# The Kentucky Online Gateway

Section 1: Setting up a Kentucky Online Gateway (KOG) Account

Technical Assistance Guidance for Child Care Coaches and Providers



# Quick reference

Set up Kentucky Online Gateway Account (KOG)	Slide #3
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# Let's get started....

Child Care providers in Kentucky are required to use The KARES and KICCS applications (APP's). On the next slides you will learn how to set up a Kentucky Online Gateway (KOG) account and gain access to the KARES and KICCS Apps.

# https://chfs.ky.gov/agencies/dcbs/dcc/Pages/kiccsportal.aspx



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er Portal		Services	Agencies New	s Contact Us		

# KICCS Provider Porta "Launch Page"

# provides easy access:

- 1) Link to the Kentucky Online Gateway and the KICCS Portal (see right side of screen)
- 2) The Phone # and email for KICCS Helpdesk
- 3) KICCS Portal User Guide (right side of screen) for new users and for those who already have a KY Online Gateway Account

Here's the address for this page:

https://chfs.ky.gov/agencies/dcbs/dcc/Pages /kiccsportal.aspx 2HES > Agencies > Department for Community Based Services > Division of Child Care > NICCS Provider Portal Launch Site

# KICCS Provider Portal Launch Site

### What It Is

The <u>KICCS Provider Portal</u> is used by child care providers to submit billing and view documents for the Child Care Assistance Program, complete Plans of Correction for Division of Regulated Child Care and submit documentation and receive correspondence for the All STARS program.

Contact the <u>KICCS HelpDesk</u> for help creating an account, navigation assistance or system issues related to the Provider Portal.

**HELPDESK** 

Local (Frankfort): (502) 564-0104, Option 5 Toll-free: (866) 231-0003, Option 6

### All STARS

Beginning June 25, Licensed and Certified child care providers will be able to do the following using the Provider Portal:

submit Standards Checklist and upload supporting

# Click on this link to log In to the KICCS Provider Portal and Kentucky Online Gateway

Portal Access

KICCS Provider Portal

#### Become a KICCS Portal User

- Review the <u>KICCS Portal User Guide</u>
   for instructions to create a KY
   Online Gateway citizen account
- Child care providers print and follow the instructions on the <u>Provider Portal</u> <u>User Agreement</u>
- University of Kentucky STARS staff (QEI) print and follow the instructions on the <u>QEI User Agreement</u>

Have an existing KY Online Gateway citizen account?

- Log into your account
- Request access to the KICCS Provider
   Portal

7/31/2018

Submit the appropriate User





The KICCS PORTAL USER GUIDE will provide step by step directions to set up an account. We suggest you print or save this document as a reference.

Need Help?

Contact the KICCS Help Desk:

1-866-231-0003 Option 6

# KICCS PORTAL USER GUIDE

User Guide to request a citizen (CIT) account and provider or STARS QEI online features

# Setting Up A Kentucky Online Gateway (KOG) Account

# https://chfs.ky.gov/agencies/dcbs/dcc/Pages/kiccsportal.aspx

STEP #1: Each user will establish their own KOG Account.

STEP #2: Each user will request access to KARES/National Background Check Portal

STEP #3: Each user will complete the electronic request for KICCS access and submit the Provider Portal Agreement for approval.



# https://chfs.ky.gov/agencies/dcbs/dcc/Pages/kiccsportal.aspx

o create an account:

## Click on the green "Create Account" button.

ntucky e Gateway		Help    English 🗸
24 Contact us		
Welcome to the CHFS network.		
Please select the account type you have in the syste	m.	
I am a Kentucky Citizen or Business Partner		
I already have an account:	Need to create a Citizen account?	
Sign In	Create Account	
I have a CHFS Network Account		
I am a CHFS contractor, employee, or agent/ver	ndor.	

# Guidelines

- Each user must establish their own account using their personal email address.
- Typically the owner, director and assistant director set up personal KOG accounts.
- <u>Do not</u> set up a center account to be shared by multiple users.
- <u>Do not</u> share your account or passwords with another user.

#### Kentucky Online Gateway

#### Ayuda Español 🗸

### Gateway Inicio de Sesión

Inicia sesión con tu Cuenta de Kentucky Online

Gateway.

