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MFN eNews: Updates on early childhood programs, research, & policy

November 2011



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Losing Ground: Low-Income Families & Child Care Subsidy



"Without the child care subsidy, I couldn't work. I wouldn't be able to pay for child care," says Nadine Scayles of Baltimore, shown here with daughter Gabrielle, age 3.

Low-income parents in Maryland get less help paying for child care than they did a decade ago or even a year ago, according to [a new study](#) of state Child Care Subsidy programs.

Dr. Nancy Grasmick Joins Maryland Family Network's Board of Directors



“Maryland has slipped back significantly over the past decade in making child care assistance available to struggling, low-income families,” says Helen Blank of the National Women’s Law Center and co-author of the study.

“Child care assistance is critical because it allows parents to get and hold jobs – and it provides access the high-quality child care programs that help prepare children to succeed in school.”

[Read more >>](#)

The Race Is On!



Maryland has submitted its application for Race to the Top – Early Learning Challenge, the federal grant program that will distribute

\$500 million over four years to a handful of winning states. If its proposal is accepted, Maryland is eligible for \$50 million over four years.

RTT-ELC is focused on overcoming school-readiness gaps and engaging parents in their children’s education. Maryland’s application includes ten projects designed to build and support the early childhood infrastructure.

MFN provides platform for [Dr. Grasmick's belief in the importance of the early years](#)

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Help select Maryland's next State School Superintendent.

[The state school board is holding a series of open forums >>](#)

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Read Maryland State Department of Education's [summary of the projects included in the state's application](#) >>

See Assistant State School Superintendent [Rolf Grafwallner discuss RTT-ELC](#) >>

Grandparents: A Safety Net for Maryland's Children



More than ever, young parents rely on the financial support that grandparents can provide.

More than ever before, grandparents in Maryland are stepping in to help raise grandchildren while young parents struggle in the poor economy.

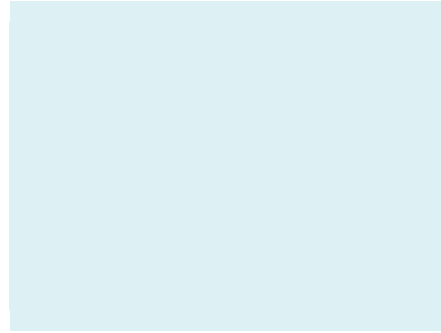
Running errands and providing child care are

among the important ways grandparents are assisting their grandchildren. Many are also playing a larger financial role by helping with health care payments, educational needs, and saving for their grandchildren's future.

"It's the big picture as to how these young kids will grow up and pay for a college education and buy a house," said grandparent Doug Flockhart, in the original story from the Associated Press. "The

middle class is so much less well-off than it used to be.”

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MARYLAND FAMILY NETWORK

Maryland Family Network Invites You to a Gubernatorial Candidate Forum on Child Care, Early Education, and Family Support with Lt. Gov. Anthony Brown and Mr. Larry Hogan



12:30 p.m.
Friday, October 3rd

Towson University
West Village Commons
Ballroom C, 4th Floor
424 Emerson Drive
Towson, MD 21204



This event is free, but seating is limited.
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As heard on WYPR

Anxiety in children—detecting early signs.

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JOB OPENINGS



Maryland Family Network is recruiting for positions in Early Head Start.

REQUEST FOR PROPOSALS



Maryland Family Network has issued a Request for Proposals to operate two new Family Support Centers. Interested parties may download the RFP and required forms here.

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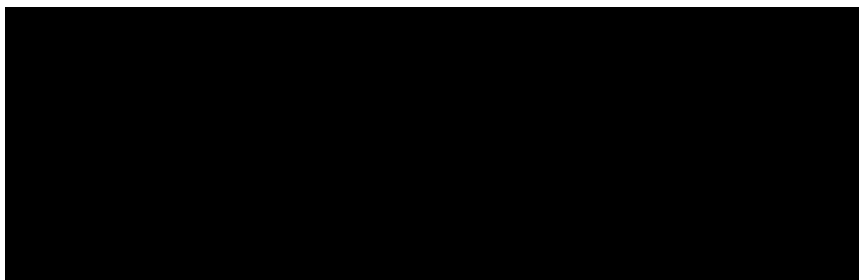


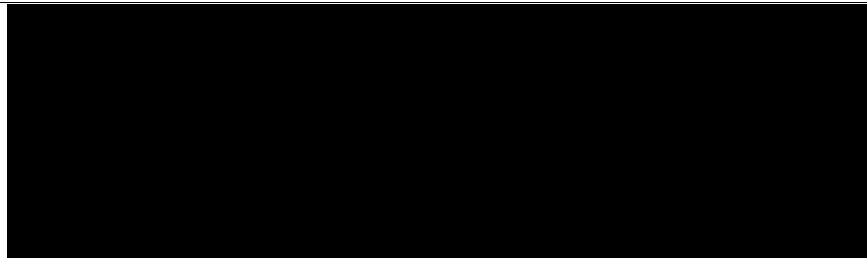
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The mission of MARYLAND FAMILY NETWORK is to ensure that young children and their families have the resources to learn and succeed.

OUR PROGRAMS:

LOCATE: Child Care helps parents find quality child care that meets their family's needs.

Family Support Centers help parents become economically self-sufficient and raise healthy, successful children.

Training and e-learning services help early childhood professionals improve their skills and their programs.

Technical Assistance helps programs, communities and individuals develop or expand high quality programs for children.

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STATE CHILD CARE ASSISTANCE POLICIES 2011: REDUCED SUPPORT FOR FAMILIES IN CHALLENGING TIMES

by

*Karen Schulman, Senior Policy Analyst
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Child care helps children, families, and communities prosper. It gives children the opportunity to learn and develop skills they need to succeed in school and in life.¹ It gives parents the support and peace of mind they need to be productive at work. And, by strengthening the current and future workforce, it helps our nation stay competitive. Yet many families, especially in today's economy, have great difficulty paying for child care. The average fee for full-time care ranges from \$3,600 to \$18,200 annually, depending on where the family lives, the type of care, and the age of the child.² Child care assistance can help families with the high cost of care, particularly low-income families³ who are struggling to meet their basic expenses and stay employed in a challenging time.

Despite the importance of child care assistance, families in thirty-seven states were worse off in February 2011 than in February 2010 under one or more of the child care assistance policies covered in this report and families in only eleven states were better off under one or more of these policies.⁴ The policies covered are critical ones—income eligibility limits to qualify for child care assistance, waiting lists for child care assistance, copayments required of parents receiving child care assistance, reimbursement rates for child care providers serving families receiving child care assistance, and eligibility for child care assistance for parents searching for a job.

The trend in state child care assistance policies between February 2010 and February 2011 contrasts with that between February 2009 and February 2010. Families in fifteen states were worse off in 2010 than they were in 2009 under one or more of the policies covered in this report and families in thirty-four states were better off under one or more policies.⁵ Families made progress under these child care assistance policies between February 2009 and February 2010, despite strains on state budgets, in large part due to \$2 billion in additional funding for the Child Care and Development Block Grant (CCDBG) for FY 2009 and FY 2010 provided by the American Recovery and Reinvestment Act (ARRA).⁶ The negative trends since February 2010 are likely due in part to the exhaustion of these funds—states had to obligate all of the funds by September 2010,⁷ and although they had until September 2011 to expend those funds, they had spent 84 percent of the funds as of the end of 2010.⁸ In addition, as of February 2011, states were still uncertain about the FY 2011 CCDBG funding level because the FY 2011 appropriations bill had not yet passed; when it finally passed in April 2011, it provided an amount for CCDBG that replaced only a small portion of the expiring ARRA funds.

In addition, families were worse off in 2011 than they were in 2001 in more states than they were better off under each of the four policies for which there are comparison data for 2001.⁹



Changes between February 2010 and February 2011 and between 2001 and February 2011 are described in more detail below, but to summarize:

- ◆ Four states lowered their income eligibility limits as a dollar amount between 2010 and 2011. Only one state increased its income limits sufficiently to surpass inflation as measured against the change in the federal poverty level.¹⁰ The remaining states increased their income limits enough to adjust for the updated federal poverty level or state median income (seven states) or kept their income limits the same as a dollar amount (thirty-nine states). In twenty-one states, the income limits in 2011 were lower as a percentage of the federal poverty level than in 2001.¹¹
- ◆ The number of states with waiting lists for child care assistance in 2011—twenty-two—was higher than the number of states with waiting lists in 2010, when nineteen states had waiting lists, or in 2001, when twenty-one states had waiting lists. Among the sixteen states that had waiting lists in both years and for which comparable data were available, the number of children on the waiting list increased in twelve states and decreased in four between 2010 and 2011. Among the eleven states that had waiting lists in both years and for which there were comparable data, the number of children on the waiting list increased in eight states and decreased in three between 2001 and 2011.
- ◆ In nearly one-quarter to over two-fifths of the states, depending on income, families paid a higher percentage of their income in copayments in 2011 than in 2010, and in most of the remaining states, families paid the same percentage of their income in copayments in 2011 as in 2010. In approximately two-fifths to three-fifths of the states, families paid a higher percentage of their income in 2011 than in 2001. In addition, in over one-third to over half of the states, a family was required to pay more in copayments than the nationwide average amount that families who pay for child care spend on child care.
- ◆ Only three states had reimbursement rates at the federally recommended level for providers who serve families receiving child care assistance in 2011, half the number of states—six—in 2010, and significantly lower than the number of states—twenty-two—in 2001. Approximately three-fifths of the states had higher reimbursement rates for higher-quality providers in 2011, but in approximately four-fifths of these states, even the higher rates were below the federally recommended level.
- ◆ Forty-six states allowed families receiving child care assistance to continue receiving it while a parent searched for a job in 2011, which was slightly lower than the number of states—forty-seven—in 2010. Seventeen states allowed families not receiving child care assistance to qualify for assistance while a parent searched for a job in 2011, which was also slightly lower than the number of states—twenty—in 2010.¹²

LOOKING AHEAD: DEVELOPMENTS SINCE FEBRUARY 2011

Although this report primarily focuses on changes between February 2010 and February 2011, states reported on some changes they made or expected to make after February 2011. While a few states reported modest improvements in one or more of the policies covered in this report, fifteen states reported cutbacks in these policies that had been or would be made after February 2011 as they continue to deal with budget shortfalls¹³ and a challenging economic environment. In some cases, states specifically attributed the cutbacks to the expiration of their ARRA funds.

- ◆ Five states reduced or planned to reduce their income eligibility limits for child care assistance after February 2011.
 - California reduced its income limit from 75 percent of the 2007 state median income (\$45,228 a year for a family of three) to 70 percent of the 2007 state median income (\$42,216 a year for a family of three), as of July 2011.
 - Illinois reduced its income limit from 200 percent of the 2010 federal poverty level (\$36,624 a year for a family of three) to 185 percent of the 2010 federal poverty level (\$33,876 a year for a family of three), as of April 2011.¹⁴
 - Louisiana reduced its income limit from 75 percent of the 2009 state median income (\$37,896 a year for a family of three) to 65 percent of the 2011 state median income (\$35,868 a year for a family of three), as of June 2011.
 - Ohio reduced its income limit from 150 percent of the 2010 federal poverty level (\$27,468 a year for a family of three) to 125 percent of the 2011 federal poverty level (\$23,172 a year for a family of three), as of July 2011.
 - South Dakota reduced its income limit from 200 percent of the 2011 federal poverty level (\$37,068 a year for a family of three) to 175 percent of the 2011 federal poverty level (\$32,428 a year for a family of three), as of July 2011.¹⁵
- ◆ Four states—Colorado, Florida, Maryland, and North Carolina—had or expected to have increases in their waiting lists for child care assistance and one state—New Hampshire—expected to start a waiting list after February 2011. In addition, one state—South Carolina—reported it may stop serving new applicants for assistance within the next year.
- ◆ Two states increased or planned to increase their copayments after February 2011.
 - Illinois increased its copayments as of April 2011. For example, the monthly copayment for a family of three with an income of \$27,795 (150 percent of the 2011 federal poverty level) increased from \$85 to \$147, and the monthly copayment for a family of three with an income of \$18,530 (100 percent of the 2011 federal poverty level) increased from \$34 to \$59.¹⁶
 - Utah, which had lowered its copayments by 20 percent using ARRA funds, planned to revert to its previous copayment levels as of October 2011.
- ◆ Five states reduced some or all of their reimbursement rates after February 2011. In all of these states, rates were below the federally recommended level before the reductions.
 - Minnesota and Ohio reduced reimbursement rates across the board for all child care providers.
 - California reduced reimbursement rates for license-exempt child care providers, but not licensed child care providers.
 - Some Colorado counties—which determine their own reimbursement rates—reduced rates.
 - Maine reduced the amount of the differential between the higher rates paid to higher-quality providers and the base rate. Only the highest rate will continue to exceed the federally recommended level.
- ◆ Three states that had used ARRA funds to expand the length of time parents could receive child care assistance to search for a job or to allow parents to qualify for child care assistance while searching for a job reverted or will revert to their previous time limits after February 2011 due to the expiration of ARRA funds.

- Colorado reduced the maximum time parents could receive child care assistance to search for a job from 180 days to 30 days, as of July 2011.
- Illinois planned to reduce the maximum time parents can continue to receive child care assistance to search for a job from 90 days to 30 days, as of October 2011.
- Missouri planned to stop allowing parents (other than those receiving Temporary Assistance for Needy Families) to qualify for child care assistance while searching for a job once ARRA funding was no longer available or as of September 30, 2011, whichever occurred first.

METHODOLOGY

The data in this report were collected by the National Women's Law Center from state child care administrators in the fifty states and the District of Columbia (counted as a state in this report). The state child care administrators were sent a survey in the spring of 2011 requesting data on policies as of February 2011 in five key areas—income eligibility limits, waiting lists, parent copayments, reimbursement rates, and eligibility for child care assistance for parents searching for a job. States were also asked to report any policy changes in each of the five areas, as well as any other major policy changes, they anticipated within the coming year. In addition to these questions, which were largely the same as in the previous year's survey, states were asked to report any changes in policies resulting from the expiration of ARRA funds. The state administrators were contacted by Center staff for follow-up information as necessary. Additional information about states' policies was obtained from documents available on state agencies' websites.

The 2010 data used in this report for comparison purposes were collected by the Center through a similar process and published in the Center's September 2010 report, *State Child Care Assistance Policies 2010: New Federal Funds Help States Weather the Storm*. The 2001 data used in this report were collected by the Children's Defense Fund (CDF) and published in CDF's report, *State Developments in Child Care, Early Education and School-Age Care 2001*. CDF staff collected the data through surveys and interviews with state child care advocates and verified the data with state child care administrators. The CDF data reflect policies in effect as of June 1, 2001, unless otherwise indicated. The Center uses 2001 as a basis for comparison because it was the year between the peak year for TANF funding for child care, FY 2000, and what was the peak year for CCDBG funding, FY 2002, until FY 2010, when ARRA provided a temporary boost in child care funding (see the section below on funding for child care assistance).

The Center chose to examine the policy areas covered in this report because they are critical in determining whether low-income families can receive child care assistance and the extent of assistance they can receive. Income eligibility limits reveal how generous a state is in determining families who qualify for child care assistance,¹⁷ and waiting lists help reveal whether families who qualify for assistance actually receive it. Parent copayment levels reveal whether low-income parents receiving child care assistance are left with significant out-of-pocket costs for care. Reimbursement rates reveal the extent to which families receiving assistance may be limited in both their choice of child care providers and the quality of care those providers offer. Eligibility policies for parents searching for work reveal whether parents can receive child care assistance while seeking employment without disrupting their child's child care arrangement.

FUNDING FOR CHILD CARE ASSISTANCE FOR LOW-INCOME FAMILIES

The primary source of funding for child care assistance is the federal Child Care and Development Block Grant (CCDBG) program. CCDBG funding was \$5.140 billion in FY 2011.¹⁸ This was a decrease from CCDBG funding for FY 2010 even before adjusting for inflation—\$6.044 billion, including the additional \$2 billion in CCDBG funding for states to obligate in FY 2009 and FY 2010 provided through the American Recovery and Reinvestment Act (assuming \$1 billion of ARRA funds each year for FY 2009 and FY 2010).¹⁹ The FY 2010 level represented a peak for CCDBG, in real terms, exceeding the previous peak for CCDBG funding (\$4.817 billion²⁰ before adjusting for inflation, or \$5.899 billion in FY 2010 dollars²¹), which occurred in FY 2002. However, the ARRA funding that contributed to the FY 2010 peak funding level was temporary.

Another important source of child care funding is the Temporary Assistance for Needy Families (TANF) block grant. States may transfer up to 30 percent of their TANF block grant funds to CCDBG, or use TANF funds directly for child care without first transferring the money. States' use of TANF dollars for child care (including both transfers and direct funding) was \$3.514 billion in FY 2009 (the most recent year for which data are available).²² Even without adjusting for inflation, the amount of TANF funds used for child care in FY 2009 was below its high of \$3.966 billion in FY 2000²³ (\$5.150 billion in FY 2010 dollars²⁴).

As a result, while CCDBG funding (including ARRA funding) peaked in FY 2010, total federal funding from CCDBG, ARRA, and TANF in FY 2010—\$9.558 billion (assuming TANF funding for child care in FY 2010, a figure not yet available, was the same as in FY 2009)—remained below total federal child care funding in FY 2001 (just after the peak in TANF funding and just before the last peak in CCDBG funding) after adjusting for inflation—\$10.178 billion in FY 2010 dollars.²⁵

INCOME ELIGIBILITY LIMITS

A family's ability to obtain child care assistance depends on a state's income eligibility limit. Analyzing this policy area involves consideration of not only a state's limit in a given year, but also whether the state adjusts the limit for inflation each year so that a family does not become ineligible for assistance because its income simply keeps pace with inflation.

Between 2010 and 2011, less than one-fifth of the states increased their income eligibility limits as a dollar amount, and four states decreased their income limits as a dollar amount.²⁶ Between 2010 and 2011, only one state increased its income limit sufficiently to surpass inflation, as measured against the change in the federal poverty level or state median income, depending on which benchmark each state used. Between 2001 and 2011, over four-fifths of the states increased their income limits as a dollar amount. However, between 2001 and 2011, only about one-quarter of the states increased their income limits sufficiently to surpass inflation, as measured against the change in the federal poverty level.²⁷ Moreover, over two-thirds of the states had income limits at or below 200 percent of poverty in 2011.

- ◆ Eight states increased their income eligibility limits as a dollar amount between 2010 and 2011 (see *Table 1a*). One of these states increased its income limit beyond the amount needed to adjust for inflation and seven of these states increased their income limits sufficiently to keep pace with inflation.²⁸

- ◆ Thirty-nine states left their income eligibility limits at the same level as a dollar amount between 2010 and 2011.²⁹
- ◆ Four states decreased their income eligibility limits as a dollar amount between 2010 and 2011.
- ◆ Forty-four states increased their income eligibility limits as a dollar amount between 2001 and 2011 (*see Table 1b*). In fourteen of these states, the increase was great enough that the income limit was higher as a percentage of the federal poverty level in 2011 than in 2001. In sixteen of these states, the increase was great enough that the income limit stayed the same, or nearly the same, as a percentage of the federal poverty level.³⁰ However, in fourteen of these states, the increase was not sufficient to keep pace with the federal poverty level, so the income limit was lower as a percentage of the federal poverty level in 2011 than in 2001.
- ◆ In six states, the income eligibility limit was lower as a dollar amount in 2011 than in 2001. In one state, the income limit stayed the same as a dollar amount. In all of these states, the income limit decreased as a percentage of the federal poverty level, bringing to twenty-one the total number of states in which the income limit failed to keep pace with the increase in the federal poverty level between 2001 and 2011.
- ◆ The income eligibility limit was above 100 percent of the federal poverty level (\$18,530 a year for a family of three in 2011) in all states in 2011. However, a family with an income above 150 percent of poverty (\$27,795 a year for a family of three in 2011) could not qualify for child care assistance in thirteen states. A family with an income above 200 percent of poverty (\$37,060 a year for a family of three in 2011) could not qualify for assistance in thirty-five states. Yet, in the majority of communities across the country, a family needs an income equal to at least 200 percent of poverty to meet its basic needs, including housing, food, child care, transportation, health care, and other necessities, based on a study by the Economic Policy Institute.³¹

WAITING LISTS

Even families who are eligible for child care assistance may not necessarily receive it. Instead, a state may place eligible families on a waiting list or may freeze intake (turn away families without adding their names to a waiting list). Families on the waiting list may not receive child care assistance for months, or may not receive it at all. Families on the waiting list are left with difficult choices, as demonstrated by several studies.³² Many of these families struggle to pay for stable, good-quality child care on their own along with other basic expenses, or use low-cost—and frequently low-quality—care because they cannot afford better-quality care. Some families may not be able to pay for child care at all, making it difficult or impossible for them to hold onto employment.

