

State Priorities for Child Care and Development Block Grant Funding Increase: 2019 National Overview

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Introduction

Research demonstrates that child care subsidies and other benefits are important to the well-being of low-income families, and that high-quality child care supports children's development and their success in school and in life.^{1,2} Initially enacted in 1990, the Child Care and Development Fund (CCDF) is the largest federal funding stream for child care subsidies, helping low-income families afford high-quality child care so they can work or participate in education or training.³ CCDF funding is delivered to states through a block grant* known as the Child Care and Development Block Grant (CCDBG).

In 2014, CCDBG was reauthorized for the first time since 1996, expanding requirements for the grant. CCDBG allows states some discretion in their use of the funds and enables states to prioritize aspects of child care access and quality that align with the needs of their populations. However, without additional funding, balancing implementation of new requirements and access to high-quality child care for all eligible children and families was a challenge for states. In Fiscal Year (FY) 2015, the U.S. Department of Health and Human Services estimated that only 15 percent of 13.6 million children eligible for subsidies were served.⁴ In 2018, Congress increased discretionary funding for CCDBG by \$2.37 billion to fund implementation of reauthorization requirements and expand access to child care for families.

Child Trends conducted a national survey of CCDBG state and territory administrators to understand the effect of the additional federal funds. Through the survey, states reported how they are using (or plan to use) the additional federal funds to expand services for eligible children and implement CCDBG reauthorization goals and requirements. This brief summarizes our methodology, key findings, and recommendations for next steps. This project was made possible with funding from the Pritzker Children's Initiative, the Irving Harris Foundation, and the David and Lucile Packard Foundation.

Key findings

- Over half of states anticipate serving more children as a result of new funding.
- Increasing payment rates for child care subsidies is a priority for most states.
- Implementing comprehensive background check requirements remains a challenge for many states.
- Reducing parent co-payments is a future priority in several states.
- Over half of states plan to invest new funding in quality improvement activities to increase professional development opportunities for early childhood educators and the availability of high-quality care for infants and toddlers.
- Additional funding is still needed in some states to implement CCDBG reauthorization requirements.

Recommended next steps for state and federal leaders

- Support efforts to document and analyze the short- and long-term outcomes of increasing CCDBG funding.
- Determine the exact funding needed to fully meet remaining CCDBG requirements.
- Identify and share best practices for expanding access to high-quality care for high-need populations and implementing new reauthorization requirements.

Throughout this brief, terms defined or explained in a glossary in [Appendix A](#) are marked with an asterisk () the first time they are used.*

Background on CCDBG Reauthorization and Increased Funding Levels

CCDBG reauthorization goals and requirements

In 2014, Congress reauthorized CCDBG,⁵ setting new standards around eligibility, child care quality, health and safety, access to child care, and workforce support. At the time, however, no additional federal funds were allocated to support states in implementing changes to meet these new standards. The 2014 reauthorization law required states to implement the following policy changes:

1. **Set provider payment rates* to ensure equal access for families.** When child care subsidies are used to pay providers for child care services, payment rates for child care should be equal to the rates that families not participating in the subsidy system would pay in the private child care market. The law recommends using the 75th percentile of market rates* as the benchmark for assessing whether states' payment rates adequately ensure equal access.⁶
2. **Implement family-friendly eligibility policies to help families retain their subsidy and promote continuity of care.*** Specifically, the reauthorization requires states to make the following changes regarding families' eligibility for subsidy receipt:
 - **Ensure 12-month eligibility.** A child must be considered eligible for child care subsidy* for at least 12 months, even following a change in a parent's employment, education, or training activities.
 - **Retain subsidies during job searches.** Although states may terminate a family's child care subsidy after a parent or caregiver loses his or her job, the reauthorization law requires states to offer three months of child care subsidy following job loss.
 - **Reduce parents' reporting requirements for retaining subsidies.** States must limit the information that parents are asked to report *while* they are eligible for a subsidy, as a requirement for *remaining eligible*. States may only require parents to report those changes that affect families' eligibility for subsidies, in order to reduce the administrative burden on parents or caregivers and the potential for families to lose their subsidy if they fail to report changes.
 - **Reduce or waive parent co-payments.*** As a result of the reauthorization, parent co-payments cannot exceed 7 percent of family income (co-payments were previously set at 10 percent); in addition, states can waive co-payments for families with very low incomes (i.e., families living below the poverty level), for children in the child welfare system, or any other priority groups established by the state.⁷
3. **Enhance health and safety practices to create more consistent health and safety standards and monitoring of health and safety standards.** This change requires states to implement the following:
 - Annual health and safety inspections for all licensed* and license-exempt providers*
 - Pre-service health and safety training for all CCDBG providers; licensed and license-exempt providers receiving CCDBG funds must complete training in a variety of health and safety topics prior to serving children

- Comprehensive background checks for all licensed and license-exempt (except relatives) providers; regardless of whether they receive CCDBG funds, providers must undergo criminal background checks⁸
4. **Expand consumer education to promote parents' choice of child care providers and their knowledge of child care quality, child development, and other topics.** States must have a consumer education website, establish a hotline to report health and safety violations, and provide parents with information about the availability and quality of child care providers, services to support children's physical and social-emotional health, and eligibility for other financial assistance programs.
 5. **Increase the amounts of quality* and infant/toddler set-asides.*** Reauthorization increased the amount of funds that states must spend toward supporting the quality and development of the child care workforce. States may spend these increased funds on activities such as developing or enhancing a tiered quality rating and improvement system (QRIS)* and offering financial incentives and compensation improvements for child care providers who obtain additional education credentials. States must raise the minimum quality set-aside from 4 to 9 percent over a five-year period (by FY 2020). Additionally, states are required to set aside a minimum of 3 percent of their CCDBG funds for activities that improve the quality of infant and toddler care.⁹
 6. **Expand access to child care for vulnerable families/underserved groups*:** CCDBG has historically lacked the funds necessary to serve all eligible children and families. In an effort to serve particularly vulnerable populations, the CCDBG reauthorization specified that states must submit monthly data on the characteristics of children served, including vulnerable populations (such as children in families experiencing homelessness) and underserved populations (such as infants and toddlers).^{10,11}

Additionally, the reauthorization law expanded the purpose of CCDBG to include the goal of increasing the number and percentage of low-income children in high-quality child care settings. However, without additional funding, many states struggled to implement the wide range of new 2014 reauthorization requirements described above and serve all eligible children.

