# Subsidized Provider Report (SPR) Technical Manual

A Guide for Program Staff  
Version 3.2  
March 2024

CDE Seal


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Table of Contents

[Subsidized Provider Report (SPR) Technical Manual 1](#_Toc173751216)

[Acronyms 3](#_Toc173751217)

[Glossary 4](#_Toc173751218)

[Revision History 5](#_Toc173751219)

[Section Summary 6](#_Toc173751220)

[Section A: Overview 6](#_Toc173751221)

[Section B: Report Schedule 7](#_Toc173751222)

[Section C: SPR File Technical Description 7](#_Toc173751223)

[Section D: SPR File Format Specifications 8](#_Toc173751224)

[Section E: SPR Data Definitions 10](#_Toc173751225)

[Line Number 11](#_Toc173751226)

[Vendor Number 11](#_Toc173751227)

[Report Year/Month 11](#_Toc173751228)

[Combined Contract Code 12](#_Toc173751229)

[Local Provider Identification Number 13](#_Toc173751230)

[Provider Last Name 13](#_Toc173751231)

[Provider First Name 13](#_Toc173751232)

[Provider Middle Initial 14](#_Toc173751233)

[Provider Home Address Line 1 14](#_Toc173751234)

[Provider Home Address Line 2 14](#_Toc173751235)

[Provider Home City 15](#_Toc173751236)

[Provider Home Zip Code 15](#_Toc173751237)

[Provider Home FIPS Code 15](#_Toc173751238)

[Provider Mailing Address Line 1 16](#_Toc173751239)

[Provider Mailing Address Line 2 16](#_Toc173751240)

[Provider Mailing City 16](#_Toc173751241)

[Provider Mailing Zip Code 16](#_Toc173751242)

[Provider Mailing FIPS Code 17](#_Toc173751243)

[Provider Work Phone Number 17](#_Toc173751244)

[Provider Cell Phone Number 18](#_Toc173751245)

[Provider E-mail Address 18](#_Toc173751246)

[Provider License Number 18](#_Toc173751247)

[Subsidy Start Date 18](#_Toc173751248)

[Subsidy End Date 19](#_Toc173751249)

[Is License Exempt 19](#_Toc173751250)

[Provider Home Telephone Number 19](#_Toc173751251)

[Provider Home Language 20](#_Toc173751252)

[Subsidy Fee Payment Amount 21](#_Toc173751253)

[Section F: Step-by-Step Reporting Instructions 22](#_Toc173751254)

[Section G: SPR Resources, Links & FAQs 23](#_Toc173751255)

## Acronyms

Below is an alphabetical list of acronyms used in the context of this document.

* **AP:** Alternative Payment
* **Bridge:** Emergency Child Care Bridge Program for Foster Children
* **C1AP**: CalWORKs Stage 1
* **C2AP**: CalWORKs Stage 2
* **C3AP**: CalWORKs Stage 3
* **CalWORKs:** California Work Opportunity and Responsibility to Kids Program
* **CAPP**: Alternative Payment Program
* **CCDD**: Child Care and Development Division
* **CCTR**: General Child Care and Development Program
* **CDE:** California Department of Education
* **CDSS**: California Department of Social Services
* **CDMIS:** Child Development Management Information System
* **CFCC**: Family Child Care Home Education Networks
* **CHAN**: Child Care and Development services for children with severe disabilities
* **CMAP**: Migrant Alternative Payment Program
* **CMIG**: Migrant Child Care and Development Programs
* **CRRP**: Resource and Referral Program
* **CSPP**: California State Preschool Program
* **DRPO:** Data Research and Planning Office
* **EC:** Education Code
* **EED:** Early Education Division
* **FCCH:** Family Child Care Home
* **FIPS:** Federal Information Processing Standards
* **FY:** Fiscal Year
* **USPS:** United States Postal Service

## Glossary

Below is an alphabetical list of terms used in the context of this document.