In 2011, nearly three-fifths of the states were able to serve eligible families who applied for child care assistance without placing any on waiting lists or freezing intake. Yet over two-fifths of the states had waiting lists or frozen intake for at least some families applying for assistance. The number of states with waiting lists or frozen intake in 2011 was greater than in 2010, and more states' waiting lists increased than decreased between 2010 and 2011. Similarly, the number of states with waiting lists in 2011 was greater than the number of states with waiting lists in 2001, and more states' waiting lists increased than decreased between 2001 and 2011.³³

- ◆ Twenty-two states had waiting lists or frozen intake in 2011, compared to nineteen states with waiting lists or frozen intake in 2010, and twenty-one states with waiting lists or frozen intake in 2001 (*see Table 2*).
- ◆ Twelve states had longer waiting lists in 2011 than in 2010, and four states had shorter waiting lists. In the remaining two states with waiting lists or frozen intake in both 2010 and 2011, it was not possible to compare the length of waiting lists based on the available data.
- ◆ Eight states had longer waiting lists in 2011 than in 2001, and three states had shorter waiting lists. In the remaining six states with waiting lists or frozen intake in both 2001 and 2011, it was not possible to compare the length of waiting lists based on the available data.

COPAYMENTS

Most states require families receiving child care assistance to contribute toward their child care costs based on a sliding fee scale that is designed to charge progressively higher copayments to families at progressively higher income levels. Some states also take into account the cost of care used by a family in determining the amount of the family's copayment. If states set copayments at levels that are so high they strain the budgets of low-income families receiving child care assistance, families may be unable to cover their copayments, forcing their child care providers to absorb the lost income, or may be discouraged from participating in the child care assistance program altogether.

This study examines state copayment policies by considering two hypothetical families: a family of three with an income at 100 percent of the federal poverty level and a family of three with an income at 150 percent of the federal poverty level.³⁴ In nearly one-quarter to over two-fifths of the states, depending on income, families paid a higher percentage of their income in copayments in 2011 than in 2010, and in most of the remaining states, copayments remained the same in 2011 as in 2010. In over two-fifths to approximately three-fifths of the states, depending on income, families also paid a higher percentage of their income in copayments in 2011 than in 2001.

Many states had relatively high copayments in 2011. In over one-third to over half of the states, depending on income, a family was required to pay more in copayments than the nationwide average amount that families who pay for child care (including those who receive child care assistance and those who do not) spent on child care—7.0 percent of income.³⁵

- ◆ In twelve states, copayments for a family of three at 150 percent of poverty³⁶ increased as a percentage of income between 2010 and 2011 (*see Table 3a*). In thirty states, copayments remained the same as a percentage of income. In two states, copayments decreased as a percentage of income. In two states, a family at 150 percent of poverty was eligible for child care assistance in 2010 but not 2011, and in five states, a family at 150 percent of poverty was not eligible in either 2010 or 2011.³⁷
- ◆ In twenty-two states, copayments for a family of three at 150 percent of poverty³⁸ increased as a percentage of income between 2001 and 2011. In nine states, copayments remained the same as a percentage of income. In thirteen states, copayments decreased as a percentage of income. In four states, a family at 150 percent of poverty was eligible for child care assistance in 2001 but not 2011, and in three states, a family at 150 percent of poverty was not eligible in either 2001 or 2011.

- ◆ In twenty-one states, copayments for a family of three at 100 percent of poverty increased as a percentage of income between 2010 and 2011 (*see Table 3b*). In twenty-seven states, copayments remained the same as a percentage of income. In three states, copayments decreased as a percentage of income.
- ◆ In twenty-nine states, copayments for a family of three at 100 percent of poverty increased as a percentage of income between 2001 and 2011. In fifteen states, copayments remained the same as a percentage of income. In seven states, copayments decreased as a percentage of income.
- ◆ In twenty-eight states, the copayment for a family of three at 150 percent of poverty was above \$162 per month (7.0 percent of income) in 2011. In an additional seven states, a family at this income level was not eligible for child care assistance.
- ◆ In eighteen states, the copayment for a family of three at 100 percent of poverty was above \$108 per month (7.0 percent of income) in 2011.

REIMBURSEMENT RATES

States determine reimbursement rates for child care providers who care for children receiving child care assistance. States set a maximum level up to which they will reimburse providers, and a provider must charge private-paying parents a fee that is equal to or greater than this level to receive the maximum rate. Reimbursement rates may vary by geographic region, age of the child, type of care, and other factors. Reimbursement rates affect the resources child care providers have to sustain their businesses, offer sufficient salaries to attract and retain qualified staff, maintain low child-staff ratios, afford facilities, and purchase materials and supplies for activities that promote children's learning. Low reimbursement rates deprive child care providers of the resources needed to offer high-quality care and may discourage high-quality providers from serving families who receive child care assistance.

States are required to conduct surveys of child care providers' market rates every two years, but are not required to set their rates at any particular level or update their rates regularly. Federal regulations recommend, but do not mandate, that rates be set at the 75th percentile of current market rates,³⁹ a rate that is designed to allow families access to 75 percent of the providers in their communities. In 2011, just three states set their reimbursement rates at the 75th percentile of current market rates, lower than in 2010, and far lower than in 2001, when over two-fifths of the states set their reimbursement rates at this recommended level.⁴⁰ In 2011, many states' reimbursement rates were significantly below the 75th percentile of current market rates. In addition, less than half of the states had updated their reimbursement rates in the previous two years. When reimbursement rates are not regularly updated, they increasingly lag behind the 75th percentile of market rates.

When the state reimbursement rate falls short of the fee a child care provider charges private-paying parents, over three-quarters of the states allow child care providers to ask parents receiving child care assistance to cover the difference (beyond any required copayment). This approach may be intended to help child care providers avoid lost income, but it places a financial burden on low-income families whose very eligibility for child care assistance demonstrates that they cannot afford this additional charge.

- ◆ Only three states set their reimbursement rates at the 75th percentile of current market rates (rates from 2009 or 2010) in 2011 (*see Table 4a*). This was half the number of states—six—that set their

reimbursement rates at this level in 2010 (*see Table 4b*). It was also significantly lower than the number of states—twenty-two—that set their reimbursement rates at this level in 2001.

- ◆ One state reduced its reimbursement rates between 2010 and 2011. Only three states increased their reimbursement rates between 2010 and 2011,⁴¹ and only twenty-one states increased at least some of their reimbursement rates between 2009 and 2011.⁴² The remaining twenty-nine states did not update their reimbursement rates between 2009 and 2011. All states except one updated their reimbursement rates between 2001 and 2011.
- ◆ In twenty-five states, reimbursement rates for center-based care for a four-year-old in 2011 were at least 20 percent below the 75th percentile of market rates (based on the state's most recent market survey) for this type of care (*see Table 4c*).⁴³
- ◆ In twenty-four states, reimbursement rates for center-based care for a one-year-old in 2011 were at least 20 percent below the 75th percentile of market rates (based on the state's most recent market survey) for this type of care.⁴⁴
- ◆ Thirty-nine states allowed child care providers to charge parents receiving child care assistance the difference between the state reimbursement rate and the fee that the provider charged private-paying parents if the state reimbursement rate was lower in 2011—the same number of states as in 2010.⁴⁵

Approximately three-fifths of the states reimbursed child care providers that met higher-quality standards at higher reimbursement rates (tiered rates) in 2011.⁴⁶ Some states had a single higher reimbursement rate; other states had progressively higher reimbursement rates for progressively higher levels of quality. Tiered reimbursement rates can offer child care providers encouragement and resources to improve the quality of their care. However, a minimal rate differential may not be sufficient to cover the additional costs entailed in meeting the criteria required to qualify for a higher rate, such as costs for additional staff in order to reduce child-staff ratios, recruiting and retaining staff with advanced education in early childhood development, training staff, upgrading facilities, and/or purchasing new equipment and materials. Yet, in about four-fifths of states with tiered rates, the highest rate fell below the 75th percentile of current market rates. In slightly over half of the states with tiered rates, the highest reimbursement rate was also less than 20 percent above the basic rate.

- ◆ Thirty-one states paid higher reimbursement rates for higher-quality care in 2011, the same number as in 2010 (*see Table 4d*).⁴⁷
- ◆ Fourteen of the thirty-one states with tiered rates in 2011 had two rate levels (including the base level),⁴⁸ two states had three levels, seven states had four levels, six states had five levels, and two states had six levels.
- ◆ In approximately four-fifths of the thirty-one states with tiered rates in 2011, the reimbursement rate for center-based care for a four-year-old at the highest quality level was still below the 75th percentile of current market rates (which includes providers at all levels of quality).
 - In twenty-five of the thirty-one states, the reimbursement rate at the highest quality level was below the 75th percentile of current market rates.⁴⁹ This includes eight states in which the reimbursement rate at the highest quality level was more than 20 percent below the 75th percentile.

- In six of the thirty-one states, the reimbursement rate at the highest quality level was higher than the 75th percentile of current market rates. This includes four states in which the reimbursement rate at the highest quality level was at least 10 percent above the 75th percentile.
- ◆ The difference between the states' lowest and highest reimbursement rates for center-based care for a four-year-old ranged from 5 percent to 67 percent in 2011. There was no consistent relationship between the percentage difference and whether the highest rate was below or above the 75th percentile of current market rates.
 - In six of the thirty-one states, the highest rate was less than 10 percent greater than the lowest rate. In five of these six states, the highest rate was below the 75th percentile of current market rates.
 - In ten of the thirty-one states, the highest rate was 10 percent to 19 percent greater than the lowest rate. In eight of these ten states, the highest rate was below the 75th percentile of current market rates.
 - In eight of the thirty-one states, the highest rate was 20 percent to 29 percent greater than the lowest rate. In six of these eight states, the highest rate was below the 75th percentile of current market rates.
 - In seven of the thirty-one states, the highest rate was at least 30 percent greater than the lowest rate. In six of these seven states, the highest rate was below the 75th percentile of current market rates.

ELIGIBILITY FOR PARENTS SEARCHING FOR A JOB

Child care assistance provided to parents searching for work can help parents who lose a job hold onto their child care until they find a new job. Parents looking for work often need child care so that they have time and availability for job interviews and other activities related to seeking a new job. Parents may also want to retain their child care while they are searching for work so it is available as soon as they find a new job, and so that their children have continuity in their care. Child care assistance for parents searching for a job is particularly important given the challenge of obtaining and maintaining employment in today's economy.

All but five of the states allowed families receiving child care assistance to continue receiving it while a parent searched for a job for at least some amount of time in 2011. Yet only one-third of the states (seventeen) allowed families to qualify for and begin receiving child care assistance while a parent searched for a job.⁵⁰ Among states setting a limit by the number of days, weeks, or months, the amount of time parents could receive child care assistance while searching for a job ranged from two weeks to 180 days.

- ◆ Forty-six states allowed families receiving child care assistance to continue receiving it while a parent searched for a job in 2011 (*see Table 5*).
 - Four states allowed families to continue receiving child care assistance until the end of the month in which the parent lost his or her job, and one state allowed families to continue receiving child care assistance until the end of the month following the month in which the parent lost his or her job. In these states, the amount of time a parent had to search for a new job depended on when during the month s/he lost a job.

- Three states allowed families to continue receiving child care assistance while a parent searched for a job for up to a certain number of hours, including one state with a limit of 80 hours, one state with a limit of 150 hours, and one state with a limit of 240 hours.
 - One state allowed families to continue receiving child care assistance while a parent searched for a job for up to two weeks.
 - One state allowed families to continue receiving child care assistance while a parent searched for a job for up to twenty-one days.
 - Eighteen states allowed families to continue receiving child care assistance while a parent searched for a job for up to either thirty days, four weeks, or one month.
 - Three states allowed families to continue receiving child care assistance while a parent searched for a job for up to either forty days, forty-five days, or fifty-six days.
 - Nine states allowed families to continue receiving child care assistance while a parent searched for a job for up to either sixty days, eight weeks, or two months.
 - Five states allowed families to continue receiving child care assistance while a parent searched for a job for up to either ninety days, thirteen weeks, or three months.
 - One state allowed families to continue receiving child care assistance while a parent searched for a job for up to 180 days.
- ◆ Five states did not allow families receiving child care assistance to continue receiving it while a parent searched for a job in 2011.
 - ◆ The number of states that allowed families receiving child care assistance to continue receiving it while a parent searched for a job in 2011 (forty-six) was slightly lower than the number of states in 2010 (forty-seven). In addition, three states reduced the length of time families receiving child care assistance could continue to receive it while a parent searched for a job between 2010 and 2011.⁵¹
 - One state reduced the length of time families receiving child care assistance could continue to receive it from six months to thirty days.
 - One state reduced the length of time families receiving child care assistance could continue to receive it from twelve weeks to six weeks.
 - One state reduced the length of time families receiving child care assistance could continue to receive it from two months to thirty days.
 - ◆ Seventeen states allowed families not receiving child care assistance to qualify for assistance while a parent searched for a job in 2011.
 - Three states allowed families to receive child care assistance while a parent searched for a job for up to a certain number of hours, including one state with a limit of 80 hours, one state with a limit of 150 hours, and one state with a limit of 240 hours.
 - One state allowed families to receive child care assistance while a parent searched for a job for up to two weeks.
 - Four states allowed families to receive child care assistance while a parent searched for a job for up to either thirty days or one month.
 - Two states allowed families to receive child care assistance while a parent searched for a job for up to either forty days or forty-five days.
 - Six states allowed families to receive child care assistance while a parent searched for a job for up to either sixty days, eight weeks, or two months.

- One state allowed families to receive child care assistance while a parent searched for a job for up to 180 days.
- ◆ One state permitted localities to allow families not receiving child care assistance to qualify for assistance while a parent searched for a job for up to six months (if funds were available) in 2011.
- ◆ Thirty-three states did not allow families not receiving child care assistance to qualify for assistance while a parent searched for a job in 2011.
- ◆ The number of states that allowed families not receiving child care assistance to qualify for assistance while a parent searched for a job in 2011 (seventeen) was lower than the number of states in 2010 (twenty).⁵² The sixteen states that allowed families not receiving child care assistance to qualify for assistance while a parent searched for a job in both 2010 and 2011 did not change the length of time these families were allowed to receive assistance.

CONCLUSION

Families experienced some progress under key child care assistance policies between February 2009 and February 2010, but since that time, they have lost considerable ground. Because families saw little if any improvement in the previous decade, this left many of them behind where they had been in 2001. As a result, far too many families are unable to receive any child care assistance, or are provided insufficient assistance to gain access to good-quality child care options.

The picture is likely to become even worse in the coming years as states confront the loss of federal funds for child care and for their overall budgets, placing increased financial strain on already stressed state budgets. As more families are deprived of help paying for reliable child care, parents will find it more difficult to work, children will be less likely to receive the nurturing care that encourages their growth and learning, and the nation will be more likely to lack the strong workforce required for its current and future prosperity.

ENDNOTES

- 1 Research demonstrates the important role that high-quality child care plays in giving children a strong start. Suzanne Helburn, Mary L. Culkin, Carollee Howes, Donna Bryant, Richard Clifford, Debby Cryer, Ellen Peisner-Feinberg, and Sharon Lynn Kagan, *Cost, Quality, and Child Outcomes in Child Care Centers* (Denver, CO: University of Colorado, 1995); Ellen S. Peisner-Feinberg, Richard M. Clifford, Mary L. Culkin, Carollee Howes, Sharon Lynn Kagan, et al., *The Children of the Cost, Quality, and Outcomes Study Go to School* (Chapel Hill, NC: University of North Carolina, Frank Porter Graham Child Development Center, 1999); Eric Dearing, Kathleen McCartney, and Beck A. Taylor, *Does Higher Quality Early Child Care Promote Low-Income Children's Math and Reading Achievement in Middle Childhood?*, *Child Development*, 80 (5), 2009, 1329-1349; National Research Council and the Institute of Medicine, *From Neurons to Neighborhoods: The Science of Early Childhood Development* (Washington, DC: National Academy Press, 2000).
- 2 National Association of Child Care Resource and Referral Agencies, *Parents and the High Cost of Child Care: 2011 Report* (Washington, DC: NACCRRRA, 2011), 7, *available at* http://www.naccrra.org/publications/naccrra-publications/publications/12330810_Cost%20Report%202011%20v02.pdf.
- 3 The number of families with children under age six that have incomes under 200 percent of poverty has increased from 6.99 million in 2007 to 7.64 million in 2010 (the most recent year for which data are available). U.S. Census Bureau, *Current Population Survey, 2008 Annual Social and Economic Supplement, Detailed Table POV08: Families With Related Children Under 6 by Number of Working Family Members and Family Structure: 2007*, *available at* http://www.census.gov/hhes/www/macro/032008/pov/new08_200_01.htm; U.S. Census Bureau, *Current Population Survey, 2011 Annual Social and Economic Supplement, Detailed Table POV08: Families With Related Children Under 6 by Number of Working Family Members and Family Structure: 2010*, *available at* http://www.census.gov/hhes/www/cpstables/032011/pov/new08_200_01.htm.
- 4 These counts include seven states in which families were worse off under some policies and better off under others.
- 5 Analysis of data in Karen Schulman and Helen Blank, *State Child Care Assistance Policies 2010: New Federal Funds Help States Weather the Storm* (Washington, DC: National Women's Law Center, 2010). These counts include nine states in which families were worse off under some policies and better off under others. Also note that although data on states' policies on eligibility for child care assistance while a parent searched for a job were not collected in 2009, states were asked about changes in their policies over the previous two years when the data were collected in 2010; the information provided was used for this analysis.
- 6 American Recovery and Reinvestment Act, Pub. L. No. 111-8, 123 Stat. 524 (2009).
- 7 Program Instruction (CCDF-ACF-PI-2009-03), Issued April 9, 2009, *available at* <http://www.acf.hhs.gov/programs/ccb/law/guidance/current/pi2009-03/pi2009-03.htm>.
- 8 U.S. Department of Health and Human Services, Administration for Children and Families, Office of Child Care, *American Recovery and Reinvestment Act (ARRA) of 2009: Recovery Act Funds for Child Care – Data Summary as of 12/31/2010*, *available at* http://www.acf.hhs.gov/programs/ccb/initiatives/arra/arra_data/summary_101231.htm.
- 9 This report uses 2001 policies as the basis for comparison because, until 2010, it was the year between the peak year for Child Care and Development Block Grant (CCDBG) funding, 2002, and the peak year for Temporary Assistance for Needy Families (TANF) funding used for child care, 2000. See section on funding for child care assistance.
- 10 The federal poverty level for a family of three was \$18,530 in 2011. U.S. Department of Health and Human Services, *The 2011 HHS Poverty Guidelines*, *available at* <http://aspe.hhs.gov/poverty/11poverty.shtml>. The federal poverty level for a family of three was \$18,310 in 2010. U.S. Department of Health and Human Services, *The HHS Poverty Guidelines for the Remainder of 2010 (August 2010)*, *available at* <http://aspe.hhs.gov/poverty/10poverty.shtml>.
- 11 The federal poverty level for a family of three was \$14,630 in 2001. U.S. Department of Health and Human Services, *The 2001 HHS Poverty Guidelines*, *available at* <http://aspe.hhs.gov/poverty/01poverty.htm>.
- 12 Comparable data were not collected for 2001.
- 13 Elizabeth McNichol, Phil Oliff, and Nicholas Johnson, *States Continue to Feel Recession's Impact* (Updated June 17, 2011) (Washington, DC: Center on Budget and Policy Priorities, 2011), *available at* <http://www.cbpp.org/files/9-8-08sfp.pdf>; Erica Williams, Michael Leachman and Nicholas Johnson, *State Budget Cuts in the New Fiscal Year Are Unnecessarily Harmful: Cuts Are Hitting Hard at Education, Health Care, and State Economies* (Updated July 28, 2011) (Washington, DC: Center on Budget and Policy Priorities, 2011), *available at* <http://www.cbpp.org/files/7-26-11sfp.pdf>.
- 14 Illinois updated its income limit to 185 percent of the 2011 federal poverty level (\$34,284 a year for a family of three) as of July 1, 2011.
- 15 Taking into account that South Dakota deducts 4 percent of income in determining eligibility, the effective annual income limit for a family of three was reduced from \$38,613 to \$33,779.
- 16 The monthly copayment for a family of three with an annual income of \$27,795 was revised to \$126 and the monthly copayment for a family of three with an annual income of \$18,530 was revised to \$46 when Illinois adjusted its income eligibility limit and copayment schedule for the 2011 federal poverty level as of July 1, 2011.