Increase in federal funding for CCDBG

In 2018, Congress responded to these challenges by appropriating a \$2.37 billion increase in CCDBG discretionary funding—the largest ever increase in this funding.¹² The legislation and its report language provided guidance to states on how to use these funds, including but not limited to the following purposes:

1. Supporting implementation of the CCDBG reauthorization law enacted in 2014
2. Providing professional development for child care workers
3. Serving additional low-income, working families
4. Increasing provider payment rates¹³

States were required to determine by September 30, 2019 how they would use the additional funds, and they are required to use these funds by September 30, 2020.¹⁴

Methodology

The following methodology section describes Child Trends' process to examine how states and territories were planning to use the additional discretionary CCDBG funds to balance the competing demands of implementing reauthorization requirements and goals while either expanding or maintaining the number of eligible children served.

To understand how CCDF lead agencies planned to use the increased federal funding, Child Trends developed an online survey to be sent to CCDF administrators in all 50 states, the District of Columbia, and the U.S. territories. The survey was piloted in March and April of 2019 to test the survey questions with a sample of states. After incorporating feedback from the pilot, the final survey was launched on May 5, 2019 and sent to states on a rolling basis through June 6, 2019. States completed surveys and provided additional responses regarding their data through August 28, 2019. Child Trends received responses from all 50 states, the District of Columbia, and Guam, for a total of 52 respondents. Throughout this report, we use the term "states" to refer to these 52 respondents.

The survey questions addressed the following topic areas:

1. How states planned to allocate the 2018 increase in CCDBG funding
2. Whether states planned to use increased funding to implement 2014 CCDBG reauthorization requirements
3. What remaining challenges states face in implementing the 2014 CCDBG reauthorization requirements

Child Trends asked states to report the most current information available at the time they completed the survey. Individual state profiles are available on the Child Trends website [here](#).

Survey limitations

Several limitations of the data are important to note for readers when interpreting the survey findings. First, because the survey results reflect the information each state reported at the time of data collection, the findings may not align exactly with a state's CCDF plans for CCDBG funds, or with other uses of funds that were documented before or after data collection. For example, a state may change its plans for spending funds after data collection, thereby affecting the number of additional children served. Second, the survey questions were not structured to capture all possible uses of new funds; rather, the survey was restricted to questions about specific uses of new CCDBG funds (i.e., to increase payment rates, to serve additional children, to meet reauthorization requirements). Finally, the completeness and quality of the data collected varied. For example, some states provided more details about their plans for using the new funding, relative to other states that had not decided on proposed uses of funds or were awaiting approval. While the findings of this survey are intended to provide a snapshot of how states plan to leverage new CCDBG funds to achieve state goals, additional research is needed to understand the exact outcomes of increased funding.

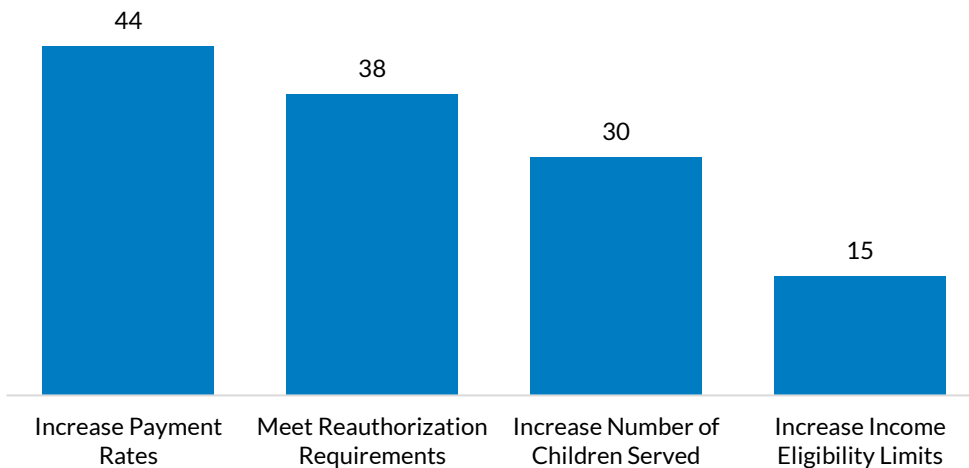
Key Findings

Plans for federal CCDBG funding increase

Given that the legislation appropriating increased federal funding for CCDBG allows states to spend the funds on multiple priorities, the survey asked CCDF state administrators to specify how they planned to allocate the new funds. That is, administrators were asked to report their plans for using funds to 1) increase

the number of children served, 2) expand eligibility limits for child care subsidies, 3) increase payment rates for providers receiving subsidies, or 4) meet reauthorization requirements. **States' most commonly reported plan was to spend the additional federal funds on increasing payment rates (44 states, or 85%), followed by meeting reauthorization requirements (38 states, or 73%) and increasing the number of children served (30 states, or 58%).** Fewer states indicated planning to spend additional funds on expanding eligibility limits (15 states, or 29%; see Figure 1).