* **ASCII:** An ASCII file is a plain text file that uses ASCII character encoding. You can open and edit an ASCII file in most any text editor or word processor. ASCII files are more commonly saved with the .TXT or .ASC extension.
* **Fields**: A term used to refer to the rows of an electronic file.
* **Fiscal Year**: California state fiscal year, spanning July 1 through June 30.
* **License**: A basic permit to operate a facility, issued by CDSS.
* **License-exempt Provider**: An individual who provides early care and education in their own home or in the home of the child receiving care and is exempt from licensing requirements pursuant to Section 1596.792 of the Health and Safety Code.
* **Provider:** A childcare provider who participates in a state-funded early care and education program and is either an individual who operates a family child care home or an individual who provides early care and education in their own home or in the home of the child receiving care and is exempt from licensing requirements. An assistant provider, a volunteer, or any other individual who works or volunteers for a family daycare home is not considered a provider.
* **Records:** A term used to refer to the columns of an electronic file.
* **Report Due Date:** The date by which all provider information for a specified report period is due to the CDE and CDSS.
* **Report Lock Date:** The last day for agencies to edit or update provider information for a past report period.
* **Report Period:** Month and Year of a SPR.
* **State-subsidized childcare services:** A state-funded early education program administered by CDE or CDSS to subsidize early learning and care for children but does not include the public education system. The following contract types administer state-subsidized childcare services and utilize providers, as defined above: (C1AP, C2AP, C3AP, CAPP, CCTR, CFCC, CHAN, CMAP, CMIG, Bridge, and CSPP).

## Revision History

| **Version Number** | **Revision Date** | **Section** | **Summary of Changes** |
| --- | --- | --- | --- |
| V 1.0 | 08/2019 | All sections | SPR Requirements created |
| V 2.0 | 12/2019 | Sections: B & E | Report Schedule: Updated to reflect FY 2020-21  Added Additional Data Fields: Is License Exempt, Provider Home Telephone #, Provider Home Language |
| V 3.0 | 2/2023 | All sections | Added DSS email and information;  Added DRPO Acronym;  Provide 20-02 Bulletin information;  Update reporting periods to provide link and remove tables;  Sections F and G were updated to include the CDMIS Updates and new reports available on CDMIS;  Section H Resources was added |
| V 3.1 | 9/2023 | All Sections | Formatting; Added ASCII Definition; Replaced Section G: SPR Management Report with previous Section H: Resources (management report is no longer available to agencies); Section E was amended to add Validation Tips for checking the SPR file, and the rules and guidelines were expanded on to provide more detail. |
| V 3.2 | 3/2024 | Section C: SPR File Technical Description; Section D: SPR File Format Specifications | Effective July 1, 2024, File Format Specifications are being updated to include the new Subsidy Payment requirement and updating the Combined Contract Code to 10 digits. File Technical Description updated to include 28 field requirement. |

## Section Summary

This document contains the following sections and topics:

* Section A: Overview
* Section B: Report Schedule
* Section C: SPR File Technical Description
* Section D: SPR File Format Specifications
* Section E: SPR Data Definitions
* Section F: Step-by-Step Reporting Instructions
* Section G: SPR Resources, Links and FAQs

## Section A: Overview

The Subsidized Provider Report (SPR) is a data collection in which California Department of Education (CDE) contracted agencies and California Department of Social Services (CDSS) contracted agencies who administer contracts and reimburse providers, as defined above, report specific business and/or personal information on all providers who were paid for providing state-subsidized services. The SPR is submitted by agencies to the CDE and CDSS via the Child Development Management Information System (CDMIS).

This document provides the technical instructions for submitting the required provider data in the SPR using the CDMIS. For further information about the SPR, refer to Management Bulletin 19-06: Collection of Family Child Care Home Provider Data at <https://www.cde.ca.gov/sp/cd/ci/mb1906.asp>, and Management Bulletin 20-02: Family Child Care Providers: Collective Bargaining; Additional Data Elements to be Reported at <https://www.cde.ca.gov/sp/cd/ci/mb2002.asp>. Guidance and technical support for the SPR is available on the Subsidized Provider Report web page at <https://www.cde.ca.gov/sp/cd/ci/spreport.asp>.

Contracted agencies managing provider contracts for reimbursement must inform providers about data collection for the report. The Notice to Providers document is available on the SPR Resource Page. Providers can choose to Opt Out of sharing their contact information with provider organizations by following the procedures below:

Opting out involves submitting a written request to the contracting agency, which is then shared with CDMIS Support at [CDMIS@dss.ca.gov](mailto:CDMIS@dss.ca.gov). This ensures future contact information remains confidential to provider organizations. To opt back in, providers can submit a written request to the contracting agency, which will be forwarded to CDMIS Support, making their contact information available in the Subsidized Provider Report.