Nombre de Usuario o	¿Olvidó Nombre de Usuario?

¿Olvidó Contraseña?

Dirección de Correo Electrónico

brummal.murphy@uky.edu

Contraseña

.....

#### Iniciar la sesión

#### ¿Todavía no tiene una

Cuenta Ciudadana de Kentucky Online Gateway?

Crear Una Cuenta

#### **ADVERTENCIA**

Este sitio web es propiedad de Commonwealth de Kentucky. Esto es para notificarle que sólo está autorizado para utilizar este sitio, o cualquier información obtenida a través de este sitio, para los fines previstos. Acceso sin autorización o la divulgación de información personal y confidencial pueden ser castigados con multas bajo la ley estatal y federal. Acceso sin autorización a este sitio web o el acceso en exceso de su autorización también puede ser castigado criminalmente. Commonwealth de Kentucky sigue las pautas aplicables federales y estatales para proteger la información de uso indebido o acceso no autorizado. Use this box to access the portal in English or Spanish.

Reenvíe correo electrónico con

verificación de cuenta

# **KARES APP**

Section 3: The National Background Check Portal









# Additional Background Checks



# CAN Online System for Background Checks for Staff who are under 18 Years Old Central Registry/Child Abuse and Neglect (CAN)

My Apps	All Apps	After signing on to your Kentucky Online
Search for Applications	<	Gateway (KOG) account, click on All Apps
F G H I J K L M	1 N O P Q R	
KARES	KICCS Provider Portal	
Fingerprint based background checks for job applicants	A portal used by Child Care providers to submit billing.	
Launch	Launch	



# Are you ready to enter a prospective employee?

# 01

Have the prospective employee complete a DCC 374 Central Registry Check form on paper. This will ensure you have all the information necessary to complete the online entry. 02

You must have a signed parent permission form and one of the following for each prospective employee uploaded to your computer: Driver's License, State Issued ID, Social Security Card, Taxpayer ID Card, Passport , Birth Certificate

# 03

Have a method of payment ready to enter into the system.

#### Please use Internet Explorer, Chrome or Mozilla to access this application.

#### 2020 Census be counted for

## Overview

Welcome to the CAN Payment and Verification system. To begin a new request, select the Form menu item located in the upper left hand corner. To check the status of a previously submitted request, select My Dashboard in the upper left hand corner. Refunds cannot be issued if you submit the wrong form or if your supporting document is not clearly recognizable. For questions regarding the correct form, see contact section below.

### Instructions

Welcome

### **General Instructions**

If you do not have a social security or taxpayer identification number, please submit a paper application. The CAN Payment and Verification system requires either a social security or taxpayer identification number. The CAN Payment and Verification Database does not accept international addresses. Please list US addresses only. To have results provided directly to an employer/agency through the application, enter an employer/agency provided email address in the Employer/Agency Information of your request. Upon completion, results will be provided directly to the employer/agency.

### Help Desk

### Contact

For questions on how to submit a request in the CAN Payment and Verification database, please contact Records Management at 502-564-3834 for Central Registry Check (DPP 156) related issues or the Division of Childcare at 502-564-2524 Option 1 for Child Care Central Registry Check (DCC 374) related issues. If you are unable to access the database or receive an error message, please contact the help desk at 877-545-6175.



## Please indicate if you are a licensed child care center or a certified family child care home.

## Disregard the other options.

#### CHILD CARE CENTRAL REGISTRY CHECK

\* STATE AND/OR FEDERAL LAW REQUIRES A CHILD ABUSE/NEGLECT (CAN) CHECK AS A CONDITION OF EMPLOYMENT OR SERVICE AS A CHILD CARE/DAY CARE STAFF MEMBER FOR THE FOLLOWING:

A Licensed Child-Care Center Employee, Volunteer, or Adult Household Member (922 KAR 2:090)

A Certified Family Child-Care Home Employee, Volunteer, or Adult Household Member (922 KAR 2:100)

A Registered Child Care Provider Applicant or Adult Household Member (922 KAR 2:180)

Private Child Care Employee (KRS 199.466)

Out of State Child Care Employee (42 U.S.C. 9858f, 45 C.F.R. 98.43)