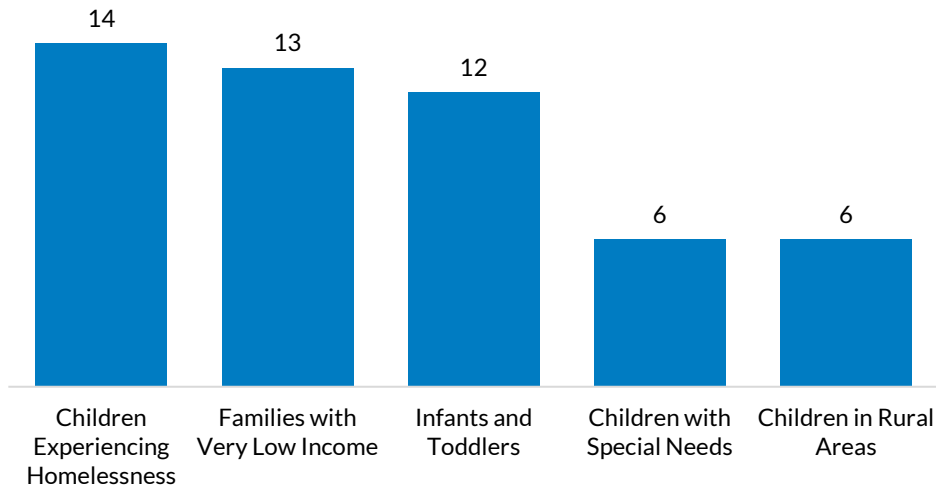
Figure 1. Distribution of states' plans for using new CCDBG funds, by number of states



Note: n=52 states

Of the 30 states reporting plans to increase the number of children served, 16 states (53%) were able to estimate the percentage increase in the number of children served, which ranged from 3 to 59 percent; half of these states (8 states, or 50%) estimated an increase of more than 20 percent. Respondents also reported whether they were targeting one or more of five priority groups of children and families for which the reauthorization encourages expanding access. Figure 2 illustrates that **the most commonly reported groups for expanding access, among the 30 states planning to increase the number of children served, were children experiencing homelessness (14 states, or 47%); families with very low income, defined as at or below the federal poverty level (13 states, or 43%); and infants and toddlers (12 states, or 40%).** Other states reported targeting funds to expand access for children with special needs (6 states, or 20%) and children in rural areas (6 states, or 20%). See [Appendix B](#) for a list of individual states and their responses.

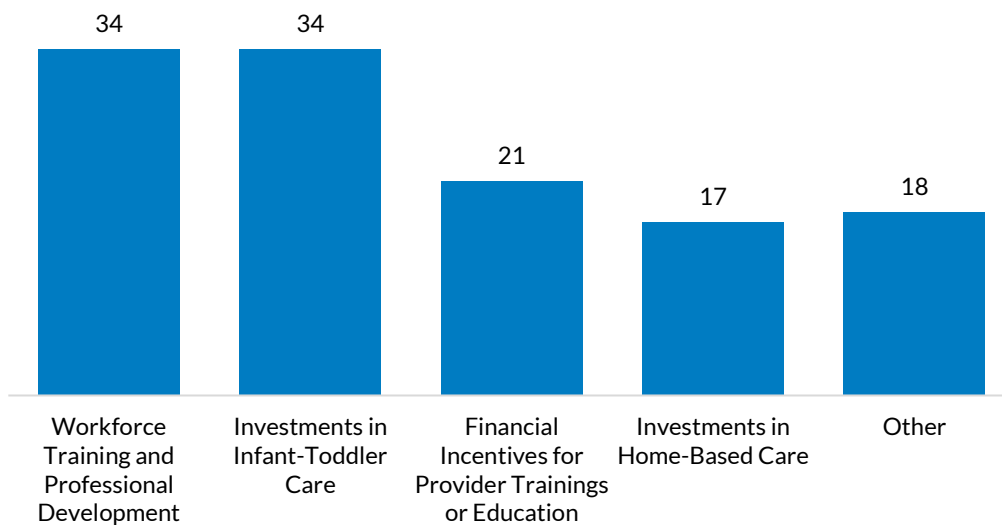
Figure 2. Prioritized groups targeted when increasing the number of children served, by number of states



Note: n=30 states

The increased funding also provided the opportunity for states to plan for improving the supply of *high-quality* child care. The reauthorization law requires states to reserve a larger share of funds for quality improvement activities (8 percent in FY 2018 and 2019, and 9 percent in FY 2020) and 3 percent for activities to increase the quality and supply of infant-toddler care.¹⁵ We asked states to indicate whether they planned to allocate additional funding for one or more of the following activities: 1) additional child care workforce training and professional development opportunities; 2) financial incentives to providers to obtain additional training, credentials, or education; 3) investments in infant-toddler care; 4) investments in home-based care; and/or 5) another activity. **States most commonly reported planning to use additional funds for workforce training and professional development opportunities (34 states, or 65%), as well as investments in infant and toddler care (34 states, or 65%; see Figure 3).** Additionally, 40 percent of states (21 states) reported plans to provide financial incentives for providers, and 35 percent of the states (18 states) planned to allocate additional funding to other activities. Of states that reported other activities, five states (28%) had plans for increasing payment rates or incentives for quality, and three states (17%) had plans for increasing incentives to providers for offering nontraditional hours of care. States also mentioned using additional funding to maintain or develop their QRIS (2 states, or 11%).

