

**The CCDF Policies Database Book of Tables:
Key Cross-State Variations in CCDF Policies as
of October 1, 2012**

OPRE Report 2013-22

November 2013

THE CCDF POLICIES DATABASE BOOK OF TABLES: KEY CROSS-STATE VARIATIONS IN CCDF POLICIES AS OF OCTOBER 1, 2012

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Submitted to:

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Office of Planning, Research and Evaluation
Administration for Children and Families
U.S. Department of Health and Human Services

Contract Numbers: GS23F8198H; HHSP23320095654WC

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This report and other reports sponsored by the Office of Planning, Research and Evaluation are available at <http://www.acf.hhs.gov/programs/opre/index.html>.



Acknowledgments

The authors owe thanks to all the individuals who helped to design the project and these tables, who provided and verified the data, and who assisted in carrying out the project tasks.

Guidance on design was provided by numerous Administration for Children and Families (ACF) staff, by members of the project's Expert Panel, and by individuals who participated in sessions at the summer 2009 State and Territory Child Care Administrators Meeting and at the fall 2009 meeting of the Child Care Policy Research Consortium. The authors would like to thank the following members of the CCDF Policies Database Expert Panel (with their affiliations at the time of joining the Panel): Peggy Ball (National Child Care Information and Technical Assistance Center), Steffanie Clothier (National Conference of State Legislatures), Ann Collins (Abt Associates), Danielle Ewen (Center for Law and Social Policy), Peter Jofitis (Inter-university Consortium for Political and Social Research/Child Care and Early Education Research Connections), Cherie Kotilinek (Minnesota State Child Care Administrator), Lee Kreader (National Center for Children in Poverty/Child Care and Early Education Research Connections), Tom Olsen (Oregon State Child Care Administrator), Deanna Schexnayder (University of Texas), and Karen Tvedt (Washington State). The views expressed in this publication do not necessarily reflect the views of these members.

Particular thanks are owed to the ACF Office of Planning, Research and Evaluation (OPRE) project officer, Kathleen Dwyer, Dawn Ramsburg of the ACF Office of Child Care (OCC), and Gina Adams and Monica Rohacek of the Urban Institute.

This project would not be possible without the substantial involvement of OCC Regional Program Managers, Child Care and Development Fund (CCDF) Administrators, and State/Territory staff. Administrators and State/Territory staff provided the detailed policy documents on which these tables are based, and conducted often time-consuming reviews of draft tables to improve their accuracy and relevance. Regional managers helped to coordinate communication.

Finally, several other Urban Institute staff played key roles in the completion of this work. Joyce Morton and Kara Harkins handled technical aspects of the CCDF Policies Database. Kathryn Stevens and Melissa Medeiros provided research assistance in the preparation of the tables. Jamyang Tashi, Ei Yin Mon, Adam Kent, Meryl Barofsky, Tiffany O'Neal, Lindsay Davis, Joanna Wu, Kathryn Stevens, and Niloufer Taber obtained, reviewed, and coded policy materials. In the early stages of the project, Gretchen Rowe and Mary Murphy provided guidance on design and logistical issues, and Meryl Thomson participated in the design of the database.

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Overview

This document describes the policies that States and Territories use in operating child care subsidy systems under the Child Care and Development Fund (CCDF). Across the country and in five outlying areas, CCDF provides federal money to States, Territories, and Tribes to subsidize the cost of child care for lower-income families. Detailed policies vary widely across jurisdictions.

The CCDF Policies Database project produces a comprehensive, up-to-date database of CCDF policies for the 50 States, the District of Columbia, and the U.S. Territories and outlying areas. The Database contains hundreds of variables designed to capture the CCDF policies across time, allowing users to access policy information for a specific point in time as well as to see how and when policies change over time. The Database is funded by the Office of Planning, Research and Evaluation and maintained by the Urban Institute.

The information in the Database, and thus the information in the tables, is based primarily on the documents that caseworkers use as they work with families and providers (often termed “caseworker manuals”). An initial set of manuals was coded for the Database, reflecting policies in effect on or before October 1, 2009. Ongoing manual updates are collected in order to capture policy changes when they occur in each State/Territory. Each year the project produces a set of tables, containing selected policies from the Database (full Database files are also made available for public use). The tables are then reviewed by State/Territory administrators and verified for accuracy. The final tables are included in an annual report, with the current report showing the policies in effect on October 1, 2012. The information provided in the Book of Tables covers four general areas of policy: eligibility requirements for families and children; family application, terms of authorization, and redetermination; family payments; and policies for providers, including maximum reimbursement rates.

Along with each table, this report provides highlights of the policies in effect in 2012, as well as how those policies have changed since 2011. Highlights from 2012 include:

- Twenty-eight States/Territories require that parents work a minimum number of hours per week to be eligible for care.
- Among the 48 contiguous States and D.C., the initial income eligibility thresholds for a family of three range from \$1,854 a month in Nebraska to \$3,978 a month in New Hampshire.
- Seventeen States/Territories use higher eligibility thresholds for families that are already receiving subsidies.
- Across the States/Territories, copayments for a three-person family with \$15,000 in annual earnings range from \$0 to \$414 per month. The median copayment for a family with those characteristics is \$64.

The information presented in this report represents a subset of the information available in the full database. For additional policies, as well as detail about policy changes over time, users can access the full Database detail.

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I. INTRODUCTION AND OVERVIEW

Across the country and in five Territories, the Child Care and Development Fund (CCDF) provides federal money to States, Territories, and Tribes to subsidize the cost of child care for lower-income families. In the average month of fiscal year 2011, the latest year for which data are available, 1.6 million children received care that was subsidized through CCDF.¹ The CCDF block grant allows subsidies to be provided to children who are under age 13 and older children under age 19 who have special needs, with parents or guardians who are working or in school, and with family incomes up to 85 percent of the applicable state median income. Within the broad federal parameters, States and Territories – and in some cases localities – set the detailed policies.² Those policies determine whether a particular family will or will not be eligible for subsidies, how much the family will have to pay for the care (if anything), how families apply for and retain subsidies, the maximum amounts that child care providers will be reimbursed, and the administrative procedures that providers must follow. Thus, while CCDF is a single program from the perspective of federal law, it is in practice a different program in every State and Territory.

