



Minnesota Department of Human Services
Office of Inspector General
Program Integrity Oversight Division
Child Care Audits and Investigations
PO Box 64982
Saint Paul, MN 55164 – 0982

July 26, 2024

ABC Learning Center Inc.
2533 24th Ave S
Minneapolis, MN 55406

License Number: 1095850

Notice of Overpayment

The Minnesota Department of Human Services (DHS), Office of the Inspector General (OIG), Program Integrity Oversight Division (PIO) recently reviewed information related to 4 Financial Hardship Grants issued to you in March, June, September and December 2022. DHS/OIG/PIO is authorized by law to ensure grant funds are used pursuant to their authorizing laws and in accordance with the terms of the grant attestations you signed on 3/28/22, 6/27/22, 9/23/22, and 1/6/23.

The documents that you provided during the grant audit showed that you failed to meet the requirements on all 4 of the grants you received. Our findings showed:

March 2022 FHG Application

Criteria 1: Monthly gross income or operating funds is insufficient to cover 4 weeks of personnel expenses..

Application Gross Income: [REDACTED]

Personnel Expenses: [REDACTED]

Audited Gross Income: [REDACTED]

Personnel Expenses: \$ [REDACTED]

Provider did not qualify because it had enough income to cover 4 weeks of personnel expenses.

June 2022 FHG Application

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Criteria 1: Monthly gross income or operating funds is insufficient to cover 4 weeks of personnel expenses..

Application Gross Income: \$ [REDACTED]
Personnel Expenses: \$ [REDACTED]

Audited Gross Income: \$ [REDACTED]
Personnel Expenses: \$ [REDACTED]

Provider did not qualify because it had enough income to cover 4 weeks of personnel expenses.

September 2022 FHG Application

Criteria 1: Monthly gross income or operating funds is insufficient to cover 4 weeks of personnel expenses.

Application Gross Income: \$ [REDACTED]
Personnel Expenses: \$ [REDACTED]

Audited Gross Income: \$ [REDACTED]
Personnel Expenses: \$ [REDACTED]

Provider did not qualify because it had enough income to cover 4 weeks of personnel expenses.

December 2022 FHG Application

Criteria 1: Monthly gross income or operating funds is insufficient to cover 4 weeks of personnel expenses..

Application Gross Income: \$ [REDACTED]
Personnel Expenses: \$ [REDACTED]

Audited Gross Income: \$ [REDACTED]
Personnel Expenses: \$ [REDACTED]

Provider did not qualify because it had enough income to cover 4 weeks of personnel expenses.

You did not meet the requirements of the Financial Hardship Grants for the March, June, September and December 2022 grant periods, as the financial records did not reflect your claims on the Financial Hardship Grant applications. **You will need to reimburse DHS for the recovery of the awarded grant money, totaling \$76,000.00, for these grant periods.**

Here are your options for repayment:

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If you agree that you did not qualify for 4 Financial Hardship Grants as mentioned above, you must return the payment of \$76,000.00 within 15 calendar days of receiving this letter. Follow this process to return the funds:

- a. Write a letter that includes provider information and identify the funds that are being returned (template below)
- b. Enclose a check payable to the State of Minnesota Department of Human Services. In the check memo, write "Financial Hardship Grants"
- c. Send to:

Minnesota Department of Human Services
Attn: Receipts Center MAXIS 211
PO Box 64835
St Paul, MN 55164-0835

Appeal Rights:

If you choose not to repay the requested amount, you can appeal this action by sending a written request.

The written request must:

- Be received by the Minnesota Department of Human Services, Appeals Division within 30 days of the date this notice was mailed;
- List each item in this notice you disagree with, the reason(s) you disagree, and if applicable, the dollar value of each item you disagree with;
- State the dollar amount you believe is correct, if applicable;
- State the statute and/or rule references you believe support your position; and
- Provide a name, address, and telephone number of a person at your business that can be contacted about your appeal.

Submit your appeal to:

Minnesota Department of Human Services

Appeals Division

P.O. Box 64941

St. Paul, MN 55164-0941

Fax: 651-431-7523

Online: <http://edocs.dhs.state.mn.us/lfserver/Public/DHS-8075-ENG>

If you have questions for the DHS Appeals Division, call:

- Metro: 651-431-3600

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- Greater Minnesota: 800-657-3510
- TTY: 800-627-3529 or your preferred relay service

If you have questions related to this Notice, please contact Beth Richtsmeier by phone at (651) - 431-5770, or by email at beth.richtsmeier@state.mn.us.

This information is available in other forms to people with disabilities by calling your county worker. For TTY/TDD users, contact your county worker through the Minnesota Relay at 711 or (800) 627-3529. For the Speech-to-Speech Relay, call (877) 627-3848.

Legal Authority:

Laws of Minnesota 2021, First Special Session, Chapter 7, Article 14, Section 21.

Minnesota Statutes, sections 245E.01, 245E.02, 245E.04, 245E.06 and 245E.07.

Minnesota Statutes, sections 119B.16 and 119B.21

Minnesota Statutes, section 256.045.