

Project Summaries for Promoting Research on Subsidy Payment Rates (PROSPR) Implementation Grants

Boston Children’s Hospital and Tribal Child Care Association of California	2
Child Trends, Inc. and Vermont Agency of Human Services.....	4
Education Development Center and Connecticut Office of Early Childhood Error! Bookmark not defined.	
Public Policy Associates (PPA) and Michigan Department of Lifelong Education, Advancement, and Potential (MiLEAP)	7
Public Policy Institute of California (PPIC) and California Department of Social Services	9
Regents of the University of Minnesota and Minnesota Department of Human Services	11
Trustees of Boston University (Boston University School of Social Work) and Massachusetts Department of Early Education and Care.....	12
The University of Chicago, Crown Family School of Social Work, Policy, and Practice, and Illinois Department of Human Services.....	14
Urban Institute and District of Columbia Office of the State Superintendent of Early Learning	16

Boston Children's Hospital and Tribal Child Care Association of California

Principal Investigator(s): Catherine Ayoub (Co-PI, Boston Children's Hospital) and Joanne Roberts (Co-PI, Boston Children's Hospital)

Policy Partner(s): Tribal Child Care Association of California (TCCAC; CCDF lead agencies)

Project Title: California Tribal Evaluation of CCDF Policies and Initiatives Implementation

Focal Subsidy Policies:

In California, Native American families may be eligible to receive child care services through either Tribal initiatives (e.g., Tribal Temporary Assistance for Needy Families, Tribal CCDF) or state initiatives (e.g., CA Work Opportunity and Responsibility to Kids [CalWORKs], CA Department of Education's child care programs), but not both. Each Tribal CCDF agency has its own eligibility requirements and policies. Additionally, in 2021, CA passed legislation requiring universal access to preschool for all 4-year-olds through the public school system by the 2025–2026 school year; public schools are not grounded in Tribal cultural traditions and practices.

Research Objectives and Approach:

The grant team will evaluate whether the implementation of CCDF subsidy practices and policies can bolster Tribal families' access to high-quality, culturally grounded early education and child care within 32 TCCAC Tribal CCDF grantee members. The grant team will also develop strategies and provide resources to support Tribal child care decision-makers in developing CCDF policies and practices.

The research questions for this project include:

1. How do subsidy payment policies (e.g., provider payment rates and copayment structures) and practices impact equitable access to high-quality child care, specifically about whether care is affordable, meets parents' needs, requires reasonable effort, and supports children's development for families with low income?
2. How do provider payment policies affect availability and access to child care for families receiving subsidies and subsidy-eligible families?
3. How do payment rate policies (e.g., differential rates) affect access to high-quality child care?
4. How do payment practices affect the availability and access to child care for families receiving subsidies and subsidy-eligible families?
5. How do family copayment policies affect access to child care?
6. What role do subsidy payment policies and practices play in improving equitable access to high-quality child care? Are there differential effects on payment rate and/or copayment

policies for key populations of interest (e.g., home-based child care providers, American Indians, rural communities)?

7. What opportunities are there to refine policies and practices regarding access to child care to support better outcomes for families and children?

The team's evaluation will include (1) analyses of administrative data to better understand policy and practice alignment at the state, county, and Tribal levels and of the potential association between diverse practices and policies regarding supply, demand, affordability, and availability of child care; (2) study of policies and practices at the community and provider levels conducted with community leaders and providers across all 32 communities to supplement and enhance the administrative data analyses from the prior step; (3) four in-depth case studies on CCDF implementation strategies and the impacts of current policy on the accessibility of high-quality child care, with a focus on family and provider voices to further understanding of need and ways to bolster access to high-quality child care; and (4) resource and strategies tool kit that include outcomes of human-centered design and rapid-cycle evaluation supporting Tribal, local, state, and national knowledge of CCDF implementation and building Tribal capacity for researching and implementing CCDF policies and practices. Data will be collected on multiple levels, including system, community, provider, and family levels.

Subpopulation(s) of Interest: Tribal communities.