Other

(If none of the above category is applicable, please explain the reason for requesting a child abuse or neglect check, including the statutory or regulatory authority for the request):

ectangular Ship

# Be sure to complete the entire form. Do not leave any of the boxes blank.

### **Personal Information**

Personal information regarding the individual submitting to a child abuse or neglect check

*First Name	*Last Name
Ex. John	Ex. Smith
*Middle Name	*Maiden/Nick Name/Other
Ex. Jones	Ex. Dave
* Sex	*Race
Please select a Sex	<ul> <li>✓ – Please select a Race</li> </ul>
*Date of Birth	* Social Security/Individual Taxpayer Identification #
MM/DD/YYYY	2006-306-306-306
*Date of Initial Hire	
MM/DD/YYYYY	

Current Address

*Address Line 1		Address Line 2	
Ex. 123 Main St		Ex. Apt 10 Or Suite 200	
* City	* State		*Zip Code
Ex. Frankfort	– Please select a S	State – 🗸 🗸 🗸	Ex. 12345
* Living at the current address Employer / Agency Information In addition to receiving th agency. Results will not the View / Upload Documents	s longer than 5 Years?  Yes  No	ealth and Family Services to sha	e the results with the following employer or
*Upload one of the following sup file types: .JPEG, .PNG, .BMP o	pporting documents: Driver's License/State ID, Bir or .PDF. Please ensure that the supporting docume *Document Description Please enter supporting documer Choose File No file chosen	th Certificate, Social Security Card/ ent image is clearly recognizable.	Individual Taxpayer ID, Passport or work ID. Approved You can add multiple applications before you
	Ex. 123 Main St  City Ex. Frankfort  Living at the current address  Employer / Agency Information In addition to receiving t agency. Results will not I  View / Upload Documents  *Upload one of the following su file types: .JPEG, .PNG, .BMP of	Ex. 123 Main St         • City       • State         Ex. Frankford       - Please select a State         • Living at the current address longer than 5 Years? • Yes No         Employer / Agency Information         In addition to receiving the results myself, I authorize the Cabinet for He agency. Results will not be mailed         View / Upload Documents         "Upload one of the following supporting documents: Driver's License/State ID, Bir file types: .JPEG, .PNG, .BMP or .PDF. Please ensure that the supporting document is .Driver's License/State ID, Bir file types: .JPEG, .PNG, .BMP or .PDF. Please ensure that the supporting document .Document Description         Please enter supporting document .Document .	Ex. 123 Main St       Ex. Apt 10 Or Suite 200         * City       * State         Ex. Frankford       - Please select a State -         * Living at the current address longer than 5 Years? • Yes O No         Employer / Agency Information         In addition to receiving the results myself, I authorize the Cabinet for Health and Family Services to shar agency. Results will not be mailed         View / Upload Documents         *Upload one of the following supporting documents: Driver's License/State ID, Birth Certificate, Social Security Card/I file types: .JPEG, .PNG, .BMP or .PDF. Please ensure that the supporting document image is clearly recognizable.         *Document Description         Please enter supporting document name         Choose File       No file chosen



On your home screen, the CAN Payment and Verification App will be available for you to use in the future.



# Out of State Background Checks

https://chfs.ky.gov/agencies/dcbs/dcc/Pages/nationalbackgroundcheck.aspx

## https://www.childcareawareky.org/tips-and-tools/

Child Care Aware Staff will refer you to the Division of Child Care Background Check Team at (502) 564-2524 or (502) 564-3015for questions regarding out of state background checks. The Tips and Tools page redirects you to DCC where you will find this form. Please be sure you submit requests for Sex Offender Registry, Child Abuse and Neglect and Criminal Record Check:

State	Form	Mali/Email to:	Requested From:	Cost	Sex Offender Registry
AL (Alabama)	Form 1598	State of Alabama DHR; Office of Child Protective Services; CA/N Central Registry; 50 N. Ripley Street; Montgomery, Alabama 36130	Provider Requests	None	AL Sex Offender Registry
AK (Alaska)	Clearance Form	E-mail to: Ocsbackgroundcheck @alaska.gov	Provider Requests	None	AK Sex Offender Registry
AR (Arkansas)	Child Maltreatment Central Registry Check	Child Maltreatment Central Registry Slot S 566 P O Box 1437	Provider	\$10.00	AR Sex Offender Registry

For staff that have not resided in KY for 5 years: Child Abuse and Neglect Registry Sex Offender Registry Criminal Record Check

Guideline #1: Staff must not work alone until the results of all out of state checks have been received or until 30 days has passed.