- 17 This study focuses on the income criteria used to determine a family's eligibility when it first applies for assistance, because this traditionally has been used as the measure of access to benefit programs and determines whether a family can enter the program. However, some states allow families to continue to receive assistance up to a higher income level than the initial eligibility cutoff. Information about states that have different entrance and exit eligibility criteria is provided in the notes to Tables 1a and 1b.
- 18 U.S. Department of Health and Human Services, Administration for Children and Families, Office of Child Care, FY 2011 CCDF Allocations (Based on Appropriation), *available at* http://www.acf.hhs.gov/programs/ccb/law/allocations/current/state2011/est_fin_all_2011.htm. This amount includes \$2.223 billion in discretionary funding and \$2.917 billion in mandatory (entitlement) funding.
- 19 U.S. Department of Health and Human Services, Fiscal Year 2011 Budget in Brief (Washington, DC: U.S. Department of Health and Human Services, 2010), 75, 79, *available at* <http://dhhs.gov/asfr/ob/docbudget/2011budgetinbrief.pdf>. In addition to the \$1 billion in ARRA funding, this total of \$6.044 billion in CCDBG funding includes \$2.127 billion in discretionary funding and \$2.917 billion in mandatory (entitlement) funding.
- 20 U.S. Department of Health and Human Services, FY 2003 President's Budget for HHS (Washington, DC: U.S. Department of Health and Human Services, 2002), 83, 92, *available at* <http://www.hhs.gov/budget/pdf/hhs2003bib.pdf>. This amount includes \$2.1 billion in discretionary funding and \$2.717 billion in mandatory (entitlement) funding.
- 21 Email from Hannah Matthews, CLASP, to Karen Schulman, National Women's Law Center, July 29, 2010. Inflation adjustment by CLASP based on the Employment Cost Index (ECI) and Consumer Price Index (CPI) for FY 2003-2009 provided to CLASP by the Congressional Budget Office (CBO), and on CBO economic projections for the ECI and CPI in FY 2010, Congressional Budget Office, *The Budget and Economic Outlook: Fiscal Years 2010 to 2020* (January 2010) (Washington, DC: Congressional Budget Office, 2010), 123.
- 22 National Women's Law Center analysis of data from U.S. Department of Health and Human Services, Administration for Children and Families, Fiscal Year 2009 TANF Financial Data, Table A. Combined Federal Funds Spent in FY 2009, *available at* http://www.acf.hhs.gov/programs/ofs/data/2009/tanf_2009.html. Total includes \$1.727 billion transferred to CCDBG, \$343 million spent on child care categorized as "assistance," and \$1.444 billion spent on child care categorized as "non-assistance."
- 23 National Women's Law Center analysis of data from U.S. Department of Health and Human Services, Administration for Children and Families, Fiscal Year 2000 TANF Financial Data, Table A. Combined Federal Funds Spent in FY 2000 Through the Fourth Quarter, *available at* http://www.acf.hhs.gov/programs/ofs/data/tanf_2000.html. Total includes \$2.413 billion transferred to CCDBG, \$353 million spent on child care categorized as "assistance," and \$1.200 billion spent on child care categorized as "non-assistance."
- 24 Email from Hannah Matthews, CLASP, to Karen Schulman, National Women's Law Center, Aug. 18, 2010. Inflation adjustment by CLASP based on the Employment Cost Index (ECI) and Consumer Price Index (CPI) for FY 2001-2009 provided to CLASP by the Congressional Budget Office (CBO), and on CBO economic projections for the ECI and CPI in FY 2010, Congressional Budget Office, *The Budget and Economic Outlook: Fiscal Years 2010 to 2020* (January 2010) (Washington, DC: Congressional Budget Office, 2010), 123.
- 25 In FY 2001, CCDBG funding was \$4.567 billion (\$5.733 billion in FY 2010 dollars) and TANF funding used for child care was \$3.541 billion (\$4.445 billion in FY 2010 dollars). The CCDBG funding amount includes \$2.0 billion in discretionary funding and \$2.567 billion in mandatory (entitlement) funding. U.S. Department of Health and Human Services, FY 2002 President's Budget for HHS (Washington, DC: U.S. Department of Health and Human Services, 2001), 89-90, *available at* <http://archive.hhs.gov/budget/pdf/hhs2002.pdf>. The TANF funding amount includes \$1.899 billion transferred to CCDBG, \$285 million spent on child care categorized as "assistance," and \$1.357 billion spent on child care categorized as "non-assistance." National Women's Law Center analysis of data from U.S. Department of Health and Human Services, Administration for Children and Families, Fiscal Year 2001 TANF Financial Data, Table A. Combined Federal Funds Spent in FY 2001 Through the Fourth Quarter, *available at* http://www.acf.hhs.gov/programs/ofs/data/tanf_2001.html. CCDBG and TANF amounts in FY 2010 dollars provided in email from Hannah Matthews, CLASP, to Karen Schulman, National Women's Law Center, Aug. 18, 2010. Inflation adjustment by CLASP based on the Employment Cost Index (ECI) and Consumer Price Index (CPI) for FY 2002-2009 provided to CLASP by the Congressional Budget Office (CBO), and on CBO economic projections for the ECI and CPI in FY 2010, Congressional Budget Office, *The Budget and Economic Outlook: Fiscal Years 2010 to 2020* (January 2010) (Washington, DC: Congressional Budget Office, 2010), 123.
- 26 In states that allow localities to set their income limits within a state-specified range, the maximum of that range was used for the analysis in this section.
- 27 State median income is not used to measure inflation between 2001 and 2011 because variations among states in state median income adjustments and in which benchmark states use to set their income eligibility limits are more difficult to track than changes in the federal poverty level over a long-term period.
- 28 These seven states include two that set their income limits based on the federal poverty level and adjusted their income limits for the 2011 federal poverty level between February 2010 and February 2011 and five that set their income limits based on the state median income level and adjusted their income limits for the updated state median income estimate between February 2010 and February 2011.
- 29 In these thirty-nine states, the income limit as a percentage of poverty declined by four percentage points or fewer. Of these thirty-nine states, at least nineteen increased or planned to increase their income limits to adjust for the 2011 federal poverty level and at least four increased or planned to increase their income limits to adjust for an updated state median income estimate between February 2011 and February 2012. States that set their income limits based on the federal poverty level typically adjust them at the same time each year, but

2010 differed because the U.S. Department of Health and Human Services delayed the update of the federal poverty level, usually issued each February, until August, and at that time, kept it at the same level as the 2009 federal poverty level (\$18,310 a year for a family of three). See Delayed Update of the HHS Poverty Guidelines for the Remainder of 2010, 75 Fed. Reg. 45,628 (Aug. 3, 2010). Therefore, states that had their income limits based on 2009 federal poverty levels as of February 2010 and planned to adjust them for 2010 federal poverty levels later in the year, effectively already had them based on 2010 federal poverty level as of February 2010.

- 30 These sixteen states include one state where the income limit as a percentage of poverty decreased by four percentage points, one state where the income limit decreased by three percentage points, six states where the income limit decreased by two percentage points, three states where the income limit stayed the same, one state where the income limit increased by two percentage points, two states where the income limit increased by three percentage points, and two states where the income limit increased by four percentage points.
- 31 National Women's Law Center analysis of data from Economic Policy Institute, Basic Family Budget Spreadsheets (2007), *available at* http://www.epi.org/pages/budget_calculator_intro/; and from James Lin and Jared Bernstein, What We Need to Get By (Washington, DC: Economic Policy Institute, 2008), *available at* <http://www.epi.org/publications/entry/bp224/>; Sylvia Allegretto, Basic Family Budgets: Working Families' Incomes Often Fail to Meet Living Expenses Around the U.S. (Washington, DC: Economic Policy Institute, 2005), *available at* <http://www.epi.org/page/-/old/briefingpapers/165/bp165.pdf>.
- 32 See, e.g., Karen Schulman and Helen Blank, In Their Own Voices: Parents and Providers Struggling with Child Care Cuts (Washington, DC: National Women's Law Center, 2005), 10; Children's Action Alliance, The Real Reality of Arizona's Working Families—Child Care Survey Highlights (Phoenix, AZ: Children's Action Alliance, 2004); Deborah Schlick, Mary Daly, and Lee Bradford, Faces on the Waiting List: Waiting for Child Care Assistance in Ramsey County (Ramsey County, MN: Ramsey County Human Services, 1999) (Survey conducted by the Minnesota Center for Survey Research at the University of Minnesota); Philip Coltoff, Myrna Torres, and Natasha Lifton, The Human Cost of Waiting for Child Care: A Study (New York, NY: Children's Aid Society, 1999); Jennifer Gulley and Ann Hilbig, Waiting List Survey: Gulf Coast Workforce Development Area (Houston, TX: Neighborhood Centers, Inc., 1999); Jeffrey D. Lyons, Susan D. Russell, Christina Gilgor, and Amy H. Staples, Child Care Subsidy: The Costs of Waiting (Chapel Hill, NC: Day Care Services Association, 1998); Casey Coonerty and Tamsin Levy, Waiting for Child Care: How Do Parents Adjust to Scarce Options in Santa Clara County? (Berkeley, CA: Policy Analysis for California Education, 1998); Philadelphia Citizens for Children and Youth, et al., Use of Subsidized Child Care by Philadelphia Families (Philadelphia, PA: Philadelphia Citizens for Children and Youth, 1997); Greater Minneapolis Day Care Association, Valuing Families: The High Cost of Waiting for Child Care Sliding Fee Assistance (Minneapolis, MN: Greater Minneapolis Day Care Association, 1995).
- 33 Waiting lists are not a perfect measure of unmet need, however. For example, waiting lists may increase due to expanded outreach efforts that make more families aware of child care assistance programs, and may decrease due to a state's adoption of more restrictive eligibility criteria.
- 34 If a state determined its copayment based on the cost of care, this study assumes that the family had a four-year-old in a licensed, non-accredited center charging the state's maximum reimbursement rate.
- 35 U.S. Census Bureau, Who's Minding the Kids? Child Care Arrangements: Summer 2006, Detailed Tables, Table 6: Average Weekly Child Care Expenditures of Families with Employed Mothers that Make Payments, by Age Groups and Selected Characteristics: Summer 2006 (2009), *available at* <http://www.census.gov/population/socdemo/child/table-2006/tab06.xls>.
- 36 For a family of three, 150 percent of the federal poverty level was equal to an income of \$27,465 in 2010 and \$27,795 in 2011.
- 37 These seven states do not include states that had income eligibility limits to initially qualify for assistance below 150 percent of poverty but allowed families already receiving assistance to remain eligible with incomes above 150 percent of poverty.
- 38 For a family of three, 150 percent of the federal poverty level was equal to an income of \$21,945 in 2001.
- 39 Child Care and Development Fund (Preamble to Final Rule), 63 Fed. Reg. 142 (July 24, 1998), *available at* <http://www.acf.hhs.gov/programs/ccb/law/finalrul/fr072498.pdf>.
- 40 For this analysis, a state's reimbursement rates in a given year are considered up-to-date if based on a market survey conducted no more than two years prior to that year. Also note that for this analysis, a state's reimbursement rates are not considered to be at the 75th percentile of market rates if only some of its rates—for example, for certain regions, age groups, or higher-quality care—are at the 75th percentile.
- 41 The one state that reduced its reimbursement rates is New Mexico. The three states that increased their reimbursement rates are Alaska, Illinois, and Texas. (These three states do not include Maryland or Vermont, which increased their rates in January 2010 and whose increased rates were reflected in the State Child Care Assistance Policies 2010 report.) Any other differences between rates shown in Table 4c of this report and rates shown in Table 4c of the State Child Care Assistance Policies 2010 report are due to revisions or recalculations of the data rather than policy changes.
- 42 These twenty-one states include Texas because it reported that a majority of its localities—which determine when to update rates—had updated at least some of their rates within the past two years. However, these twenty-one states do not include Colorado because it did not report that any of its localities—which also determine when to update rates—had updated their rates within the past two years. These twenty-one states also do not include Hawaii, which only updated its rates for license-exempt care in 2010.

- 43 States were asked to report data from their most recent market rate survey, and most states reported data from 2009 or more recent surveys. However, three states—California, Idaho, and North Dakota—reported data from 2008 or earlier. These three states are not included in the twenty-five states because their reimbursement rates were less than 20 percent below the 75th percentile of market rates based on their outdated surveys, and thus it is not possible to calculate whether their reimbursement rates were 20 percent or more below the 75th percentile of current market rates.
- 44 California, Idaho, and North Dakota are not included in the twenty-four states because their reimbursement rates were less than 20 percent below the 75th percentile of market rates based on their outdated surveys, and thus it is not possible to calculate whether their reimbursement rates were 20 percent or more below the 75th percentile of current market rates.
- 45 Comparable data were not collected for 2001. However, comparable data were collected for 2000 and 2005. In each of these years, thirty-seven states permitted child care providers to charge parents the difference between the state reimbursement rate and the provider's private fee. Karen Schulman and Helen Blank, *Child Care Assistance Policies 2005: States Fail to Make Up Lost Ground, Families Continue to Lack Critical Supports* (Washington, DC: National Women's Law Center, 2005), 5 and 18; Karen Schulman, Helen Blank, and Danielle Ewen, *A Fragile Foundation: State Child Care Assistance Policies* (Washington, DC: Children's Defense Fund, 2001), 103.
- 46 This analysis is based on tiered rates in each state's most populous city, county, or region. Within each state, the use and structure of tiered rates may vary across cities, counties, or regions.
- 47 Comparable data on tiered rates were not collected for 2001.
- 48 These fourteen states include Nevada, which plans to have four tier levels, but so far has only implemented Tier 1 and Tier 4.
- 49 These twenty-five states include New Mexico and North Carolina, which determined a separate 75th percentile of current market rates for child care providers at each quality level. In both states, the reimbursement rate at the highest quality level was lower than even the 75th percentile for the lowest-priced level.
- 50 This analysis is based on policies for families not connected to the TANF program. Additional states allow families receiving or transitioning from TANF to qualify for child care assistance while searching for a job.
- 51 The data in this report on the length of time each state allowed parents to receive child care assistance while searching for a job are not comparable to the data in the 2010 State Child Care Assistance Policies report due to changes in the survey question wording and changes in the way some states reported information about their policies. Actual changes in policy are indicated in the notes for Table 5.
- 52 The number of states that allowed families not receiving child care assistance to qualify for assistance while a parent searched for a job in 2010 reported here (twenty) differs from the number reported in the 2010 State Child Care Assistance Policies report (eighteen) because two states provided revised information.

TABLE 1A: INCOME ELIGIBILITY LIMITS FOR A FAMILY OF THREE IN 2010 AND 2011

State	Income limit in 2011			Income limit in 2010			Change in income limit 2010 to 2011		
	As annual dollar amount	As percent of poverty (\$18,530 a year)	As percent of state median income	As annual dollar amount	As percent of poverty (\$18,310 a year)	As percent of state median income	As annual dollar amount	As percent of poverty	As percent of state median income
Alabama*	\$23,808	128%	44%	\$23,808	130%	47%	\$0	-2%	-3%
Alaska*	\$54,288	293%	77%	\$46,248	253%	69%	\$8,040	40%	8%
Arizona*	\$30,216	163%	51%	\$30,216	165%	54%	\$0	-2%	-3%
Arkansas*	\$28,345	153%	60%	\$28,345	155%	62%	\$0	-2%	-2%
California*	\$45,228	244%	68%	\$45,228	247%	70%	\$0	-3%	-3%
Colorado*	\$23,803-\$54,108	128%-292%	35%-80%	\$23,803-\$54,108	130%-296%	37%-85%	\$0	-4% - -2%	-5% - -2%
Connecticut*	\$42,690	230%	50%	\$61,556	336%	75%	-\$18,866	-106%	-25%
Delaware	\$36,624	198%	52%	\$36,624	200%	55%	\$0	-2%	-3%
District of Columbia*	\$45,775	247%	80%	\$45,775	250%	84%	\$0	-3%	-4%
Florida*	\$27,468	148%	47%	\$27,468	150%	49%	\$0	-2%	-2%
Georgia	\$28,160	152%	48%	\$35,200	192%	61%	-\$7,040	-40%	-13%
Hawaii	\$47,124	254%	62%	\$47,124	257%	66%	\$0	-3%	-4%
Idaho	\$23,184	125%	43%	\$23,184	127%	46%	\$0	-2%	-2%
Illinois*	\$36,624	198%	54%	\$36,624	200%	56%	\$0	-2%	-2%
Indiana*	\$23,256	126%	39%	\$23,256	127%	40%	\$0	-2%	-1%
Iowa*	\$26,556	143%	43%	\$26,556	145%	45%	\$0	-2%	-1%
Kansas*	\$33,876	183%	55%	\$33,876	185%	58%	\$0	-2%	-3%
Kentucky*	\$27,468	148%	51%	\$27,468	150%	53%	\$0	-2%	-3%
Louisiana*	\$37,896	205%	69%	\$37,896	207%	73%	\$0	-2%	-5%
Maine*	\$45,775	247%	79%	\$45,775	250%	81%	\$0	-3%	-2%
Maryland	\$29,990	162%	35%	\$29,990	164%	37%	\$0	-2%	-2%
Massachusetts*	\$41,396	223%	50%	\$39,207	214%	50%	\$2,189	9%	0%
Michigan	\$23,880	129%	37%	\$23,880	130%	38%	\$0	-2%	-1%
Minnesota*	\$34,348	185%	47%	\$32,944	180%	47%	\$1,404	5%	0%
Mississippi	\$34,999	189%	74%	\$34,999	191%	79%	\$0	-2%	-5%
Missouri*	\$23,520	127%	40%	\$23,520	128%	42%	\$0	-2%	-2%
Montana	\$27,468	148%	50%	\$27,468	150%	52%	\$0	-2%	-3%
Nebraska*	\$21,972	119%	36%	\$21,972	120%	37%	\$0	-1%	-2%
Nevada*	\$43,248	233%	72%	\$43,248	236%	75%	\$0	-3%	-3%
New Hampshire*	\$45,775	247%	58%	\$45,775	250%	61%	\$0	-3%	-3%
New Jersey*	\$36,620	198%	43%	\$36,620	200%	45%	\$0	-2%	-2%
New Mexico*	\$36,620	198%	79%	\$36,620	200%	82%	\$0	-2%	-3%
New York*	\$36,620	198%	53%	\$36,620	200%	56%	\$0	-2%	-3%
North Carolina*	\$37,476	202%	66%	\$37,476	205%	69%	\$0	-2%	-3%
North Dakota*	\$29,556	160%	48%	\$29,556	161%	52%	\$0	-2%	-4%
Ohio*	\$27,468	148%	44%	\$27,468	150%	46%	\$0	-2%	-2%
Oklahoma*	\$35,100	189%	69%	\$35,100	192%	73%	\$0	-2%	-4%
Oregon	\$34,281	185%	57%	\$33,874	185%	60%	\$407	0%	-3%
Pennsylvania*	\$36,620	198%	55%	\$36,620	200%	58%	\$0	-2%	-3%
Rhode Island*	\$32,958	178%	46%	\$32,958	180%	47%	\$0	-2%	-1%
South Carolina*	\$27,465	148%	50%	\$27,465	150%	53%	\$0	-2%	-3%
South Dakota*	\$38,150	206%	66%	\$38,150	208%	70%	\$0	-2%	-4%
Tennessee*	\$32,352	175%	60%	\$31,044	170%	60%	\$1,308	5%	0%
Texas*	\$27,465-\$46,658	148%-252%	50%-85%	\$27,465-\$44,524	150%-243%	52%-85%	\$0-\$2,134	-2%-9%	-2%-0%
Utah*	\$35,244	190%	60%	\$33,192	181%	60%	\$2,052	9%	0%
Vermont	\$36,600	198%	59%	\$36,600	200%	59%	\$0	-2%	-1%
Virginia*	\$27,468-\$45,780	148%-247%	39%-64%	\$27,468-\$45,780	150%-250%	40%-67%	\$0	-3% - -2%	-2% - -1%
Washington	\$32,424	175%	47%	\$36,624	200%	56%	-\$4,200	-25%	-9%
West Virginia*	\$27,468	148%	56%	\$27,468	150%	58%	\$0	-2%	-2%
Wisconsin*	\$34,281	185%	52%	\$33,876	185%	54%	\$405	0%	-2%
Wyoming*	\$43,596	235%	66%	\$48,175	263%	79%	-\$4,579	-28%	-13%

* indicates notes found on pages 19 and 20.