Child Trends, Inc. and Vermont Agency of Human Services

Principal Investigator(s): Sara Amadon (PI, Child Trends) and Patti Banghart Gottesman (PI, Child Trends)

Policy Partner(s): Child Development Division at the Vermont Agency of Human Services, Department for Children and Families (CCDF lead agency)

Project Title: Effects of CCDF Payment Policies on Equitable Access to High-Quality Subsidized Care in Vermont

Focal Subsidy Policies:

Vermont made subsidy policy changes in 2021 and 2023, including (1) increased provider reimbursement rates; (2) increased income eligibility thresholds for families receiving subsidies; (3) created an immigrant-resident eligibility category with state funds; (4) waived copayments for qualifying families; (5) created a single copayment for families; (6) allowed payment based on enrollment; and (7) gave capacity payments to providers. With these policy changes and initiatives, VT aimed to stabilize the child care sector and expand access for families to receive and retain child care subsidies.

Research Objectives and Approach:

The grant team will examine the effects Vermont's changes to the CCDF payment policies have on equitable access to high-quality child care for families eligible for subsidies.

The research questions for this project include:

1. How do policy changes lead to equitable access to early care and education for families?
2. How do policy changes impact providers to support equitable access to early care and education for children and families?
3. How do policy changes impact the early care and education workforce to support equitable access to early care and education for children and families?

The grant team will evaluate changes to CCDF payment policies using a mixed-methods approach, including longitudinal and descriptive analyses of administrative data (e.g., subsidy, licensing, VT quality ratings), as well as surveys and focus groups with parents and providers.

Subpopulation(s) of Interest: Families with infants/toddlers, families that are recent immigrants, children living in rural areas, providers and families in rural and low-income areas, children in households with income at or near the poverty level, and subsidy-eligible families.

Education Development Center and Connecticut Office of Early Childhood

Principal Investigator(s): Heidi Rosenberg (PI, Education Development Center) and Mike Strambler (Co-PI, Yale School of Medicine)

Policy Partner(s): Connecticut Office of Early Childhood (OEC; CCDF lead agency)

Project Title: Increasing Access to Child Care and Early Education: Evaluating the Impact of Connecticut's CCDF Subsidy Payment Policies on Provider and Family Participation

Focal Subsidy Policies:

Over the years, OEC has made several significant changes to Care 4 Kids subsidy payment policies to increase the affordability of child care, supply of high-quality child care, and families' access to subsidies. Beginning in 2019, OEC instituted a series of base-payment rate increases for licensed centers and family child care providers, with additional increases scheduled through July 2025. OEC also increased its quality bonus incentive for nationally accredited center-based and family child care providers. From April to November 2021, OEC instituted a temporary waiver of all family copayments.

Research Objectives and Approach:

The grant team will conduct (1) an implementation evaluation, exploring how subsidy payment policies are administered at the state level and how they are experienced by providers and families; and (2) an impact evaluation, examining whether OEC's subsidy payment policies have increased the number of providers serving families using subsidies and families' equitable access to affordable, high-quality child care.

The overarching research question for the project is: How do subsidy payment policies (e.g., provider payment rates and copayment structures) and practices impact access to high-quality child care, specifically about whether care is affordable, meets parents' needs, requires reasonable effort, and supports children's development for families with low incomes? There are also specific research questions for each evaluation.

Implementation evaluation:

1. How are OEC's subsidy payment policies implemented?
2. Which agency staff and outside vendors are responsible for administering different aspects of the subsidy policies, and to what extent is the work coordinated across entities?
3. What structural elements support or hinder policy implementation?
4. How do providers experience these policy changes?
5. How do families experience these policy changes?

6. What contextual factors related to policy implementation are associated with provider and parent experiences?

Impact evaluation:

1. How do subsidy payment policies impact child care providers' participation in the subsidy system?
2. How do payment policies impact subsidy-eligible families' access to care?
3. Are there differential impacts associated with specific provider or family characteristics?

The grant team will use a mixed-methods approach to evaluate the implementation and impact of OEC's subsidy payment policies, including an interrupted time-series analysis design for the impact evaluation. Analyses will involve secondary data, such as administrative data from OEC and census data, and primary data collected from surveys of providers and families, as well as interviews with providers and focus groups with families.

Subpopulation(s) of Interest: Children of different ages (e.g., infants/toddlers, school-aged children), children with different subsidy eligibility statuses, children with special needs, and children living in different geographic areas/neighborhoods with different poverty levels.

