

Webinar	CCAP for Child Care Pilot
Learning Objective	<ul> <li>Receive a step-by-step walkthrough of the CCAP for Child Care Application and hear any helpful application tips along the way.</li> </ul>
Format	15-minute webinar clip (approximately)

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1.	Welcome to the CCAP for Child Care Pilot Webinar. We are excited that you have tuned in for a step-by-step guide on how to fill out your application.	CCAP for Child Care Pilot Self-Paced Webinar Application open through July 31 <sup>st</sup> , 2024
2.	Before we get started, it is important to first review the eligibility criteria to participate in this pilot program. You can use the application checklist and guide to assist you as you are assessing your eligibility. This guide may be found at <u>https://dhs.ri.gov/programs-and-</u> <u>services/child-care/child-care-providers/CCAP-</u> <u>for-Child-Care-Staff</u> . Eligibility requirements for participating in this	<image/> <section-header><section-header><section-header><section-header><section-header><section-header><section-header><section-header><section-header><section-header><section-header><section-header></section-header></section-header></section-header></section-header></section-header></section-header></section-header></section-header></section-header></section-header></section-header></section-header>
	pilot program include:	
	<ul> <li>You are working in a DHS licensed child care program at least 20 hrs. a week;</li> </ul>	
	<ul> <li>Both you and your child are residents of Rhode Island;</li> </ul>	
	<ul> <li>Your household income is at or below 300% of the Federal Poverty Limit;</li> </ul>	
	<ul> <li>You are the parent of a child (or children), between ages 6 weeks and 13 years old who resides in your household; and</li> </ul>	
	<ul> <li>Your child is a US citizen or qualified immigrant.</li> </ul>	
	If you have any questions about these eligibility requirements, please reach out to <u>CCAPforChildCare@pcgus.com</u> .	
	If you are currently receiving CCAP benefits, you are still eligible to participate in this pilot, as participation will waive your copay and will have no other impact on your existing CCAP benefits.	



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3.	Once you have reviewed the eligibility criteria, and you've decided to apply, you can move onto the next step of gathering any necessary verification documents.	CACPE of Child Cace Dealer Constraints of the Constraints of the Cons
	Verification documents are required to confirm your eligibility.	Documents           term         term         term         Constraint of term           Perform         • • • • • • • • • • • • • • • • • • •
	The following verification documents will be necessary when applying:	Normality of the second
	<ol> <li>Documents to establish your relationship with the child to receive benefits and establish their citizenship or immigration status.</li> </ol>	
	a. To verify these requirements, you may upload one of the following for each child: the child's birth certificate, baptismal record/certificate, or hospital or public record of birth and parentage.	
	<ul> <li>b. If you do not have access to any of these documents, you have the option to upload a combination of documents to verify these requirements. To verify your relationship with the child, you may upload one of the following documents: Adoption papers or records, Child support, paternity records, BIA or Tribal records, Divorce/custody papers, Court records of parentage/guardianship. To verify the child's citizenship or immigration status, you may upload: a copy of their US Passport or Immigration Visa.</li> </ul>	
	You will also be required to upload documentation to verify your household income. The primary applicant, that is the person submitting the application, must be an employee of a DHS licensed program. To verify income, you must upload: 1 month of your most recent household income statements or paystubs from your DHS licensed program employer as well as paystubs from any other employment.	