If you require technical assistance with any of the topics covered in this technical manual, please contact CDMIS Support by e-mail at [CDMIS@cde.ca.gov](mailto:CDMIS@cde.ca.gov) or [CDMIS@dss.ca.gov](mailto:CDMIS@dss.ca.gov).

## Section B: Report Schedule

SPR report month due dates can be found on the California Department of Education website, Contractor Information Page in the Subsidized Provider Report section. The link to this page is provided here and is updated annually: <https://www.cde.ca.gov/sp/cd/ci/spreportsched.asp>

## Section C: SPR File Technical Description

This section provides technical descriptions of the various components of a file.

#### File Format

All files uploaded for the SPR must be specifically formatted to meet SPR standards. Specifically, files must maintain the following characteristics:

* Files must contain 28 information fields.
* Data entry within the mandatory 28 information fields is required unless otherwise specified.
* Files must be a tab-delimited text ASCII file.
* Files must not be compressed (i.e., zipped).
* Incorrectly formatted files will not be processed by the CDMIS.

#### Records (Rows)

The term “records” is used to refer to the rows of a file:

* Each record in files must end with the standard personal computer (PC) end-of-line characters Carriage Return (CR)/Line Feed (LF) (i.e., “Enter” key).
* Blank records are not allowed in the files.
* Files must contain at least one record.
* Files must not contain header rows.

#### Fields (Columns)

The term “fields” is used to refer to the columns of a file:

* All fields indicated in Section D: SPR File Format Specifications must appear in each record, even fields with null or blank values.
* All fields are delimited (separated) by tabs, except the last one, which is followed by a CR/LF.
* The use of two tabs next to each other indicates a blank field.
* Fields must not be padded with spaces.
* Fields must not contain control characters or format symbols.
* If a field is marked as required, null values (no data) are not allowed.
* Field lengths may be less than the specified length if the data size column includes "Max and Min sizes" but can never exceed the maximum. If the data size column includes a specific field size, the field must be exactly that length.

#### Data

Within each field, data elements must be specifically formatted. Each field contains different data format specifications.

General descriptions of the format of the different data elements are presented below:

* Character fields can contain both upper- and lower-case letters, numbers, and dashes, unless otherwise noted.
* Number fields must contain only numbers.
* Date fields must contain dates in the format mm/dd/yyyy.

Detailed descriptions of the format of the different data elements of a file are presented in the following section, Section D: SPR File Format Specifications.

## Section D: SPR File Format Specifications

This section provides detailed information of format specifications for each data field within a file.

Within a file, all data elements must be formatted and meet specific criteria. The below table outlines each data element of a file. Additionally, the table below provides descriptions of each data element, including the data type, size, and entry requirement. For definitions, guidelines, and examples for each field, refer to Section E: SPR Data Definitions.

C: Character (upper and lower case letters, numbers, dashes, etc.)

D: Dates (format is mm/dd/yyyy)

N: Numbers only

| Field No. | Data Element Description | Data Type | Data Size | Entry Required? |
| --- | --- | --- | --- | --- |
| 1 | Line Number | N | Max. 6 | Yes |
| 2 | Vendor number | C | 4-5 | Yes |
| 3 | Report Year/Month | C | 6 | Yes |
| 4 | Combined Contract Code | C | 10 | Yes |
| 5 | Local provider identification number | C | Max. 15 | No |
| 6 | Provider Last Name | C | Max. 50 | Yes |
| 7 | Provider First Name | C | Max. 50 | Yes |
| 8 | Provider Middle Initial | C | 1 | No |
| 9 | Provider Home Address Line 1 | C | Max. 95 | Yes |
| 10 | Provider Home Address Line 2 | C | Max. 95 | No |
| 11 | Provider Home City | C | Max. 35 | Yes |
| 12 | Provider Home Zip Code | C | 9 | Yes |
| 13 | Provider Home FIPS Code | C | 5 | Yes |
| 14 | Provider Mailing Address Line 1 | C | Max. 95 | No |
| 15 | Provider Mailing Address Line 2 | C | Max. 95 | No |
| 16 | Provider Mailing City | C | Max. 35 | No |
| 17 | Provider Mailing Zip Code | C | 9 | No |
| 18 | Provider Mailing FIPS Code | C | 5 | No |
| 19 | Provider Work Phone Number | N | 10 | See data definition |
| 20 | Provider Cell Phone Number | N | 10 | See data definition |
| 21 | Provider E-mail address | C | Max. 62 | No |
| 22 | Provider License Number | C | 9 | No |
| 23 | Subsidy Start Date | D | 10 | Yes |
| 24 | Subsidy End Date | D | 10 | No |
| 25 | Is License Exempt | C | 1 | Yes |
| 26 | Provider Home Phone Number | N | 10 | See Data Definition |
| 27 | Provider Home Language | N | 2 | No |
| 28 | Subsidy Fee Payment Amount | C | Max. 8 | No |