Guideline #2: What if the state does not respond or refuses to provide results? Kentucky can't force another state to comply with our regulatory requirements. Just maintain the communications on file for review.



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# The KICCS Portal

Section 4: Kentucky's Integrated Child Care System

Child Care Assistance Program Billing Complete Plan of Correction for DRCC Submit Reports for Kentucky All Stars





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Edit View Favorites Tools Help		On the "	All Apps" page, scroll dow
entucky.gov	and you		find KICCS Provider Port
CHE'S BI HISSME EXT HSSME Rusiness Objects reports can access externally.	Benefind Learn about public assistance program and apply for benefits.	CM75 External SharePoint Sites SharePoint Web Application Enables site access via all Ky.gov and CTT KOG user accounts.	Child Support Website Allows public to create, update and view their accounts (custodial and non-custodial parents).
Drol	Erroll as Citizen	Endl	rot
CLPPP Application to track Lead Poisoning	CSE Monthly Invoicing Portal Allows contracting officials to enter their expenses.	CSE Policy and Procedures Allows caseworkers to view Policy	EDRS EDRS Electronic death re orting system Hospitals, funeral homes are required to use EDRS to report deaths in KY. EDRS is a ssion critical 24/7 application.
Ençul	Enroll	Enroll	arsa
CenTrack Small generic applications almost 300 in GenTrack and almost TOU in GenLog. Supports entry and tracking of generic information.	HANDS Application to monitor worker services to pregnant women, first time parents.	Fiviat TWIST is the Commonwealth of Kentucky's automated case management system designed to support the frontline social services delivery effort that is operated under the agois of the Cabinet for Health and Family Services (CHFS).	KADAP Used to enter application information to determine whether clients are eligine for the drug assistance program (Ryan White Grat).
Erroll	Enrol	Erroli	aros .
Kentucky Diabetes Contact Holds demographic information regarding professionals in the Diabetes field. Creates contact lists, mailing labels, name tags, etc.	Kentucky Medicaid's Pharmacy Member Portal Medicaid Member Pharmacy Portal	KHE Coordinating Council & Comm Sharepoint for KHIE Coordinating Council and Committees	A portal used by Child Care providers to submit billing.
Erral	Empl	Endi	Errol
KY Diabetes Resource Directory Web based application, available to public listing all Diabetes resources by county city, zip code so that an individual would be able to search for information in their region	KY MMIS Interchange The Kentucky Medicaid Management Information System (KYMMIS) is a claims processing and retrieval system. The Current KYMMIS is hosted and mantained by ZXC formerly Hewlett Packard	KYFIRST Kentucky Food Inspection Regulatory Standards Tool.	NEDSS National Electronic Disease Surveillance System Enables NPDH reportable disease staff to report disease information to the Center for Disease Control.

https://kog.chfs.ky.gov/request/external/SelectRole.aspx#DivAlertContainer

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Welcome to Kentucky Online G... 🧟 Kentucky Online Gateway - ... 🗙 📑

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Select the roles you wish to request or remove for the (KICCS Provider Portal)

Roles	PreRequisites	Request	
Technical_Notes_Assistance Technical Notes Assistance			
Current Roles			
Roles		Remove	
Print_PBF Print Provider Billing Form			
Print_Remittance Print Remittance		α	
Process_Prov_Ren_Chng_CMP_POC Submit Renewal & Change Applicati Correction	ons, Pay Civil Monetary Penaltic	es, Submit Plans of	1_ √
Save_PBF Save Provider Billing Form			
Send_PBF Send Provider Billing Form		a	
View_PBF View Provider Billing Form			

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Add or remove roles by clicking in the boxes. <u>Most providers should</u> <u>add all roles except</u> <u>Technical Notes</u> <u>Assistance.</u> Check with your Health and Safety Coach for guidance.