Figure 3. Planned allocation of additional funding for quality improvement activities, by number of states



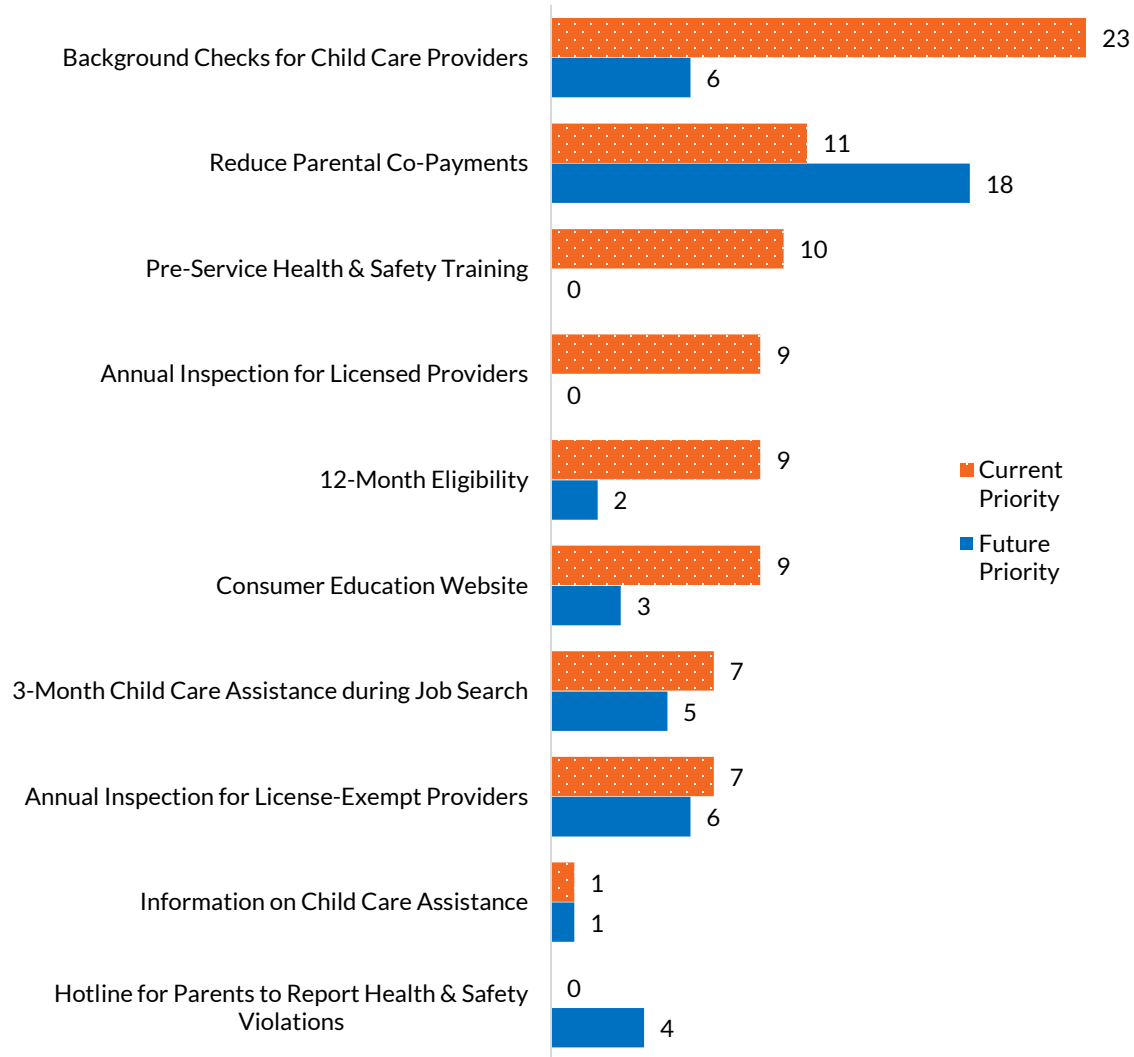
Note: n=52 states

How states are using new funds to implement reauthorization requirements

States most commonly reported already meeting consumer education requirements, such as providing information about child development and other resources to parents (49 states, or 94%), offering a hotline for parents to report health and safety violations (48 states, or 92%), and conducting annual health and safety monitoring visits to all licensed providers receiving a subsidy (43 states, or 83%). For each reauthorization requirement a state was not already meeting, states reported whether their plans for using new funds were intended to help implement that requirement or whether implementing the requirement was a future priority (i.e., for states needing additional funds or time to implement the requirement). As Figure 4 illustrates, states' most commonly reported plans for using new funds were for conducting comprehensive background checks for providers (23 states, or 44%), reducing parental co-payments (11 states, or 21%), and providing pre-service health and safety training for all providers receiving a subsidy (10 states, or 19%).

The three most common requirements that states identified as a future priority (i.e., requirements that they needed additional funds or time to meet) were reducing parent co-payments, providing comprehensive background checks, and providing annual inspections to all license-exempt providers (reported by 18 [35%], 6 [12%] and 6 states [12%], respectively).

Figure 4. Current and future priorities for using new CCDBG funds to implement reauthorization requirements, by number of states



Note: n = 52 states. “Current Priority” indicates the number of states using increased CCDBG funding to implement the reauthorization requirement, and “Future Priority” indicates the number of states planning to use funding to implement the reauthorization requirement at a later date. See [Appendix C](#) for a list of individual states and their responses.

Current challenges to implementing the goals and requirements of reauthorization

Additional funding to implement requirements

We also surveyed states about whether they were still struggling to fund implementation of the 2014 reauthorization requirements. **Of the 47 states that responded to this question, only 18 (38%) indicated that the increased funding was enough for their state to implement all of the CCDBG reauthorization requirements. The majority of states (29 states, or 62%) reported that the additional funds were not sufficient to implement all of the reauthorization requirements.** Of the 29 states reporting insufficient funds, 22 (76%) specified which reauthorization requirements they are not currently meeting. Most commonly, these 22 states reported needing additional funds to raise provider payment rates to the 75th percentile (10 states, or 45%) and to meet criminal background check requirements for providers (7 states, or 32%).