TABLE 1B: INCOME ELIGIBILITY LIMITS FOR A FAMILY OF THREE IN 2001 AND 2011

State	Income limit in 2011			Income limit in 2001			Change in income limit 2001 to 2011		
	As annual dollar amount	As percent of poverty (\$18,530 a year)	As percent of state median income	As annual dollar amount	As percent of poverty (\$14,630 a year)	As percent of state median income	As annual dollar amount	As percent of poverty	As percent of state median income
Alabama*	\$23,808	128%	44%	\$18,048	123%	41%	\$5,760	5%	3%
Alaska*	\$54,288	293%	77%	\$44,328	303%	75%	\$9,960	-10%	2%
Arizona*	\$30,216	163%	51%	\$23,364	160%	52%	\$6,852	3%	-1%
Arkansas*	\$28,345	153%	60%	\$23,523	161%	60%	\$4,822	-8%	0%
California*	\$45,228	244%	68%	\$35,100	240%	66%	\$10,128	4%	1%
Colorado*	\$23,803-\$54,108	128%-292%	35%-80%	\$19,020-\$32,000	130%-219%	36%-61%	\$4,783-\$22,108	-2%-73%	-1%-19%
Connecticut*	\$42,690	230%	50%	\$47,586	325%	75%	-\$4,896	-95%	-25%
Delaware	\$36,624	198%	52%	\$29,260	200%	53%	\$7,364	-2%	-1%
District of Columbia*	\$45,775	247%	80%	\$34,700	237%	66%	\$11,075	10%	13%
Florida*	\$27,468	148%	47%	\$20,820	142%	45%	\$6,648	6%	2%
Georgia	\$28,160	152%	48%	\$24,278	166%	50%	\$3,882	-14%	-2%
Hawaii*	\$47,124	254%	62%	\$46,035	315%	83%	\$1,089	-60%	-20%
Idaho	\$23,184	125%	43%	\$20,472	140%	51%	\$2,712	-15%	-8%
Illinois*	\$36,624	198%	54%	\$24,243	166%	43%	\$12,381	32%	10%
Indiana*	\$23,256	126%	39%	\$20,232	138%	41%	\$3,024	-13%	-2%
Iowa*	\$26,556	143%	43%	\$19,812	135%	41%	\$6,744	8%	2%
Kansas*	\$33,876	183%	55%	\$27,060	185%	56%	\$6,816	-2%	-1%
Kentucky*	\$27,468	148%	51%	\$24,140	165%	55%	\$3,328	-17%	-4%
Louisiana*	\$37,896	205%	69%	\$29,040	205%	75%	\$8,856	0%	-6%
Maine*	\$45,775	247%	79%	\$36,452	249%	75%	\$9,323	-2%	4%
Maryland	\$29,990	162%	35%	\$25,140	172%	40%	\$4,850	-10%	-5%
Massachusetts*	\$41,396	223%	50%	\$28,968	198%	48%	\$12,428	25%	2%
Michigan	\$23,880	129%	37%	\$26,064	178%	47%	-\$2,184	-49%	-10%
Minnesota*	\$34,348	185%	47%	\$42,304	289%	76%	-\$7,956	-104%	-29%
Mississippi	\$34,999	189%	74%	\$30,999	212%	77%	\$4,000	-23%	-3%
Missouri*	\$23,520	127%	40%	\$17,784	122%	37%	\$5,736	5%	3%
Montana	\$27,468	148%	50%	\$21,948	150%	51%	\$5,520	-2%	-1%
Nebraska*	\$21,972	119%	36%	\$25,260	173%	54%	-\$3,288	-54%	-18%
Nevada*	\$43,248	233%	72%	\$33,420	228%	67%	\$9,828	5%	5%
New Hampshire*	\$45,775	247%	58%	\$27,797	190%	50%	\$17,978	57%	8%
New Jersey*	\$36,620	198%	43%	\$29,260	200%	46%	\$7,360	-2%	-4%
New Mexico*	\$36,620	198%	79%	\$28,300	193%	75%	\$8,320	4%	4%
New York*	\$36,620	198%	53%	\$28,644	202%	61%	\$7,976	-4%	-8%
North Carolina*	\$37,476	202%	66%	\$32,628	223%	69%	\$4,848	-21%	-3%
North Dakota*	\$29,556	160%	48%	\$29,556	202%	69%	\$0	-43%	-21%
Ohio*	\$27,468	148%	44%	\$27,066	185%	57%	\$402	-37%	-13%
Oklahoma*	\$35,100	189%	69%	\$29,040	198%	66%	\$6,060	-9%	3%
Oregon	\$34,281	185%	57%	\$27,060	185%	60%	\$7,221	0%	-3%
Pennsylvania*	\$36,620	198%	55%	\$29,260	200%	58%	\$7,360	-2%	-3%
Rhode Island*	\$32,958	178%	46%	\$32,918	225%	61%	\$40	-47%	-15%
South Carolina*	\$27,465	148%	50%	\$21,225	145%	45%	\$6,240	3%	5%
South Dakota*	\$38,150	206%	66%	\$22,826	156%	52%	\$15,324	50%	14%
Tennessee*	\$32,352	175%	60%	\$24,324	166%	56%	\$8,028	8%	4%
Texas*	\$27,465-\$46,658	148%-252%	50%-85%	\$21,228-\$36,516	145%-250%	47%-82%	\$6,237-\$10,142	2%-3%	3%
Utah*	\$35,244	190%	60%	\$28,248	193%	59%	\$6,996	-3%	1%
Vermont	\$36,600	198%	59%	\$31,032	212%	64%	\$5,568	-15%	-5%
Virginia*	\$27,468-\$45,780	148%-247%	39%-64%	\$21,948-\$27,060	150%-185%	41%-50%	\$5,520-\$18,720	-2%-62%	-2%-14%
Washington	\$32,424	175%	47%	\$32,916	225%	63%	-\$492	-50%	-15%
West Virginia*	\$27,468	148%	56%	\$28,296	193%	75%	-\$828	-45%	-19%
Wisconsin*	\$34,281	185%	52%	\$27,060	185%	51%	\$7,221	0%	1%
Wyoming*	\$43,596	235%	66%	\$21,948	150%	47%	\$21,648	85%	19%

* indicates notes found on pages 19 and 20.

NOTES FOR TABLES 1A AND 1B: INCOME ELIGIBILITY LIMITS

The income eligibility limits shown in the table represent the maximum income families can have when they apply for child care assistance. Some states allow families, once receiving assistance, to continue receiving assistance up to a higher income level than that initial limit. These higher exit eligibility limits are reported below for states that have them.

Changes in income limits were calculated using raw data, rather than the rounded numbers shown in the table.

- Alabama: In 2001, families already receiving assistance could continue doing so until their income reached \$27,756. In 2010 and 2011, the exit eligibility limit was \$27,468. As of October 2011, the income limit to qualify for assistance was expected to increase to \$24,084 (130 percent of poverty) to adjust for the 2011 federal poverty level.
- Alaska: The Alaska Permanent Fund Dividend (PFD) payment, which the majority of families in the state receive, is not counted when determining eligibility.
- Arizona: As of July 2011, the income limit was increased to \$30,600 (165 percent of poverty) to adjust for the 2011 federal poverty level.
- Arkansas: The income limits shown in the table take into account a deduction of \$100 per month (\$1,200 a year) that is allowed for an adult household member who works at least 30 hours per week. It is assumed there is one working parent. The stated income limits, in policy, were \$22,323 in 2001 and \$27,145 in 2010 and 2011. As of October 2011, the stated income limit was expected to increase to \$29,760 (60 percent of state median income) to adjust for the updated state median income estimate.
- California: Under policies in effect in 2001, families who had been receiving assistance as of January 1, 1998 could continue doing so until their income reached \$46,800 since they were subject to higher income guidelines previously in effect. Also note that two pilot counties (San Mateo and San Francisco) allowed families already receiving assistance to continue to receive it up to an income of \$54,096 in 2010 and 2011. As of July 2011, the state's income limit was reduced to \$42,216 (70 percent of the 2007 state median income).
- Colorado: Counties set their income limits within state guidelines. Also note that counties may allow families already receiving assistance to continue doing so after their income exceeds the county's initial income limit for up to six months, if their income remains below 85 percent of state median income (\$54,108 in 2010 and 2011).
- Connecticut: In 2011, families already receiving assistance could continue doing so until their income reached \$64,035. In 2010, the state did not have a separate exit eligibility limit. As of July 2011, the income limit to qualify for assistance was increased to \$42,893 (50 percent of state median income), and the exit eligibility limit was increased to \$64,340 (75 percent of state median income) to adjust for the 2011 state median income estimate.
- District of Columbia: In 2001, families already receiving assistance could continue doing so until their income reached \$41,640. In 2010 and 2011, the exit eligibility limit was \$51,101.
- Florida: In 2010 and 2011, families already receiving assistance could continue doing so until their income reached \$36,620. As of July 2011, the income limit to qualify for assistance was increased to \$27,795 (150 percent of poverty), and the exit eligibility limit was increased to \$37,060 (200 percent of poverty) to adjust for the 2011 federal poverty level.
- Hawaii: In 2001, the state allowed a 20 percent deduction of all countable income in determining eligibility, which is taken into account in the figure shown here. The stated income limit, in policy, was \$36,828. The state no longer used the deduction in 2010 or 2011.
- Illinois: In 2001, the state allowed a 10 percent earned income deduction in determining eligibility, which is taken into account in the figure shown here. The stated income limit, in policy, was \$21,819. The state no longer used the deduction in 2010 or 2011. As of April 2011, the income limit was reduced to \$33,876 (185 percent of the 2010 federal poverty level). As of July 2011, the income limit was increased to \$34,284 to adjust for the 2011 federal poverty level.
- Indiana: In 2010 and 2011, families already receiving assistance could continue doing so until their income reached \$31,128. As of April 2011, the income limit to qualify for assistance was increased to \$23,532 (127 percent of poverty), and the exit eligibility limit was increased to \$31,500 (170 percent of poverty) to adjust for the 2011 federal poverty level.
- Iowa: For special needs care, the income limit was \$36,624 in 2010 and 2011. As of July 2011, the income limit for standard care was increased to \$26,880 (145 percent of poverty), and the income limit for special needs care was increased to \$37,080 (200 percent of poverty) to adjust for the 2011 federal poverty level. Also note that in some areas of the state a separate ARRA-funded scholarship program in effect from July 2009 through June 2011 helped families with incomes between \$26,556 and \$33,874 pay for infant and toddler care offered by providers that were accredited by the National Association for the Education of Young Children (NAEYC) or the National Association for Family Child Care (NAFCC) or that had a rating of a level three or higher under the state's child care quality rating and improvement system.
- Kansas: As of May 2011, the income limit was increased to \$34,272 (185 percent of poverty) to adjust for the 2011 federal poverty level.
- Kentucky: In 2010 and 2011, families already receiving assistance could continue doing so until their income reached \$30,216. As of April 2011, the income limit to qualify for assistance was increased to \$27,795 (150 percent of poverty), and the exit eligibility limit was increased to \$30,575 (165 percent of poverty) to adjust for the 2011 federal poverty level.
- Louisiana: As of June 2011, the income limit was reduced to \$35,868 (65 percent of the 2011 state median income). Also note that data on the state's policies as of 2001 are not available, so data on policies as of March 15, 2000 are used instead.
- Maine: As of April 2011, the income limit was increased to \$46,325 (250 percent of poverty) to adjust for the 2011 federal poverty level.
- Massachusetts: In 2001, families already receiving assistance could continue doing so until their income reached \$49,248. In 2010, the exit eligibility limit was \$64,103 and in 2011, it was \$70,372. Also note that, for special needs care, the income limit to qualify for assistance was \$64,103 in 2010 and \$70,372 in 2011, and the exit eligibility limit was \$78,415 in 2010 and \$82,791 in 2011. As of July 2011, for standard care, the income limit to qualify for assistance was increased to \$42,025 (50 percent of state median income), and the exit eligibility limit was increased to \$71,441 (85 percent of state median income) to adjust for the updated state median income estimate.
- Minnesota: In 2010, families already receiving assistance could continue doing so until their income reached \$46,962. In 2011, the exit eligibility limit was \$48,964.
- Missouri: In 2010 and 2011, families already receiving assistance could continue doing so until their income reached \$25,740.

- Nebraska: For families transitioning from TANF, the income limit was \$33,876 in 2010 and 2011. As of July 2011, the income limit was increased to \$34,296 (185 percent of poverty) for families transitioning from TANF and to \$22,248 (120 percent of poverty) for all other families to adjust for the 2011 federal poverty level.
- Nevada: As of October 2011, the income limit was expected to increase to \$44,880 (75 percent of state median income) to adjust for the updated state median income estimate.
- New Hampshire: As of July 2011, the income limit was increased to \$46,325 (250 percent of poverty) to adjust for the 2011 federal poverty level.
- New Jersey: In 2001, families already receiving assistance could continue doing so until their income reached \$36,575. In 2010 and 2011, the exit eligibility limit was \$45,775. As of October 2011, the income limit to qualify for assistance was expected to increase to \$37,060 (200 percent of poverty), and the exit eligibility limit was expected to increase to \$46,325 (250 percent of poverty) to adjust for the 2011 federal poverty level.
- New Mexico: As of April 2011, the income limit was increased to \$37,060 (200 percent of poverty) to adjust for the 2011 federal poverty level.
- New York: A few small demonstration projects set the income limit at \$46,691 in 2010 and 2011. Also note that data on the state's policies as of 2001 are not available, so data on policies as of March 15, 2000 are used instead. As of June 2011, the state's income limit was increased to \$37,060 (200 percent of poverty) to adjust for the 2011 federal poverty level.
- North Carolina: As of August 2011, the income limit was increased to \$42,816 (75 percent of state median income) to adjust for the 2011 state median income estimate.
- North Dakota: As of October 2011, the income limit was expected to increase to \$30,576 (45 percent of state median income) to adjust for the updated state median income estimate.
- Ohio: In 2010 and 2011, families already receiving assistance could continue doing so until their income reached \$36,620. The state did not have a separate exit eligibility limit in 2001. As of July 2011, the income limit to qualify for assistance was reduced to \$23,172 (125 percent of poverty); however, families already receiving assistance can continue to receive it up to the higher exit eligibility limit, which was increased to \$37,080 (200 percent of poverty) to adjust for the 2011 federal poverty level.
- Oklahoma: The income limit depends on how many children are in child care. The income limits shown in the table assume that the family had two children in subsidized care. The income limit for a family of three with only one child in subsidized care was \$29,100 in 2010 and 2011.
- Pennsylvania: In 2001, families already receiving assistance could continue doing so until their income reached \$34,381. In 2010 and 2011, the exit eligibility limit was \$43,029. As of May 2011, the income limit to qualify for assistance was increased to \$37,060 (200 percent of poverty), and the exit eligibility limit was increased to \$43,546 (235 percent of poverty) to adjust for the 2011 federal poverty level.
- Rhode Island: As of April 2011, the income limit was increased to \$33,354 (180 percent of poverty) to adjust for the 2011 federal poverty level.
- South Carolina: In 2001, families already receiving assistance could continue doing so until their income reached \$24,763. In 2010 and 2011, the exit eligibility limit was \$32,043. As of October 2011, the income limit to qualify for assistance was expected to increase to \$27,795 (150 percent of poverty), and the exit eligibility limit was expected to increase to \$32,428 (175 percent of poverty) to adjust for the 2011 federal poverty level.
- South Dakota: The income limits shown in the table take into account that the state disregards 4 percent of earned income in determining eligibility. The stated income limits, in policy, were \$21,913 in 2001 and \$36,624 in 2010 and 2011. As of March 2011, the stated income limit was increased to \$37,068 (200 percent of poverty) to adjust for the 2011 federal poverty level. As of July 2011, the stated income limit was reduced to \$32,428 (175 percent of poverty).
- Tennessee: The state had a separate ARRA-funded child care scholarship program that provided assistance to low-income, working parents who had incomes up to \$43,968, who were not receiving child care benefits through any other state program, and who were referred to the program by their child care provider, from April 1, 2009 to September 30, 2010; the state did not accept new children into the program after April 1, 2010.
- Texas: Local workforce development boards set their own income limits within state guidelines. Some local boards allow families an extended year of child care assistance up to a higher income than the initial eligibility limit; however, this exit eligibility limit cannot exceed 85 percent of state median income. As of October 2011, the maximum income at which local boards can set their eligibility limits was expected to increase to \$46,773 (85 percent of state median income) to adjust for the 2011 state median income estimate.
- Utah: The income limits shown in the table take into account a standard deduction of \$100 per month (\$1,200 a year) for each working parent, assuming there is one working parent in the family, and a standard deduction of \$100 per month (\$1,200 a year) for all families to help cover any medical expenses. The stated income limits, in policy, were \$25,848 in 2001, \$30,792 in 2010, and \$32,844 in 2011. Also note that in 2010, families already receiving assistance could remain eligible up to a stated income limit of \$38,496. In 2011, the stated exit eligibility limit was \$41,052. As of October 2011, the stated income limit to qualify for assistance was expected to increase to \$33,079 (56 percent of state median income), and the stated exit eligibility limit was expected to increase to \$41,349 (70 percent of state median income) to adjust for the 2012 state median income estimate. The stated income limit to qualify for special needs care was \$46,740 in 2010 and \$49,848 in 2011.
- Virginia: The state has different income limits for different regions of the state. In 2001, the state had three separate regional income limits, which for a family of three were: \$21,948, \$23,400, and \$27,060. In 2010 and 2011, the state had four separate regional income limits: \$27,468, \$29,304, \$33,876, and \$45,780. As of October 2011, the income limits were expected to increase to \$27,804 (150 percent of poverty), \$29,652 (160 percent of poverty), \$34,284 (185 percent of poverty), and \$46,332 (250 percent of poverty) to adjust for the 2011 federal poverty level.
- West Virginia: In 2010 and 2011, families already receiving assistance could continue doing so until their income reached \$33,876. As of August 2011, the income limit to qualify for assistance was increased to \$27,792 (150 percent of poverty), and the exit eligibility limit was increased to \$34,284 (185 percent of poverty) to adjust for the 2011 federal poverty level.
- Wisconsin: In 2001, families already receiving assistance could continue doing so until their income reached \$29,256. In 2010, the exit eligibility limit was \$36,624 and in 2011, it was \$37,060.
- Wyoming: The income limits shown in the table for 2010 and 2011 take into account a standard deduction of \$200 per month (\$2,400 a year) for each working parent, assuming there is one working parent in the family. The stated income limits, in policy, were \$45,775 in 2010 and \$41,196 in 2011. As of April 2011, the stated income limit was increased to \$41,688 (225 percent of poverty) to adjust for the 2011 federal poverty level. Also note that, in 2001, families already receiving assistance could continue doing so until their income reached \$27,060. The state did not have a separate exit eligibility limit in 2010 or 2011.

TABLE 2: WAITING LISTS FOR CHILD CARE ASSISTANCE

State	Number of children or families on waiting lists as of early 2011	Number of children or families on waiting lists as of early 2010	Number of children or families on waiting lists as of December 2001
Alabama*	7,602 children	6,682 children	5,089 children
Alaska	No waiting list	No waiting list	588 children
Arizona*	4,626 children	11,391 children	No waiting list
Arkansas	14,000 children	2,727 children	8,000 children
California*	187,516 children	194,460 children	280,000 children (estimated)
Colorado*	5,205 children	1,455 children	Waiting lists at county level
Connecticut	No waiting list	No waiting list	No waiting list
Delaware	No waiting list	No waiting list	No waiting list
District of Columbia*	No waiting list	No waiting list	9,124 children
Florida*	67,988 children	66,947 children	46,800 children
Georgia*	Frozen intake	No waiting list	16,099 children
Hawaii	No waiting list	No waiting list	No waiting list
Idaho	No waiting list	No waiting list	No waiting list
Illinois	No waiting list	No waiting list	No waiting list
Indiana*	12,689 children	11,622 children	11,958 children
Iowa	No waiting list	No waiting list	No waiting list
Kansas	No waiting list	No waiting list	No waiting list
Kentucky	No waiting list	No waiting list	No waiting list
Louisiana	No waiting list	No waiting list	No waiting list
Maine	No waiting list	No waiting list	2,000 children
Maryland*	2,854 children	No waiting list	No waiting list
Massachusetts	19,451 children	22,426 children	18,000 children
Michigan	No waiting list	No waiting list	No waiting list
Minnesota*	4,572 families	3,728 families	4,735 children
Mississippi*	9,652 children	No waiting list	10,422 children
Missouri	No waiting list	No waiting list	No waiting list
Montana	No waiting list	No waiting list	Varies by resource and referral district
Nebraska	No waiting list	No waiting list	No waiting list
Nevada*	1,749 children	2,545 children	No waiting list
New Hampshire*	No waiting list	1,845 children	No waiting list
New Jersey*	8,559 children	2,931 children	9,800 children
New Mexico*	5,092 children	1,216 children	No waiting list
New York*	Waiting lists at local level	Waiting lists at local level	Waiting lists at local level
North Carolina	46,749 children	37,929 children	25,363 children
North Dakota	No waiting list	No waiting list	No waiting list
Ohio	No waiting list	No waiting list	No waiting list
Oklahoma	No waiting list	No waiting list	No waiting list
Oregon*	No waiting list	No waiting list	No waiting list
Pennsylvania*	11,726 children	5,022 children	540 children
Rhode Island	No waiting list	No waiting list	No waiting list
South Carolina	No waiting list	No waiting list	No waiting list
South Dakota	No waiting list	No waiting list	No waiting list
Tennessee*	Frozen intake	Frozen intake	9,388 children (and frozen intake)
Texas*	22,845 children	11,572 children	36,799 children
Utah	No waiting list	No waiting list	No waiting list
Vermont	No waiting list	No waiting list	No waiting list
Virginia*	11,018 children	9,670 children	4,255 children
Washington*	3,455 families	No waiting list	No waiting list
West Virginia	No waiting list	No waiting list	No waiting list
Wisconsin	No waiting list	No waiting list	No waiting list
Wyoming	No waiting list	No waiting list	No waiting list

* indicates notes found on page 22.

