DATE: March 19, 2020

TO: Current Licensed and License Exempt Child Care Providers

FROM: Dr. Scott M. Koenigsknecht, Deputy Superintendent
       P-20 System and Student Transitions

SUBJECT: Child Development and Care (CDC) Guidance for COVID-19 State Emergency for Current CDC Subsidy Providers

This memorandum provides CDC Guidance concerning the COVID-19 state emergency for current CDC subsidy providers.

The governor has ordered the closure of all schools in the state as of Monday, March 16, 2020 through April 5, 2020. While specific guidance wasn’t provided related to the closure of child care programs and facilities, we understand that you will follow state and national guidance related to ensuring the health and safety of children and families in your community as you make decisions about the operations of your own programs.

The Child Development and Care (CDC) program understands the impact this state of emergency could have on current CDC subsidy providers. Therefore, these Frequently Asked Questions (FAQs) have been developed and posted to the CDC website (attached) to clarify temporary child care billing procedures and answer other questions related to training and Great Start to Quality during this unprecedented situation. The FAQs on the CDC website will be updated as necessary as the situation evolves and new information becomes available.

Please address questions related to child care billing and payments to the CDC call center at 866-990-3227.

For questions not addressed in this memo, please contact Lisa Brewer Walraven at brewer-walravenl@michigan.gov or 517-241-6950.

Attachment
Child Development and Care (CDC) FAQ for Activities March 16, 2020 – April 5, 2020

1. How should child care providers bill for child absence hours?
   A. During the time period of March 16, 2020 – April 5, 2020 (Pay Periods 007 and 008), providers are instructed to bill **regular child care hours** instead of absence hours when the child is in attendance, absent, or the facility is closed. Providers will not be required to utilize annual absence hours during this time.

   Providers will need to document on their time attendance records the following statement: **Billing regular child care hours due to state of emergency declared by Governor Whitmer (COVID 19) from March 16, 2020 – April 5, 2020.**

2. How can I bill for school age children who need additional care?
   A. With the closure of K-12 public schools from March 16, 2020 – April 5, 2020 the Department realizes that school age children may need to attend a child care program for additional hours. Effective Pay Period 007 (March 15 – March 28, 2020) all school age child authorizations have been increased to 90 hours biweekly to allow providers to bill for the additional care provided.

   The increased authorizations will remain on the approved CDC subsidy case until the end of the 12-month authorization period. Ongoing, you should only bill for a school age child when they are in your care outside of regular school hours.

3. Will child care subsidy cases that have eligibility end dates for March 2020 or April 2020 be allowed to continue without interruption?
   A. Yes. In order to not disrupt the continuity of care MDE and DHHS will be working together to suspend CDC case redeterminations for these two months. March 31, 2020 redeterminations will be extended to May 31, 2020, and April 30, 2020 redeterminations will be extended to June 30, 2020.

4. If I’m a license exempt provider and I can’t get fingerprinted during the period of March 16, 2020 – April 5, 2020 what should I do?
   A. If a licensed exempt provider cannot get fingerprinted due to Covid-19 restrictions implemented at the local level, the CDC office will be granting extensions. If you have questions about getting an extension please contact the Child Care program at 866-990-3227.

5. Are there limits to the number of people at one site?
   A. According to current requirements from Governor Gretchen Whitmer in **Executive Order 2020-11**, effective March 17, 2020, “all assemblages of more than 50 people in a single indoor shared space and all events of
more than 50 people are prohibited in this state.” This is potentially subject to change.

6. Should Great Start to Quality Resource Centers continue to offer Great Start to Quality Orientation (GSQO) training for license exempt child care providers?
   A. While these trainings do not fall under Executive Order (No. 2020-5), we encourage you to review the Executive Order to ensure you understand the intent and restrictions for bringing groups together.

Because license exempt provider payments rely on the completion of this training, we encourage you to explore offering training virtually or reduce group sizes by offering increased options to meet the needs of the providers in your service area. In addition, during this state of emergency, you may move to providing First Aid and CPR training (infant, child, and adult), and suspend CPR and First Aid certification, which requires a practical skills component. Providers will not be certified in CPR and First Aid. The goal is for you to meet the needs of the providers in your service area who are waiting to be paid for care they are providing. If continuing to offer GSQO trainings in a face to face format isn’t possible in your region, please reach out to ECIC to discuss alternative options to meet the need.

During this time, Great Start to Quality Resource Centers should indicate on the training sign in sheet the method of delivery for the training and whether or not you offered CPR/First Aid training or certification. Note, if a provider would like to become certified in the future, he/she could attend a stand-alone CPR/First Aid certification class and receive credit toward level 2.

7. Should license exempt health and safety coaching visits continue as required to meet CDC requirements?
   A. Between the period of March 16, 2020 and April 5, 2020 we are placing a moratorium on these visits. License-exempt providers will be given the option of a phone call to address a portion of items on the health and safety checklist, followed by the in-person portion to complete the visit. During the moratorium proper documentation must be maintained and submitted to the Department, including the reason for the visit not being completed.

8. If I have a GSQ coaching visit or cohort meeting scheduled, should it proceed?
   A. Between the period of March 16, 2020 and April 5, 2020 coaching visits and cohorts (to the extent possible) should be conducted via phone or email. Case notes/documentation should indicate why any coaching visits were postponed.
9. If I have a GSQ Assessment Visit scheduled, should it proceed?
   A. Between the period of March 16, 2020 and April 5, 2020 we are placing a moratorium on these visits. During the moratorium proper documentation must be maintained, including the reason for the visit not being completed.

10. What if my rating expires between March 16, 2020 and April 5, 2020?
    A. Programs with ratings that expire within this window have been extended by 5 weeks. Application review and approval and Validations are still occurring during the state of emergency.

11. Should Infant-Toddler Cohort meetings continue as planned?
    A. We encourage you to convene the infant-toddler cohorts in your region virtually or to reduce group sizes by offering increased options to meet the needs of the providers in your service area.

12. Should face to face training offered through the MiRegistry continue as planned?
    A. We encourage you to explore offering training virtually or reduce group sizes by offering increased options to meet the needs of the providers in your service area. In addition, confirming whether or not a provider expects to attend may also help you get a better sense of attendance numbers. If these are not options within your area, we recommend working with your Early Childhood Support Network (ECSN) to suspend trainings during the stated period and rescheduling as soon as possible after April 5, 2020 to ensure you meet the requirements within your scope of work. Decisions made to suspend trainings must be documented in the ECSN monthly report document submitted to MDE.