

**WISCONSIN DEPARTMENT OF PUBLIC INSTRUCTION**  
**Community Nutrition Programs**  
**Child and Adult Care Food Program**

**Guidance Memorandum B:** For Sponsoring Organizations of the Child and Adult Care Food Program (CACFP) in Day Care Homes

Topic: Reimbursement for Meals

Date: July 2008

The Child and Adult Care Food Program regulations establish that meals served in a day care home are eligible for reimbursement under the following conditions:

1. The day care home and each meal service must have prior approval from the Department of Public Instruction.
2. The children are enrolled and are currently receiving child care services. An initial enrollment form (and subsequently, new enrollment forms or documentation of current enrollment) signed by the parent must be on file for each child, including the provider's own children, if income eligible.
3. The child care is nonresidential, i.e., the children are not living in the day care home.
- 4) a) The provider's own children (defined as the provider's own children by birth or adoption, residential grandchildren or housemates' children, who are part of the economic unit) are eligible under the following circumstances:
  - i) The sponsoring organization has determined the provider to be income eligible and has an approved income statement on file. (For resident grandchildren, any parent income must be included on the income statement as part of the total household income.);
  - ii) Signed child care enrollment forms for each such child are on file with the sponsoring organization; and
  - iii) At least one other enrolled nonresident child is present and participating in the meal service.
- b) A foster child in residence with the provider ("residential foster child") may be claimed for reimbursement by the provider if the following conditions are met:
  - i) The foster child is enrolled for day care in the home;
  - ii) The foster child's presence in the home is in compliance with state and/or local regulatory requirements (DHFS 45/DWD 55);
  - iii) A current and valid Household Size-Income Statement is on file with the sponsoring organization for the residential foster child (Attachment 1, Guidance Memorandum I); and
  - iv) A nonresidential, enrolled child is present and participating in the same meal service.
- c) The child(ren) of an assistant to the provider is not considered to be "provider's own". The child(ren) of an assistant should be claimed as non-residential when the child is enrolled for care at the day care home and should be claimed in the appropriate category based upon the tiering status of the home. If the day care home provider is Tier I eligible, then meals served to the assistant's child(ren) would be eligible for reimbursement at the Tier I rate. If the provider is Tier II, then the assistant, like any other parent, would need to complete an income eligibility form to determine eligibility.

If the assistant is in fact a member of the household, assuming the role of assistant caregiver doesn't change that status. For example, a day care home provider can not "hire" her husband or any other residential housemate (i.e. daughter, "life partner", roommate, etc) as an assistant for an hour a day to avoid considering his/her salary in determining household income for tiering purposes.

5. The enrolled children are twelve years of age or under. However, for children of migrant workers the age limit is 15 years and under. For children with disabilities (i.e. "adults"), there is no age limit when they are enrolled in a child care facility which serves a majority of persons 18 years of age or younger.

Additionally, the provider must have documentation that the "adult" has a disability **and** that the day care provider has a license or certification, from the appropriate agency, that allows for the care of adults with disabilities. The sponsoring organization must submit to DPI a copy of the license or certificate that permits providing care for an adult(s) with disabilities in order for the provider to properly claim CACFP reimbursement for these meals. A written exception to the group day care license, stating that the provider is allowed to care for disabled adults during child care hours will be regarded as sufficient documentation.

DPI will also accept as valid a signed, written statement from the licensing/certifying agency, indicating that the home provider is not out of regulatory compliance when caring for an adult with disabilities (i.e. special needs adult) while also caring for children as specified on his/her license/certification.

When claiming CACFP reimbursement for a disabled adult, under licensing regulations, a written exception or statement from the licensing authority is not required when the disabled adult is deemed to be a provider's own child, per Department of Workforce Development regulations [DWD 55.08(6)(c)], and the disabled adult is seven years or older. This only applies when the disabled adult is being claimed under licensing regulations; it does not apply when claiming the disabled adult under certification regulations. In addition, in all cases documentation that the adult has a disability must be on file with the sponsoring organization.