NOTES FOR TABLE 2: WAITING LISTS FOR CHILD CARE ASSISTANCE

Alabama: Data for December 2001 are not available so data from November of that year are used instead.

Arizona: The waiting list total for 2011 is from April 15, 2011.

California: The waiting list total for 2001 is an estimated figure. The waiting list totals for 2010 and 2011 are from June of each year.

Colorado: Waiting lists are kept at the county level, rather than at the state level. Four counties had waiting lists in 2001, but data on the total number of children on waiting lists in counties that had them are not available. In addition, four counties had frozen intake in 2001. The waiting list totals for 2010 and 2011 are the totals of reported county waiting lists.

District of Columbia: The waiting list total for 2001 may include some children living in the wider metropolitan area that encompasses parts of Maryland and Virginia.

Florida: The waiting list total for 2010 is from March 31, 2010.

Georgia: The state froze intake as of May 2011 for all families other than minor parents enrolled full time in school, grandparents over the age of 60 or receiving Supplemental Security Income (SSI) who are raising children under five, protective services cases, TANF applicants and recipients, and children with special needs.

Indiana: In addition to the waiting list, some counties froze intake in 2001.

Maryland: The waiting list was implemented on February 28, 2011.

Minnesota: The waiting list totals for 2010 and 2011 are from March of each year.

Mississippi: Families with incomes at or below 50 percent of state median income are not placed on the waiting list.

Nevada: Families with incomes below 130 percent of poverty are not placed on the waiting list.

New Hampshire: The waiting list total for 2010 is from April 19, 2010.

New Jersey: Data for 2001 are not available, so data from March 2002 are used instead. The waiting list total for 2010 is from April 22, 2010. The waiting list total for 2011 is from May 2011.

New Mexico: The waiting list total for 2011 is from March 2011. Families with incomes at or below 100 percent of poverty are not placed on the waiting list.

New York: Waiting lists are kept at the local district level and statewide data are not available. Each local district also has the authority to freeze intake and stop adding names to its waiting list.

Oregon: A waiting list was implemented in October 2010, but in January 2011 the state began serving all families on the waiting list each month, and in March 2011 the state stopped placing families on the waiting list.

Pennsylvania: The waiting list total for 2011 is from January 2011.

Tennessee: When the state reported its data in 2001, the state had frozen intake for families not in the TANF or Transitional Child Care programs. The waiting list total for 2001 represents the number of children on the waiting list when intake was closed. The state did not provide a similar number for 2010 or 2011, when intake was also frozen. TANF families, families transitioning from TANF, teen parents in high school, and children in foster care are exempt from the freeze.

Texas: Local workforce development boards maintain waiting lists. The totals in the table represent the aggregate number of children on waiting lists across all boards. The waiting list totals for 2010 and 2011 are from March of each year. In addition, some boards have frozen intake.

Virginia: Data for December 2001 are not available, so data from January of that year are used instead.

Washington: The state implemented a waiting list effective March 1, 2011. The waiting list total is from May 2011.

**TABLE 3A: PARENT COPAYMENTS FOR A FAMILY OF THREE
WITH AN INCOME AT 150 PERCENT OF POVERTY AND ONE CHILD IN CARE**

State	Monthly fee in 2011		Monthly fee in 2010		Monthly fee in 2001		Change 2010 to 2011		Change 2001 to 2011	
	As a dollar amount	As a percent of income	As a dollar amount	As a percent of income	As a dollar amount	As a percent of income	In dollar amount	In percent of income	In dollar amount	In percent of income
Alabama	Not eligible	Not eligible	\$197	9%	\$215	12%	N/A	N/A	N/A	N/A
Alaska	\$115	5%	\$67	3%	\$71	4%	\$48	2%	\$44	1%
Arizona	\$152	7%	\$152	7%	\$217	12%	\$0	0%	-\$65	-5%
Arkansas	\$365	16%	\$365	16%	\$224	12%	\$0	0%	\$141	4%
California	\$87	4%	\$87	4%	\$0	0%	\$0	0%	\$87	4%
Colorado	\$259	11%	\$253	11%	\$185	10%	\$6	0%	\$74	1%
Connecticut	\$139	6%	\$137	6%	\$110	6%	\$2	0%	\$29	0%
Delaware	\$220	9%	\$208	9%	\$159	9%	\$12	0%	\$61	1%
District of Columbia	\$102	4%	\$88	4%	\$91	5%	\$14	1%	\$11	-1%
Florida*	\$173	7%	\$173	8%	\$104	6%	\$0	0%	\$69	2%
Georgia	\$191	8%	\$190	8%	\$139	8%	\$1	0%	\$52	1%
Hawaii	\$405	17%	\$405	18%	\$38	2%	\$0	0%	\$367	15%
Idaho	Not eligible	Not eligible	Not eligible	Not eligible	Not eligible	Not eligible	N/A	N/A	N/A	N/A
Illinois	\$85	4%	\$186	8%	\$134	7%	-\$101	-4%	-\$49	-4%
Indiana*	\$208	9%	\$170	7%	\$154	8%	\$38	2%	\$54	1%
Iowa*	Not eligible	Not eligible	Not eligible	Not eligible	Not eligible	Not eligible	N/A	N/A	N/A	N/A
Kansas	\$207	9%	\$88	4%	\$162	9%	\$119	5%	\$45	0%
Kentucky	\$286	12%	\$242	11%	\$177	10%	\$44	2%	\$109	3%
Louisiana*	\$152	7%	\$152	7%	\$114	6%	\$0	0%	\$38	0%
Maine	\$231	10%	\$227	10%	\$183	10%	\$4	0%	\$48	0%
Maryland*	\$313	13%	\$313	14%	\$236	13%	\$0	0%	\$77	1%
Massachusetts	\$195	8%	\$195	9%	\$160	9%	\$0	0%	\$35	0%
Michigan	Not eligible	Not eligible	Not eligible	Not eligible	\$24	1%	N/A	N/A	N/A	N/A
Minnesota	\$76	3%	\$74	3%	\$53	3%	\$2	0%	\$23	0%
Mississippi*	\$155	7%	\$155	7%	\$105	6%	\$0	0%	\$50	1%
Missouri	Not eligible	Not eligible	Not eligible	Not eligible	Not eligible	Not eligible	N/A	N/A	N/A	N/A
Montana	Not eligible	Not eligible	\$227	10%	\$256	14%	N/A	N/A	N/A	N/A
Nebraska*	Not eligible	Not eligible	Not eligible	Not eligible	\$129	7%	N/A	N/A	N/A	N/A
Nevada	\$199	9%	\$149	7%	\$281	15%	\$50	2%	-\$82	-7%
New Hampshire	\$313	14%	\$309	13%	\$2	<1%	\$4	0%	\$311	13%
New Jersey	\$106	5%	\$51	2%	\$133	7%	\$55	2%	-\$27	-3%
New Mexico	\$159	7%	\$138	6%	\$115	6%	\$21	1%	\$44	1%
New York*	\$276	12%	\$267	12%	\$191	10%	\$9	0%	\$85	1%
North Carolina	\$232	10%	\$229	10%	\$159	9%	\$3	0%	\$73	1%
North Dakota	\$344	15%	\$336	15%	\$293	16%	\$8	0%	\$51	-1%
Ohio	\$207	9%	\$200	9%	\$88	5%	\$7	0%	\$119	4%
Oklahoma	\$189	8%	\$189	8%	\$146	8%	\$0	0%	\$43	0%
Oregon	\$343	15%	\$334	15%	\$319	17%	\$9	0%	\$24	-3%
Pennsylvania	\$173	7%	\$173	8%	\$152	8%	\$0	0%	\$21	-1%
Rhode Island	\$185	8%	\$113	5%	\$19	1%	\$73	3%	\$166	7%
South Carolina	\$87	4%	\$74	3%	\$77	4%	\$13	1%	\$10	0%
South Dakota	\$334	14%	\$165	7%	\$365	20%	\$169	7%	-\$31	-6%
Tennessee	\$160	7%	\$189	8%	\$112	6%	-\$29	-1%	\$48	1%
Texas*	\$116-\$301	5%-13%	\$114-\$251	5%-11%	\$165-\$256	9%-14%	\$2-\$50	0%-2%	-\$49-\$45	-4% - -1%
Utah	\$172	7%	\$172	8%	\$220	12%	\$0	0%	-\$48	-5%
Vermont	\$224	10%	\$224	10%	\$123	7%	\$0	0%	\$101	3%
Virginia	\$231	10%	\$228	10%	\$183	10%	\$3	0%	\$48	0%
Washington	\$146	6%	\$134	6%	\$87	5%	\$12	0%	\$59	2%
West Virginia	\$54	2%	\$54	2%	\$54	3%	\$0	0%	\$0	-1%
Wisconsin	\$217	9%	\$204	9%	\$160	9%	\$13	0%	\$57	1%
Wyoming	\$39	2%	\$39	2%	\$98	5%	\$0	0%	-\$59	-4%

* indicates notes found on page 25.

**TABLE 3B: PARENT COPAYMENTS FOR A FAMILY OF THREE
WITH AN INCOME AT 100 PERCENT OF POVERTY AND ONE CHILD IN CARE**

State	Monthly fee in 2011		Monthly fee in 2010		Monthly fee in 2001		Change 2010 to 2011		Change 2001 to 2011	
	As a dollar amount	As a percent of income	As a dollar amount	As a percent of income	As a dollar amount	As a percent of income	In dollar amount	In percent of income	In dollar amount	In percent of income
Alabama	\$78	5%	\$78	5%	\$65	5%	\$0	0%	\$13	0%
Alaska	\$45	3%	\$15	1%	\$14	1%	\$30	2%	\$31	2%
Arizona	\$65	4%	\$43	3%	\$65	5%	\$22	1%	\$0	-1%
Arkansas	\$0	0%	\$0	0%	\$0	0%	\$0	0%	\$0	0%
California	\$0	0%	\$0	0%	\$0	0%	\$0	0%	\$0	0%
Colorado	\$155	10%	\$155	10%	\$113	9%	\$0	0%	\$42	1%
Connecticut	\$62	4%	\$61	4%	\$49	4%	\$1	0%	\$13	0%
Delaware	\$100	7%	\$113	7%	\$55	5%	-\$13	-1%	\$45	2%
District of Columbia	\$44	3%	\$35	2%	\$32	3%	\$9	1%	\$12	0%
Florida*	\$106	7%	\$106	7%	\$69	6%	\$0	0%	\$37	1%
Georgia	\$130	8%	\$129	8%	\$21	2%	\$1	0%	\$109	7%
Hawaii	\$203	13%	\$203	13%	\$0	0%	\$0	0%	\$203	13%
Idaho	\$177	11%	\$153	10%	\$65	5%	\$24	1%	\$112	6%
Illinois	\$34	2%	\$87	6%	\$65	5%	-\$53	-3%	-\$31	-3%
Indiana*	\$77	5%	\$0	0%	\$0	0%	\$77	5%	\$77	5%
Iowa*	\$9	1%	\$9	1%	\$22	2%	\$0	0%	-\$13	-1%
Kansas	\$58	4%	\$0	0%	\$22	2%	\$58	4%	\$36	2%
Kentucky	\$176	11%	\$132	9%	\$97	8%	\$44	3%	\$79	3%
Louisiana*	\$152	10%	\$77	5%	\$49	4%	\$75	5%	\$103	6%
Maine	\$123	8%	\$121	8%	\$97	8%	\$2	0%	\$26	0%
Maryland*	\$200	13%	\$200	13%	\$90	7%	\$0	0%	\$110	6%
Massachusetts	\$141	9%	\$119	8%	\$40	3%	\$22	1%	\$101	6%
Michigan	\$24	2%	\$24	2%	\$24	2%	\$0	0%	\$0	0%
Minnesota	\$43	3%	\$42	3%	\$5	<1%	\$1	0%	\$38	2%
Mississippi*	\$80	5%	\$80	5%	\$47	4%	\$0	0%	\$33	1%
Missouri	\$110	7%	\$110	7%	\$43	4%	\$0	0%	\$67	4%
Montana	\$62	4%	\$42	3%	\$49	4%	\$20	1%	\$13	0%
Nebraska	\$61	4%	\$0	0%	\$30	2%	\$61	4%	\$31	1%
Nevada	\$50	3%	\$25	2%	\$0	0%	\$25	2%	\$50	3%
New Hampshire	\$122	8%	\$80	5%	\$0	0%	\$42	3%	\$122	8%
New Jersey	\$77	5%	\$0	0%	\$71	6%	\$77	5%	\$6	-1%
New Mexico	\$68	4%	\$62	4%	\$47	4%	\$6	0%	\$21	1%
New York*	\$6	<1%	\$4	<1%	\$4	<1%	\$2	0%	\$2	0%
North Carolina	\$154	10%	\$153	10%	\$106	9%	\$1	0%	\$48	1%
North Dakota	\$258	17%	\$252	17%	\$158	13%	\$6	0%	\$100	4%
Ohio	\$112	7%	\$101	7%	\$43	4%	\$11	1%	\$69	4%
Oklahoma	\$120	8%	\$120	8%	\$54	4%	\$0	0%	\$66	3%
Oregon	\$129	8%	\$125	8%	\$90	7%	\$4	0%	\$39	1%
Pennsylvania	\$87	6%	\$65	4%	\$65	5%	\$22	1%	\$22	0%
Rhode Island	\$31	2%	\$0	0%	\$0	0%	\$31	2%	\$31	2%
South Carolina	\$61	4%	\$48	3%	\$43	4%	\$13	1%	\$18	0%
South Dakota	\$0	0%	\$0	0%	\$0	0%	\$0	0%	\$0	0%
Tennessee	\$108	7%	\$90	6%	\$39	3%	\$18	1%	\$69	4%
Texas*	\$77-\$201	5%-13%	\$76-\$167	5%-11%	\$109-\$170	9%-14%	\$1-\$34	0%-2%	-\$32-\$31	-4% -- -1%
Utah	\$1	<1%	\$1	<1%	\$36	3%	\$0	0%	-\$35	-3%
Vermont	\$0	0%	\$0	0%	\$0	0%	\$0	0%	\$0	0%
Virginia	\$154	10%	\$152	10%	\$122	10%	\$2	0%	\$32	0%
Washington	\$50	3%	\$50	3%	\$20	2%	\$0	0%	\$30	2%
West Virginia	\$38	2%	\$38	2%	\$27	2%	\$0	0%	\$11	0%
Wisconsin	\$87	6%	\$78	5%	\$61	5%	\$9	1%	\$26	1%
Wyoming	\$0	0%	\$10	1%	\$10	1%	-\$10	-1%	-\$10	-1%

* indicates notes found on page 25.

NOTES FOR TABLES 3A AND 3B: PARENT COPAYMENTS

For a family of three, an income at 100 percent of poverty was equal to \$14,630 a year in 2001, \$18,310 a year in 2010, and \$18,530 a year in 2011.

For a family of three, an income at 150 percent of poverty was equal to \$21,945 a year in 2001, \$27,465 a year in 2010, and \$27,795 a year in 2011.

For states that calculate their fees as a percentage of the cost of care, it is assumed that the family was purchasing care at the state's maximum reimbursement rate for licensed, non-accredited center care for a four-year-old. Monthly fees were calculated from hourly, daily, and weekly fees assuming the child was in care 9 hours a day, 5 days a week, 4.33 weeks a month. Copayments for states with standard income deductions were determined based on adjusted income.

Changes in copayments were calculated using raw data, rather than the rounded numbers shown in the table.

Florida: Local coalitions have flexibility in setting copayments; the copayments in the table reflect the maximum copayment levels allowed under state policy and used by a local coalition.

Indiana: Copayments vary depending on how long the family has been receiving child care assistance, with families paying a higher percentage of income the longer they receive assistance. The copayments shown in the table assume it is the first year the family is receiving assistance.

Iowa: A family with an income at 150 percent of poverty would be eligible for assistance if the family were using special needs care. For this family, the copayment would have been \$174 per month in 2010 and \$152 per month in 2011. A family with an income at 100 percent of poverty that is using special needs care would have the same copayment as a family using standard care.

Louisiana: Data are not available for June 2001, so data from March 2000 are used instead.

Maryland: The state determines copayments based on maximum state reimbursement rates in the region where the family lives.

Mississippi: For children in foster care or protective services and children receiving SSI benefits, the copayment is \$10 per month.

Nebraska: A family with an income at 150 percent of poverty would be eligible if the family were transitioning from TANF. This family's copayment would have been \$160 per month in 2010 and \$183 per month in 2011.

New York: Local social services districts set copayments within a state-specified range; the copayments in the table reflect the maximum amount allowed in that range. Also note that data are not available for June 2001, so data from March 2000 are used instead.

Texas: Local workforce development boards set their own copayments within state guidelines. Also note that parents participating in the TANF work program (Choices) and the Food Stamp Employment and Training program are exempt from the copayment.

TABLE 4A: STATE REIMBURSEMENT RATES IN 2011

State	State reimbursement rates compared to market rates	Year when rates last updated	If state rate is lower than rate provider charges, is provider allowed to charge parents the difference?
Alabama	12th-51st percentile of 2009 rates	2009	Yes
Alaska*	50th/75th percentile of 2009 rates	2010	Yes
Arizona*	75th percentile of 2000 rates	2006	Yes
Arkansas*	75th percentile of 2006 rates	2006	Yes, for quality approved
California	85th percentile of 2005 rates	2006	Yes
Colorado*	Locally determined	Varies by locality	No
Connecticut	60th percentile of 2001 rates	2002	Yes
Delaware*	52%-75% of the 75th percentile of 2009 rates	2006	Yes
District of Columbia	75th percentile of 2001 rates	2006	No
Florida*	Locally determined	2009	Yes
Georgia	50th percentile of 2005 rates	2006	Yes
Hawaii*	At or below the 75th percentile of 2009 rates	2008	Yes
Idaho*	75th percentile of 2001 rates	2001	Yes
Illinois*	25th-100th percentile of 2010 rates	2011	Yes, unless contracted
Indiana	72nd percentile of 2007 rates	2007	Yes
Iowa	2% above the 75th percentile of 2004 rates	2008	No
Kansas	65th percentile of 2000 rates	2002	Yes
Kentucky	68th percentile of 2005 rates	2006	Yes
Louisiana*	Below the 50th percentile of 2010 rates	2007	Yes
Maine	75th percentile of 2008 rates	2009	No
Maryland	51st percentile of 2005 rates	2010	Yes
Massachusetts*	3rd-43rd percentile of 2011 rates	2009	No
Michigan	Below the 75th percentile of 2011 rates	2009	Yes
Minnesota*	30th-41st percentile of 2010 rates	2006	Yes
Mississippi*	36th-75th percentile of 2009 rates	2007	Yes
Missouri*	33rd percentile of 2008 rates	2008	Yes
Montana	75th percentile of 2009 rates	2009	Yes
Nebraska	60th percentile of 2008 rates	2009	No
Nevada	15th-65th of 2010 rates	2004	Yes
New Hampshire	50th percentile of 2007 rates	2009	Yes
New Jersey*	Below the 75th percentile of 2010 rates	2009	Yes, unless contracted
New Mexico*	Above or below the 75th percentile of 2009 rates	2007	No
New York	75th percentile of 2009 rates	2009	Yes
North Carolina*	Below the 75th percentile of 2007 rates	2007	Yes
North Dakota	85% of the 75th percentile of 2008 rates	2009	Yes
Ohio*	35th percentile of 2008 rates	2009	No
Oklahoma*	23rd-72nd percent of 2010 rates	2009	No
Oregon	75th percentile of 2006 rates	2007	Yes
Pennsylvania*	40th-72nd percentile of 2007 rates	2007	Yes
Rhode Island	75th percentile of 2002/2004 rates	2008	No
South Carolina	50th-75th percentile of 2009 rates	2007	Yes
South Dakota	75th percentile of 2009 rates	2009	Yes
Tennessee*	45th-60th percentile of 2006 rates	2008	Yes
Texas*	23rd-88th percentile 2009 rates	Varies by locality	Yes
Utah	30th-70th percentile of 2009 rates	2007	Yes
Vermont*	At or below the 75th percentile of 2008 rates	2010	Yes
Virginia*	20th-35th of 2009-2010 rates	2004/2009	Yes
Washington*	10th-84th percentile of 2010 rates	2008	No
West Virginia*	35th-85th percentile of 2011 rates	2009	No
Wisconsin	75th percentile of 2005 rates	2006	Yes
Wyoming	75th percentile of 2007 rates	2007	Yes

* indicates notes found on pages 30 and 31.