This Book of Tables presents key aspects of the differences in CCDF-funded programs across all 50 States, the District of Columbia, American Samoa, the Northern Mariana Islands, Guam, Puerto Rico, and the Virgin Islands, as of October 1, 2012.³ (Highlights of policy changes between 2011 and 2012 are included throughout this report.) October 1 was chosen as the focus date because it is the start of the federal fiscal year, consistent with the submission date of the biennial CCDF Plans (in odd-numbered years), and consistent with the starting date of the annual period covered by ACF’s administrative data (ACF-800 – Annual Aggregate Child Care Data Report and ACF-801 – Monthly Child Care Data Report). This Book of Tables includes 42 tables across four general areas of policy (see Table of Tables on page iii for more information):

- Eligibility requirements for families and children (Tables 1 through 17)
- Family application, terms of authorization, and redetermination (Tables 18 through 27)
- Family payments (Tables 28 through 35)
- Policies for providers, including maximum reimbursement rates (Tables 36 through 42)

The information in the tables is taken from the CCDF Policies Database, a cross-state, cross-time database of CCDF policy information funded by HHS/ACF/OPRE. The information in the Database, and thus the information in the tables, is based primarily on the documents that caseworkers use as they work with families and providers (often termed “caseworker manuals”).

¹ See “FFY 2011 CCDF Data Tables (Preliminary Estimates)”, Table 1, available on-line at <http://www.acf.hhs.gov/programs/occ/resource/fy-2011-data-tables-preliminary>.

² CCDF regulations (Code of Federal Regulations 45 CFR Parts 98 and 99: Child Care and Development Fund: Final Rule) may be accessed via the U.S. Government Printing Office website (<http://www.gpo.gov/fdsys/pkg/CFR-2011-title45-vol1/pdf/CFR-2011-title45-vol1-part98.pdf>).

³ The 2009 and 2011 Books of Tables, showing policies in effect on October 1, 2009, 2010, and 2011 are available from the Office of Planning Research and Evaluation (OPRE) CCDF Policies Database project webpage (<http://www.acf.hhs.gov/programs/opre/research/project/child-care-and-development-fund-ccdf-policies-database-2008-2013>). Work is currently underway to collect policy changes through October 1, 2013.

The caseworker manuals generally provide more detailed information on eligibility, family payments, and provider-related policies than is included in the biennial CCDF Plan documents submitted by States/Territories to ACF.⁴ The caseworker manuals also provide ongoing detail for periods in between CCDF Plan submission dates. The Database includes some of the policy variations that exist within States/Territories, and it includes policy details beyond those that appear in this Book of Tables. Readers interested in that level of information may obtain the full Database from the Child Care and Early Education *Research Connections* website.⁵

Despite the extensive information in these tables, they do not cover all aspects of States⁷/Territories' child care subsidy programs. The following caveats are especially important to note:

- In several States, at least some policies vary across sub-areas within the State. In these States, the Book of Tables shows the information for the most populous area, and notes the area to which the information applies.
- The Book focuses on CCDF-funded child care subsidies; child care funded solely with Temporary Assistance for Needy Families (TANF)⁶ funds or other non-CCDF funds is not included.
- Tribal CCDF programs are not included.
- Some important aspects of child care subsidy policy are not addressed in the tables. In particular, the tables do not address most aspects of program administration, do not cover rules for provider licensing, and do not include information on how States/Territories spend funds for quality activities.⁷

The remainder of this Introduction provides more information on the programs covered by this Book, and the process by which the information in the Book of Tables was obtained and verified. Subsequent sections of the Book present the tables describing each area of policy. Appendix A provides more information on the content of the full CCDF Policies Database.

⁴ Throughout this Book of Tables, the term “States/Territories” refers to the 50 States, the District of Columbia, the Commonwealth of Puerto Rico, the Commonwealth of the Northern Mariana Islands, and the Territories of American Samoa, Guam, and the United States Virgin Islands.

⁵ Upon final review and release of the data by ACF each year, the full Database is available from the *Research Connections* website (<http://www.researchconnections.org/childcare/resources/17048>).

⁶ TANF provides work opportunities and assistance to low-income families. The program is a federally-funded, State/Territory administered program, allowing States/Territories flexibility in establishing guidelines for providing assistance to families in need. Additional information about TANF can be found at the Administration for Children and Families, U.S. Department of Health and Human Services website (<http://www.acf.hhs.gov/programs/ofa/programs/tanf>).

⁷ These types of policies may extend beyond CCDF, and may be handled by a different agency than the agency that administers CCDF. Information regarding program administration is reported in the CCDF Plans. Information regarding licensing can be found at the National Association for Regulatory Administration (<http://naralicensing.org/>).

The Programs Covered by the Book of Tables

The Book of Tables presents the policies of the key child care subsidy program in each State/Territory that is funded partly or fully with CCDF money. The names of the programs are listed in Table A. Two points are important to note concerning the programs covered by the tables. First, the Book describes the policies for a program as a whole, even if it is jointly funded by both CCDF and other sources. Second, the Book does not include all programs within a State/Territory that help low-income families obtain child care and child development services.

State	Program ¹
Alabama	Child Care Subsidy Program
Alaska	Child Care Assistance Program
Arizona	Child Care Assistance
Arkansas	Child Care Assistance Program
California	California Alternative Payment Programs ²
Colorado	Colorado Child Care Assistance Program
Connecticut	Child Care Assistance Program
Delaware	Child Care Subsidy Program
DC	Subsidized Child Care
Florida	School Readiness
Georgia	Childcare and Parent Services
Hawaii	Child Care Connection Hawaii
Idaho	Idaho Child Care Program
Illinois	Child Care Assistance Program
Indiana	CCDF Program
Iowa	Child Care Assistance
Kansas	Child Care Program
Kentucky	Child Care Assistance Program
Louisiana	Child Care Assistance Program
Maine	DHHS Child Care Subsidy Program
Maryland	Child Care Subsidy Program
Massachusetts	Early Education and Care Financial Assistance
Michigan	Child Development and Care
Minnesota	Child Care Assistance Program
Mississippi	Child Care Payment Program
Missouri	Child Care Assistance Program
Montana	Best Beginnings Child Care Scholarship Program
Nebraska	Child Care Subsidy Program
Nevada	Child Care Subsidy Program
New Hampshire	NH Child Care Scholarship
New Jersey	Child Care Assistance Program

Table A. State/Territory Program Names for the Programs Represented in the CCDF Policies Database's Book of Tables for October 1, 2012

State	Program ¹
New Mexico	Child Care Assistance
New York	Child Care Subsidy Program
North Carolina	Subsidized Child Care Program
North Dakota	Child Care Assistance Program
Ohio	Publicly Funded Child Care
Oklahoma	Child Care Subsidy Program
Oregon	Child Care Program Employment Related Day Care
Pennsylvania	Child Care Works Subsidized Child Care
Rhode Island	Child Care Assistance Program
South Carolina	ABC Child Care Program
South Dakota	Child Care Assistance
Tennessee	Child Care Certificate Program
Texas	Child Care Services
Utah	Child Care Assistance
Vermont	Child Care Financial Assistance Program
Virginia	Child Care Subsidy and Services
Washington	Working Connections Child Care
West Virginia	Child Care
Wisconsin	Wisconsin Shares Child Care
Wyoming	Child Care Subsidy Program
American Samoa	Child Care Program
Guam	CCDF Program
No Mariana Islands	DCCA Child Care and Development Fund Program
Puerto Rico	Child Care and Development Program
Virgin Islands	Child Care Subsidy Program

Source: CCDF Policies Database October 1, 2012 Data

¹ The selected programs were used to code the child care policies and represent the main program providing subsidized child care in each State/Territory. In most cases the program was selected based on consultation with a State/Territory representative.