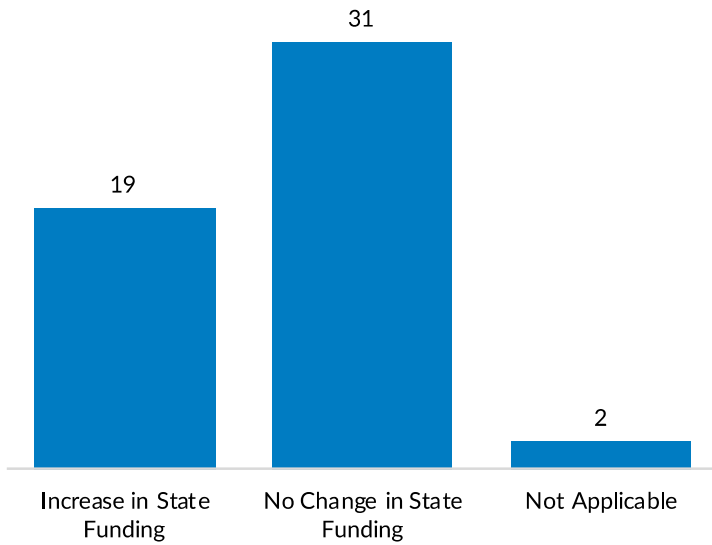
Priorities if CCDBG funding were to increase

Finally, to better understand states' needs for additional funding to improve their child care subsidy programs overall, states reported which priorities they would fund if additional funding were available. Among the 49 states that provided this information, the top three reported priorities were increasing provider payment rates (29 states, or 59%); increasing access to serve additional children, including priority groups of children and families (19 states, or 39%); and expanding quality initiatives (16 states, or 33%).

State increases in funding

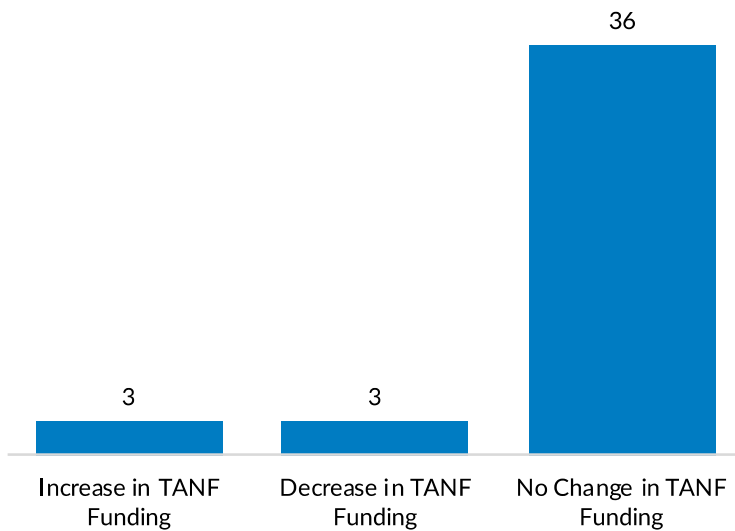
States decide how much state funding, if any, they will invest in their child care subsidy program beyond the minimum federal requirement. Additionally, states can spend up to 30 percent of Temporary Assistance for Needy Families (TANF)* funds on child care, although a recent analysis showed that states only spent 16 percent of TANF funds on child care.¹⁶ To understand whether states had access only to increased federal funds—or whether there were opportunities to leverage increased state funding for child care assistance as well—Child Trends asked states whether they had experienced an increase in state general funds for child care assistance or an increase in TANF funds transferred to child care during the same period as the federal increase in CCDBG funds. **Nineteen states (37%) reported that they experienced an increase in state general funds for child care in either FY 2018 or FY 2019, while only 3 states (6%) reported an increase in the amount of TANF funds transferred to child care in either FY 2018 or FY 2019 (see Figures 5 and 6).**

Figure 5. Change in state funding for child care from FY 2017-2018 to FY 2018-2019, by number of states



Note: n = 52 states. “Not applicable” represents states that do not use state general funding for CCDF (Guam) or operate on a two-year budget cycle (Oregon).

Figure 6. Change in TANF funding for child care from FY 2017-2018 to FY 2018-2019, by number of states



Note: n = 42 states. Ten states did not report this information.

Summary of Findings and Recommendations

Nationally, increased CCDBG funding spurred expanded access to child care subsidies for low-income families, increased payment rates for child care providers, and targeted initiatives to support high-need populations (e.g., infants and toddlers, children experiencing homelessness) and professional development for early childhood educators. Understanding how states have used and plan to use the funds, as well as where gaps still exist, can help policymakers as they develop budgets and refine child care policy.

- **Over half of states anticipate serving more children as a result of new funding.** Even as states balance their allocation of funds to increase provider rates and implement authorization requirements, 30 states indicated that they will serve an increased number of children with new funds. The estimated increase in 16 of those states ranged from 3 percent to 59 percent, with children in families experiencing homelessness, very low-income families, and infants and toddlers identified as priority groups for expanded slots in 12 to 14 states.
- **Increasing payment rates for child care subsidies is a priority for most states.** States reported both current use of CCDBG funding to increase provider payment rates and planned use of future funding for the same purpose. The maximum payment levels set for child care subsidies vary by age of child, type of care, and rated quality of care, making it difficult to compare rates across states.
- **Implementing comprehensive background check requirements remains a challenge for many states.** Of the 38 states planning to use increased funds to implement reauthorization requirements (73%), over half (23 states, or 61%) plan to use new funds to implement comprehensive background checks for all licensed providers and license-exempt providers that receive child care subsidies. States reported challenges due to lack of funding and/or additional time needed to implement different aspects of this policy change.
- **Reducing parent co-payments is a future priority in several states.** New requirements specified that parent co-payments should not exceed 7 percent of family income. States were also encouraged to waive parent co-payments for families with incomes less than the federal poverty level. While 11 states (21%) reported plans to use new funds to meet these goals, a greater number of states (18 states, or 35%) indicated that implementation of these policies was a future priority.
- **Over half of states plan to invest new funding in quality improvement activities to increase professional development opportunities for early childhood educators and the availability of high-quality care for infants and toddlers.** Reauthorization requirements included increasing the minimum set-asides for quality improvement activities and services for infants and toddlers. States' professional development goals varied but generally focused on increased coaching and training opportunities, participation in state quality improvement activities, financial assistance for providers (e.g., scholarships or tuition reimbursement), and supports for home-based providers. States' planned investments in infant and toddler care included developing state networks to coordinate providers' professional development, providing updated curricula and materials, and creating financial incentives to provide high-quality care (e.g., increased payment rates).
- **Additional funding is still needed in some states.** While the 2018 increase in federal funds for CCDBG was historic, more than half of states (29 states, or 62%) surveyed reported that the increased funding levels still fall short of helping them meet the multiple goals and requirements of reauthorization. According to the survey, 37 percent of states experienced an increase in state general funding for child care in FY 2018 or FY 2019 corresponding with the **increase** in CCDBG