**TABLE 4B: STATE REIMBURSEMENT RATES COMPARED TO THE
75TH PERCENTILE OF CURRENT MARKET RATES IN 2011, 2010, AND 2001**

Rates equal to or above the 75th percentile of current market rates . . .

State	In 2011?	In 2010?	In 2001?
Alabama	No	No	Yes
Alaska*	No	No	No
Arizona	No	No	No
Arkansas	No	Yes	Yes
California	No	No	Yes
Colorado*	No	No	Yes
Connecticut	No	No	No
Delaware	No	No	No
District of Columbia	No	No	No
Florida*	No	No	Yes
Georgia	No	No	No
Hawaii	No	No	No
Idaho	No	No	Yes
Illinois*	No	No	No
Indiana	No	No	Yes
Iowa	No	No	No
Kansas	No	No	No
Kentucky	No	No	Yes
Louisiana	No	No	Yes
Maine	No	Yes	Yes
Maryland	No	No	Yes
Massachusetts	No	No	No
Michigan	No	No	No
Minnesota	No	No	Yes
Mississippi*	No	No	Yes
Missouri	No	No	No
Montana*	Yes	Yes	No
Nebraska	No	No	No
Nevada	No	No	Yes
New Hampshire	No	No	No
New Jersey*	No	No	No
New Mexico*	No	No	No
New York	Yes	Yes	Yes
North Carolina*	No	No	No
North Dakota	No	No	Yes
Ohio	No	No	No
Oklahoma	No	No	No
Oregon	No	No	No
Pennsylvania*	No	No	No
Rhode Island	No	No	Yes
South Carolina	No	No	No
South Dakota	Yes	Yes	Yes
Tennessee	No	No	No
Texas*	No	No	Yes
Utah	No	No	No
Vermont*	No	No	No
Virginia	No	No	No
Washington*	No	No	No
West Virginia*	No	No	Yes
Wisconsin	No	No	Yes
Wyoming	No	Yes	Yes

* indicates notes found on pages 30 and 31.

TABLE 4C: STATE REIMBURSEMENT RATE AMOUNT IN 2011 COMPARED TO MARKET RATE AMOUNT FOR CHILD CARE CENTERS

State	City/county/region*	Center care for a four-year-old					Center care for a one-year-old				
		Monthly state reimbursement rate	75th percentile of market rate	Year of market rate	Difference between state rate and 75th percentile	Percentage difference between state rate and 75th percentile	Monthly state reimbursement rate	75th percentile of market rate	Year of market rate	Difference between state rate and 75th percentile	Percentage difference between state rate and 75th percentile
Alabama	Birmingham Region	\$442	\$559	2009	-\$117	-21%	\$481	\$615	2009	-\$134	-22%
Alaska	Anchorage	\$650	\$690	2009	-\$40	-6%	\$850	\$850	2009	\$0	0%
Arizona	Maricopa County (Phoenix)	\$515	\$836	2010	-\$320	-38%	\$576	\$974	2010	-\$398	-41%
Arkansas	Pulaski County	\$457	\$468	2011	-\$11	-2%	\$552	\$552	2011	\$0	0%
California	Los Angeles County	\$744	\$787	2007	-\$44	-6%	\$1,029	\$1,228	2007	-\$199	-16%
Colorado	Denver	\$578	\$953	2009	-\$375	-39%	\$721	\$1,097	2009	-\$376	-34%
Connecticut	North Central Region	\$650	\$1,078	2011	-\$429	-40%	\$818	\$1,277	2011	-\$459	-36%
Delaware	New Castle County	\$478	\$782	2009	-\$304	-39%	\$539	\$888	2009	-\$349	-39%
District of Columbia	Citywide	\$632	\$1,170	2010	-\$538	-46%	\$862	\$1,460	2010	-\$598	-41%
Florida	Miami-Dade County	\$403	\$541	2009	-\$139	-26%	\$442	\$585	2009	-\$143	-24%
Georgia	Zone 1	\$494	\$715	2009	-\$221	-31%	\$602	\$815	2009	-\$212	-26%
Hawaii	Statewide	\$675	\$675	2009	\$0	0%	\$1,395	\$1,425	2009	-\$30	-2%
Idaho*	Boise Metro Area (Region IV)	\$492	\$602	2006	-\$110	-18%	\$594	\$667	2006	-\$73	-11%
Illinois*	Metropolitan Region (Group 1A)	\$768	\$963	2010	-\$196	-20%	\$1,091	\$1,245	2010	-\$154	-12%
Indiana	Marion County	\$693	\$792	2011	-\$99	-13%	\$814	\$905	2011	-\$91	-10%
Iowa*	Statewide	\$561	\$686	2010	-\$125	-18%	\$696	\$814	2010	-\$118	-15%
Kansas	Sedgwick County	\$444	\$695	2010	-\$251	-36%	\$661	\$823	2010	-\$162	-20%
Kentucky	Central Region	\$473	\$550	2009	-\$77	-14%	\$540	\$616	2009	-\$76	-12%
Louisiana	Statewide	\$379	\$487	2010	-\$108	-22%	\$401	\$541	2010	-\$141	-26%
Maine	Cumberland County	\$805	\$868	2010	-\$63	-7%	\$996	\$1,050	2010	-\$54	-5%
Maryland*	Region W	\$532	\$780	2009-2011	-\$247	-32%	\$844	\$1,084	2009-2011	-\$240	-22%
Massachusetts	Metro Boston Region	\$795	\$1,299	2011	-\$504	-39%	\$1,181	\$1,710	2011	-\$529	-31%
Michigan	Statewide	\$487	\$975	2010-2011	-\$488	-50%	\$731	\$1,000	2010-2011	-\$269	-27%
Minnesota	Hennepin County	\$859	\$1,052	2010	-\$193	-18%	\$1,154	\$1,403	2010	-\$249	-18%
Mississippi	Statewide	\$312	\$390	2011	-\$78	-20%	\$339	\$433	2011	-\$94	-22%
Missouri	St. Louis Area	\$348	\$840	2010	-\$492	-59%	\$596	\$1,124	2010	-\$528	-47%
Montana	Billings Region	\$624	\$624	2009	\$0	0%	\$714	\$714	2009	\$0	0%
Nebraska	Urban Counties	\$671	\$758	2010	-\$87	-11%	\$812	\$866	2010	-\$54	-6%
Nevada	Clark County	\$498	\$749	2010	-\$251	-34%	\$606	\$844	2010	-\$238	-28%
New Hampshire	Statewide	\$680	\$801	2009	-\$121	-15%	\$810	\$985	2009	-\$175	-18%
New Jersey	Statewide	\$573	\$974	2010	-\$401	-41%	\$695	\$1,127	2010	-\$432	-38%
New Mexico*	Metropolitan Counties	\$422	\$607	2009	-\$184	-30%	\$501	\$694	2009	-\$194	-28%
New York	New York City	\$940	\$940	2009	\$0	0%	\$1,464	\$1,464	2009	\$0	0%
North Carolina*	Mecklenburg County	\$702	\$853	2008-2009	-\$151	-18%	\$737	\$988	2008-2009	-\$251	-25%
North Dakota	Statewide	\$430	\$506	2007	-\$76	-15%	\$480	\$565	2007	-\$85	-15%
Ohio*	Cuyahoga County (Cleveland)	\$603	\$766	2010	-\$163	-21%	\$746	\$949	2010	-\$203	-21%
Oklahoma*	Enhanced Area Counties	\$438	\$510	2010	-\$72	-14%	\$601	\$671	2010	-\$70	-10%
Oregon*	Region A	\$705	\$840	2010	-\$135	-16%	\$894	\$1,038	2010	-\$144	-14%
Pennsylvania	Philadelphia	\$714	\$823	2010	-\$108	-13%	\$909	\$1,023	2010	-\$114	-11%
Rhode Island	Statewide	\$680	\$862	2009	-\$182	-21%	\$814	\$989	2009	-\$175	-18%
South Carolina	Statewide Urban Counties	\$476	\$554	2011	-\$78	-14%	\$528	\$624	2011	-\$96	-15%
South Dakota	Minnehaha County/Sioux Falls	\$614	\$614	2009	\$0	0%	\$722	\$722	2009	\$0	0%
Tennessee*	Top Tier Counties	\$515	\$590	2010	-\$75	-13%	\$598	\$654	2010	-\$56	-9%
Texas	Gulf Coast Workforce Development Area	\$507	\$676	2009	-\$169	-25%	\$713	\$921	2009	-\$209	-23%
Utah	Statewide	\$450	\$516	2009	-\$66	-13%	\$564	\$710	2009	-\$146	-21%
Vermont	Statewide	\$561	\$822	2010	-\$261	-32%	\$594	\$898	2010	-\$304	-34%
Virginia	Fairfax County	\$844	\$1,212	2009-2010	-\$368	-30%	\$1,212	\$1,416	2009-2010	-\$204	-14%
Washington	King County (Region 4)	\$673	\$1,053	2010	-\$380	-36%	\$802	\$1,255	2010	-\$452	-36%
West Virginia	Statewide	\$498	\$541	2011	-\$43	-8%	\$606	\$628	2011	-\$22	-3%
Wisconsin*	Zone D	\$779	\$914	2010	-\$134	-15%	\$1,005	\$1,156	2010	-\$152	-13%
Wyoming	Statewide	\$542	\$625	2010	-\$84	-13%	\$606	\$694	2010	-\$88	-13%

* indicates notes found on pages 30 and 31.

TABLE 4D: STATE TIERED REIMBURSEMENT RATES FOR CENTER CARE FOR A FOUR-YEAR-OLD IN 2011

State	City/county/region*	Number of tier levels (including base rate)	Reimbursement rate for lowest tier	Reimbursement rate for highest tier	Reimbursement rates between highest and lowest tiers	Difference between highest and lowest tiers	Percentage difference between highest and lowest tiers	75th percentile of market rate	Difference between rate at highest tier and 75th percentile	Percentage difference between rate at highest tier and 75th percentile
Alabama										
Alaska										
Arizona	Maricopa County (Phoenix)	2	\$515	\$567	N/A	\$52	10%	\$836	-\$269	-32%
Arkansas										
California										
Colorado*	Denver	6	\$578	\$773	\$619, \$643, \$706, \$740	\$196	34%	\$953	-\$179	-19%
Connecticut	North Central Region	2	\$650	\$682	N/A	\$32	5%	\$1,078	-\$396	-37%
Delaware										
District of Columbia	Citywide	3	\$632	\$909	\$771	\$277	44%	\$1,170	-\$261	-22%
Florida*	Miami-Dade County	2	\$403	\$483	N/A	\$81	20%	\$541	-\$58	-11%
Georgia										
Hawaii*	Statewide	2	\$675	\$710	N/A	\$35	5%	\$675	\$35	5%
Idaho										
Illinois*	Metropolitan Region (Group 1A)	5	\$668	\$801	\$701, \$734, \$768	\$134	20%	\$963	-\$162	-17%
Indiana	Marion County	2	\$693	\$762	N/A	\$69	10%	\$792	-\$30	-4%
Iowa										
Kansas										
Kentucky*	Central Region	4	\$462	\$523	See notes	\$61	13%	\$550	-\$27	-5%
Louisiana*	Statewide	5	\$379	\$455	\$390, \$409, \$430	\$76	20%	\$487	-\$33	-7%
Maine*	Cumberland County	4	\$805	\$1,007	\$846, \$886	\$201	25%	\$868	\$139	16%
Maryland*	Region W	4	\$532	\$671	\$585, \$633	\$139	26%	\$780	-\$109	-14%
Massachusetts										
Michigan										
Minnesota	Hennepin County	2	\$859	\$988	N/A	\$129	15%	\$1,052	-\$64	-6%
Mississippi	Statewide	2	\$312	\$339	N/A	\$27	9%	\$390	-\$51	-13%
Missouri	St. Louis Area	2	\$348	\$417	N/A	\$70	20%	\$840	-\$423	-50%
Montana	Billings Region	5	\$624	\$748	\$655, \$686, \$717	\$125	20%	\$624	\$125	20%
Nebraska	Urban Counties	2	\$671	\$736	N/A	\$65	10%	\$758	-\$22	-3%
Nevada*	Clark County	2	\$498	\$573	N/A	\$75	15%	\$749	-\$176	-24%
New Hampshire										
New Jersey	Statewide	2	\$573	\$604	N/A	\$31	5%	\$974	-\$370	-38%
New Mexico*	Metropolitan Counties	5	\$379	\$506	\$422, \$446, \$480	\$127	33%	\$687	-\$181	-26%
New York*	New York City	2	\$940	\$1,081	N/A	\$141	15%	\$940	\$141	15%
North Carolina*	Mecklenburg County	5	\$477	\$702	\$501, \$641, \$670	\$225	47%	\$853	-\$151	-18%
North Dakota										
Ohio	Cuyahoga County (Cleveland)	4	\$603	\$693	\$633, \$663	\$90	15%	\$766	-\$73	-9%
Oklahoma*	Enhanced Area Counties	4	\$292	\$487	\$373, \$438	\$195	67%	\$510	-\$23	-5%
Oregon										
Pennsylvania	Philadelphia	4	\$714	\$779	\$730, \$762	\$65	9%	\$823	-\$43	-5%
Rhode Island										
South Carolina	Statewide Urban Counties	5	\$390	\$624	\$455, \$476, \$580	\$234	60%	\$554	\$70	13%
South Dakota										
Tennessee*	Top Tier Counties	4	\$429	\$515	\$450, \$494	\$87	20%	\$590	-\$75	-13%
Texas	Gulf Coast Workforce Development Area	2	\$507	\$533	N/A	\$25	5%	\$676	-\$144	-21%
Utah										
Vermont	Statewide	6	\$561	\$786	\$589, \$617, \$673, \$730	\$224	40%	\$822	-\$37	-4%
Virginia										
Washington										
West Virginia	Statewide	3	\$498	\$585	\$541	\$87	17%	\$541	\$43	8%
Wisconsin*	Zone D	2	\$779	\$857	N/A	\$78	10%	\$914	-\$56	-6%
Wyoming										

* indicates notes found on pages 30 and 31.

NOTES FOR TABLES 4A, 4B, 4C AND 4D: REIMBURSEMENT RATES

State reimbursement rates are compared to the 75th percentile of market rates (the rate designed to allow families access to 75 percent of providers in their community) because federal regulations recommend that rates be set at this level.

A state is considered to have rates that were based on current market prices if the market survey used to set its rates was conducted no more than two years earlier (so, for example, rates used in 2011 are considered current if set at the 75th percentile of 2009 or more recent market rates).

States were asked to report reimbursement rates and the 75th percentile of market rates for their most populous city, county, or region. Monthly rates were calculated from hourly, daily, and weekly rates assuming the child was in care 9 hours a day, 5 days a week, 4.33 weeks a month. Differences between state reimbursement rates and the 75th percentile were calculated using raw data, rather than the rounded numbers shown in the table.

For states that pay higher rates for higher-quality care, the most common rate level (the level representing the greatest number of providers) for each state is used for the data analysis in Tables 4a, 4b, and 4c, unless otherwise indicated. The rates analyzed in the tables do not reflect other types of higher rates or rate enhancements, such as higher rates paid for care for children with special needs or care during non-traditional hours.

Alaska: Reimbursement rates are set at the 75th percentile of market rates for infant and toddler care and at the 50th percentile for all other categories of care.

Arizona: Reimbursement rates were set at the 75th percentile of 2000 market rates in 2006. On July 1, 2007, the state implemented a 5 percent increase in rates. On April 1, 2009, the state reversed this 5 percent increase and rates reverted to the level at which they had been set in 2006.

Arkansas: Only providers with state quality approval are allowed to charge parents the difference between the state reimbursement rate and the rate charged to private-paying parents.

Colorado: Each county determines its own reimbursement rates and whether to offer higher rates for higher-quality care.

Delaware: Providers are allowed to charge parents the difference between the state reimbursement rate and the private-pay rate under the Purchase of Care Plus option.

Florida: Reimbursement rates vary by local coalition. In addition, local coalitions may pay rates that are up to 20 percent higher than the basic rate for Gold Seal providers, a designation authorized by the legislature indicating higher-quality care and tied to accreditation. Miami-Dade reimburses Gold Seal providers at a rate that is 20 percent higher than the basic rate.

Hawaii: Reimbursement rates were last updated for licensed care in 2008 and for license-exempt care in 2010. Also note that the state has higher reimbursement rates for accredited center-based care for children over age 24 months through the time the children are eligible to enroll in kindergarten or junior kindergarten (usually age five by the end of the calendar year, depending on the child's birth date). The state does not have accredited rates for care for infants and toddlers or for family child care.

Idaho: Compared to 2008 market rates, reimbursement rates are at the 52nd percentile for child care centers and family child care homes and at the 48th percentile for group child care. Also note that Region IV includes Ada, Boise, Elmore, and Valley Counties.

Illinois: Reimbursement rates are not based on a percentile of market rates. Rates vary by age of child, type of care, and region of the state. Rates generally range from below the 25th percentile to above the 50th percentile of market rates, and in some areas of the state, exceed the 100th percentile. Reimbursement rates are reported for the Metropolitan Region (referred to as Group 1A), which includes Cook, DeKalb, DuPage, Kane, Kendall, Lake, and McHenry Counties. Also note that a provider that has a contract with the state is not permitted to ask families to pay the difference between the state reimbursement rate and the rate charged to private-paying parents.

Iowa: The state calculates reimbursements based upon units of care. A unit is a 5-hour block of time. The rates shown in the table are calculated assuming that if a family is using 9 hours of care, 5 days per week, 4.33 weeks per month, this would translate into 2 units of care per day for 22 days per month, or 44 units per month.

Kentucky: The state has four star levels. The amount of the bonus at each star level—for four-year-olds, \$7 to \$11 per month for two-star providers, \$11 to \$15 per month for three-star providers, and \$14 to \$18 per month for four-star providers—depends on the percentage of children served by the provider who are receiving child care assistance. For all levels, a licensed or certified provider may receive, to the extent funds are available, \$2 per day beyond the maximum rate if the provider is accredited. The highest rate shown in Table 4d assumes that the provider receives the maximum allowable bonus at the four-star level and is accredited.

Louisiana: Reimbursement rates are below the 50th percentile of market rates for most age groups and types of care; reimbursement rates for center care for infants, toddlers, and preschoolers are at the 15th percentile. Rates were last updated as of January 2007, except for the addition of rates for military providers on October 30, 2009. Also note that bonuses for higher-quality care are paid quarterly.

Maine: The tiered rates shown in the table reflect a temporary increase in differential rates that went into effect as of July 2010—from 2 percent to 5 percent above the base rate for Step 2, from 5 percent to 10 percent above the base rate for Step 3, and from 10 percent to 25 percent above the base rate for Step 4. The tiered rates reverted to their previous, lower levels as of July 30, 2011.

Maryland: The market rate survey was conducted at various points in time during the two years prior to January 2011. Also note that Region W includes Anne Arundel, Calvert, Carroll, Charles, and Prince George's Counties.

Massachusetts: Reimbursement rates are between the 3rd and 31st percentile of market rates for center-based care and between the 3rd and 43rd percentile for family child care.

Minnesota: Reimbursement rates for licensed centers are at approximately the 33rd percentile of market rates statewide (30th percentile in rural counties and 34th percentile in urban counties). Reimbursement rates for licensed family child care are at approximately the 38th percentile of market rates statewide (41st percentile in rural counties and 34th percentile in urban counties).

Mississippi: Reimbursement rates for licensed centers are at the 51st percentile of market rates for infants, 49th percentile for toddlers, 56th percentile for preschoolers, 62nd percentile for school-age care during the summer, and 75th percentile for special needs care. Reimbursement rates for family child care are at the 36th percentile for infants, 65th percentile for toddlers, 64th percentile for preschoolers, 75th percentile for school-age care during the summer, and 42nd percentile for special needs care.

Missouri: The state does not allow parents involved in the protective services system to be asked to pay the difference between the state reimbursement rate and the rate providers charge private-paying parents.

Montana: Data on policies as of 2001 are not available, so policies as of March 2000 are used instead.