² When applicable for a particular group of policies, different policies were coded for CalWORKS Stage 2, CalWORKS Stage 3, and Non-CalWORKS Alternative Payment Programs. If separate sub-programs were coded, the footnotes in the tables will reflect which program is represented.

Programs with Joint Funding

Many child care subsidy programs are funded jointly by CCDF and other funds. Non-CCDF funds may be from the TANF program (to the extent they are not formally transferred to CCDF), state-only child care funds in excess of mandatory and matching funds, private/donated funds, and funds from other programs such as housing programs, the Supplemental Nutrition Assistance Program (SNAP⁸), and foster care or Child Protective Services (CPS). Further, up to

⁸ The SNAP program was formerly known as the Food Stamp Program.

30 percent of a State's/Territory's TANF funds may be transferred to CCDF; however, once this money is transferred, it is considered CCDF funding.

In recognition of this joint funding, States/Territories are required to report to the federal government a "pooling factor", computed as total CCDF funds divided by all the funds (CCDF and non-CCDF) used to provide the child care subsidies to the children included in the States'/Territories' administrative data reports to ACF.⁹ For FY 2009, the pooling factors ranged from 0.182 in D.C. to 1.0 in 19 States/Territories. The figure for D.C. indicates that of the subsidies described by D.C.'s data reports (ACF-800 – Annual Aggregate Child Care Data Report and ACF-801 – Monthly Child Care Data Report), only 18.2 percent of the funds were CCDF funds. In other words, CCDF funds supported subsidies for approximately 18 percent of the children reported as being served by D.C. in the ACF-800 and 801 reports. In contrast, in the 19 States/Territories with a pooling factor of 1.0, 100 percent of the funds were either originally CCDF funds or TANF funds transferred to CCDF. The average factor was 0.818.¹⁰ ACF applies the pooling factor to a State's/Territory's total children served to estimate the number of children served by CCDF.

Readers of the Book of Tables who are comparing programs across States/Territories should be cognizant of joint funding for at least two reasons. First, if a user is examining the subsidy policies together with information on CCDF caseloads or CCDF spending, it is important to recognize that the cost and caseload of a program with joint funding may be larger than reflected in CCDF cost and caseload figures. Second, in some cases, a program may use its non-CCDF funds to serve a child or provide a benefit in a manner not permitted by federal CCDF rules. Any policies in the tables that conflict with federal CCDF requirements should be assumed to be funded by a program's non-CCDF funds.

Programs Not Included in the Book of Tables

The Book of Tables provides in-depth information on the State/Territory subsidized child care programs that are funded at least in part with CCDF monies. The Book does not provide a comprehensive picture of all the free or subsidized care available to families in each State/Territory. Specifically, the Book of Tables does not describe the policies that govern Head Start and State/Territory-funded pre-kindergarten programs, child care provided through separate programs for TANF recipients using entirely non-CCDF money, other subsidy programs funded entirely with non-CCDF money, or CCDF programs other than each State's/Territory's primary CCDF-funded program. Awareness of what is and is not covered by the Book is particularly important for readers who are combining policy information from the Book of Tables with information from other sources, such as CCDF administrative data or household-level survey data.

⁹ ACF Technical Bulletin #1r-v3 includes an Appendix that details the computation of the pooling factor, with a spreadsheet that lists all the potential sources of CCDF and non-CCDF funds. See <http://www.acf.hhs.gov/programs/occ/resource/tb01r-4>. TANF-transfer, State Match, and State Maintenance of Effort (MOE) funds are all considered part of CCDF funds.

¹⁰ FY 2009 "801" data, obtained from the *Research Connections* website, <http://www.researchconnections.org/childcare/resources/23619>. Pooling factors for more recent years will be available as those years of CCDF administrative data are publicly released on the *Research Connections* website.

Head Start and State/Territory-funded pre-k policies

Policies governing States’/Territories’ Head Start and State/Territory-funded pre-kindergarten (“pre-k”) programs are not included in the Book of Tables.¹¹ However, these programs serve large numbers of pre-school children, and Early Head Start serves infants and toddlers. Approximately 964,000 children (mostly ages 3 and 4) were served by Head Start and Early Head Start during FY 2011, and approximately 1.3 million (mostly age 4) were in State/Territory-funded pre-kindergarten programs in the 2010-11 school year.¹² In contrast, about 470,000 children ages 3 and 4 were served by CCDF in FY 2011.¹³ Thus, for this age group, Head Start and State/Territory-funded pre-kindergarten both serve more children than CCDF. (Some children are served by more than one program.) A child’s enrollment in Head Start or State/Territory-funded pre-k could allow a parent to work part time without needing to obtain child care, or could reduce the number of hours that a parent must pay for child care (or try to obtain a subsidy). In some cases, a financial link is created between CCDF and pre-k programs since a portion of the amount that a State/Territory spends on pre-k programs can be used as part of its required State/Territory match or maintenance-of-effort (MOE) spending for purposes of CCDF.¹⁴ However, even when a State/Territory takes that option, children enrolled in pre-k are *not* included in the case-level administrative data on the number of children receiving child care services.¹⁵

TANF-Funded child care

States/Territories take different approaches to providing free or subsidized child care for families receiving TANF, both in terms of funding and in terms of service provision. In terms of funding, States/Territories may:

1. Transfer TANF funds into CCDF, in which case the funds are considered and reported as CCDF funds¹⁶; or
2. Spend TANF funds directly on child care (often referred to as TANF-direct) in which case States/Territories could either:
 - a. “Pool” the TANF-direct funds with CCDF funds to pay for services reported on the ACF-800 and ACF-801 data reports; or
 - b. Keep TANF-direct funds completely separate – in which case no TANF-funded child care services would be reported in either the ACF-800 or ACF-801 data.

¹¹ Any discussion of pre-kindergarten programs in this report refers only to state-funded programs.

¹² Head Start data are available from: <http://eclkc.ohs.acf.hhs.gov/hslc/mr/factsheets/2011-hs-program-factsheet.html>. Pre-k enrollment figures are from: <http://nieer.org/publications/state-preschool-2011>.

¹³ According to the CCDF enrollment statistics from the ACF-801 data for FY 2011, approximately 29 percent of children served were ages 3 and 4 and 1.622 million children were served through CCDF. See: <http://www.acf.hhs.gov/programs/occ/resource/fy-2011-data-tables-preliminary>.