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Manual of the Commonwealth of Kenucky

**KENTUCKY** Cabinet for Health and Family Services

**Provider Portal Launch Site** 

ncies > Department for Community Based Services > Division of Child Care > KICCS Provider Portal Launch Site

## **IMPORTANT** In addition to setting up an online account, each user must complete a written Provider Portal Agreement. The KICCS **Provider Portal account** is not activated until the

written agreement is

received and approved.

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der Portal is used by child care providers to submit documents for the Child Care Assistance Program. of Correction for Division of Regulated Child Care and ntation and receive correspondence for the All STARS

ICCS HelpDesk for help creating an account, navigation system issues related to the Provider Portal.

ankfort): (502) 564-0104, Option 5 e: (866) 231-0003, Option 6

### I STARS

Beginning June 25, Licensed and Certified child care providers will be able to do the following using the Provider Portal:

submit Standards Checklist and upload supporting

### Print the PROVIDER PORTAL USER AGREEMENT

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Portal Access

Services



Agencies

#### **Become a KICCS Portal User**

- Review the KICCS Portal User Guide for instructions to create a KY Online Gateway citizen account
- Child care providers print and follow the instructions on the Provider Portal User Agreement
- University of Kentucky STARS staff (QEI) print and follow the instructions on the QEI User Agreement

Have an existing KY Online Gateway citizen account?

Log into your account

0 1

- Request access to the KICCS Provider Portal
- Submit the appropriate User

Hint: Print the **Provider Portal** Agreement and submit it for approval. Don't forget to send a copy of your I.D.

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#### **PROVIDER PORTAL USER AGREEMENT, 3 pages**

Division of Child Care (DCC) Division of Regulated Child Care (DRCC)

#### Kentucky Integrated Child Care System (KICCS) Provider Portal Access Agreement

#### Form and Online Request Instructions

#### General Procedure

To obtain access to the KICCS Provider Portal and its online features, an applicant must have a citizen account accessible through the Kentuck Online Gateway (KOG), submit a legible copy of their driver's license or state photo ID, and complete and submit this form. Please type or complete this form in Ink. All information must be accurate and complete, and the form must contain the appropriate authorized signature(s) from an owner or authorized agent regustered with the Kentucky Secretary of State's Office. Droke the form is completed, it must be submitted to CHPS for approval.

- Step 1: Print this form. Submit one form for each user requesting an account and for each license number to which the user needs access.
- Step 2: Follow the instructions available on the KICCS Provider Portal Launch Site <u>inttps://th/s.ky.gov/apprnces/dkbs/dks/dkg/Bacgs/kiccpport/al.app.</u> to create a citizen account or request KICCS portal roles through the KICS. If you need help completing the online request, contact the KICCS Help Desk (502) 564-0104, Option 6, or toil free at 866-231-0003, Option 6.
- Step 3: Complete ALL fields of the form. Handwritten information must be legible. Access will
  not be granted if the user information is incomplete or illegible.
- Step 4: Please ensure the administrator signature line is signed by the owner or registered agent documented with the Kentucky Secretary of State.
- Step 5: Submit the completed form, a copy of your driver's license or valid photo ID issued by the state electronically to fax number 502-564-3464 or by email: <u>Portal Access@ky.goy</u>.

It you prefer, you may mail these documents to:

Helpful Hint Page #1:

Division of Child Care ATTN: CCAP Portal Administrator 275 E. Main St, 3C-F Frankfort, KY 40521

NOTE: Please enlarge and lighten your driver's license before faxing. It will make the image easier to read.

For questions or assistance, please call the help desk at (502) 564-0104, Option 6, or toll free at 866-231-0003, Option 6.

Instructions on how to complete the form, including how and where

to submit the completed document

Commonwealth of Kentucky Cabinet for Health and Family Services (CHFS) Division of Child Care (DCC) Division of Regulated Child Care (DRCC)

#### Kentucky Integrated Child Care System (KICCS) Provider Portal Account Agreement

#### SECTION 1: USER INFORMATION

REQUEST DATE:	KY DL/PHOTO ID NO.	
FIRST NAME:	M.I.	LAST NAME:
EMAIL USED ON KOG:		
PRIMARY PHONE: ( )		SECONDARY PHONE: ()
ENTER NAME OF THE HEA	D OF ORGANIZATION/OW	NER:
BUSINESS NAME:		FAX NUMBER:

CERTIFIED, LICENSED OR REGISTRATION (CLR) NO.