Public Policy Associates and Michigan Department of Lifelong Education, Advancement, and Potential

Principal Investigator(s): Colleen Graber (PI, Public Policy Associates) and Rebecca Frausel (Co-PI, Public Policy Associates)

Policy Partner(s): Michigan Department of Lifelong Education, Advancement, and Potential (CCDF lead agency) and Office of Early Childhood Education

Project Title: Unequal Burdens, Unequal Access? Understanding How Administrative Burden Mediates Payment and Copayment Policies

Focal Subsidy Policies:

Michigan is pursuing five initiatives related to payment/copayment policies: (1) temporary waiver of family copayments; (2) temporary increase in payments to providers; (3) payment by enrollment, rather than attendance; (4) payment by time blocks, rather than hours of care; and (5) a pilot program using a contracted-slots model, where services to subsidy-eligible families are contracted out to providers.

Research Objectives and Approach:

The grant team will examine the direct impact of subsidy policy changes on access to care (both overall access and equity of access) and the role of policy implementation in mediating the impact of policy changes for key populations of interest, including families with different characteristics and needs (e.g., race, ethnicity, poverty, geography).

The research questions for this project include:

1. How do subsidy payment rates and copayment structures affect Child Development and Care (CDC)-eligible families' access to child care, specifically about whether care is affordable, meets parents' needs, requires reasonable effort, supports children's development, and provides equitable access?
2. How does the temporary nature of some of the policy changes affect providers' and families' program participation and access to care?
3. How does administrative burden affect the relation of payment and copayment policies with child care access, in terms of learning, compliance, and psychological costs for providers and families? Does the burden differ across family types?
4. How do eligibility specialists (e.g., caseworkers) perceive the administrative burden of the CDC program, and what effect do the policy changes have on their perceptions?
5. How effective is the contracted-slots model on access to child care? What are providers' impressions of the administrative burden of the contracted slots compared to the CDC

program? To what extent are contracted slots supplementing, rather than supplanting, existing CDC-provider slots?

The grant team will use a mixed-methods approach, which includes a secondary analysis of state administrative data and administrative documents as well as surveys of providers and caseworkers, a longitudinal qualitative provider panel, case studies, and interviews with providers participating and not participating in the contracted slots pilot, and observations of caseworker listening-workshopping sessions.

Subpopulation(s) of Interest: Race and ethnicity subgroups and children in urban and rural areas.

Public Policy Institute of California and California Department of Social Services

Principal Investigator(s): Caroline Danielson (PI, Public Policy Institute of California), Niu Gao (Co-PI, Public Policy Institute of California), and Laura Hill (Co-PI, Public Policy Institute of California)

Policy Partner(s): California Department of Social Services, Child Care and Development Division (CCDF lead agency)

Project Title: Impact of CCDF Payment Policies and Practices on Access to Child Care in California

Focal Subsidy Policies:

California enacted subsidy policy changes, including waiving family fees through September 2023; increasing provider reimbursement rates (may switch to a single reimbursement rate structure based on a cost model); and, in 2021, passing legislation requiring universal access to preschool for all 4-year-olds through the public school system by 2025–2026 school year.

Research Objectives and Approach:

The grant team will examine the implementation and outcomes of subsidy payment policies and practices and develop proof-of-concept approaches and metrics to lay the groundwork for the lead agency to continue tracking the rollout of future payment policy changes.

The research questions for this project include:

1. How do fee waivers during the COVID-19 pandemic and the ongoing reduction in family fees after the pandemic impact access to high-quality child care?
2. How do increased provider payment rates impact access to high-quality child care?
3. How does California's move to universal preschool change the supply of providers and access to high-quality care for children from birth to age 5?

The grant team will use a mixed-methods longitudinal approach (2015–2026), including analyzing: (1) publicly available data about payment policy and practice changes (e.g., timing and location within the state); (2) aggregated administrative data on child care supply (e.g., centers, family child care homes, and license-exempt providers); (3) individual-level administrative data (e.g., Child Development Management Information System, Supplemental Nutrition Assistance Program and Temporary Assistance for Needy Families program participation data, Unemployment Insurance-covered earnings for low-income families); (4) surveys of local Child Care Resource and Referral Agencies, Alternative Payment Program agencies, and Local Planning Councils; and (5) focus groups with families and providers.

Subpopulation(s) of Interest: Children ages from birth to age five, dual language learners, and license-exempt providers.