¹⁴ According to CCDF financial data for FY 2011, 14 States used pre-kindergarten expenditures to help satisfy State matching and/or MOE requirements. See: <http://www.acf.hhs.gov/programs/occ/resource/fy-2011-ccdf-state-expenditure-data>.

¹⁵ See the ACF-800 form, <http://www.acf.hhs.gov/programs/occ/resource/acf-800-form> for instructions that children in pre-k are not counted as children receiving child care services. Instead, States/Territories are asked to indicate the estimated number of CCDF eligible children receiving public pre-kindergarten services for which CCDF Match and MOE is claimed.

¹⁶ When TANF funds are transferred to CCDF, they must be spent according to CCDF regulations.

In terms of service provision, some States/Territories use the same child care caseworkers and policies for families receiving TANF benefits as for all other families, although families receiving TANF may have a guarantee of receiving a subsidy, or may have higher priority than non-TANF families, and the TANF portion of the program may have a different program name. Other States/Territories handle child care for families receiving TANF through a completely different administrative structure, and some States/Territories use a mix of approaches. As noted above, when States/Territories serve TANF families through the same programs that serve other families, the TANF families will generally be included in the 800 and 801 data. However, if child care for TANF families is completely separate, TANF families will generally not appear in the 801 data, presumably because the State/Territory keeps data on those families in a separate data system.

For the child care programs included in the Book, the tables capture a great deal of information about the treatment of families within that program who also receive TANF benefits. This is the case regardless of funding mechanisms – whether the program is using TANF funds transferred to CCDF, or simply pooled with CCDF, or neither; if the program’s materials describe policies for TANF families, they are included in the Database and in these tables. However, if a State/Territory provides child care to families receiving TANF *through a completely separate program with no funding or administrative connection with CCDF*, the policies of that program are not captured in the Database and in these tables. In general, if a State’s/Territory’s 801 data indicate that a very low percentage of the caseload receives TANF, the State/Territory may be serving TANF families through a separate program or approach. Thus, readers who are particularly interested in those families who receive TANF benefits should be aware that the policies captured here do not provide a complete picture of the free or subsidized child care available to this subset of families in all States/Territories.

Other government subsidy programs

States, Territories, and localities may operate other programs that provide free or subsidized child care or child development services beyond the programs already discussed. For example, free after-school programs may be operated by school districts, city governments, or other agencies. A State/Territory may have a separate program for special groups such as foster children, children under protective services, or migrant farmworkers. These programs, while important, are outside the scope of the current project. Also, if a State/Territory operates more than one distinct program with CCDF funds (as is the case in California), only the primary program is included in the Book.¹⁷

¹⁷ We coded the Alternative Payment Programs (CAPP) and the CalWORKS Stage 2 and Stage 3 programs in the Database. When policies differed, policies for the CAPP program (for non-TANF families) are shown in the tables. We did not code some other California programs that serve very few families, such as a program serving migrant farmworker families, due to resource constraints.

Sources and Verification

For all of the tables in this Book (Tables 1 through 42) the primary sources of information were the detailed policy documents used by caseworkers in each State/Territory to administer the child care subsidy program, together with ongoing updates to those documents.¹⁸

To maximize the accuracy of the material in this Book, an initial set of tables prepared by project staff was submitted to program administrators for their review and comment. State/Territory contacts were asked to identify incorrect information and to indicate where project staff could locate missing information – information that was not initially identified in the policy materials used for coding.¹⁹ In some cases, State/Territory staff indicated that information that had not been found in a manual was simply not applicable for the State/Territory due to other aspects of the State's/Territory's policies. State/Territory reviewers also provided additional details that augmented the notes included with each table.

Table B shows the extent to which each State's/Territory's data were reviewed. In the majority of States/Territories (51), a State/Territory contact reviewed the materials and any issues that were raised were fully resolved. In other States/Territories (two) there was some communication between project and State/Territory staff, but at least one issue remained unverified. A few States/Territories (three) were not able to review the tables.

Throughout the tables, some items of information are missing for some States/Territories. That is, some table elements are identified as “information not found in State's manual.” Information is considered missing if we did not initially identify the information in the policy materials we had collected and no additional materials were obtained during the review period.

¹⁸ Some State/Territory policies can be changed relatively easily through administrative actions, while others might require action from the State/Territory legislature. Policies that require legislative action may not change as often.

¹⁹ For most adjustments to initial coding, documentation was obtained in the form of an updated policy or supplemental policy document. In some cases, a particular policy was not documented in any written form, and initial coding was adjusted based on discussion with the State/Territory contact.

Table B. Verification Status of the Information in the CCDF Policies Database Project’s Book of Tables for October 1, 2012

State	Status of Verification ¹	State	Status of Verification
Alabama	Fully verified	Missouri	Fully verified
Alaska	Fully verified	Montana	Fully verified
American Samoa	Partially verified	Nebraska	Fully verified
Arizona	Fully verified	Nevada	Fully verified
Arkansas	Fully verified	New Hampshire	Fully verified
California	Fully verified	New Jersey	Partially verified
CNMI ²	Fully verified	New Mexico	Fully verified
Colorado	Fully verified	New York	Fully verified
Connecticut	Not verified	North Carolina	Fully verified
Delaware	Fully verified	North Dakota	Fully verified
District of Columbia	Fully verified	Ohio	Fully verified
Florida	Fully verified	Oklahoma	Fully verified
Georgia	Fully verified	Oregon	Fully verified
Guam	Fully verified	Pennsylvania	Fully verified
Hawaii	Fully verified	Puerto Rico	Not verified
Idaho	Fully verified	Rhode Island	Not verified
Illinois	Fully verified	South Carolina	Fully verified
Indiana	Fully verified	South Dakota	Fully verified
Iowa	Fully verified	Tennessee	Fully verified
Kansas	Fully verified	Texas	Fully verified
Kentucky	Fully verified	Utah	Fully verified
Louisiana	Fully verified	Vermont	Fully verified
Maine	Fully verified	Virgin Islands	Fully verified
Maryland	Fully verified	Virginia	Fully verified
Massachusetts	Fully verified	Washington	Fully verified
Michigan	Fully verified	West Virginia	Fully verified
Minnesota	Fully verified	Wisconsin	Fully verified
Mississippi	Fully verified	Wyoming	Fully verified

¹ “Fully verified” (51 States/Territories) means the State/Territory reviewed the draft tables, and all issues that were raised were fully resolved. “Partially verified” (two States/Territories) means that the State/Territory did review the tables, but at least one question was not fully resolved. “Not verified” (three States/Territories) means that State/Territory staff were not able to review the tables.