(If you have multiple centers and need additional space, attach a separate piece of paper listing the information for each center including the business name for each C.L.R).

#### BUSINESS MAILING ADDRESS:

CITY:STATEZIP:COUNTY:	

#### SECTION 2: KICCS PROVIDER PORTAL ACCOUNT USER AGREEMENT

By accepting this user agreement, I acknowledge I have been made aware of my responsibilities to protect the confidentiality of the information in the KICCS Provider Portal Account. I am only permitted to use KICCS Provider Portal Account for the purpose of reporting child care activity for payment, submitting for Renewal, and/or submitting Provider Change Request applications online. I acknowledge I have been made aware that misuse of the information may potentially lead to penalties and/or system revocation.

#### As an authorized user, I agree to the following terms of use:

I agree to make only authorized use of any information in the KICCS Provider Portal Account. I
agree to not divulge the contents of any record except as permitted by state or federal law.

2 Lagree not to share any user name or nassword information. Lacknowledge Lam responsible for

Helpful Hint Page #2:

Each user must set up their own account Each user may have access to multiple accounts, simply attach a form with the license # of each center you need to access.

DO NOT SHARE USER ACCOUNTS

Any misuse of the KICCS Provider Portal Account or its information may lead to temporary revocation of access privileges, permanent loss of access privileges or penalties under state and/or federal law.

#### SECTION 3: AUTHORIZATION SIGNATURE FOR ALL ACCOUNT REQUESTORS

I attest to the best of my knowledge the information provided above is true, accurate, and complete and that I have read and agree to the KICCS Provider Portal Account user agreement terms within this document.

OUR SIGNATORE HERE	DATE
four Printed Name (must be legible):	
·	<b>+</b>
OUR ADMINISTRATOR'S SIGNATURE HERE	DATE

Section 4 is for the Division of Child Care/Division of Regulated Child Care staff only. Do NOT write below this line.

#### SECTION 4: AUTHORIZATION SIGNATURE(S) FOR CCAP ADMINISTRATORS ONLY

I certify the job duties of the User require access to the program(s) requested and the access complies with appropriate use as specified in the KICCS Provider Portal Account User Agreement.

CCAP ADMINISTRATOR: \_\_\_\_\_ DATE: \_\_\_\_\_

Helpful Hint Page #3: Be sure the application is signed by the licensee or person authorized to sign documents. Attach a copy of your photo ID. Hint: The agreement will be reviewed and approved. At that time you will receive an email confirming approval of your account.

YOU MUST OPEN THE EMAIL AND VALIDATE THE ACCOUNT IF NEEDED!

Gateway Log In	Don't already have a
Login with your Kentucky Online Gateway Account.	Kentucky Online Gateway Citizen Account?
	Create An Account
Username or Email Address Forgot Username?	
	WARNING
Password Forgot Password?	This website is the property of the Commonwealth of Kentucky. This is to notif you that you are only authorized to use this site, or any information accesse
	through this site, for its intended purpose. Unauthorized access or disclosure of personal and confidential information may be punishable by fines under state and
	federal law. Unauthorized access to this website or access in excess of you authorization may also be criminally punishable. The Commonwealth of Kentuck
Log In	follows applicable federal and state guidelines to protect the information from
	misuse of unautionized access.





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# Need on-site assistance?



Child Care Aware Health and Safety Coaches are available statewide to provide technical assistance. Click on the link to locate the coach in your county.

800 956-8950	1 1 E	3	💥 Tips and Tools
Training Research Ti	ps and Tools		٩
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	Training Research Ti jion	Training Research Tips and Tools	Training Research Tips and Tools



https://www.childcareawareky.org/about-child-care-aware/coaches/

# Who Do You Call For Help?

# Access to KICCS or the Kentucky Online Gateway

For KICCS system and technical issues:

KICCS Portal Help Desk Phone: (866) 231-0003, Option 6 (toll free) (866) 231-0023 Option 6 (toll free) (502) 564-0104, Option 6 (in Frankfort) KICCS Portal Help Desk Email:

CHFS.KICCSHelpDesk@ky.gov

For questions on access approval or to remove a user from the account:

portal.access@ky.gov

(502) 564-2524 Lahoma or Amber