Board of Regents of the University of Minnesota and Minnesota Department of Human Services

Principal Investigator(s): Elizabeth Davis (Co-PI, Board of Regents of the University of Minnesota) and Ann E. Bailey (Co-PI, Board of Regents of the University of Minnesota)

Policy Partner(s): Minnesota Department of Human Services, Child Care Services Division (CCDF Lead Agency)

Project Title: Coordinated Evaluation of Minnesota’s Child Care Assistance Payment Policies

Focal Subsidy Policies:

Minnesota increased the maximum payment rates substantially in 2014, and again in 2020 and 2021. In November 2021, MN set maximum rates at the 40th percentile for infants and toddlers and at the 30th percentile for preschool- and school-age children. In October 2023, MN raised rates to the 75th percentile of the 2021 market rate data.

Research Objectives and Approach:

The grant team will assess how provider payment practices and policies improve equitable access to high-quality child care, particularly for rural communities, communities of color, and immigrant communities.

The research questions for this project include:

1. How do provider payment policies and practices affect low-income families’ access to high-quality child care?
2. What role do subsidy payment policies and practices play in improving equitable access to high-quality child care?
3. How do payment rate policies (e.g., increasing payment rates) impact program goals, such as supporting parental educational and training attainment, work stability and wage growth, and child educational outcomes?

The grant team will use a mixed-methods approach involving three components: (1) analysis of administrative data, including descriptive analysis and quasi-experimental analysis of causal effects; (2) large-scale qualitative interview study, including with child care directors and families who participate in subsidies; and (3) collection and analysis of survey data, including from child care directors, educators (center- and home-based), and families.

Subpopulation(s) of Interest: Parents of infants and toddlers, communities of color, immigrant communities, and rural communities.

Boston University Board of Trustees (School of Social Work) and Massachusetts Department of Early Education and Care

Principal Investigator(s): Yoonsook Ha (PI, Boston University Board of Trustees), Andrew Bacher-Hicks (Co-PI, Boston University), Kate Giapponi-Schneider (Co-PI, Brandeis University), and Pamela Joshi (Co-PI, Brandeis University)

Policy Partner(s): Massachusetts Department of Early Education and Care (CCDF lead agency)

Project Title: Evaluation of the Relationship between Massachusetts Child Care Subsidy Payment Rate Policies and Access to Care

Focal Subsidy Policies:

In 2023, Massachusetts implemented a 10 percent increase in rates for all providers and additional targeted increases to ensure that all rates meet the 30th percentile of market prices; Massachusetts plans to increase rates again in 2024 to the 50th percentile of market prices. Additionally, the Department of Early Education and Care plans to conduct a cost study to develop a more equitable rate structure, so that future rate increases can be distributed more equitably to programs and underserved communities.

Research Objectives and Approach:

The grant team will gather evidence on whether, to what degree, and for whom rate increases improve the supply of subsidized care and how to best deploy such policies.

The research questions for this project include:

1. Do the patterns in the availability, demand, and use of subsidized care relate to mismatches and/or shortages in availability and inequity in access to care?
2. How do rate changes impact the availability, demand, and use of subsidized care?
3. What are the differential effects of rate changes on equitable access to high-quality subsidized care for Child Care Development Block Grant priority populations and underserved communities?
4. What kinds of communication enhance the impacts of rate changes on equitable access to subsidized care?

The grant team will use a mixed-methods approach, including a secondary analysis of longitudinal administrative data, provider focus groups, and a parent survey. The grant team will also engage providers directly in designing and evaluating a low-cost, communications-focused intervention aimed at increasing awareness of the rate increases to further enhance equitable access to care.

Subpopulation(s) of Interest: Children of different ages (e.g., infants/toddlers, school-aged children) and incomes; Black, Hispanic, and other families of color; immigrant families; families in rural areas; children living in different geographic areas/neighborhoods; families affected by poverty; children with different subsidy eligibility statuses; and families needing nonstandard hour care.

