


**STATE OF CONNECTICUT**  
*DEPARTMENT OF SOCIAL SERVICES*  
**PROGRAM INFORMATION BULLETIN**

  
 Claudette J. Beaulieu, Deputy Commissioner

Upon Receipt \_\_\_\_\_  
 Date \_\_\_\_\_

INFORMATION BULLETIN NO: 09-01

PROGRAM (s): SNAP,  
 HUSKY A (F07)

Subject: Treatment of Dependent Care Payments

**This supersedes Information Bulletin No.: FS-03-03. Please discard FS-03-03.**

We are revising the UPM to reflect a change implemented by the Food, Conservation and Energy Act of 2008. Per that federal act, there is no longer a limit on the amount we can allow as a deduction for dependent care payments effective October 1, 2008. Although we have not seen many Quality Control errors related to the dependent care deduction in the past, the elimination of the maximum deduction amount increases the chance that any dependent care deduction errors that do occur will be high dollar errors.

We will also clarify how to enter data on EMS to ensure the appropriate deduction is allowed for HUSKY A for Families (F07) and other Family Medicaid coverage groups when the family receives FMA and SNAP.

**Note: You must use new form W-1224 – “SNAP Dependent Care Agreement Form,” to verify the amount that the SNAP applicant/recipient is legally obligated to pay. A W-1224 must be completed for each provider. Both the SNAP client and the provider must complete and sign the form and return it to you. A copy must be filed in the case record.**

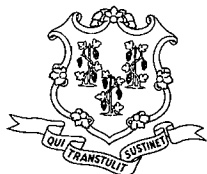
**In addition, you must check EMS to see if the provider receives assistance from any DSS program and, if so, if the income received from providing child care is entered on EMS. If not, inform the worker of record that the provider has income.**

<p><b>Dependent Care as a SNAP Deduction</b></p> <p><b>(When a SNAP recipient is paying for dependent care)</b></p>	<p>The deduction for each dependent is no longer limited for SNAP. Allow a deduction for each dependent for whom the payer has an <b>out-of-pocket</b> expense for dependent care as verified by the W-1224. This should be the monthly amount charged by the provider minus payments that are <b>expected</b> to be made during the month by other parties such as Care4Kids. The amount of the Care4Kids payment remains constant for the Care4Kids certification period authorized on the Care 4 Kids certificate.</p>
<p><b>Dependent Care as a Deduction for HUSKY A for Families (F07) and other Family Medicaid Coverage Groups</b></p>	<p>A deduction for child care is allowed for Family Medicaid coverage groups up to the limits prescribed in policy:</p> <ul style="list-style-type: none"> <li>• \$200 per month for each child under 2 years of age;</li> <li>• \$175 for an adult or for each child age 2 or older.</li> </ul> <p>EMS is programmed to apply these limits.</p> <p>For HUSKY A for Families (F07) allow the deduction up to the limit regardless of who pays the child care costs.</p> <p>Allow only the client’s share of dependent care costs for other FMS coverage groups.</p>

<p><b>How to record a dependent care expense for the same child and provider when Care4Kids pays part of the expense and the family receives both SNAP and FMA</b></p>	<p>List the provider twice. (EMS will allow you to record up to four dependents under a provider but you cannot list the same dependent twice under the same provider.)</p> <p>Under the first provider segment, enter "C" in the "Type" field and record the client's share of the day care expense in the "AMT" fields(s). Under the second provider segment, enter an "S" in the "Type" field and record the Care4Kids portion of the dependent care expense in the "Amt" fields(s).</p> <p><b>Important!</b> You must create two segments when Care4Kids is paying to avoid SNAP errors resulting from overstating the client's share of the expense.</p>
<p><b>Dependent Care as Income for SNAP</b></p> <p>(When a SNAP recipient is a dependent care provider)</p>	<p>Count the Parent/Provider Agreement (PPA) amount as income to the provider. The PPA amount on CCMIS equals the Care4KIDs amount plus the parent's out-of-pocket payment.</p> <p><b><u>IF THE PROVIDER CLAIMS HE OR SHE DOES NOT RECEIVE THIS AMOUNT, PROCEED AS FOLLOWS.</u></b></p> <p><b>Step 1:</b> Obtain the Care4Kids monthly payment from the CCMIS Payment History Report.</p> <p><b>Step 2:</b> To verify the parent's actual payment, have both the parent and the provider complete, sign and return to you a written statement to document that amount. The W-1224 can be used but is not required. Use that amount as the provider's income from the parent.</p> <p><b>IMPORTANT:</b> Both the parent and the provider must document in writing the amount actually paid by the parent to the provider if the amount is different than indicated on CCMIS. The provider should contact the Care4Kids contractor to have the amount corrected, but this is not an eligibility requirement for the SNAP Program.</p> <p><b>Step 3:</b> Add the amount from Step 1 to the amount from Step 2. This is the provider's income for the month for that dependent.</p> <p>Follow these steps for each dependent for whom the provider receives a payment from Care4Kids.</p> <p>Follow these steps for each of the three months prior to the current month and use an average as the SNAP recipient's income.</p> <p><b>NOTE:</b> The <b>Care4Kids Monthly Payment</b> is issued <b>only after</b> the provider has submitted the necessary paperwork. Therefore, it is possible for a provider to receive nothing from <b>Care4Kids</b> one month, and a double payment the next month. This is the reason you must use an average of three months and project that amount over the re-certification period.</p>