² CNMI = Commonwealth of the Northern Mariana Islands

II. ELIGIBILITY REQUIREMENTS FOR FAMILIES AND CHILDREN

Federal policies establish the three basic requirements for eligibility for CCDF-funded child care subsidies. First, a child must be under 13 years of age, although the States/Territories have the option of extending services to children under 19 years of age if they are physically or mentally incapable of self-care, or under court supervision. Second, the family's income must be lower than 85 percent of the applicable state median income. Third, the parents or guardians must be working or attending a job training or educational program. However, this work/education requirement is often waived for families with children who receive or are in need of receiving protective services.²⁰ States/Territories can also, on a case-by-case basis, waive the income requirement for a family with children in need of protective services.

Within these overall requirements, States/Territories have the flexibility to establish a wide range of detailed policies. In particular, States/Territories (and in some cases localities) determine whether to set income thresholds lower than the federally-allowed maximums, how to define the family unit and family income for purposes of establishing eligibility, whether to provide care for teenagers with special needs, how to define the parent/guardian activities for which child care may be provided, whether to use the CCDF-funded program to provide child care for foster children or children being monitored through child protective services, whether to modify requirements in any way for families also enrolled in other programs, and whether to impose any other eligibility requirements such as an assets test.

Basic Age and Activity Requirements

Child care subsidies are provided for families in need of child care because the parents participate in work or certain other activities. In order to qualify for subsidized care, the family must have an age-eligible child as defined by federal guidelines and State/Territory policies. In addition to having a qualifying child, the family must meet activity requirements. Within the federal guidelines, States/Territories establish which activities are approved for CCDF-funded child care. In a two-parent family, both parents generally must be involved in approved activities in order for the family to qualify for subsidized care. (States/Territories sometimes make exceptions for two-parent families in which one parent has a disability or is otherwise incapable of providing care.)

Maximum Age Allowed for CCDF Eligibility (Table 1)

Under the federal rules for CCDF, States/Territories may provide subsidized care for children who are under age 13, or who are under age 19 but either under court supervision or mentally or physically incapable of caring for themselves. States/Territories determine what age

²⁰ Under federal rules these children do not have to be formally connected to child protective services. For example, homeless children can be considered "in need" of protective services even if they are not connected with CPS.

limits to use within the federal parameters. States/Territories that pool non-CCDF funds with CCDF funds may extend eligibility in ways not permitted by CCDF funds. (When States/Territories set age limits higher than the federal guidelines, it should be assumed that the State/Territory is using State/Territory dollars rather than federal funding to provide the subsidy for the children who exceed the federal age limit.)

Table 1 shows the variation in State/Territory policies regarding age limits. Findings for 2012 include:

- For children without any special circumstances (not under court supervision, and no special needs) most States/Territories provide subsidies through age 12 (until the child's 13th birthday). However, Oregon and Wyoming provide subsidies for children only through age 11. Massachusetts and New York allow a subsidized child who turns 13 during the school year to continue receiving services for the remainder of the school year.
- All but three States/Territories (Arizona, American Samoa, and the Northern Mariana Islands) set higher age limits for children who are mentally or physically incapacitated. Among the States/Territories that set a higher age, the maximum age for children with a mental or physical incapacity ranges from 14 in Minnesota to 21 in California, with most States/Territories serving these children through either age 17 or age 18.
- Policies for children under protective services show greater variation. Nine States/Territories do not provide children under child protective services (CPS) subsidized care through the primary CCDF-funded programs included in this Book. Among the States/Territories that do provide children under CPS subsidized care through the CCDF-funded programs, more than half use the same age limit as for all other children; the remainder allow children under CPS to receive care through age 17 or 18.

Minimum Work Hours Per Week Required for CCDF Eligibility (Table 2)

Although employment is a qualifying activity for child care subsidies in all places, some programs only provide subsidies for parents/guardians working a minimum number of hours. Table 2 outlines these policies. Highlights from 2012 include:

- Twenty-eight States/Territories require that parents work a minimum number of hours per week to be eligible for care. Among these programs, the minimum required hours range from 15 hours each week in Alabama and Utah to 38 hours each week in Puerto Rico. Additionally, Montana does not use a weekly work hour requirement, instead requiring parents to meet a monthly work hour minimum.
- Of the States/Territories with minimum work hour requirements, three (Massachusetts, South Carolina, and Puerto Rico) have set lower requirements for families in need of part-time care. For example, South Carolina requires a parent to work 30 hours per week to receive full-time child care, but a parent may work as little as 15 hours per week to be eligible for part-time child care. Two States/Territories (North Carolina and Guam) require parents to meet a minimum work requirement for full-time care, but do not require parents to work a minimum number of hours in order to receive part-time care.

- Almost all of the States/Territories with minimum work hour policies require each parent in a two-parent family to meet the same requirement as a single parent would have to meet. However, three States/Territories modify the requirement for two-parent families. In Kentucky, while a single parent must work 20 hours per week to receive subsidized care, a two-parent family can qualify for care if the two parents work a total of 40 hours. In Texas, a single parent must work 25 hours per week and a two-parent family must work a total of 50 hours per week. In Utah, the general requirement is 15 hours per week, but in a two-parent family, one parent must work at least 30 hours while the other parent must work at least 15 hours.

This table shows a minimum work hour requirement only when the State/Territory has an explicit policy requiring parents to engage in an approved activity for a minimum number of hours. Even if a program has no explicit minimum work hour policy, the number of work hours generally affects the number of hours approved for subsidized child care.²¹

Approved Activities for CCDF Eligibility (Tables 3 and 4)

Employment is not the only activity that may allow a family to be eligible for child care subsidies. Other activities for which States/Territories provide CCDF-funded subsidies include job search, high school/GED activities, English as a Second Language (ESL) activities, training, post-secondary education, employment and training under the SNAP program, and housing search.²² For families receiving TANF, some States/Territories require families to meet TANF work program requirements in order to receive CCDF-subsidized child care, while others allow for additional TANF activities in addition to the States'/Territories' work programs. Tables 3 and 4 show the policies in each State/Territory. Findings for the policies in effect in 2012 include:

- Employment is an approved activity in all of the States/Territories.
- Among the 42 programs that consider job search to be a qualifying activity, 16 only allow a family that was already receiving subsidies for another reason to continue to receive subsidized care during a job search, while 26 consider job search as a qualifying activity for both initial and continuing eligibility.
- The amount of time parents can receive subsidized child care during job search activities varies across States/Territories, ranging from two weeks to six months in States/Territories that set limits per year. In some States/Territories, the time limit is per occurrence, with multiple periods of job search allowed in a year.
- Almost all States/Territories consider high school/GED, job training, and post-secondary education to be qualifying activities in at least some cases, while a little over half of the States/Territories consider ESL classes to be a qualifying activity.
- Thirteen States/Territories consider SNAP employment-and-training activities to be a qualifying activity for subsidized child care.

²¹ States/Territories often approve care for travel time, study hours, and other work and education-related activities. Further, there is no federal requirement for States/Territories to strictly align the approved child care hours with work hours.