## Section E: SPR Data Definitions

The provider information fields in the Subsidized Provider Report (SPR) are described in this section. Each information field has its own definition, rules, and guidelines. All 28 fields above must be present in the record even when the information itself is optional. To include a field with no information, a tab will be used to create the field, and then tab again to leave and move into the next field.

**Validation Tip:** When data checking your document for validation that all fields are present, follow the below recommendations:

* Put the cursor before the first character of line one. Then, using the arrow key, arrow to the right to go through the document. After all characters in the field, there should be one arrow (tab) to the next field of information.
* Ensure there are no spaces before or after the information in the field.
* Blank fields will have one arrow into the field, then one arrow out of the field with no additional spaces.
* Blank fields should be reviewed to ensure they are optional. Required fields cannot be left blank.
* Some fields are marked as “Entry Optional” but are mandatory reporting fields. These fields should only be left blank if they are unknown by the contracting agency.

### Line Number

The line number information field indicates the row number for the file. This is a required piece of information and is included in the electronic file that is transferred to the CDMIS for the purpose of submitting the SPR. This number is used to differentiate between rows of data submitted in the SPR.

#### Rules and Guidelines

* Line Numbers cannot be repeated.
* This field must contain a number.

### Vendor Number

The Vendor Number information field indicates the agency submitting the SPR. This is a required piece of information and is included in the electronic file that is transferred to the CDMIS for the purpose of submitting the SPR. The Vendor Number is issued to the contractor by the CDE and/or CDSS.

#### Rules and Guidelines

* The vendor number is exactly four (4) or five (5) characters long.
* Do not include a hyphen, slash, or any extra characters in the Vendor Number.

### Report Year/Month

The Report Year/Month information field indicates the report period (report month and year) for which data is being submitted. This is the data reporting month and year code that must be transferred to the CDMIS for the purpose of submitting the SPR. The report year/month indicates the period during which a provider was paid for providing state-subsidized childcare services.

#### Rules and Guidelines

* The field must be exactly six (6) characters long.
* The required format is yyyymm where yyyy is the four-digit year and mm is the two-digit month.
* Example: July 2023 must be entered as “202307”.

### Combined Contract Code

The Combined Contract Code information field indicates the contract types from which a provider was paid. The Combined Contract Code is a ten-digit code where each place value is assigned a different contract type. Agencies should enter a “1” into the place value if a provider was paid from the corresponding contract. If the provider was not paid for the contract type assigned to the place value, agencies should enter a “0.” The Combined Contract Code information field takes the “1” or “0” in each place value and combines it into a single ten-digit code for the SPR.

The place values for the Combined Contract Code **must** be assigned in the following order: Bridge, CCTR, CMIG, CMAP, CSPP, CFCC, CAPP, C1AP, C2AP, C3AP.

#### Example 1: Provider Paid from Single Contract

The table below identifies each place value of the Combined Contract Code for a provider who provides services only in a CCTR contract. For Example, one, the agency would report a Combined Contract Code of “0100000000” (do not include the quotation marks).

##### Provider Contract Type Applicability for Single Contract Type

| BRIDGE | CCTR | CMIG | CMAP | CSPP | CFCC | CAPP | C1AP | C2AP | C3AP |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

\*A cell value of “1” indicates the contract type is applicable. A cell value of “0” indicates a contract type is not applicable.

#### Example 2: Provider Paid from Multiple Contracts

The table below identifies each place value of the Combined Contract Code for a provider who provides services under Bridge, C2AP and a C3AP contracts. For Example, two, the agency would report a Combined Contract Code of “1000000011” (do not include the quotation marks).