funding. During this same period, only three states increased TANF funding for child care, meaning that most states relied on increased federal funding to meet their child care goals.

Further research is needed to fully understand the exact outcomes of states' proposed plans and how their plans benefit children, families, and early childhood educators. Based on the priorities highlighted by states, we recommend state and federal leaders consider the following next steps:

- **Support efforts to document and analyze the short- and long-term outcomes of increasing CCDBG funding.** To fully understand how states' proposed plans for using this historic funding increase affects children, families, and programs, federal and state policymakers need access to comprehensive data to inform their future policy and funding decisions.
- **Determine the exact funding needed to fully implement remaining CCDBG requirements.** When asked about future goals that they will need additional funding to meet, states most frequently reported increased payment rates for providers, reduced parent co-payments, and comprehensive background checks to support health and safety. Analyzing costs of implementing these goals and identifying potential funding sources are action steps that could inform future planning efforts.
- **Identify and share best practices for expanding access for high-need populations and implementing new reauthorization requirements.** As states implement new policies and programs using increased CCDBG funds, there are opportunities for states to learn about innovative approaches and share research-based practices and strategies.

To build upon the information gathered through this survey, Child Trends plans to conduct case studies in five states to explore several outcomes associated with the increased CCDGB funding. These case studies will analyze state-level administrative data to learn about the number of additional children served, the outcomes of quality improvement initiatives, and the communities that the funding increase has affected. We look forward to sharing state successes and strategies to help inform the work of other states as policymakers, administrators, advocates, educators, and families work to create stronger state child care systems.

Appendix A: Glossary of Terms

Continuity of care: A term used to describe programming and policies that ensure children and families are consistently engaged in high-quality early learning experiences through stable relationships with caregivers who are sensitive and responsive to a young child's signals and needs.¹⁷

Child care subsidy: Income-eligible families may receive this subsidy to pay for child care while working or attending school or in job training.¹⁸

Infant/toddler-set aside amounts: A provision requiring states to spend at least 3 percent of CCDF funds to improve the supply and quality of care for infants and toddlers. These funds can be used to increase the number of providers caring for infants and toddlers, develop curricula, and/or offer training and professional development.

License-exempt providers: These caregivers are exempt from licensing because they care for a small number of children or they are relatives of the children for whom they care. States can allow license-exempt providers to receive CCDF funding. Reauthorization of the Child Care and Development Block Grant Act of 2014 requires that all providers receiving subsidies 1) meet health and safety requirements in 10 topic areas, 2) complete preservice and ongoing training on those topics, and 3) engage in specified monitoring activities to ensure that child care providers are in compliance with the health and safety requirements.¹⁹

Licensed providers: Any caregiver who operates a home- or center-based child care business is required to be licensed and approved by the state. State licensing rules and regulations outline a base set of health and safety standards with which all child care facilities must comply.

Market rate: Regarding child care, this is the cost of operations to provide full-time, high-quality home- or center-based child care. This rate, which is determined by a state-conducted market rate survey (MRS), is used to inform calculations about the payment rates for child care subsidies.

Parent co-payment: Parents who receive a child care subsidy are required to pay for a portion of the child care they receive based on their income. This amount is determined by states.

Provider payment rates: States must certify that the payment rates offered through the child care subsidy system are sufficient to ensure equal access for eligible children to comparable child care services provided to children whose parents are *not* eligible to receive child care assistance.

Quality rating and improvement system (QRIS): A systemic approach to assessing, improving, and communicating the level of quality in early and school-age care and education programs.²⁰ To motivate participation in the QRIS and incentivize efforts that promote high-quality program practices, states often tie child care subsidy reimbursement rates to the quality rating a program receives. That is, lower-quality rated programs receive lower reimbursement rates and higher-quality programs receive higher reimbursement rates.

Quality set-aside: The CCDBG Grant of 2014 increased the portion of funds states can set aside for quality improvement and sustainability activities from 4 percent to 9 percent. The reauthorization also specified that states "use the quality set-aside to fund at least one of the following 10 quality activities:

1. Supporting the training and professional development of the child care workforce
2. Improving on the development or implementation of early learning and development guidelines
3. Developing, implementing, or enhancing a tiered quality rating system for child care providers and services
4. Improving the supply and quality of child care programs and services for infants and toddlers

5. Establishing or expanding a statewide system of child care resource and referral services
6. Supporting compliance with state requirements for licensing, inspection, monitoring, training, and health and safety
7. Evaluating the quality of child care programs in the state, including evaluating how programs positively impact children
8. Supporting child care providers in the voluntary pursuit of accreditation
9. Supporting the development or adoption of high-quality program standards related to health, mental health, nutrition, physical activity, and physical development
10. Other activities to improve the quality of child care services, as long as outcome measures relating to improved provider preparedness, child safety, child well-being, or kindergarten-entry are possible.”

States also are required to report the measures used to evaluate progress in improving the quality of child care programs and services.²¹

State block grant: A grant from the federal government that allows states the authority to allocate funding as they see fit to a range of allowable services.