²² The activities listed are not explicitly stated in the CCDF federal guidelines. States/Territories have leeway concerning which activities they approve for care.

- Seven States/Territories consider a homeless family's search for housing to be a qualifying activity in at least some cases.
- Focusing specifically on families receiving TANF, almost all of the States/Territories consider families participating in the States'/Territories' TANF work program activities potentially eligible for subsidized child care, while 35 allow for TANF activities in addition to the TANF work program.

It is important to note that the rules concerning allowable activities are complex, and an activity may qualify for subsidized child care in some but not all circumstances. For example, for educational activities, States/Territories may allow for any type of educational program, or they may restrict eligibility to parents who are working in addition to attending school. Some details of States'/Territories' policies are listed in the tables' footnotes; more information can be found in the full detail of the CCDF Policies Database.

Changes in Age and Activity Requirements from 2011 to 2012

Most States/Territories imposed the same basic eligibility requirements in 2012 as they did in 2011, but there were some changes. Two States/Territories lowered the maximum age for CCDF-eligible children without special needs or in need of protective services. Wyoming lowered the maximum age from 12 in 2011 to 11 in 2012, and the Virgin Islands lowered the maximum age from 13 in 2011 to 12 in 2012. The age requirements for children with special needs and children receiving protective services remained unchanged from 2011 to 2012.

Work requirements also changed in two of the States/Territories. In both Kansas and Missouri, parents were not required to meet a minimum work hour requirement in 2011, while in 2012 these States required participants to work a minimum of 20 hours per week. Similarly, changes in eligible activities were seen in two States. Nevada reduced the number of weeks that could be approved for job search activities, from four weeks in 2011 to two weeks in 2012. In North Dakota, the list of approved activities was expanded in 2012 to include ESL activities.

Variations in Eligibility Requirements for Subgroups of Families and Children

Some programs allow for exceptions to their activity requirements or use different eligibility criteria for families participating in other assistance programs. Federal guidelines require families to meet at least one reason for care, such as employment, training, education, or protective services. However, States/Territories may define these terms in different ways. Programs that use funding from both CCDF and non-CCDF sources may also provide subsidized child care to families not meeting the federal requirements.

Exemptions from Parent/Caretaker Activity Requirements (Table 5)

In some programs, parents and guardians may be exempt from the activity requirements if they meet certain criteria. Table 5 provides the policies for elderly and special needs exemptions. Key findings for 2012 include:

- Programs in four States (Georgia, Massachusetts, Mississippi, and New Jersey) include some form of an elderly exemption. In these States, caretakers considered elderly (at least 60 in Georgia, at least 65 in Massachusetts and Mississippi, and at least 61 in New Jersey) may be eligible for subsidies regardless of whether they are working or in school or training. This policy often applies to grandparents acting as caretakers.
- The majority of programs allow for some type of exemption for parents with special needs, in many cases restricting the exemption to one parent in a two-parent household. In the most common form of this policy, one parent may be exempt from activity requirements when he or she has a documented special need only if there is another parent in the household who satisfies the activity requirement.

As mentioned elsewhere, State/Territory policies that appear to conflict with CCDF rules should be assumed to be funded by non-CCDF funds (pooled with CCDF funds), or allowed based on the State's/Territory's definition of applicable terms (such as defining children in need of protective services to include children whose parents have special needs).

If Families Receiving Different Types of Benefits/Services Have Different Parent Activity Requirements (Table 6)

Families who are receiving another type of benefit or service, such as foster care, homeless services, CPS supervision, or transitional child care following TANF receipt, may be treated differently than other families. They may be eligible for the subsidized child care program without meeting activity requirements, they may be ineligible for the subsidized child care program (because their care is provided by another program), or they may have modified activity requirements. Table 6 shows how the CCDF-funded programs treat families receiving these benefits or services. Highlights for 2012 include:

- More than half of the States/Territories require families using transitional child care (following TANF receipt) to meet the same requirements as all other CCDF-eligible families. The others have different requirements for these families, such as allowing them to work fewer than the minimum hours required for other families.
- Three States/Territories (Delaware, Ohio, and Puerto Rico) do not require homeless families to meet any activity requirement in order to receive subsidized child care. (As was shown in Table 4, some of the States/Territories that do impose an activity requirement on homeless families consider their search for housing to be an eligible activity.)
- Only six States/Territories (Connecticut, Maine, Nebraska, Pennsylvania, Utah, and the Northern Mariana Islands) require families with CPS cases to meet the same activity requirements as all other families. Families with children under CPS are automatically

eligible in some States/Territories, ineligible in others (because their care is provided through other programs), and eligible with modified policies in the remaining States/Territories.

- Families with foster children must meet the same requirements as all other families in 21 States/Territories. In the remaining States/Territories, foster families are either eligible for subsidized care with no activity requirements, are never eligible (because child care is provided through another program), or are eligible with modified policies.

An additional point is important to note concerning this table's data on requirements for families receiving transitional child care. In some States/Territories, eligibility for transitional child care is determined by separate caseworkers for families transitioning off the TANF program, rather than by the CCDF program staff. When eligibility is determined through a different program, the requirements are often not outlined in the State/Territory caseworker manuals for the child care subsidy program. When this occurs, the table indicates the difference, but the specific policies are not provided.²³

Changes in Special Activity Requirements from 2011 to 2012

There were very few changes in policies for activity exemptions between 2011 and 2012. Only one State/Territory updated its policies, with Mississippi changing the activity requirements for families with foster children and families in need of protective services. In both cases, the State removed its previous activity requirements for these groups, exempting the families from meeting activity requirements in 2012.

Family and Income Definitions

The federal CCDF policies refer to family size and family income, requiring that a subsidized family have income below 85 percent of the state median income, which varies by family size. However, the federal policies do not specify how to define family units or family income. Each program establishes these definitions, which can affect whether a particular family is eligible for subsidies and/or the family's required copayment.

Each program determines which individuals will form the "family unit" (sometimes called "assistance unit" or "filing unit") for purposes of determining CCDF eligibility and family copayments. This group of individuals may or may not include all the individuals who are living together under one roof (usually termed the "household"). In all programs, the family unit for CCDF purposes always includes the subsidy-eligible children and their biological or adoptive parents. However, States/Territories make different decisions concerning some other household members, such as a sibling or a step-parent of the subsidy-eligible child.

²³ Due to resource constraints, policy manuals for additional programs were not collected, unless they were part of a shared manual with the State's/Territory's CCDF program. If the State/Territory provided additional documentation during the verification process, the additional information was captured in the database and tables.