##### Provider Contract Type Applicability for Multiple Contract Types

| BRIDGE | CCTR | CMIG | CMAP | CSPP | CFCC | CAPP | C1AP | C2AP | C3AP |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 |

#### Rules and Guidelines

* The Combined Contract Code is exactly ten (10) digits long.
* Leading zeroes must be included.
* The only allowable numbers in this field are zero and one.

### Local Provider Identification Number

The Local Provider Identification Number field indicates the unique identification number or case number that an agency assigns to a provider. Agencies are encouraged to maintain Local Provider Identification Numbers that do not change between SPR report periods to help locate and distinguish between providers.

#### Rules and Guidelines

* Data entry within this field is optional.
  + Only leave this blank if a Local Provider Identification Number is not available. To leave blank, tab to the next field.
* The same Local Provider Identification Number cannot be used for more than one provider.
* The Local Provider Identification Number cannot contain a Social Security Number.
* The Local Provider Identification Number cannot contain the first and/or last name of the provider or the child served.
* The maximum length of the field is 15 characters.
* The only allowable characters in this field are the letters A – Z (upper and lower case are acceptable) and the numbers zero – nine.

### Provider Last Name

The Provider Last Name information field indicates the last name of the provider.

#### Rules and Guidelines

* Only the provider’s last name should be in this field. There are other fields for the first name and middle initial.
* Do not enter any business information in the name fields.
* The maximum length of this field is 50 characters.
* Only letters, hyphens, spaces, and apostrophes are allowed.

### Provider First Name

The Provider First Name information field indicates the first name of the provider.

#### Rules and Guidelines

* Only the provider’s first name should be in this field. There are other fields for the last name and middle initial.
* Do not enter any business information in the name fields.
* If two names are listed on the provider license, provide two separate records. Never put two people in one record.
* The maximum length of this field is 50 characters.
* Only letters, hyphens, spaces, and apostrophes are allowed.

### Provider Middle Initial

The Provider Middle Initial information field indicates the first letter of the middle name of the provider.

#### Rules and Guidelines

* Data entry is optional but recommended if available.
* The maximum length of this field is one (1) character.
* Do not enter a period after the middle initial.
* Only letters are allowed.

### Provider Home Address Line 1

The Provider Home Address Line one information field indicates the first line of the street address of the provider. The Provider Home Address Line one should indicate where the provider lives.

#### Rules and Guidelines

* The address must be a physical street address (i.e. 123 Main Street, 84113 North Green Avenue, etc.).
* Abbreviated street names are not allowed.
* Providers approved as participants in the Secretary of State’s address confidentiality program may provide a designated address in lieu of a home address.

### Provider Home Address Line 2

The Provider Home Address Line two information field indicates the second line of the street address of the provider. The Provider Home Address Line two should indicate where the provider lives.

#### Rules and Guidelines

* Data entry is optional but recommended if available.
* This field should contain unit numbers, apartment numbers, building names, or other related components of the address.
* Example: Suite 600, Unit 12.

### Provider Home City

The Provider Home City information field indicates the city associated with the Provider Home Address Line one.

#### Rules and Guidelines

* Abbreviations of city names are not allowed.
* The city must exist in the zip code provided.

### Provider Home Zip Code

The Provider Home Zip Code information field indicates the zip code associated with the Provider Home Address Line one.

#### Rules and Guidelines

* The zip code must contain nine (9) digits. The primary five-digit zip code and the four-digit extension.
* Enter numbers only. Hyphens and other special characters are not allowed.
* The provider zip code and provider FIPS code must be consistent.

### Provider Home FIPS Code

The Provider Home Federal Information Processing Standards (FIPS) Code information field indicates the code that identifies the state and county associated with the Provider Home Address Line one.

#### Rules and Guidelines

* The field must contain five (5) digits.
* Leading zeroes must be included.
* Provider FIPS Codes are only accepted for California (06001 through 06116), Oregon (41001 through 41071), Nevada (32001 through 32033 and 32510), and Arizona (04001 through 04027).
* The Provider FIPS Code consists of a two-digit state code (California is 06) **and** a three-digit county code. For agencies using the CDD-801A Input/Edit function to submit information, the dropdown list automatically displays the correct Provider FIPS Code for the county selected.
* The Provider FIPS Code must be consistent with the provider zip code. For example, the FIPS Code for Sacramento County should be entered only when the child's services are provided in Sacramento County.

