and Chapter 5101:2-16 of the Administrative Code.

(2) No caretaker is to have PFCC benefits denied solely on the basis that an application to participate in another program has been denied or benefits under another program have been terminated without a separate determination that the caretaker failed to satisfy a PFCC eligibility requirement.

(3) The process for a caretaker that simultaneously requests PFCC and another program includes the following:

(a) If a caretaker is denied benefits for the other program, the caretaker is not required to resubmit another application for PFCC; and

(b) PFCC eligibility is to be determined in accordance with PFCC processing time frames from the date the joint application was initially accepted by the county agency.

(S) How does a caretaker withdraw a PFCC application, or request discontinuance of PFCC benefits?



The caretaker may voluntarily withdraw an application at any time before the county agency makes an eligibility determination. The caretaker may also voluntarily discontinue receiving PFCC benefits. The process for voluntarily withdrawing an application or discontinuing benefits includes the following:

(1) The caretaker, or the caretaker's authorized representative, on his or her own initiative, contacts the county agency either verbally or in writing to request that the application not be processed further, or that the PFCC benefits be discontinued.

(2) The county agency is to document in the case file that a withdrawal or discontinuance request was made by the caretaker, how the request was made, and, if the information is given, why the caretaker wishes to withdraw the PFCC application or discontinue PFCC benefits.

(3) The county agency is to provide notice of denial of an application for benefits using the JFS 07334 "Notice of Denial of Your Application for Assistance" or its computer generated equivalent.

(4) The caretaker may submit a new application with supporting documentation pursuant to paragraphs A(2) and A(3) of this rule if they wish to apply for benefits.

(T) What happens when a caretaker moves out of state during an eligibility period?

If a caretaker moves out of the state of Ohio, the caretaker no longer qualifies for Ohio PFCC benefits. The process for a caretaker who no longer resides in Ohio includes the following:

(1) The caretaker is to contact the county agency to advise of the move and to give an updated address.

(2) The county agency is to propose termination of the case using the JFS 07334 "Notice of Denial of Your Application for Assistance" or its computer generated equivalent.