How States/Territories determine the composition of the family unit can affect whether a child qualifies for the child care subsidy. Since eligibility thresholds increase with family size, a larger family may have more income than a smaller family and still qualify for CCDF subsidies. However, the inclusion of an additional individual in the family can also reduce the likelihood that the family will be eligible, if that individual has income. For example, in the case of a teenage parent, including the teenager's parents will reduce the likelihood of eligibility if the parents have substantial earnings, but will increase the chance of eligibility if the parents have very low earnings or there are several additional siblings who increase family size.

In general, if a person is included in the family unit, his or her income is counted in determining family income. However, there are some exceptions. In addition to describing the policies for defining the family size, the following tables capture some of the exceptions to the general rule that the income of all family members included in the family unit is counted, focusing specifically on earnings. States'/Territories' policies concerning the treatment of family members' earnings can be quite detailed. For instance, whether or not a child's earnings are counted may depend on whether the child is in school. Additional detail can be found in the table footnotes and in the full detail of the CCDF Policies Database.

Defining the Family Unit and Income: Treatment of Children and Siblings (Table 7)

Table 7 shows States'/Territories' policies for defining the family unit when older siblings are present. The age at which siblings are included in the unit may vary based on whether or not the siblings are attending school. Table 7 also shows the policies for how the States/Territories treat the earnings of children and siblings who are included in the family unit (e.g., the earnings of a teenage sibling or of a CCDF-eligible child under CPS or court supervision). Findings from 2012 include:

- More than half of the States/Territories count children in the unit through the age of 17 if they are not attending school.
- There is greater variation in policy for children attending school with slightly less than half the States/Territories maintaining the 17-year-old age limit, and 15 States/Territories counting children through age 18. The oldest age at which a child attending school is counted in the unit is 23, in Massachusetts.
- Six States (Arkansas, Colorado, Florida, Idaho, New Jersey, and Texas) count all children in the unit without regard to age, as long as the child lives in the household and/or is considered a dependent for tax purposes.
- Twenty-five States/Territories do not count income earned by children and siblings in the unit, while five States/Territories fully count the earnings of children and siblings. In 10 States/Territories, earnings are counted once the child reaches a certain age. The remaining States/Territories have varying policies, often related to whether the child is attending school.

Defining the Family Unit and Income: Treatment of Teen Parents (Table 8)

Table 8 shows States’/Territories’ policies for defining the family unit when there is a young parent living with his or her own parent(s). Each State’s/Territory’s definition of teenage parents is included, along with the policy for counting the earnings of teen parents. Key findings from 2012 include:

- More than half of the States/Territories define a teen parent as a parent age 17 or under. The oldest age at which a parent living with his or her parents may be considered a teen parent is in the District of Columbia, where a parent age 25 or younger, living with his or her parent, and attending high school or college full time, is considered a young adult and treated as a teen parent.
- In more than half of the States/Territories, the income of teen parents is fully counted. Only eight States/Territories never count the earnings of teen parents, while the remaining States/Territories have varying policies, such as excluding teen parents’ earnings when they are attending school.
- Over half of the programs count a minor parent and his or her child as a separate family unit, even if he or she lives with his or her parents. The remaining States/Territories either always consider the size and income of the larger family (including the teen parent’s parents and siblings), or have a more complex policy that considers other factors, such as which members of the family are part of the same TANF assistance unit.

Defining the Family Unit and Income: Treatment of Step-Parents and Temporarily Absent Parents (Table 9)

Table 9 shows the States’/Territories’ policies for defining the family unit and income when step-parents are present. The table also reflects the policies in cases of blended families, where the family consists of married parents with no children in common. Finally, policies are shown for cases where the parent is temporarily absent from the home. A parent may be absent from the home due to work, military deployment, or other reasons; State/Territory policies for counting temporarily absent parents in the family size sometimes vary based on the reason for the absence. Highlights from 2012 include:

- All but three States/Territories (District of Columbia, New Jersey, and North Carolina) always include a step-parent as part of the family unit. New Jersey only counts step-parents if they are legally responsible for the child.
- Of the States/Territories that count step-parents in the family unit, all fully count the income of step-parents for eligibility and copayment purposes, except for Pennsylvania, which uses an income disregard for step-parents.
- Only three States/Territories (District of Columbia, Idaho, and North Carolina) treat the parents in blended families (families consisting of married parents with no children in common) as separate units.
- A majority of the States/Territories count the income of a parent who is temporarily absent from the household.

Defining the Family Unit and Income: Treatment of Non-Parent Caretakers (Table 10)

In addition to policies for step-parents and teen parents, States/Territories also vary in their treatment of non-parent caretakers, such as grandparents taking care of their grandchildren. We define a non-parent caretaker as an adult who lives with the child and who has assumed responsibility for the care of the child when the child's parents do not live in the home with the child. Policies regarding non-parent caretakers may vary depending on whether the caretaker is a relative or non-relative. Table 10 shows the State/Territory policies for defining the family unit and income when caretakers are responsible for the children.

Key findings regarding the treatment of caretakers who are relatives in 2012 include:

- Forty-five States/Territories allow all relative caretakers to apply for subsidies for the children in their care. The remaining States/Territories limit eligibility to caretakers meeting certain criteria, such as establishing legal guardianship.
- Six States/Territories exclude relative caretakers from family size when determining eligibility. (This creates what is sometimes termed a “child-only” unit for purposes of eligibility determination and the computation of the copayment.)
- Forty-two States/Territories count the income of relative caretakers when determining eligibility.

Key findings regarding the treatment of caretakers who are not relatives include:

- Thirty-three States/Territories allow all non-relative caretakers to apply for subsidies for the children in their care, with the remaining States/Territories limiting eligibility to caretakers meeting certain criteria.
- Six States/Territories exclude non-relative caretakers from the family size when determining eligibility, and 41 States/Territories count the income of non-relative caretakers when determining eligibility.

Defining the Family Unit and Income: Treatment of Non-Parent, Non-Caretaker Adults (Table 11)

The family unit often consists of siblings, parents, and caretakers, but some States/Territories may also include other adults living in the home (along with the parent or caretaker), such as aunts or uncles. Policies regarding other adults living in the home may vary depending on whether the adults are relatives or non-relatives. Table 11 shows the State/Territory policies for defining the family unit and income when adults other than the parents/caretakers are living in the home. Highlights for 2012 include:

- When determining family size and income for eligibility, the majority of the States/Territories never include other adult relatives living in the home.
- Almost all of the States/Territories exclude adult non-relatives living in the home when determining family size and income.

Additional detail about how States/Territories define the family unit (e.g., the treatment of an unmarried parent's partner), can be found in the full detail of the CCDF Policies Database.