Temporary Assistance for Needy Families (TANF): A federal program designed to help low-income families move toward financial self-sufficiency through job training, education, and supportive services (e.g., housing, medical care) and to reduce need for government assistance. TANF program goals include encouraging a two-parent family structure and reducing the number of pregnancies by unwed mothers. TANF is administered to states through a block grant and can be used to fund child care assistance programs as well.

Vulnerable children/families: A designation for a subpopulation of children and families, as defined by the state lead agency, that are given priority for child care assistance. States are required by statute to prioritize services for children who have special needs, are living in households that are very low-income, and/or are experiencing homelessness. Other groups a lead agency could prioritize include teen mothers, children in foster care, and previous recipients of Temporary Assistance for Needy Families. These designations and definitions vary by state.

Appendix B: Distribution of State Investments Using New CCDBG Funds, by State

State	Reported compliance with reauthorization (i.e., supporting health and safety, informed consumer choices, supporting equal access/family friendly policies, and enhancing quality/supporting the workforce)	Access to child care services (e.g., number of children served, eligibility, or to serve underserved populations)	Provider payment rates	Increase income eligibility limits
Alabama	✓	✓	✓	✓
Alaska			✓	
Arizona	✓	✓	✓	
Arkansas				
California	✓	✓		
Colorado	✓		✓	✓
Connecticut	✓		✓	✓
Delaware	✓	✓	✓	
District of Columbia			✓	
Florida		✓	✓	
Georgia	✓		✓	
Guam	✓	✓		✓
Hawaii	✓	✓	✓	✓
Idaho	✓		✓	
Illinois	✓	✓	✓	✓
Indiana		✓		
Iowa	✓		✓	
Kansas	✓	✓	✓	
Kentucky	✓	✓	✓	✓
Louisiana	✓	Not reported	✓	
Maine	✓	✓	✓	
Maryland	✓	✓	✓	✓
Massachusetts	✓		✓	
Michigan		✓	✓	✓
Minnesota	✓			
Mississippi		✓	✓	✓
Missouri			✓	
Montana	✓		✓	
Nebraska	✓	✓	✓	

State	Reported compliance with reauthorization (i.e., supporting health and safety, informed consumer choices, supporting equal access/family friendly policies, and enhancing quality/supporting the workforce)	Access to child care services (e.g., number of children served, eligibility, or to serve underserved populations)	Provider payment rates	Increase income eligibility limits
Nevada	✓	✓	✓	
New Hampshire	✓			
New Jersey			✓	✓
New Mexico	✓		✓	Not Reported
New York	✓	✓	✓	
North Carolina		✓	✓	
North Dakota			✓	
Ohio			✓	
Oklahoma	✓	✓	✓	✓
Oregon	✓	✓	✓	
Pennsylvania	✓		✓	
Rhode Island	✓	✓	✓	✓
South Carolina	✓	✓	✓	
South Dakota	✓	✓		✓
Tennessee	✓	✓	✓	
Texas		✓	✓	
Utah	✓	✓	✓	✓
Vermont	✓		✓	
Virginia	✓	✓	✓	
Washington			✓	
West Virginia	✓			
Wisconsin	✓	✓	✓	
Wyoming	✓		✓	

Appendix C: Priorities of Increased Funds to Meet Reauthorization Requirements, by State

Health and safety policies

State	Annual health and safety inspections of all licensed providers receiving a subsidy	Annual health and safety inspections of all license-exempt providers receiving a subsidy (except providers)	Pre-service health and safety training for all CCDBG providers	Comprehensive background checks for child care providers
Alabama	Meets	Meets	Priority	Meets
Alaska	Meets	Meets	Meets	Future
Arizona	Meets	Meets	Meets	Priority
Arkansas	Meets	Future	Meets	Meets
California	Priority	Future	Meets	Meets
Colorado	Meets	Meets	Meets	Meets
Connecticut	Priority	Priority	Priority	Priority
Delaware	Meets	Meets	Meets	Meets
District of Columbia	Meets	Meets	Meets	Meets
Florida	Meets	Meets	Meets	Meets
Georgia	Meets	Meets	Meets	Priority
Guam	Meets	Future	Priority	Priority
Hawaii	Meets	Future	Priority	Priority
Idaho	Meets	Meets	Priority	Priority
Illinois	Meets	Meets	Meets	Meets
Indiana	Meets	Meets	Meets	Future
Iowa	Meets	Meets	Meets	Priority
Kansas	Meets	Meets	Meets	Priority
Kentucky	Meets	Meets	Meets	Priority
Louisiana	Meets	Meets	Meets	Priority
Maine	Meets	Meets	Meets	Priority
Maryland	Meets	Meets	Meets	Future
Massachusetts	Meets	Priority	Priority	Priority
Michigan	Meets	Meets	Meets	Meets
Minnesota	Priority	Future	Priority	Priority
Mississippi	Meets	Meets	Meets	Meets
Missouri	Meets	Meets	Meets	Meets
Montana	Priority	Priority	Priority	Priority
Nebraska	Meets	Meets	Priority	Priority
Nevada	Meets	Priority	Meets	Priority