<p><b>Where to Find Care4Kids Information</b></p>	<p>Information regarding dependent care payments authorized by the <b>Care4Kids</b> program is available on the <b>Child Care Management Information System (CCMIS)</b>. To get the information you need, go to the CCMIS Payment History Report. Please refer to the <b>CCMIS Desk Guide</b> that is available on the DSSWEB in the Worker's Tool Kit for details about how to access that report and use the data in it. If you are unable to print a copy of that desk guide, please contact your regional OSD trainer for assistance.</p> <p>The amount of the dependent care payment is determined every six months, or whenever there is a change, whichever comes first.</p>
<p><b>Tips for Using CCMIS</b></p>	<p><b>To find the "Family ID#":</b></p> <p>From the main menu, click in the box with a picture of a woman and child marked "client." This will bring you to a data entry screen. Clear this screen by hitting the "F11" key. You are now able to make entries on this screen.</p> <p>In the box marked "EMS ID" enter the client ID number and hit the "F12" key. This will give you detailed family information including the "Family ID#" which appears in the first block. Write this number down and click "exit" on the tool bar. This will bring you back to the main menu.</p> <p><b>To access a payment report:</b></p> <p>On the main menu tool bar click "Reports" then "Pay History Report." This will bring you to the Payment History Report page.</p> <p>Click next to "family" and enter the "Family ID#" in the box next to the word "family." Next, enter dates in the boxes marked "check paid start date" and "thru." It is best to enter a range of months rather than one month, because if payment is made late, it may not show in a given month. A range of three months is recommended.</p> <p>Click "execute report" and the report will be generated.</p> <p>Once you have the report use the amount in the "Amount Paid" field as the "S: type amount and the difference between this amount and the "Monthly PPA Rate" as the "C" type amount on the EMS Care screen.</p>
<p><b>Links to more information about how to use CCMIS</b></p>	<p>If you do not have a client ID# you can do a name search on CCMIS. You can find more information about how to use CCMIS on the DSSWEB in the Workers Toolkit by following this link:  <a href="http://dssweb/dscgi/ds.py/Get/File-3306/CCMIS_DESKGUIDE_REVISED_2003[1].pdf">http://dssweb/dscgi/ds.py/Get/File-3306/CCMIS_DESKGUIDE_REVISED_2003[1].pdf</a></p> <p>To find information specific for entering dependent care data for F07, follow this link:  <a href="http://dssweb/dscgi/ds.py/Get/File-6568/How_to_Load_Both_Care_4_Kids_Child_Care_Payment_and_Out_of_Pocket_for_F07KM.doc">http://dssweb/dscgi/ds.py/Get/File-6568/How_to_Load_Both_Care_4_Kids_Child_Care_Payment_and_Out_of_Pocket_for_F07KM.doc</a></p>

Disposition: Retain for future reference.  
Distribution: Eligibility Staff  
Responsible Units: Adult Services: (860) 424-5383  
Family Services Unit: (860) 424-5540



State of Connecticut  
Department of Social Services

## SNAP Dependent Care Agreement Form

W-1224  
(New 10/09)

I pay the provider listed below to care for members of my household so that I can work or participate in employment or training or look for employment. The department will use the amount that I pay for dependent care to determine the amount of my SNAP benefit.

**Do not include payments from any other source, such as Care 4 Kids.**

If you receive assistance from the Care 4 Kids program, we may share this information with them.

The provider cares for the following member(s) of my household:

- 1 \_\_\_\_\_ Amount paid \$ \_\_\_\_\_ each \_\_\_\_\_  
(Household Member's Name) (Day, Week, Month)
- 2 \_\_\_\_\_ Amount paid \$ \_\_\_\_\_ each \_\_\_\_\_  
(Household Member's Name) (Day, Week, Month)
- 3 \_\_\_\_\_ Amount paid \$ \_\_\_\_\_ each \_\_\_\_\_  
(Household Member's Name) (Day, Week, Month)

### Signatures

I certify that all of the statements made on this form are true and complete to the best of my knowledge.

\_\_\_\_\_  
(Print **Parent's** Name) Parent's Signature Date

\_\_\_\_\_  
Parent's Client ID Number

\_\_\_\_\_  
(Print **Provider's** Name) Provider's Signature Date

This information is available in alternate formats. Phone (800) 842-1508 or TDD/TTY (800) 842-4524.