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	For a 2-parent household, the second parent must also upload paystubs if employed.	
	If you have any questions regarding necessary verification documents, please email us at <u>CCAPforChildCare@pcgus.com</u> or call us toll free Monday-Friday 9:30 am-6 pm at 833-930- 3540, and we will be happy to assist you.	
	Documents may be uploaded as PDFs or an image file. That is, if you don't have a digital copy of one of these files, you may take a photo of the document with a digital camera or phone to upload to the application.	
4.	Now, let's walk through how to complete the application.	CCAP for Child Care Pilot Application The International State of Contracts
	Keep in mind that a PDF version of the application is also available to print and deliver to DHS. If you choose to submit a paper application, you may access the application at <u>https://dhs.ri.gov/programs-and-services/child- care/child-care-providers/CCAP-for-Child-Care- Staff</u> . Please note, paper applications may take longer to process than an electronic submission.	<text><text><list-item><list-item><list-item><list-item><list-item><list-item></list-item></list-item></list-item></list-item></list-item></list-item></text></text>
	To complete the online application, navigate to <u>https://dhs.ri.gov/programs-and-services/child-care/child-care-providers/CCAP-for-Child-Care-Staff</u> .	
	The first screen of the application provides an outline of the application, the types of documentation you are required to upload, and helpful hints.	
	After reviewing, you may move to the first section by selecting "Next".	
5.	The first section of the application is labeled 'Applicant Information.'	Experiment information
	You will start by filing in your name, phone number, and a valid email address. Be sure you fill in an active email address because this is where you will receive all future CCAP for Child Care Program Pilot communications and updates on your eligibility status. If you don't have an active email or need support in setting one up, please reach us by phone at 833-930- 3540.	Applicant Information
	You will then be asked to answer whether you are currently receiving CCAP benefits.	



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	Remember, even if you are currently receiving CCAP benefits, you may still be eligible to participate in the pilot.	
	Next, you will fill in your address and confirm that your primary place of residence is in Rhode Island.	
	After that, you will enter your social security number or individual tax identification number. Please note you will only be able to fill in 9 numerical values to proceed with this field; that is you don't need to enter the hyphens.	
	Please double check that you have entered this number accurately before proceeding. As a reminder, this information will be stored confidentially, and only application reviewers will have access to this information.	
	Next, you will be asked to fill out demographic information. This is for informational purposes only and will not have a bearing on your eligibility.	
	Lastly, you will enter information for all members of your household, starting with yourself. This includes their name, their relationship to you, and their age. For this pilot, household members are "the dependent children, including both applicant and non-applicant child(ren), and the parent(s) and the legal spouse(s) of the parent(s) who live with them in the same household".	
	If you have more than 10 members in your household, you may select additional rows. If you do not need additional rows, please answer this question by selecting 'no.'	
	Once you have completed all required fields on this page, you will be able to move forward to the next page by selecting 'next' in the bottom right corner of the page.	
	If you are unable to complete the full application at this time, you can save your progress. To do this, you will be asked to sign up by email. The link to the saved application will be sent to your email to complete at a future time.	



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6.	Section 2 of the application is titled 'Child Information.'	28 (page 20) - <b>Child Information: Existing Relationships and Charachaptemptics: Existing Relationships and Charachaptemptic relationships and charachaptemptic relationships and a strain and annual material strain and annual strain and annual strain and annual strain a strain and annual strain and annual strain annual strain annual strain annual strain annual strain annual strain annual strain annu</b>
	Begin by selecting the number of children you would like to apply for CCAP for Child Care benefits. Form fields specific to each child will appear based on the number you select.	Child Information Were were werten werden were to to 200 for Child Case and were the case at the case of the case
	For each child, enter their name, birthdate, and relationship to you as the applicant. After this, you will be asked whether this child resides in your household and about their citizenship / immigration status.	e i Recent
	Lastly, you will be asked to upload documents to verify that (1) you are the parent of the child, and (2) their citizenship / immigration status.	
	You have the option to upload one of the following documents which will verify both requirements: the child's birth certificate, the child's baptismal records, or the child's hospital or public record of birth and parentage.	
	If you do not have any of these documents, review the table on the application and upload one document from each column in the table. One document will be used to verify your relationship with the child and the other document will be used to establish the child's citizenship / immigration status.	
	Your documents can be uploaded as a PDF or image. Please refrain from uploading anything that is not in this format as it may not be accepted.	
	If you are applying for more than one child, repeat this process for each child. Once all required fields are complete, select 'next' in the bottom right corner of the page.	
	Information will save automatically.	
7.	Section 3 is related to your 'Household Income.'	If inspection - <b>Household Sector</b> The advant and part formation and your sectored parts
	This section will gather information about earned income.	The same of additional measurement of the same same the measurement of the same same the measurement of the same same the same same the same same the same same same same same same same sam
	Earned income is income from employment. Earned income must be verified for each parent in the household.	Record of the second and the second
	Begin by selecting whether you are a one parent or two parent household. For this program, we are referring to a 2-parent household as "two	i σ i RMAR5