Nevada: The state has established four levels in its tiered reimbursement system, but only two are currently in effect. The first level is for all licensed centers and family child care homes. The fourth level is for all accredited centers and family child care homes, which receive a reimbursement rate that is 15 percent above the rate for licensed care. The second and third levels, which will pay 5 percent and 10 percent, respectively, above the rate for licensed care, have not been implemented yet.

New Jersey: The percentile of the market rate at which reimbursement rates are set depends on the age of the child and category of care. Also note that centers that have direct contracts with the state are not permitted to ask families receiving child care assistance to pay the difference between the state reimbursement rate and the rate charged to private-paying parents. Data on policies as of 2001 are not available, so policies as of March 2000 are used instead.

New Mexico: Reimbursement rates range from 25 percent below the 75th percentile of market rates (for five-star school-age centers in metropolitan counties) to 11 percent above the 75th percentile (for five-star school-age group child care homes in rural counties). In August 2007, base reimbursement rates were increased for all licensed centers and group child care homes, and differential rates for four-star and five-star providers were increased as well. Reimbursement rates were decreased slightly in November 2010. Also note that the state's market rate survey differentiates between quality levels and the 75th percentile of market rates is obtained for providers at each quality level; in Table 4c, the reimbursement rate for the most common rate level is compared to the 75th percentile for that same quality level, and in Table 4d, the reimbursement rate for the highest quality level is compared to the 75th percentile for that quality level.

New York: Local social services districts may set reimbursement rates for accredited programs that are up to 15 percent higher than base reimbursement rates.

North Carolina: The state's market rate survey differentiates between quality levels and the 75th percentile of market rates is obtained for providers at each quality level. Reimbursement rates were increased on October 1, 2007, for three-, four-, and five-star licensed facilities if the market rate survey data supported a change, but were not brought up to the 75th percentile of 2007 market rates. Rates for one- and two-star licensed facilities are based on 2003 market rate survey data. In Table 4c, the reimbursement rate for the most common rate level is compared to the 75th percentile for that same quality level. In Table 4d, the reimbursement rate for the highest quality level is compared to the 75th percentile for that quality level.

Ohio: The state reduced its reimbursement rates to the 26th percentile of 2008 market rates as of July 31, 2011.

Oklahoma: Most reimbursement rates are between the 23rd and 72nd percentile of market rates, depending on the type of care, age of child, geographic region, and quality rating of the provider. Enhanced Area Rates apply to 19 out of 77 counties in the state (Caddo, Canadian, Cherokee, Cleveland, Comanche, Creek, Garfield, Kay, Logan, McCurtain, Oklahoma, Ottawa, Payne, Pittsburg, Pottawatomie, Tulsa, Wagoner, Washington, and Woods).

Oregon: Region A includes the Ashland, Bend, Corvallis, Eugene, Monmouth, and Portland areas.

Pennsylvania: Reimbursement rates for center care for infants, toddlers, and preschoolers are set at least at the 62nd percentile of market rates for full-time care and the 58th percentile for part-time care. Rates for center care in counties with a concentration of young children in poverty are set at least at the 72nd percentile for full-time care and the 60th percentile for part-time care. Rates for group or family child care for infants, toddlers, and preschoolers are set at least at the 55th percentile for full-time care and the 50th percentile for part-time care. Rates for center, group, or family child care for school-age children are set at least at the 40th percentile.

Tennessee: Reimbursement rates are at the 60th percentile of market rates for infants, 50th percentile for toddlers, and 45th percentile and above for all others. The rates shown in the table apply to the 21 counties that met the criteria for being paid the higher reimbursement rate (counties that were among the top 15 in average population in 2004 and/or among the top 15 in per capita income in 2002-2004). There is a separate set of reimbursement rates that apply to the remaining counties.

Texas: Local workforce development boards determine and update reimbursement rates at their own discretion. Average rates across board areas range from the 23rd to 88th percentile of market rates. Twenty-two of the 28 boards have updated reimbursement rates in at least one category of care within the last two years; the Gulf Coast Workforce Development Area updated its reimbursement rates in 2010. Also note that providers are allowed to ask parents to pay the difference between the state reimbursement rate and the private-pay rate, unless specifically prohibited by the local board or when the parent is exempt from having to pay a copayment or the parent's copayment is calculated to be zero.

Vermont: Reimbursement rates are below the 75th percentile of market rates for one- to three-star providers, at the 75th percentile for four-star providers, and above the 75th percentile for five-star providers.

Virginia: Reimbursement rates, depending on age group, are between the 20th and 35th percentile of market rates for licensed centers and between the 20th and 30th percentile for regulated family child care providers. Also note that infant rates were last increased in 2009 based on the 2008 market rate survey, and all other reimbursement rates were last increased in 2004.

Washington: Reimbursement rates for center care range from the 10th percentile of market rates for preschoolers in Region 4 to the 73rd percentile for school-age care in Region 4. Rates for family child care range from the 24th percentile for toddlers in Region 5 to the 84th percentile for school-age care in Region 1. Also note that rates were last updated in 2008, with the exception of the addition of an enhanced toddler rate for licensed family child care as of July 1, 2009.

West Virginia: The percentile of the market rate for reimbursement rates varies by the type of care, age of child, and quality tier. Also note that policies as of 2001 are not available, so policies as of March 2000 are used instead.

Wisconsin: Zone D is the most urban of the state's four zones and includes Madison and Milwaukee. The state groups its rates into four zones based on level of urbanization using Census data.

TABLE 5: ELIGIBILITY FOR CHILD CARE ASSISTANCE WHILE PARENTS SEARCH FOR A JOB IN 2011

State	<i>Parents receiving child care assistance when they lose a job</i>		<i>Parents applying for child care assistance while searching for a job</i>	
	Can they continue receiving assistance?	For how much time?	Can they qualify for assistance?	For how much time?
Alabama	No	N/A	No	N/A
Alaska*	Yes	80 hours	Yes	80 hours
Arizona*	Yes	60 days	No	N/A
Arkansas*	Yes	45 days	Yes	45 days
California*	Yes	60 days	Yes	60 days
Colorado*	Yes	180 days	Yes	180 days
Connecticut*	Yes	Until end of following month	No	N/A
Delaware	Yes	3 months	No	N/A
District of Columbia*	Yes	3 months	No	N/A
Florida*	Yes	30 days	No	N/A
Georgia*	Yes	8 weeks	No	N/A
Hawaii*	Yes	30 days	Yes	30 days
Idaho*	Yes	Until end of month	No	N/A
Illinois*	Yes	90 days	No	N/A
Indiana*	Yes	13 weeks	No	N/A
Iowa*	Yes	30 days	Yes	30 days
Kansas*	Yes	Until end of month	No	N/A
Kentucky	Yes	4 weeks	No	N/A
Louisiana	No	N/A	No	N/A
Maine*	Yes	8 weeks	No	N/A
Maryland*	Yes	30 days	No	N/A
Massachusetts*	Yes	8 weeks	Yes	8 weeks
Michigan	No	N/A	No	N/A
Minnesota*	Yes	240 hours	Yes	240 hours
Mississippi*	Yes	60 days	Yes	60 days
Missouri*	Yes	4 weeks	Yes	8 weeks
Montana*	Yes	30 days	No	N/A
Nebraska*	Yes	2 months	Yes	2 months
Nevada*	Yes	2 weeks	Yes	2 weeks
New Hampshire*	Yes	40 days	Yes	40 days
New Jersey*	Yes	90 days	No	N/A
New Mexico*	Yes	30 days	No	N/A
New York*	Yes	4 weeks	Locally determined	See notes
North Carolina*	Yes	30 days	No	N/A
North Dakota*	Yes	8 weeks	Yes	8 weeks
Ohio*	Yes	30 days	No	N/A
Oklahoma*	Yes	30 days	No	N/A
Oregon*	Yes	Until end of month	No	N/A
Pennsylvania*	Yes	60 days	No	N/A
Rhode Island*	Yes	21 days	No	N/A
South Carolina	Yes	30 days	No	N/A
South Dakota*	Yes	30 days	No	N/A
Tennessee*	Yes	30 days	Yes	30 days
Texas*	Yes	4 weeks	No	N/A
Utah*	Yes	150 hours	Yes	150 hours
Vermont*	Yes	1 month	Yes	1 month
Virginia	No	N/A	No	N/A
Washington*	Yes	56 days	No	N/A
West Virginia	Yes	30 days	No	N/A
Wisconsin	Yes	Until end of month	No	N/A
Wyoming*	No	N/A	No	N/A

* indicates notes found on pages 33 and 34.

NOTES FOR TABLE 5: ELIGIBILITY FOR CHILD CARE ASSISTANCE WHILE PARENTS SEARCH FOR A JOB

The table reflects policies that apply to families not receiving TANF; policies may differ for families receiving TANF.

Alaska: Parents can receive child care assistance while searching for a job for up to 80 hours in a 12-month period.

Arizona: Each parent in a family receiving child care assistance can continue to receive it while searching for a job for up to two 30-day periods or one 60-day period in each 12-month period.

Arkansas: In addition to the 45 days parents may receive child care assistance while searching for a job, a one-time extension of 15 consecutive calendar days may be granted if needed to secure employment. A handwritten statement listing job contacts or documentation of the job search must be provided in order to receive the extension.

California: Parents can receive child care assistance while searching for a job for up to 60 working days during the contract period; child care assistance is provided for no more than 5 days per week and less than 30 hours per week.

Colorado: The amount of time parents could receive child care assistance while searching for a job was expanded from 30 days to 180 days (in a 12-month period) as of April 2009 using ARRA funds. The state reverted to the previous policy as of July 2011.

Connecticut: Parents receiving child care assistance can continue to receive it until the end of month following the month of a job loss if they are actively seeking another job and payment is needed to prevent the loss of a slot in a school-based or licensed child care program and the child continues to attend care.

District of Columbia: Parents receiving child care assistance can continue to receive it for up to 3 months from the effective date of employment termination if they lost a job due to a reduction in force by the employer and through no fault of the employee.

Florida: Local early learning coalitions, which administer the child care assistance program, may seek a waiver to the 30-day time limit and allow parents to continue to receive child care assistance while searching for a job for up to 60 or 90 days. Parents who qualified for unemployment compensation could receive child care assistance for up to 6 months until the expiration of ARRA funds.

Georgia: Parents receiving child care assistance who lose a job due to a company closing or layoffs may continue to receive child care assistance while searching for a job for up to 8 weeks. After the 8-week time period, a parent's case may be suspended for up to 12 weeks. Under a separate ARRA-funded program that started in 2009 and ended in September 2010, parents could qualify or continue to receive child care assistance while searching for a job for up to 12 weeks.

Hawaii: Parents can receive child care assistance for up to 30 consecutive days within a 12-month period from the date that they lose a job.

Idaho: Parents searching for a new job can continue to receive child care assistance only during the month in which they lost their previous job.

Illinois: The state used ARRA funds to increase the amount of time parents could continue to receive child care assistance while searching for a job from 30 days to 90 days, as of November 1, 2009. The state planned to revert to its previous policy of limiting the time parents can continue to receive child care assistance while searching for a job to 30 consecutive days, with a maximum of three job searches allowed in a 12-month period, as of October 2011.

Indiana: Parents receiving child care assistance can continue to receive it while searching for a job for up to 13 weeks per year.

Iowa: Parents can receive child care assistance while searching for a job for up to 30 consecutive days, once within a 12-month period.

Kansas: Parents receiving child care assistance must report the loss of a job within 10 days, and the caseworker must provide 10 days notice that the case will be closed. Cases always close the last day of the month.

Maine: Parents receiving child care assistance can continue to receive it while searching for a job for up to 8 weeks within a 6-month period.

Maryland: Parents receiving child care assistance can continue to receive it while searching for a job for up to 30 consecutive days.

Massachusetts: Parents receiving child care assistance can continue to receive it while searching for a job for an additional 4 weeks (on top of the initial 8 weeks allowed) within a 52-week period if they were laid off or there are other extraordinary circumstances.

Minnesota: Parents can receive child care assistance while searching for a job for up to 240 hours per calendar year.

Mississippi: Parents can receive child care assistance while searching for a job for up to 60 days from the last date of employment.

Missouri: As of May 1, 2010, parents applying for child care assistance could receive assistance while searching for a job for up to 8 weeks. This policy was expected to be in effect while ARRA funding was available or until September 30, 2011, whichever occurred first.

Montana: Parents receiving child care assistance can continue to receive it for up to 30 calendar days following the loss of a job. Parents must report a change in employment status within 10 days.

Nebraska: Parents can receive child care assistance while searching for a job for up to 2 calendar months, with a possible extension.

Nevada: Parents can receive child care assistance while searching for a job for up to 2 weeks in a 12-month calendar year.

New Hampshire: Parents can receive child care assistance while searching for a job for part time (16 to 30 hours per week) for up to 40 days in a 6-month period.

New Jersey: Parents receiving child care assistance can continue to receive it after losing a job for up to 90 days from the date of a layoff notice. Parents cannot receive child care assistance while searching for a job if they voluntarily quit employment.

New Mexico: Parents receiving child care assistance can continue to receive it while searching for a job for up to 30 calendar days immediately following the loss of employment, or graduation from high school or undergraduate school.

New York: Local social services districts may allow parents receiving assistance to continue to receive it while searching for a job for up to 2 weeks, or 4 weeks if child care arrangements would be lost if child care assistance was not continued. Local districts may also choose to allow parents to qualify or continue to receive child care assistance while searching for a job for up to 6 months if the district has funds available. Child care assistance is only provided for the portion of the day a parent documents as directly related to seeking employment. Local districts may impose additional limitations on child care assistance for parents to search for a job.

- North Carolina: From July 1, 2009 until June 30, 2010, parents could qualify or continue to receive child care assistance while searching for a job for up to 6 months. As of July 1, 2010, this policy ended for all new applicants and the state reverted to its previous policy. Under this policy, currently in effect, parents receiving child care assistance can continue to receive it while searching for a job for up to 30 days, and can request a 30-day extension; parents cannot qualify for child care assistance while searching for a job.
- North Dakota: Parents can receive child care assistance while searching for a job for up to 8 weeks in a calendar year for 20 hours a week.
- Ohio: Parents receiving child care assistance can continue to receive it while searching for a job for up to 30 days if they are scheduled to return to work, school, or training within that timeframe.
- Oklahoma: Parents can continue to receive child care assistance for up to 30 calendar days while searching for a job if they had been receiving child care assistance for at least 30 days prior to losing a job or completing an education program. Parents may be approved to receive child care assistance while searching for a job no more than twice per calendar year, and must have been employed or going to school for at least 90 calendar days between approval periods.
- Oregon: Parents receiving child care assistance can continue to receive it while searching for a job until the end of the month in which the case closes after being given a 10-day notice of closure. Depending on when a parent reports losing a job, this could be the end of the same month in which the job was lost or the following month.
- Pennsylvania: Parents who voluntarily leave a job can continue to receive child care assistance during a 13-day notification period. Parents who involuntarily lose a job can continue to receive child care assistance for up to 60 days, in addition to the 13-day notification period.
- Rhode Island: Parents receiving child care assistance can continue to receive it for up to 21 consecutive days from the beginning of a period of temporary unemployment resulting from a job loss or transition between jobs.
- South Dakota: Parents receiving child care assistance can continue to receive it while searching for a job for up to 30 days from the last date of employment. From June 2009 until September 30, 2010, the state used ARRA funds to allow parents to qualify or continue to receive child care assistance while searching for a job for up to 2 months.
- Tennessee: Parents receiving child care assistance can continue to receive it while searching for a job for up to 30 consecutive calendar days beginning with the day following the last day of employment. Parents applying for child care assistance while searching for a job can receive assistance for up to 30 calendar days from the date of application.
- Texas: Parents receiving child care assistance can continue to receive it while searching for a job for up to 4 weeks in a federal fiscal year.
- Utah: Parents can receive child care assistance for up to 150 hours while searching for a job under the Kids-In-Care Program.
- Vermont: Parents can request two additional one-month extensions in a 12-month period to receive child care assistance while searching for a job. These extensions may be granted when certain conditions are met, such as a diligent and good faith effort to obtain paid work.
- Washington: Parents receiving child care assistance can continue to receive it while searching for a job for a period of up to 28 days twice per year or a period of up to 56 days once per year.
- Wyoming: From June 2009 through June 2010, the state used ARRA funds to allow parents to qualify or continue to receive child care assistance while searching for a job for up to 60 days.

The National Women's Law Center is a nonprofit organization that has been working since 1972 to advance and protect women's legal rights. The Center focuses on major policy areas of importance to women and their families, including employment, education, health and reproductive rights, and family economic security. The Center is grateful for the continued assistance of the state child care administrators who provided the information included in this report. The authors also thank Nancy Duff Campbell, Co-President, and Joan Entmacher, Vice President for Family Economic Security, for their comments.

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The findings and conclusions of this report are those of the authors alone, and do not necessarily reflect the opinions of these funders.



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Interests:



Child Care Subsidy Helps Parents, Children, and Providers

The Child Care Subsidy provides a critical safety net for families and children. By providing a voucher to help low-income parents pay for child care, the subsidy allows parents to work and children to learn and develop skills in child care. The subsidy also provides a financial underpinning for the child care system, especially in low-income neighborhoods.

[National Women's Law Center's recent study](#) provides a state-by-state overview of five key features that determine how well the subsidy fulfills these functions. Here's a quick recap of how Maryland's program is doing:

"The child care subsidy shows me that I can, with the assistance of the state, afford great quality child care for my son," says Taria Franklin of Baltimore, seen here with Kenneth, age 3.

1. Income eligibility limits to qualify for child care assistance

Income limits for Maryland's Child Care Subsidy (formerly known as Purchase of Care) have not kept pace with inflation. So, in inflation-adjusted dollars, the income eligibility limit has gotten lower. Currently, eligibility is up to about 165% of the Federal Poverty Guideline (\$29,990 for a family of three).

2. Waiting list for child care assistance

The Child Care Subsidy is not an entitlement, so the program does not necessarily have sufficient funds to serve all eligible families at all times. Priority is given to families participating in Temporary Assistance for Needy Families (welfare) and to children with disabilities.

Maryland instituted a waiting list in February 2011, thereby closing enrollment to all except families who get priority -- those receiving Temporary Cash Assistance and income-eligible families with children who have disabilities. At this time, more than 12,700 children in Maryland are on the waiting list.

3. Parent copayments

Parents are also assigned a co-payment, based on their incomes and cost of care in their regions. Over the past ten years, co-payments have held fairly steady for some families but increased for others, notably those living at or below the poverty level.

4. Reimbursement rates

The State sets a rate at which it will reimburse child care providers. Like most states, Maryland has set the rate far below current market rates. As a result, families using the child care subsidy only have access to those child care programs willing to accept below-market remuneration.

5. Eligibility for parents searching for a job

If a parent is receiving the Child Care Subsidy and loses his or her job, Maryland permits him or her to continue to receive The Child Care Subsidy for 30 days while looking for a new job.

For detailed information on changes over the past ten years and to see how Maryland compares to other states, read [NWLC's report](#).

Other Child Care Subsidy facts:

For FY2012, Maryland's budget allocation for the subsidy program is \$87,800,000.

As of March 2011, more than 26,000 children in Maryland were receiving care subsidized by the Child Care Subsidy program.

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Race to the Top – Early Learning Challenge Fund

EXECUTIVE SUMMARY

Introduction

Maryland stands ready to make the maximum use of Race to the Top Early Learning Challenge (RTT-ELC) funding to ensure that Maryland’s young children are supported to overcome school readiness gaps. The Maryland State Department of Education (MSDE) will be the fiscal agent and its Division of Early Childhood Development (DECD) will take the lead in implementing the funds if awarded. The Governor’s State Advisory Council on Early Care and Education will advise MSDE on the implementation of the RTT-ELC State Plan. The participating state agencies, including the Maryland Department of Health and Mental Hygiene (DHMH), the Maryland Department of Human Resources (DHR), and the Governor’s Office for Children (GOC), will support the State Plan through collaboration. Maryland is currently implementing a Race to the Top reform agenda for K-12 education. If awarded, Maryland would create a seamless Birth to Grade 12 reform agenda.

List of projects to enhance the early childhood infrastructure in Maryland

To fully achieve implementation of the State Plan, Maryland has designed innovative projects to build, support, and reinforce the early childhood infrastructure of a successful state system. The RTT-ELC State Plan will move the early childhood education in Maryland from a good system to a great system. The State Plan responded to the following scope of the RTT-ELC grant.

- High quality, accountable programs;
- Promoting early learning and development outcomes for children;
- A great early childhood education workforce; and
- Measuring outcomes and progress.



Race to the Top – Early Learning Challenge Fund

Maryland’s RTT-ELC State Plan proposes ten specific projects which address the scope of the grant. The projects are:

Project #1

Creating Local Early Childhood Councils

Project #2

Implementing a Tiered Quality Rating and Improvement System for all early learning and development programs, named Maryland EXCELS.