State	Annual health and safety inspections of all licensed providers receiving a subsidy	Annual health and safety inspections of all license-exempt providers receiving a subsidy (except providers)	Pre-service health and safety training for all CCDBG providers	Comprehensive background checks for child care providers
New Hampshire	Meets	Meets	Meets	Priority
New Jersey	Meets	Meets	Meets	Meets
New Mexico	Meets	Meets	Meets	Meets
New York	Priority	Priority	Meets	Priority
North Carolina	Meets	Meets	Meets	Meets
North Dakota	Meets	Meets	Meets	Meets
Ohio	Meets	Meets	Meets	Meets
Oklahoma	Meets	Meets	Meets	Meets
Oregon	Meets	Meets	Meets	Priority
Pennsylvania	Priority	Priority	Priority	Priority
Rhode Island	Priority	Meets	Meets	Meets
South Carolina	Meets	Future	Meets	Meets
South Dakota	Meets	Meets	Meets	Priority
Tennessee	Meets	Meets	Meets	Meets
Texas	Meets	Meets	Meets	Meets
Utah	Meets	Meets	Meets	Meets
Vermont	Priority	N/A	Meets	Meets
Virginia	Meets	Meets	Meets	Priority
Washington	Meets	Meets	Meets	Future
West Virginia	Meets	Meets	Meets	Future
Wisconsin	Priority	Priority	Meets	Priority
Wyoming	Meets	Priority	Meets	Future

Consumer education choices

State	Develop a consumer education website	Establish a hotline for parents to report health and safety violations	Develop information on child care assistance and other benefits
Alabama	Priority	Meets	Meets
Alaska	Future	Meets	Meets
Arizona	Meets	Meets	Meets
Arkansas	Meets	Meets	Meets
California	Meets	Meets	Meets
Colorado	Meets	Meets	Meets
Connecticut	Priority	Meets	Meets
Delaware	Meets	Meets	Meets

State	Develop a consumer education website	Establish a hotline for parents to report health and safety violations	Develop information on child care assistance and other benefits
District of Columbia	Meets	Meets	Meets
Florida	Meets	Meets	Meets
Georgia	Meets	Meets	Meets
Guam	Priority	Future	Meets
Hawaii	Priority	Meets	Meets
Idaho	Meets	Meets	Meets
Illinois	Meets	Meets	Meets
Indiana	Meets	Meets	Meets
Iowa	Meets	Meets	Meets
Kansas	Meets	Meets	Meets
Kentucky	Meets	Meets	Meets
Louisiana	Meets	Meets	Meets
Maine	Meets	Meets	Not Reported
Maryland	Priority	Future	Meets
Massachusetts	Meets	Meets	Meets
Michigan	Meets	Meets	Meets
Minnesota	Meets	Meets	Meets
Mississippi	Meets	Meets	Meets
Missouri	Meets	Meets	Meets
Montana	Meets	Future	Priority
Nebraska	Future	Meets	Future
Nevada	Priority	Meets	Meets
New Hampshire	Priority	Meets	Meets
New Jersey	Meets	Meets	Meets
New Mexico	Meets	Meets	Meets
New York	Meets	Meets	Meets
North Carolina	Meets	Meets	Meets
North Dakota	Meets	Future	Meets
Ohio	Meets	Meets	Meets
Oklahoma	Meets	Meets	Meets
Oregon	Future	Meets	Meets
Pennsylvania	Meets	Meets	Meets
Rhode Island	Meets	Meets	Meets
South Carolina	Meets	Meets	Meets
South Dakota	Meets	Meets	Meets
Tennessee	Meets	Meets	Meets
Texas	Meets	Meets	Meets
Utah	Meets	Meets	Meets
Vermont	Meets	Meets	Meets

State	Develop a consumer education website	Establish a hotline for parents to report health and safety violations	Develop information on child care assistance and other benefits
Virginia	Meets	Meets	Meets
Washington	Meets	Meets	Meets
West Virginia	Priority	Meets	Meets
Wisconsin	Meets	Meets	Meets
Wyoming	Priority	Meets	Meets

Family-friendly policies

State	Implement a 12-month eligibility	Provide 3-month child care assistance during job search	Reduce parental co-payments
Alabama	Meets	Meets	Priority
Alaska	Future	Meets	Future
Arizona	Meets	Meets	Future
Arkansas	Meets	Meets	Meets
California	Meets	Meets	Meets
Colorado	Meets	Future	Priority
Connecticut	Meets	Priority	Future
Delaware	Meets	Meets	Meets
District of Columbia	Meets	Meets	Meets
Florida	Meets	Meets	Meets
Georgia	Meets	Meets	Priority
Guam	Meets	Future	Future
Hawaii	Priority	Priority	Priority
Idaho	Priority	Priority	Future
Illinois	Priority	Priority	Priority
Indiana	Meets	Meets	Meets
Iowa	Priority	Priority	Meets
Kansas	Meets	Meets	Meets
Kentucky	Meets	Meets	Meets
Louisiana	Meets	Future	Meets
Maine	Meets	Meets	Priority
Maryland	Meets	Meets	Future
Massachusetts	Meets	Meets	Meets
Michigan	Meets	Meets	Meets
Minnesota	Meets	Meets	Meets
Mississippi	Meets	Meets	Meets
Missouri	Meets	Meets	Future
Montana	Meets	Meets	Future
Nebraska	Priority	Priority	Meets

State	Implement a 12-month eligibility	Provide 3-month child care assistance during job search	Reduce parental co-payments
Nevada	Meets	Future	Priority
New Hampshire	Meets	Meets	Future
New Jersey	Meets	Meets	Meets
New Mexico	Meets	Meets	Priority
New York	Future	Future	Future
North Carolina	Meets	Meets	Future
North Dakota	Meets	Meets	Meets
Ohio	Meets	Meets	Meets
Oklahoma	Meets	Meets	Priority
Oregon	Meets	Meets	Future
Pennsylvania	Meets	Meets	Future
Rhode Island	Priority	Meets	Future
South Carolina	Meets	Meets	Meets
South Dakota	Meets	Meets	Priority
Tennessee	Meets	Meets	Meets
Texas	Meets	Meets	Future
Utah	Priority	Meets	Meets
Vermont	Meets	Meets	Meets
Virginia	Meets	Meets	Future
Washington	Meets	Meets	Future
West Virginia	Priority	Meets	Meets
Wisconsin	Priority	Priority	Priority
Wyoming	Meets	Meets	Future

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