



**Child Care Manual Procedure Letter No. 172**

**TO: All Child Care Manual Holders**  
**FROM: Matt Damschroder, Director**  
**SUBJECT: JFS 01115 "Publicly Funded Child Care Release of Information"**

**Background:**

Child care providers often request case information to assist families who are submitting an application for publicly funded child care (PFCC) and to determine when the provider may expect payment for care provided. The Ohio Department of Job and Family Services (ODJFS)/county department of job and family services (CDJFS) is not permitted to provide child care case information to anyone without permission of the caretaker or their designated authorized representative.

**Implementation:**

The JFS 01115 "Publicly Funded Child Care Release of Information" is now available to assist child care providers with obtaining child care application information on the families they serve. Caretakers can submit this form to their CDJFS or through the Ohio Benefits Self-Service Portal (SSP) to allow their child care provider to receive child care case information from their county agency and ODJFS. A child care provider cannot require the family to complete this form as part of their enrollment process and/or to receive child care.

The following applies to caretakers who submit an application for PFCC benefits or have entered the recertification process for PFCC benefits.

Scenario	Procedure
When should the caretaker complete the JFS 01115 and submit it?	A caretaker may complete the JFS 01115 when a child care provider accepts their children into their program for care AND their application for PFCC benefits or recertification has not been completed.
Why should the caretaker complete the JFS 01115?	PFCC benefit case information is not allowed to be shared with anyone outside of ODJFS/CDJFS. The form will grant permission for child care providers to receive information concerning pending applications.
How can the JFS 01115 be cancelled?	The JFS 01115 consent may be canceled by the caretaker or caretaker’s Authorized Representative at any time by providing notice in writing to the county agency or through the SSP.

<p>What information is ODJFS/CDJFS able to share about the status of an application if your child care program is listed on the PFCC application and the JFS 01115 has been submitted by the caretaker?</p>	<p>ODJFS/CDJFS may share the following:</p> <ul style="list-style-type: none"> <li>• Primary caretaker first and last name, address and phone number</li> <li>• First and last name and date of birth of children needing care.</li> <li>• Application information: <ul style="list-style-type: none"> <li>• Application status, including denied without PAD (payment after denial) and pending application.</li> <li>• Verification documents needed.</li> <li>• Eligibility begin and end date.</li> <li>• Authorization information</li> </ul> </li> </ul>
<p>What if the JFS 01115 has been submitted by the caretaker giving permission for a specific provider to have access to information, but this specific provider is not listed on the PFCC application?</p>	<p>If the caretaker has already submitted their PFCC application through the SSP and the provider identified by the family needs to be changed, then the caretaker can submit a change of provider through the SSP.</p> <p>If the caretaker has already submitted their PFCC application to the county and the provider identified by the family needs to be change, then the caretaker will have to contact the county to report the change in provider, unless their SSP account is already linked to their case in Ohio Benefits.</p>

The most recent version of the ODJFS form referenced in this procedure letter can be accessed through [Forms Central](#).

Please contact the Child Care Policy Help Desk at [childcarepolicy@jfs.ohio.gov](mailto:childcarepolicy@jfs.ohio.gov) or 1-877-302-2347, option 4, if you have any questions.

Ohio Department of Job and Family Services  
**Publicly Funded Child Care Release of Information**

Caretaker Name	Phone Number								
Street Address	City	State	Zip						
Caretaker Email (must be email you used in the SSP, if you have an SSP account)	Last four digits of Caretaker SSN								
<b>REASON FOR THE CONSENT TO RELEASE INFORMATION</b>									
<p>This consent gives permission for the county department of job and family services (CDJFS)/Ohio Department of Job and Family Services (ODJFS) to release publicly funded child care application information to the identified child care provider.</p> <p>You are not required to complete this form to be eligible for publicly funded child care.</p> <p>A child care provider cannot require you to complete this form as part of their enrollment process and/or to receive child care.</p>									
<b>CONSENT TO RELEASE INFORMATION</b>									
<u>Reason for Consent</u>									
<p>I understand that by signing this that the provider(s) has access to my information until the access is revoked by me or my authorized representative even if I'm no longer attending that program.</p> <ul style="list-style-type: none"> <li>• Primary caretaker first and last name, address and phone number</li> <li>• First and last name and date of birth of children needing care.</li> <li>• Application information: <ul style="list-style-type: none"> <li>○ Application status, including denied without PAD (payment after denial) and pending application.</li> <li>○ Verification documents needed.</li> <li>○ Eligibility begin and end date.</li> <li>○ Authorization information</li> </ul> </li> </ul>									
<p>This information may be released to:</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">Provider 1 name</td> <td style="width: 50%;">Provider 2 name</td> </tr> <tr> <td>Program license number</td> <td>Program license number</td> </tr> <tr> <td>Provider address</td> <td>Provider address</td> </tr> </table>				Provider 1 name	Provider 2 name	Program license number	Program license number	Provider address	Provider address
Provider 1 name	Provider 2 name								
Program license number	Program license number								
Provider address	Provider address								
<ul style="list-style-type: none"> <li>• This document can be submitted using one of the following methods: <ol style="list-style-type: none"> <li>1. Uploaded into the Self-Service Portal (SSP) by accessing your benefit <a href="https://ssp.benefits.ohio.gov/">https://ssp.benefits.ohio.gov/</a></li> <li>2. Submitted to the caretakers' county agency.</li> </ol> </li> <li>• This consent will remain in effect for eighteen months from the date of application for pending and denied child care applications or may be revoked by the Caretaker or Caretaker's Authorized Representative at any time by providing notice in writing, which must include your name and case number using one of the following: <ul style="list-style-type: none"> <li>• Uploaded into the Self-Service Portal (SSP) by accessing your benefit <a href="https://ssp.benefits.ohio.gov/">https://ssp.benefits.ohio.gov/</a></li> <li>• Submitted to the caretakers' county agency.</li> </ul> </li> <li>• By signing this form, I am responsible for terminating the listed provider(s) access to the information listed on this form.</li> <li>• Be aware that the information used or disclosed pursuant to this authorization may be disclosed by the recipient of the information and may no longer be protected from disclosure.</li> <li>• Treatment, payment, enrollment, or eligibility for public assistance cannot be conditioned on signing this authorization unless the authorization is necessary for determining eligibility for the public assistance program.</li> <li>• Pursuant to federal and state law, and applicable policies the ODJFS may access and disclose information contained in systems controlled or maintained by the ODJFS or controlled and maintained for the benefit of the ODJFS.</li> </ul>									
Signature of Caretaker or Caretaker's Authorized Representative listed in Ohio Benefits			Date						