Project #3

Establishing an Early Childhood Breakthrough Center that provides quality capacity building for programs participating in Maryland EXCELS and expands models of excellence to attendance areas of Title 1 schools in school improvement.

Project #4

Revising the early learning standards to align with Common Core Standards.

Project #5

Professional Development to promote the use of the early learning standards by all early learning and development programs.

Project #6

Refining Maryland’s comprehensive assessment system in early childhood, including the Maryland Model for School Readiness (MMSR) Kindergarten Assessment.

Project #7

Addressing the health and behavioral needs of children through a coherent set of early intervention and prevention programs.

Project #8

Creating a Coalition of Family Engagement and three statewide outreach efforts to promote family engagement in being their children’s first teacher.



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Project #9

Establishing Leadership in Early Learning Academies for educators from school and early childhood programs to promote rigorous, yet developmentally appropriate teaching practices for prekindergarten through grade 2.

Project #10

Enhancing the existing early childhood data system to link with the Maryland Longitudinal Data System.

Executive Summary – Supplemental Information

PROJECT #1– LOCAL EARLY CHILDHOOD COUNCILS

Local Early Childhood Councils – Create 24 local early childhood councils to support the implementation of the State Advisory Council on Early Care and Education. Annie E. Casey Foundation will invest in and partner with Maryland to coordinate implementation over 12 months with the goal of developing local plans that assist in the implementation of Maryland’s RTT-ELC state plan. The Casey Foundation will provide leadership facilitation to the councils.

PROJECT #2- MARYLAND EXCELS

Enhancement of Maryland EXCELS: Field test, maintain, enhance, and administer a full-scale implementation of the Tiered Quality Rating and Improvement System (of Maryland EXCELS) through a qualified vendor. Proposed funding is requested for:

- Field testing, a training institute, online professional development, program coordination, hosting of program data in a secure environment, and interface with the Maryland Longitudinal Data System. The Maryland EXCELS web-site was designed to operate as a fully online, web-based system. There are two sides to the web-based system: the public portal and the internal management system.



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- Stipends for reviewers for the Environment Rating Scales (ERS), Program Administration Scales (PAS) for child care centers, and the Business Administration Scales (BAS) for family child care homes. Funding detail is included in Budget Narrative Part II.
- Program Coordinators to review documentation for early learning and development programs in order to meet Maryland EXCELS standards. Funding detail for these positions is included in Budget Narrative Part II.

Promoting Maryland EXCELS: Support public and private early learning and development programs, including community programs to participate in Maryland EXCELS. Funding for a qualified vendor is requested to:

- Bring Maryland EXCELS to full scale following field tests and finalization of standards and processes;
- Develop program specialty endorsement standards in the areas of: Asthma and Allergy Awareness and Practices, Health and Wellness Initiatives, Inclusive Programming Practices, and Dual Language. Provide bonuses for providers meeting those standards and professional development for providers seeking to meet those standards;
- Ensure technical data integration amongst systems sharing child level data;
- Recruit programs for participation;
- Develop and conduct a family/public awareness marketing campaign;

Validating/Evaluation: To evaluate the effectiveness of the Maryland EXCELS Model, Maryland proposes a study, to be conducted by a qualified vendor, which will focus on project implementation and:

- Validate whether the check levels of Maryland EXCELS differentiate levels of program quality, and



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- Assess the relationship between the quality ratings and children’s learning and school readiness, involving the Class Assessment Scale (CLASS).

PROJECT #3 – QUALITY CAPACITY BUILDING:

Early Childhood Breakthrough Center Approach: Implementation of quality capacity building support for early learning and development participating in Maryland EXCELS, with a special focus on those programs located in Title 1 attendance areas, and in particular, in the schools in school improvement, i.e., areas with the highest concentration of children with high needs.

Community Hubs: Establish two (2) Community Hubs to provide and coordinate existing services in the community for families with children, birth-5, in two highly under-resourced communities in Baltimore City through an Early Learning Intermediary Organization.

Preschool for All: Maryland proposes to establish five (5) Preschool for All sites, where prekindergarten programs that are integrated in child care or Head Start settings, in Title 1 attendance areas. The site selection will be selected through competitive procurement process.

Judy Center Partnership Expansion: Establish two (2) Judy center satellite sites at Title 1 schools in school improvement in Baltimore City and Prince George’s County and expand comprehensive services for children, birth to six, from the existing Judy Center Partnership sites to other Title 1 schools.

Extended option - Individualized Family Service Plan project: Coaching and mentoring program for early learning and development programs serving children from three to five years old who have an Individualized Education Plan (IEP) or an



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Individualized Family Service Plan (IFSP) under the extended option provisions of IDEA.

PROJECT #4 – PROMOTING THE USE OF STATEWIDE, HIGH QUALITY EARLY LEARNING AND DEVELOPMENT STANDARDS

Guide to Early Childhood Pedagogy: Development of an instructional guide for early learning and development programs to support the use of early learning standards and assessment. Costs pertain to printing and web-based resources only.

Promoting Use of early learning standards

- Implement two (2) field tests of the Preschool STEM program to 150 classrooms (Maryland EXCELS participants).
- Expand of the language program, VIOLETS, to 150 classrooms (Maryland EXCELS participants).

PROJECT #5 – PROFESSIONAL DEVELOPMENT FOR DEVELOPING EARLY LEARNING STANDARDS

Maryland Model for School Readiness (MMSR) professional development: Conduct on-going professional development for a total of 3,100 early education educators on early learning practices to support the early learning standards.

PROJECT #6– COMPREHENSIVE ASSESSMENT SYSTEM

Formative assessment, birth to 72 months, Kindergarten Entry Assessment (KEA), and Professional Development to Support Developmental Screening: Revision of the existing formative assessments (36-72 months), development of new formative assessments (birth to 36 months), and the revision of the existing KEA to align with the State adopted Common Core Standards. Assessment program will feature a transmedia technology platform for assessment administration, including linkage to reporting data



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base and to on-line resources for early learning. Also included will be the development of training modules and professional development for the administration of state-recommended developmental screening instruments. This project will be done in collaboration with the State of Ohio.

PROJECT #7 - CHILD DEVELOPMENT INNOVATIONS

Best Beginnings Developmental Screen: Field test and reporting on screening instrument for children, birth to three, developed by the University of Maryland.

Developmental Screenings: As included in Project #6 above, Maryland will introduce the use of four state-recommended valid developmental screening instruments for children birth-five years. Additionally, a qualified vendor will conduct training of pediatricians on state- recommended developmental screening instruments.

Maryland Early Childhood Mental Health Consultation in Pediatric Care: Build mental health capacity in primary care (pediatrics and family practice), including early childhood mental health detection and intervention. In the first year, 20 primary care providers will participate in a pilot in two counties, and there will be gradual uptake over the life of the grant to expand participation statewide.

The Social and Emotional Foundation of Learning (SEFEL): Development and implementation of an on-line data collection and analysis system for SEFEL training participation and outcomes. The system is designed to interface with Maryland’s Longitudinal Data System/Early Childhood Data Warehouse.

PROJECT #8– FAMILY ENGAGEMENT AND SUPPORT

The Coalition for Family Engagement: Creation of a Coalition from all family engagement organizations to develop a Maryland-specific Family, Parent, and



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Community Engagement Framework and to implement strategies for evidence-based practices and training for all early learning and development programs and family engagement organizations.

Family Engagement in Libraries: Creation of Family Advisory Councils in all local libraries located in or near Title1 attendance areas, including the establishment of Family Information Centers and resource kits for families of young children.

Parent-Child Learning Parties:– Expand existing project to 25 percent of all early learning and development programs at Title 1 attendance areas. Learning Parties are interactive, hands-on, parent/child events that promote the development of school readiness skills of young children.

Expand Statewide the Reach Out and Read Project of the American Academy of Pediatrics: Primary care physicians/pediatricians will work with families around family literacy, child development, and school readiness through Reach out and Read. Pledges will be solicited from corporations and foundations by the State Advisory Council on Early Care and Education for books. Over the four years of the grant, it is estimated that over 46,100 children will receive books and their parents will receive direction from primary care physicians/pediatricians.

PROJECT #9 – LEADERSHIP IN EARLY LEARNING ACADEMY

Leadership Learning Academies: Academies would enable early childhood educators working with children ages 4 to 7 (prekindergarten, including Head Start and child care, through 2nd grade) in sixty (60) Title I schools with a significant high needs population, to learn rigorous, yet developmentally appropriate instructional practices that support the Common Core Standards. The Academies will provide one-day sessions, with a half-



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day follow-up session each year, to be held throughout the state regionally in Title I schools with high need populations.

PROJECT #10 – EARLY LEARNING DATA SYSTEM

Professional Development: With funding from this grant, the Child Care Automated Tracking System (CCATS) portal will be expanded with services for early education educators. This will include professional development plans and applications for grants and incentives. Additionally, an online application for training approval will be provided to the early care and development community.

Grants and Provider Benefits: A CCATS module that is not in use will be activated to include grant funds management and provider benefits in one web-based location and make data available for analysis in the Maryland Longitudinal Data System.

Attendance Reporting: A secure system for Point of Service Attendance Reporting will be developed, piloted in five locations, and then implemented statewide for parents to sign their children in and out of child care licensed programs for each day of attendance. Through an interface, data will be used to prepare subsidy invoices.



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Interests:



Maryland Grandparents More Important to Their Grandchildren than Ever

In the past, grandparents often stepped in when parents were absent, ill, or battling addiction. But today, there are other reasons grandparents are playing a larger role in their grandchildren's lives.

Two major trends have recently emerged. First, the 78 million baby boomers, born between 1946 and 1964, began turning 65 this year; there are more grandparent-aged citizens than ever before. Grandparents now make up one in four adults, and the grandparent population is growing at twice the rate of the rest of the American public.

The other trend is an unfortunate one: families – especially families with young children – have been hit especially hard by the recession. More than ever, young parents need the financial support that grandparents can provide.

Many grandparents are playing a crucial financial role for their grandchildren by helping with health care payments, educational needs, and saving for their grandchildren's future.

"Grandparents have become the family safety net, and I don't see that changing any time soon," said Amy Goyer, a family expert at AARP. "While they continue to enjoy their traditional roles, including spending on gifts for grandchildren, I see them increasingly paying for the extras that parents are struggling to keep up with – sports, camps, tutoring or other educational needs, such as music lessons."

Some grandparents are playing still a larger role. According to the 2010 Census, 8.3% of children under 5 in Maryland are living with a grandparent who is identified as the head of household. That's up from 6.3% who lived in such households in 2000. The rate of grandparent-headed households is the highest it has been in 40 years; some population experts say it has never been higher.

Peter Frances, a population analyst for MetLife Mature Market Institute, says the stereotype of grandparents as frail, receding, and dependent is changing. They are more likely than previous generations to be in the workforce at a later age, and they spend billions of dollars each year on infant food, clothes, toys, games, tuition and supplies for grandchildren.

Last year, unemployment among workers ages 25 to 34 was double that of Americans aged 55 to 64. So, a lot of young parents need help. Recent grandparents, many of whom remain employed, are sometimes able to provide it. "There is not much doubt that the recent recession has brought grandparents and grandchildren together," said Peter Francese.

Read more about the evolving role of grandparents – [see the original story from the Associated Press](#)

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Interests:



MFN provides platform for Dr. Grasmick's belief in the importance of the early years

"If I could do away with twelfth grade for most students and spend the money on little kids, that's what I'd do," says Dr. Nancy Grasmick, restating her longstanding belief that the years from birth to age five set the stage for later learning.

During her tenure as State Superintendent of Schools, Dr. Grasmick frequently spoke of the importance of early childhood education and supported funding for programs serving young children and their families. Dr. Grasmick embraced the initiative in 2005 to consolidate all of the State's early childhood programs in the Maryland State Department of Education, where she established a

Dr. Grasmick with Family Support Center participants in Annapolis.

new Division of Early Childhood Development.

"I see the goal as creating a continuum of education that begins at birth," says Dr. Grasmick. "We know from longitudinal studies and from neurological research that the early years are a time of unparalleled learning. From birth to age five, children are developing skills, competencies, and even brain architecture that will influence their success in school and in life. If we want to eliminate the achievement gap, we must focus on the early years."

Dr. Grasmick brings a lifetime of educational leadership to her new Board commitment with Maryland Family Network. She started her career in 1961 as a classroom teacher and moved on to leadership positions in Baltimore County and elsewhere, capping her career with 20 years as Maryland State Superintendent of Schools from 1991 until her retirement in June 30, 2011.

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Tell the state what type of leader is needed in next state school superintendent

The state school board is holding a series of open forums for members of the public to say what characteristics they would like to see in a new school superintendent. The public also may fill in an online survey at www.ecragroup.com/mdss

Nancy S. Grasmick, who held the job for nearly 20 years, retired in June.

The forums are being held:

Oct. 27 at Easton High School in Talbot County; Nov. 2 at Laurel High School in Prince George's County; Nov. 3 at Seneca Valley High School in Montgomery High School; Nov. 7 at Huntington High School in Calvert County; Nov. 7 at Mountain Ridge High School in Allegany County; Nov. 9 at Edgewood High School in Harford County and Nov. 10 at Baltimore Polytechnic Institute in Baltimore City.

Posted by **Liz Bowie** at 2:52 PM | [Permalink](#) | [Comments \(0\)](#)

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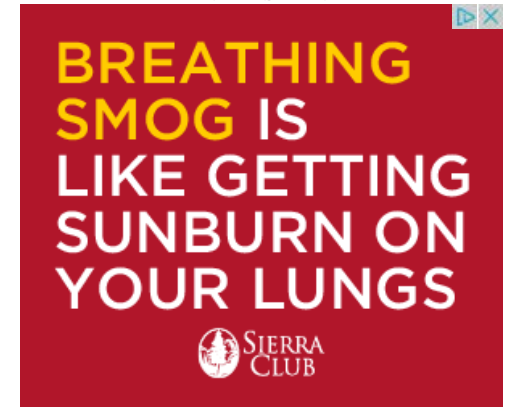
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January 2011
December 2010
November 2010
October 2010
September 2010
August 2010
July 2010
June 2010
May 2010

[April 2010](#)
[March 2010](#)
[February 2010](#)
[January 2010](#)
[December 2009](#)
[November 2009](#)
[October 2009](#)
[September 2009](#)
[August 2009](#)
[July 2009](#)
[June 2009](#)
[May 2009](#)
[April 2009](#)
[March 2009](#)
[February 2009](#)
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[December 2008](#)
[November 2008](#)
[October 2008](#)
[September 2008](#)
[August 2008](#)
[July 2008](#)
[June 2008](#)
[May 2008](#)
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[July 2007](#)
[June 2007](#)
[May 2007](#)
[April 2007](#)

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Interests:



Compulsory Education Checks for Two-Year-Olds in England

Government changes in preschool and early childhood education in England will likely include a new series of developmental assessments that will be paired with health visitor check-ups that are carried out at the age of two.

These education assessments will cover social, emotional, and physical development as well as communication and language. Government officials claim that the test will help identify early development problems and diagnose special needs at a young age. Though still in a draft stage, the initial framework suggests that the assessments will, in part, focus on the readiness of children to independently care for themselves.

As currently planned, these check-ups will also assess if children understand “who,” “what,” and “where,” in simple questions, and if they understand that some actions can harm others.

Though these evaluations are intended to help ensure that children build a stable foundation for success later in life, many feel that there are some serious risks. “Many educationalists would say that the ongoing testing risks branding some children as failures,” says Jane Serbyrn, manager of Kingsthorpe Children’s Centre in England. “The child could just be having a bad day on the day of the assessment.”

Richard House, a senior lecturer in psychotherapy at Roehampton University, London, says, “Children are so diverse that to even begin constructing some generalized view of how they should be developing at a certain age is fraught with danger.”

Proponents of these early education assessments, though, point out that many children are entering school without the basic skills they need to benefit from the education system. Graeme Paton, Education Editor at The Telegraph, writes that data show “Almost half [of English children entering school] lack basic social and language skills.”

Sarah Teather, the Children’s Minister, says “The importance of the early years – as a foundation for life and future attainment and success – cannot be overestimated. That’s why it’s vital we have the right framework to support high quality early years education.”

For more information, read [“Two-year-olds to be given compulsory education checks”](#) in The Telegraph.



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Interests:



The Path to Wilson College

When she was in tenth grade, Ashley Johnson was playing basketball, going to step practice, and dreaming of the day when she would attend the University of Maryland at College Park. Her plans were derailed by the birth of her daughter Kayla when Ashley was just sixteen.

However, Ashley was determined to get back on track for high school graduation and a college degree. Rather than dropping out, Ashley started attending the high school credit program at the Washington County Family Support Center.

At the Family Support Center, Ashley took classes to complete her high school requirements, learned about child development and nurturing techniques, and was introduced to the Women with Children Program at Wilson College in Chambersburg, Pennsylvania. Ashley is a highly capable student, and the Family Support Center (FSC) staff encouraged her to consider Wilson College's program which provides family-friendly on-campus housing year-round to single mothers and their children (20 months and older) so the mother can pursue a bachelor's degree full time.

Ashley drew strength from the support of the staff at the FSC. She enjoyed being a great mother to Kayla and did well in the alternative high school classes offered at the FSC in partnership with the local school system. In May, she completed high school and was awarded her diploma.

Not only was Ashley accepted into Wilson's Women with Children Program, she received a Presidential Grant from the college to help defray her costs. An impressive list of additional grants and awards will help her pay her way.

Ashley and Kayla moved into their new home on the Wilson campus in late August along with twenty other families. Each family has a two-room suite with a private bath and access to a common playroom, computer room, kitchen, and laundry facilities. Families participate in the meal plan and eat in the main dining hall.

Kayla will attend the Wilson College Child Care Center while Ashley goes about college life – attending classes, studying, and (when she feels ready) joining in extracurricular activities. At this moment, Ashley says she plans to study psychology and information technology.

The MFN eNews will follow Ashley through her first year at Wilson College, providing occasional updates on her achievements and challenges as she settles into college life.

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Interests:



LOCATE users Chris Fournier
and his wife Kelly



More Fathers than Ever Before Calling LOCATE: Child Care

Until recently, it was a given that most calls to LOCATE: Child Care would come from mothers. However, in December 2010, LOCATE referral specialists happened to notice that they were getting more calls than usual from fathers. So, they started keeping a tally. In just three months, LOCATE staff recorded more than 200 calls from dads. They can't say for sure when the change started to occur. However, it is in line with an ongoing research trend showing a gradual but steady increase in father involvement over the past 30 years.

Researchers from University of California at Riverside found that, in the 1960s, men performed only about 15 percent of household responsibilities, a broad category that includes caring for children. When those researchers took measurements in 2008, they found that in less than 30 years men have doubled the amount of time they spend helping with household responsibilities. They also found that during that same time, men have tripled the amount of time they spend caring for their children ([Read about the study here](#)).

On the one hand, a 30/70 split still isn't very fair. On the other hand, it's closer to equal than ever before. Given that more and more fathers seem to be calling LOCATE, it seems possible that the increase of father involvement might continue into the future. We interviewed several fathers who recently called LOCATE to ask them how they share household and child care responsibilities in their families.

Chris Fournier, a soon-to-be father from Silver Spring, was one recent caller to LOCATE. Chris and his wife, Kelly, are eagerly looking forward to being parents for the first time. As busy professionals, they also know that it won't be long before they need child care. "I knew some of the things we wanted from a child care center," says Chris, "but as a new Dad there was a lot I didn't know—like, were we supposed to provide the diapers? And food?"

Chris says that the LOCATE Referral Specialist with whom he spoke was very helpful in assisting him figure out what goals he and Kelly had for their child care center. "She really took the time to listen to our needs," says Chris, "and she volunteered a lot of information that we hadn't thought of."

Ben Spiker, another father who recently used LOCATE, was looking for a child care center for his one-

year-old daughter, Twila. Ben says that household and child care responsibilities are pretty evenly split between him and his wife, Sara. He acknowledges that there is still a huge amount of responsibility for both of them. But because he participates so fully, he says, "I get to see a lot of the stuff that other dads don't get to see." Ben talked about helping Twila learn how to walk. He said that he loves to cook for her.

Chris and Ben are just two of the hundreds of fathers who have called LOCATE in recent months. They feel that they might participate more fully in household responsibilities than most dads, but they don't think what they do is unusual. They also sound really glad that they have the opportunity to spend time with their children.

Chris Fournier says he is very excited about his baby's arrival, which is expected in April. "The more information I have, the better I feel about it," he says. "My whole thing is just that I want to be involved."

To find out more about LOCATE visit the [LOCATE: Child Care website](#) or call **1-877-261-0060 to speak with a LOCATE Referral Specialist.**

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