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	parents living in the same legal household who share financial responsibility for the applicant's dependent child/children."	
	You will then upload one month's worth of your most recent income statements or paystubs from the DHS licensed child care program where you currently work. This may be 4 weekly income statements or 2 biweekly paystubs.	
	If you recently started work and do not have one month of paystubs, you may upload a letter from your employer, documenting your employment and the number of hours they anticipate you will be working.	
	For a 2-parent household, please be sure you upload income documentation for the second parent if employed.	
	Once complete, navigate to the next page by selecting 'next' in the bottom right corner of the page.	
8.	Section 4 will be used to verify the DHS child care program where you work, your role, and your approximate work schedule.	Experiment that the format of the forma
	Begin by selecting the type of DHS licensed child care program where you work: a center or family child care home.	Employment Ended the second se
	Next, select the name of the program where you work from the drop-down menu.	Barlina ya 1970 Barlina ya 197
	You will then select your position at the program and the average hours you work per week. Remember, to be eligible for this pilot, you must work an average of at least 20 hours a week.	
	Next, complete the table with your average work week schedule. If your schedule looks different week to week, that is okay! The purpose of this table is to provide a general outline of the days and hours you may work. Keep in mind that you will need to fill in at least one row of this table to move forward, and the total hours in the table should align with the number of hours you selected in the question about the average number of hours you work.	
	Once complete, please select 'next' in the bottom right corner of the page and move onto the final section of the application.	



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9.	The final section to complete is section 5, the pilot program attestations, and agreements.	Experience     The specific distance     The specific distance
	By signing the application, you are affirming your understanding and agreement with the requirements of the CCAP for Child Care Program, so be sure to review these attestations thoroughly and carefully! Should you be approved as a pilot participant, you will be responsible for following these attestations.	<section-header><section-header><section-header><section-header><section-header><section-header><section-header><section-header><section-header><section-header><section-header><section-header><section-header><section-header><section-header><section-header><section-header><section-header><section-header><section-header><section-header><section-header><section-header><section-header><list-item><list-item><list-item><list-item><list-item><list-item><list-item><list-item><list-item><list-item><list-item><list-item><list-item><list-item><list-item><list-item></list-item></list-item></list-item></list-item></list-item></list-item></list-item></list-item></list-item></list-item></list-item></list-item></list-item></list-item></list-item></list-item></section-header></section-header></section-header></section-header></section-header></section-header></section-header></section-header></section-header></section-header></section-header></section-header></section-header></section-header></section-header></section-header></section-header></section-header></section-header></section-header></section-header></section-header></section-header></section-header>
	For a 2-parent household, each parent will need to review and sign. Finally, please include your signature date.	
	Once all required fields are complete, you will be prompted to 'submit' by selecting the green submit button in the bottom right corner of your page. If you have any missing or incorrect fields, they will highlight in red, and the application will bring you back to correct these.	
	Feel free to use the "Back" and "Next" buttons at the bottom of the page to navigate back through the application and review your material before officially submitting!	
	If you come across any difficulties, please reach out to us by email at <u>CCAPforChildCare@pcgus.com</u> or by calling us toll-free at 833-930-3540.	
10.	Once your application is submitted, please monitor your email inbox. Any communication about your application, including any edit request, approvals, or denials will be sent from <u>CCAPforChildCare@pcgus.com</u> to the email you entered on the first page of the application. If approved, your eligibility notice will come with next step instructions for enrolling your child in a CCAP program.	Additional Resources For more information and any next steps, please email us at: CCAPforChildCare@pcgus.com Or call us toll-free Monday-Friday 9:30 am - 6 pm at: 833-930-3540 For additional resources, visit: https://dhs.ri.gov/programs-and-services/child-care
	If your application is not approved, you have the right to appeal your benefit decision.	



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11.	Thank you for joining us for this application walkthrough and thank you for your continued dedication to serving Rhode Island's littlest learners.	Thank you for participating in this webinar. We hope this has been helpful to you!