University of Chicago Crown Family School of Social Work, Policy, and Practice and Illinois
Department of Human Services

Principal Investigator(s): Julia Henly (PI, University of Chicago) and David Alexander (Co-PI, Illinois Action for Children)

Policy Partner(s): Illinois Department of Human Services (CCDF lead agency), Illinois Action for Children, and Center for Early Learning Funding Equity

Project Title: Compensation and Quality Contracts to CCDF Providers: Payment Policies to Improve Equitable Access to High-Quality Child Care

Focal Subsidy Policies:

Illinois created two new provider payment mechanisms—Smart Start Grants and Smart Start Quality Support Program—to supplement its CCDF voucher model, with additional financial support going to programs that serve subsidized and subsidy-eligible families. The new payment mechanisms supplement the voucher program’s per-child reimbursements. Furthermore, Illinois will adopt a restructured copayment rate that virtually eliminates out-of-pocket expenses for subsidy-eligible families living in poverty and caps copayments at 7 percent of household income for other subsidy-eligible families.

Research Objectives and Approach:

The grant team will investigate whether Smart Start Grants, the Smart Start Quality Support Program, and the restructured copayment rate can improve subsidized and subsidy-eligible families’ access to high-quality child care.

The research questions for this project include:

1. What factors shape the design and rollout of the new provider payment mechanisms? How do equity goals manifest in their design and implementation?
2. What do providers understand about the new provider payment mechanisms and restructured copayment rate, and how does their understanding affect the likelihood of participation in the subsidy program?
3. Does participation in the new payment mechanisms change provider experiences?
4. Does participation in the new payment mechanisms and restructured copayment rate result in expected outputs related to workforce compensation, staffing, quality supports, revenue stabilization, and copayment reductions?
5. Does participation in the new payment mechanisms and restructured copayment rate lead to expected short-term outcomes related to increased supply, quality, and morale, and to lower costs for parents?

6. Has families' access to child care improved with the implementation of the new provider payment mechanisms and restructured copayment rate?
7. What are the unintended consequences (if any) of participating in the new provider payment mechanisms and restructured copayment rate?
8. What are the equity implications of each research question? Are there differential experiences and effects of the new provider payment mechanisms and restructured copayment rates for diverse provider and family populations of interest?

The grant team will (1) use an embedded ethnographic study of the CCDF lead agency's planning activities; (2) conduct a panel study, surveys, and qualitative interviews with licensed centers and licensed family child care program directors/owners; and (3) assess and analyze administrative data to understand child care access changes.

Subpopulation(s) of Interest: Underserved populations, with particular attention to Black, Indigenous, and people of color families; families in rural areas; families living in economically disadvantaged communities; families with special caregiving needs; and families needing nonstandard hour care.

**Urban Institute and District of Columbia Office of the State Superintendent of Education,
Division of Early Learning**

Principal Investigator(s): Diane Schilder (PI, Urban Institute), Justin Doromal (Co-PI, Urban Institute), and Kathryn Kigera (Co-PI, OSSE)

Policy Partner(s): District of Columbia Office of the State Superintendent of Education, Division of Early Learning (CCDF lead agency)

Project Title: An Evaluation of the District of Columbia’s Innovative Subsidy Policies and Practices

Focal Subsidy Policies:

District of Columbia has (1) increased child care subsidy payments based on a cost-estimation model; (2) changed family copayments, so that no family copayment is more than 7 percent of household income; (3) administered these policies in innovative ways by having some large child care centers determine eligibility and copayments directly and by supporting smaller providers with subsidy administration through government agencies and with opportunities to engage in shared services. Additionally, the District of Columbia plans more changes in the coming years.

Research Objectives and Approach:

The grant team will evaluate the implementation and impact of DC’s innovative child care subsidy policies and practices, and how variations in payment policies and practices relate to access to stable, high-quality child care.

The research questions for this project include:

1. What is the relationship between payment rate policies (e.g., differential rates based on the quality of the facility based on a cost estimation model) and access to child care?
2. How do provider payment policies affect availability and access to child care for families receiving subsidies and subsidy-eligible families?
3. How do provider payment practices affect availability and access to child care for families receiving subsidies and subsidy-eligible families?
4. How do family copayment policies affect access to child care?
5. What role do subsidy payment policies and practices play in improving equitable access to high-quality child care?
6. What are the outcomes and impacts of provider payments and family copayment policies and practices?

The grant team will analyze administrative data and primary qualitative and survey data—collected from community leaders, policymakers, child care subsidy staff, providers, and families—to describe the implementation of policies and practices and produce evidence of outcomes and impacts.

Subpopulation(s) of Interest: Children of different ages (e.g., infants/toddlers, school-aged children), families from diverse racial/ethnic backgrounds, children with special needs, and families needing nonstandard hour care.