### Provider Mailing Address Line 1

The Provider Mailing Address Line one information field indicates the first line of the mailing address of the provider. The Provider Mailing Address Line one should indicate where the provider receives mail.

#### Rules and Guidelines

* Data entry is optional for providers whose home address matches their mailing address.
* Post Office (P.O.) box information is allowed.

### Provider Mailing Address Line 2

The Provider Mailing Address Line two information field indicates the second line of the mailing address of the provider. The Provider Mailing Address Line two should indicate where the provider receives mail.

#### Rules and Guidelines

* Data entry is optional for providers whose home address matches their mailing address.
* This field should contain unit numbers, apartment numbers, building names, or other related components of the address.
* Example: Suite 600, Unit 12.

### Provider Mailing City

The Provider Mailing City information field indicates the city associated with the Provider Mailing Address Line one.

#### Rules and Guidelines

* Data entry is optional for providers whose home address matches their mailing address.
* Abbreviations of city names are not allowed.
* The city must exist in the zip code provided.

### Provider Mailing Zip Code

The Provider Mailing Zip Code information field indicates the zip code associated with the Provider Mailing Address Line one.

#### Rules and Guidelines

* Data entry is optional for providers whose home address matches their mailing address.
* The zip code must contain nine (9) digits. The primary five-digit zip code and the four-digit extension.
* Enter numbers only. Hyphens and other special characters are not allowed.
* The provider zip code and provider FIPS code must be consistent.

### Provider Mailing FIPS Code

The Provider Home Federal Information Processing Standards (FIPS) Code information field indicates the code that identifies the state and county associated with the Provider Mailing Address Line one.

#### Rules and Guidelines

* Data entry is optional for providers whose home address matches their mailing address.
* The field must contain five (5) digits.
* Leading zeroes must be included.
* Provider FIPS Codes are only accepted for California (06001 through 06116), Oregon (41001 through 41071), Nevada (32001 through 32033 and 32510), and Arizona (04001 through 04027).
* The Provider FIPS Code consists of a two-digit state code (California is 06) **and** a three-digit county code. For agencies using the CDD-801A Input/Edit function to submit information, the dropdown list automatically displays the correct Provider FIPS Code for the county selected.
* The Provider FIPS Code must be consistent with the provider zip code.

### Provider Work Phone Number

The Provider Work Phone Number information field indicates the phone number of the provider. The Provider Work Phone Number is associated with the providers’ business affairs and/or place of employment.

#### Rules and Guidelines

* Data entry for one of either the work phone number, cell phone number, or home phone number is required.
  + Only leave this blank if it is unknown to the contracting agency AND at least one other phone number is entered.
* The phone number must contain ten (10) numbers.
* The phone number cannot contain non-numeric characters.

### Provider Cell Phone Number

The Provider Cell Phone Number field indicates the mobile phone number of the provider.

#### Rules and Guidelines

* Data entry for one of either the work phone number, cell phone number, or home phone number is required.
  + Only leave this blank if it is unknown to the contracting agency AND at least one other phone number is entered.
* The phone number must contain ten (10) numbers.
* The phone number cannot contain non-numeric characters.

### Provider E-mail Address

The Provider E-mail Address information field indicates the e-mail address of the provider.

#### Rules and Guidelines

* Data entry within this field is optional.
  + Only leave this field blank if the email is unknown to the contracting agency.
* Example: sample-email@yahoo.com, JohnDoe@college.edu.

### Provider License Number

The Provider License Number information field indicates the license number of the provider. For license-exempt providers, this information field should be left blank.

#### Rules and Guidelines

* Data entry is not required for license-exempt providers.
  + Only leave this field blank if the provider is license exempt AND this is indicated with a “Y” in field 25, referring to “Is the provider license exempt.
* The Provider License Number must contain nine (9) digits.
* Leading zeroes must be included.
* Enter the license number as it appears on the license from the CDSS, Community Care Licensing.

### Subsidy Start Date

The Subsidy Start Date information field indicates the first day a provider was paid by the agency for providing state-subsidized childcare services.