6. Meals served at any one shift and claimed for reimbursement do not exceed the authorized capacity. (Refer to the Attachment for additional information on calculating the authorized capacity and determining the allowable CACFP reimbursement.)
7. When meals are served in shifts, the number of children present for child care at any serving time cannot exceed the authorized capacity. The use of shifts at a meal service requires that some children leave and others arrive later.

Provider claiming shift meals are required to complete and submit to the sponsor a meal shift schedule sheet. This form must detail the names of the children, the hours of care and the meals served and claimed for reimbursement, **whenever** a meal total exceeds the provider's regulated capacity. A minimum of one meal shift schedule sheet **must** be completed and submitted by the provider with each monthly claim for reimbursement. If the shift schedule for one or more of the children changes during the claiming month additional meal shift schedule sheets must be submitted by the provider. In all cases, the provider must furnish sufficient documentation (i.e. meal shift schedule sheets) such that an accurate record of all shift meals for the claiming month is on file with the sponsoring organization. The provider must demonstrate that at no time were meals claimed in excess of authorized capacity, and that no child was claimed for more than two meals and one snack, or two snacks and one meal, per day.

Sponsors must detail in writing (as part of their CACFP contract, PI-1459, PI-1459-R) their agency's policies on shift meals. Sponsors are encouraged to develop and distribute to all their providers a written policy on claiming procedures for shift meals. Approval of shift meal service by the sponsoring organization is optional.

8. Reimbursement cannot exceed two meals and one snack or two snacks and one meal per child per day.
9. Meals and snacks must meet the USDA component and quantity requirements.
10. A provider must maintain on a daily basis records of attendance, menus, and the number of meals by type and child name (or designation) that are served to enrolled children. (Menus and the number of meals served by type and child name (or designation) must be recorded by the end of each operating day.) Infant menus (ages 4 months and older) must also include notations as to which item(s) were provided by the parent, or notations as to which items were provided by the day care home provider. Sponsors are free to determine the best method of notation to be used, and whether the notations will be for provider supplied food items, or will be for parent supplied food items.
11. Licensing, certification, registration, or approval of the provider is current. Exceptions to a provider's regulation must be in writing, although there is no specified exceptions form that must be used. An email communication from the respective regulatory agency is also an acceptable written documentation. Phone contacts with the appropriate regulatory agency regarding provider exceptions are acceptable if documented to the provider's file. Such documentation must include the date, name of the regulatory agency staff person contacted, and the specific nature of the regulatory exception, including the effective period of the exception(s). (See item #5 above regarding regulatory exceptions for "adults".)
12. Reimbursement checks must be made payable to an individual, the sponsored provider. Sponsors may, if they wish, list on the reimbursement check the name of the care day home, a P.O. box number and/or an

address different from the address of the day care home for which CACFP reimbursement was claimed. Sponsors may also mail the reimbursement check to an address different from the address of the day care home for which CACFP reimbursement has been claimed. In this later case, sponsors must have on a file a written request from the provider asking that the reimbursement check be mailed to a different address. All sponsors must maintain an audit trail which clearly associates a given payment to a given month of Program participation, and which links an approved provider to an approved geographical location for a given period of Program performance.

### 13. Change in Tier Determination

If a provider's tier determination changes within a given month, the change must be reflected in the claim for reimbursement for that respective month. Unless otherwise notified by the provider or via official notification that the eligibility was fraudulently obtained, a determination of Tier 1 status based on categorical eligibility shall be effective for a maximum of one year from the signature date of the child care provider.

Sponsors must maintain audit documentation supporting the timely reclassification (i.e. change in tier determination) of any provider. This will include a notice to the provider of the reclassification, as well as claim detail documenting the adjustment in the rates of reimbursement for the month of change. In addition, the provider home can only be reported on the monthly claim for reimbursement (PI-1452) in **one** of the appropriate boxes (Column B. *Number of Homes Claiming this Month*). This must be the tier classification in which the provider is classified at the end of the reporting month.