#### Rules and Guidelines

* Enter the date (month, day, and year) the provider began being paid to provide state-subsidized childcare services.
* The Subsidy Start Date cannot be after the report period.
* Required format is mm/dd/yyyy (include the slashes).

### Subsidy End Date

The Subsidy End Date information field indicates the date the provider was last paid for providing subsidized care.

#### Rules and Guidelines

* This information field should be left blank for providers who have not ended subsidy care.
* Enter the date (month, day, and year) the provider ended subsidy care.
* The Subsidy End Date cannot be before the Subsidy Start Date.
* Required format is mm/dd/yyyy (include the slashes).

### Is License Exempt

The License Exempt information field indicates if the provider’s site is license exempt.

#### Rules and Guidelines

* The only allowable characters in this field are the letters “Y” and “N” (Field 25 is **not** case-sensitive).
* If “N” is inputted, provider’s license number must be identified within Field Number 22.
* If “Y” is inputted, Field Number 22 must be left blank.

### Provider Home Telephone Number

The Provider Home Telephone Number information field indicates the home telephone number of the provider.

#### Rules and Guidelines

* Data entry for one of either the work phone number, cell phone number, or home phone number is required.
  + Only leave this blank if it is unknown to the contracting agency AND at least one other phone number is entered.
* The phone number must contain ten (10) numbers.
* The phone number cannot contain non-numeric characters.

### Provider Home Language

The Provider Home Language information field indicates which language is the provider’s home language.

#### Rules and Guidelines

* Data entry within this field is optional.
  + This field should only be left blank if the home language is unknown to the contracting agency.
* The language code must contain two (2) numbers.
* Enter numbers only. Hyphens and other special characters are not allowed.
* The language codes identified in the SPR must align with the Language Code Table found below:

| **Language Code** | **Home Language of Provider** |
| --- | --- |
| 11 | Arabic |
| 12 | Armenian |
| 42 | Assyrian |
| 13 | Burmese |
| 03 | Cantonese |
| 36 | Cebuano (Visayan) |
| 54 | Chaldean |
| 20 | Chamorro (Guamanian) |
| 39 | Chaozhou (Chaochow) |
| 14 | Croatian |
| 15 | Dutch |
| 00 | English |
| 16 | Farsi (Persian) |
| 17 | French |
| 18 | German |
| 19 | Greek |
| 43 | Gujarati |
| 21 | Hebrew |
| 22 | Hindi |
| 23 | Hmong |
| 24 | Hungarian |
| 25 | Ilocano |
| 26 | Indonesian |
| 27 | Italian |
| 08 | Japanese |
| 09 | Khmer (Cambodian) |
| 50 | Khmu |
| 04 | Korean |
| 51 | Kurdish |
| 47 | Lahu |
| 10 | Lao |
| 07 | Mandarin (Putonghua) |
| 48 | Marshallese |
| 44 | Mien |
| 49 | Mixteco |
| 88 | Native American Languages |
| 40 | Pashto |
| 05 | Filipino (Tagalog) |
| 41 | Polish |
| 06 | Portuguese |
| 28 | Punjabi |
| 29 | Russian |
| 45 | Rumanian |
| 30 | Samoan |
| 31 | Serbian |
| 52 | Serbo-Croatian |
| 01 | Spanish |
| 46 | Taiwanese |
| 32 | Thai |
| 53 | Taishanese |
| 34 | Tongan |
| 33 | Turkish |
| 38 | Ukrainian |
| 35 | Urdu |
| 02 | Vietnamese |
| 55 | Other Languages of China |
| 66 | Other Languages of the Philippines |
| 99 | Other non-English |

### Subsidy Fee Payment Amount

The Subsidy Fee Payment Amount information field indicates the amounts of all subsidies paid to each provider in the report month.  Effective July 1, 2024, those counties and contractors that are readily able to provide amounts of all subsidies paid in the report month for each provider must include that data in the report. Counties and contractors that are unable to meet this timeframe shall submit an implementation plan to CCPU at info@childcareprovidersunited.org no later than July 1st, 2024.

#### Rules and Guidelines

* Data entry in this field is optional.
  + This field should only be left blank if the information is not readily available AND the agency has created an implementation plan with CCPU.
* This field may contain up to eight (8) characters. This includes up to five (5) digits for dollar amounts, a decimal, and two digits for cents amount.
* Enter decimal and numbers only. Hyphens and other special characters are not allowed.