## Attachment

### NOTES ON CAPACITY FOR LICENSED AND CERTIFIED PROVIDERS

#### (Criteria and guidance specific to providers wishing to claim their own children, ages 7 years or older, for CACFP reimbursement)

1. In certain cases, a provider may be able to claim their own children between ages 7 and 12 in excess of the 6 (certified) or 8 (licensed) capacity.
2. If a provider is both licensed and certified, the provider is considered licensed during the days/hours on the license. All meals served within the licensed hours should be figured based on licensed group size.
3. Sponsors must identify “related” and “provider’s own” in order to determine proper group size.
4. Licensing has agreed to defer to Certification’s definition for “providers own” when children are over the age of 7. However, licensing looks at resident children as being full time residents. If the child is not living in the home full time, then during the time the child is not a resident in the home the child would count towards the maximum group size.
5. “Related” does not apply to licensing.
6. Housemate (roommate) children are not considered “related”. These children are considered residential and the CACFP regulations for residential children apply.

#### Certification Maximum Group Size

No more than 6 children under the age of 7

1. No more than 0 - 3 unrelated children under 7
  2. No more than 3 – 6 related children under 7, for a maximum group size of 6
- Providers **can** claim their own children between the ages of 7 and 12 beyond the maximum group size of 6, as long as the provider meets these four conditions:
    1. A current income eligibility statement is on file for the provider’s household showing that the provider’s household is income eligible or categorically eligible;
    2. A current sponsor-provided CACFP enrollment form (and/or documentation of current enrollment) is on file for each child;
    3. The provider’s own children are enrolled and participating in the child care program during the time of the meal service(s); and
    4. Other enrolled nonresidential children are present and participating in the same meal service(s).

DWD 55.02 (18)

**Related Children** – “Related to the provider” means the provider’s natural or adopted children, foster children, stepchildren, grandchildren, brothers, sisters, first cousins, nephews, nieces, uncles and aunts. Related children who are not in residence in the day care home will count in the group size up to age 13 (up to age 19 if special needs).

DWD 55.08 (6)(c)

**Provider’s Own** – A provider’s natural, adopted, foster, stepchildren and any other children who live in the provider’s home (either full or part time custody) who are 7 years of age or older are not counted in determining the maximum group size. (Provider’s Own only affects provider’s own children between 7 and 12.)

**Foster Children** – A foster child is considered a household of 1 for Tier Determination only. A foster child is considered to be residential and part of the household for claiming purposes. Nonresidential children must be present and participating in the same meal service in order to claim the foster child.

**Military Children** – USDA has issued CACFP guidance that makes an exception for military dependents in residential care with family child care providers due to the current deployment. This exception takes into account the special child care needs of recently deployed United States military personnel who have had to leave their children in family child care while they are overseas. In certain circumstances, USDA will allow children in this situation to be considered nonresidential for CACFP purposes for the duration of the deployment. This will allow these children to continue to participate in the CACFP.

## Licensing Maximum Group Size

At no time may more than 8 children be in the care of the center, with the exception of provider's own between ages 7-12.

The total of 8 includes:

1. All children under 7 years of age, including the provider's own children; and
2. All children 7 years of age or older who are not the provider's own children.
3. If a provider does not exceed 8, but has met capacity limits because of age distribution of children, additional children in first grade and above in care for fewer than 3 hours per day may be claimed based on Table 45.04.

The maximum number of children that one provider may care for is specified in Table 45.04. If the size of the group or the age distribution of the children exceeds the number that may be served by one provider, an additional qualified provider shall be present.

- Providers **can** claim their own children between the ages of 7 and 12 beyond the maximum group size of 8, as long as the provider meets these four conditions:
  1. A current income eligibility statement is on file for the provider's household showing that the provider's household is income eligible or categorically eligible;
  2. A current sponsor-provided CACFP enrollment form (and/or documentation of current enrollment) is on file for each child;
  3. The provider's own children are enrolled and participating in the child care program during the time of the meal service(s); and
  4. Other enrolled nonresidential children are present and participating in the same meal service(s).
- 5. LICENSING HAS AGREED TO USE CERTIFICATION'S DEFINITION OF PROVIDERS OWN. . However, licensing looks at resident children as being full time residents. If the child is not living in the home full time, then during the time the child is not a resident in the home the child would count towards the maximum group size.

DWD 55.08 (6)(c)

**Provider's Own** – A provider's natural, adopted, foster, stepchildren and any other children who live in the provider's home (either full or part time custody) who are 7 years of age or older are not counted in determining the maximum group size. (Provider's Own only affects provider's own children between 7 and 12.)

**Foster Children** – A foster child is considered a household of 1 for Tier Determination only. A foster child is considered to be residential and part of the household for claiming purposes. Nonresidential children must be present and participating in the same meal service in order to claim the foster child.

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# Certification

## Maximum Group Size

**Table 55.08(6)**  
**Maximum Number of Children in Certified Day Care**

**A. When all children are 2 years of age or older**

Related Children Under 7 years of Age	Additional Children Under 7 years of Age	Additional children Ages 7 and older	Maximum Number of Children *
0	3	Additional children ages 7 through 12 (if special needs up to 19) may be cared for as long as the maximum total number of children is not exceeded.	6
1	3		6
2	3		6
3	3		6
4	2		6
5	1		6
6	0		6

\*The maximum number does not include the provider's natural, adopted or foster children 7 years of age and older.

**When children under the age of 2 years are present**

Number of Children Under 2 Years of Age	Maximum Number of Children *
0	6
1	6
2	6
3	5
4	4

\*The maximum number does not include the provider's natural, adopted or foster children 7 years of age and older.

**Note:** Under s. 48.65(1), Stats., if a provider takes care of 4 or more children under the age of 7 who are not related to the provider, for compensation, the provider must obtain from the department a license to operate a day care center.

# Licensing

## Maximum Group Size

**Table 45.04**  
**Maximum Number of Children in Family Day Care Per Provider**

Children Under 2 years of Age	Children 2 Years of Age And Older	Maximum Number of Additional Children in First Grade or Above in Care for Fewer than 3 Hours a Day	Maximum Number of Children Per Provider
0	8	0	8
1	7	0	8
2	5	1	8
3	2	3	8
4	0	2	6

# CERTIFIED GROUP SIZE WORKSHEET

Unrelated children under 7 \_\_\_\_\_ (0-3 children)  
Related children under 7 + \_\_\_\_\_ (0-6) children  
Total children under 7 =  See 1 & 2 below

Providers own children 7-12 years + \_\_\_\_\_  
Total children to be claimed on CACFP

**EXCEPTION:**

1. 3 children under the age of 2 = maximum group size of 5  
**Except** provider's own 7-12 years of age
2. 4 children under the age of 2 = maximum group size of 4  
**Except** provider's own 7-12 years of age

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# LICENSED GROUP SIZE WORKSHEET

Number of children under 2 \_\_\_\_\_ (No more than 4)  
(including provider's own children 0-2 years)  
Number of children age 2-12 + \_\_\_\_\_  
(including provider's own children 2-7 years)  
Total children = 8 (See 1, 2 & 3 below)  
Providers own children 7-12 years + \_\_\_\_\_  
Total children to be claimed on CACFP

**EXCEPTION:**

1. 2 children under the age of 2 = maximum group size of 7  
**Except** provider's own 7-12 years of age
2. 3 children under the age of 2 = maximum group size of 5  
**Except** provider's own 7-12 years of age
3. 4 children under the age of 2 = maximum group size of 4  
**Except** provider's own 7-12 years of age

If a provider does not exceed 8 children, but has met capacity limits because of age distribution of children, additional children in 1<sup>st</sup> grade and above in care for fewer than 3 hours per day may be claimed based on the table.