Note: If there are two licensees associated with one subsidy payment, provide the amount on only one of the licensees’ row entries.

## Section F: Step-by-Step Reporting Instructions

Contractors must upload a tab-delimited text file to submit their monthly SPR. The electronic file must contain:

* State-subsidized individual childcare providers.
* For license-exempt individual providers and individuals operating family child care homes.
* For all contract types.
* For one agency.

Each SPR must be uploaded to the CDMIS Online Portal to fulfill the monthly SPR reporting requirement. Contractors can access the CDMIS at <https://www4.cde.ca.gov/cdmis/default.aspx>. A user account and password are required to log on to the system.

#### Transfer an Electronic File

After following File Format Specifications, agencies should follow the steps below to submit a SPR to the CDMIS.

1. Log on to the CDMIS Online Portal and navigate to the Main Menu.
2. Select the drop-down tab for “Subsidized Provider Report.” Select “Upload Subsidized Provider Report” from the drop-down options.
3. Select the file to upload. To locate the file on your computer, select the “Choose File” button.
4. The “Open File” dialog box is displayed. To locate the file on your computer, select the “Browse” button. Search your computer for your file. Highlight the file name. Select the “Open” button.
5. Select the “Upload File” button to process the file.
6. Depending on file size, this could take several minutes to complete. Do not submit again and do not leave the page while the upload is occurring.
7. The screen will inform you once the upload is complete and the “Last Report Month/Year Upload” date will be updated to the recent upload.

The CDMIS allows multiple electronic file transfers for the same report period. Every successful electronic file transfer updates existing provider information for the specified agency.

Once a file is submitted, the file transfer process begins. The CDMIS processes the data in the file to check for completeness and consistency. After processing, the file is either:

* **Accepted** – all of the information is copied into the CDMIS database.
* **Rejected** – none of the information is copied to the CDMIS database.

A file transfer status message is displayed on the screen. If there are no file format or data quality errors, agencies will see the message “File successfully transferred.” If there are file format and/or data quality errors, the CDMIS will display a list of the error messages and their respective line numbers, exportable as an electronic spreadsheet.

Agencies should resolve the errors indicated and follow steps one through five above to re-submit the SPR. Once a report passes the file format and data quality checks it is counted as a successful SPR submission. Only files that are uploaded and have successfully passed on the CDMIS meet the SPR reporting requirement.

## Section G: SPR Resources, Links & FAQs

Subsidized Provider Report Web Page for Guidance and technical assistance:

[https://www.cde.ca.gov/sp/cd/ci/spreport.asp](https://www.cde.ca.gov/sp/cd/ci/spreport.asp" \o "SPR Report)

CDMIS Online Portal:

[https://www4.cde.ca.gov/cdmis/default.aspx](https://www4.cde.ca.gov/cdmis/default.aspx" \o "CDMIS Online Portal )

CDMIS Support Web Page:

[https://www.cde.ca.gov/sp/cd/ci/main.asp](https://www.cde.ca.gov/sp/cd/ci/main.asp" \o "CDMIS Support Web Page)

Contractor Information Web Page

[https://www.cde.ca.gov/sp/cd/ci/#spreport](https://www.cde.ca.gov/sp/cd/ci/" \l "spreport" \o "Contractor Web Page)

CDSS Child Care Transition Web Page:

[https://www.cdss.ca.gov/inforesources/child-care-and-development/child-care-and-development-transition](https://www.cdss.ca.gov/inforesources/child-care-and-development/child-care-and-development-transition" \o "CDSS Child Care Transition Web Page)

**Q: Who can I contact if I need help with SPR reporting?**

A: Contact CDMIS Support at [CDMIS@cde.ca.gov](mailto:CDMIS@cde.ca.gov) or [CDMIS@dss.ca.gov](mailto:CDMIS@dss.ca.gov)

**Q: Who should I contact if I am no longer contracted for family child care homes?**

A: Contractors and Consultants should work together to update contracts. If the consultant has approved or removed family child care homes, the contractor and consultant should update DRPO by emailing [CDMIS@dss.ca.gov](mailto:CDMIS@dss.ca.gov). This will update the SPR reporting requirement for your agencies.