Treatment of Various Types of Income and Benefits When Determining Eligibility (Tables 12 and 13)

States/Territories also establish policies for what types of income are counted. Tables 12 and 13 show how States/Territories treat different types of income. Table 12 captures the policies for the following types of income and benefits: TANF income, income from Supplemental Security Income (SSI), Social Security Disability Income benefits (SSDI), net self-employment income, child support income, and the value of SNAP benefits. Table 13 captures the treatment of general assistance, the value of housing assistance, benefits from the Low Income Home Energy Assistance Program (LIHEAP), foster care income, State Earned Income Tax Credit (EITC) refunds, lump sum income, and non-recurring gifts. Key findings from 2012 include:

- TANF income is fully counted in approximately half of the States/Territories, and not counted or only partially counted in the remainder.
- SSI is fully counted in a little over half of the States/Territories while most States/Territories count SSDI income.
- All of the States/Territories fully count net income from self-employment.
- Three States/Territories (Arkansas, Connecticut, and Puerto Rico) do not count child support income. D.C. and the Virgin Islands specify that child support income is counted for CCDF-eligible children only, while other States/Territories count the child support income of all children in the family.
- Almost all of the States/Territories do not count the value of housing assistance, while five States/Territories count the value of some types of housing assistance, such as military housing assistance or employer-provided housing.
- Almost all of the States/Territories exclude the value of LIHEAP and State EITC refunds.
- Lump-sum and gift income policies show greater variation, with some States/Territories counting income above a certain dollar amount, such as income that exceeds \$50. More than half of the States/Territories do not count this type of income.

How the State/Territory chooses to define countable income can greatly impact the family's eligibility and copayment. In States/Territories with more narrow definitions of income, families may be more likely to qualify for subsidized care because their countable income is lower. Note that the child support disregards described in this table refer to the child support *received* by the family; the treatment of the child support *paid* by the family is covered in Table 14.

Income Disregards When Determining Eligibility (Table 14)

A program's definition of income may include a disregard, or deduction, of a portion of the family's earned income or a disregard of the child support that is paid by the family (to children outside the household). Disregards make it more likely that a family will be eligible for CCDF, and may lower the family's required payment. Table 14 shows each State's/Territory's

policies for earned income disregards and disregards for child support payments. Key findings from the 2012 policies include:

- Six States/Territories (Arkansas, South Dakota, Utah, Wyoming, Puerto Rico, and the Virgin Islands) disregard a portion of earned income, either a monthly dollar amount (\$100 in Arkansas and Utah and \$200 in Wyoming) or a percentage of income (4 percent in South Dakota, 15 percent in Puerto Rico, and 20 percent in the Virgin Islands).
- Approximately half of the programs allow families to deduct from their income the amount of child support paid in support of children outside of the home.

Note that the child support disregards described in this table refer to the child support *paid* by the family for the support of children living elsewhere; the treatment of the child support *received* by the family is covered in Table 12.

Changes in Family and Income Definitions from 2011 to 2012

From 2011 to 2012, none of the States/Territories updated their policies regarding the family definitions or income disregards captured here, while a few of the States/Territories made changes to their policies regarding the types of income that are counted when determining eligibility. Missouri's 2011 policy of counting some SSI was updated in 2012 to no longer include any SSI in the income calculation. Missouri's policy for counting non-recurring gifts also changed, from excluding gifts in 2011 to counting some gifts in 2012. In Wisconsin, child support was previously not included in the State's income calculation, but for 2012, child support was included if it exceeded \$1,250 per month. In New Jersey, lump sum income was previously not counted, but in 2012 lump sum payments were fully counted when determining income. Rhode Island also added to its list of included income, with foster care income excluded in 2011, but fully counted as income in 2012.

Financial Eligibility Tests

In almost all cases, families must have income below a certain threshold in order to be fully eligible for the child care subsidy. (In some States/Territories, some children, such as children under child protective services, are automatically eligible for care without an explicit financial eligibility test.) The countable income of the family (using the definitions of family and income discussed above) is compared to the applicable eligibility threshold. As discussed earlier, each State/Territory establishes income eligibility thresholds, subject to the maximum limits allowed by the federal CCDF rules – 85 percent of state median income. Some States/Territories have one set of eligibility thresholds for initial eligibility and a somewhat-higher (i.e., less restrictive) set of thresholds for continuing eligibility. This is sometimes referred to as “tiered eligibility”. Other States/Territories use a higher set of eligibility thresholds for other purposes, such as for families whose children have special needs.

A second type of financial eligibility test that is sometimes used in determining eligibility for other means-tested programs is an “assets test”. An assets test requires that a family's

countable assets (money in bank accounts, and so on) be lower than a specified maximum. The legislation that created the CCDF program neither established nor prohibited assets tests. The great majority of States/Territories do not use an assets test, but a small number do.

Initial and Continuing Eligibility Thresholds (Tables 15 and 16)

Every State/Territory establishes income eligibility thresholds to determine eligibility for subsidized child care. Table 15 provides the States’/Territories’ initial eligibility thresholds, for one-person to five-person families.²⁴ A family newly applying for subsidies must have countable monthly income under the initial eligibility threshold in order to be eligible for subsidies. Table 16 provides continuing eligibility thresholds or the maximum income that a family already receiving a subsidy can have and still remain eligible. By establishing higher continuing eligibility thresholds, States/Territories allow families to work towards increasing their employment and income without losing their child care benefits. Key findings from 2012 include:

- Among the 48 contiguous States and D.C., the initial eligibility thresholds for a family of three range from \$1,854 in Nebraska to \$3,978 in New Hampshire. (The New Hampshire limits are approximately equal to 2.5 times the Federal Poverty Guidelines for a three-person family in 2012. Appendix B shows each State’s/Territory’s initial and continuing eligibility thresholds for a three-person family as a percentage of the Federal Poverty Guidelines.)
- Higher thresholds for a three-person family are used in the two non-contiguous States and in one Territory (\$4,524 in Alaska and \$3,927 in Hawaii and American Samoa).
- Puerto Rico has the lowest threshold for a three-person family at \$1,423.
- In three States (Colorado, Texas, and Virginia), eligibility thresholds vary geographically within the State. The table shows the thresholds that affect the greatest number of families within the State.
- Seventeen States/Territories use higher eligibility thresholds for families who are already receiving subsidies, sometimes referred to as thresholds for continuing eligibility.
- When continuing eligibility thresholds are used, the continuing eligibility threshold for a three-person family ranges from eight percent higher than the initial threshold in Wisconsin to 70 percent higher than the initial threshold in Massachusetts.

Thresholds for larger family sizes (up to families with 10 members) can be found in the full detail of the CCDF Policies Database.

Assets Tests (Table 17)

Assets tests establish a limit on the amount of assets a family may hold and still qualify for subsidized child care. When an assets test is used, the State/Territory must decide what types

²⁴ A one-person family is relevant only in States/Territories with policies that may result in a “child-only” family. For instance, a State/Territory may consider a child living with a non-parent caretaker to be a one-person “child-only” family.

of assets to count (bank accounts and other financial assets, all or part of the value of vehicles, and so on) and how to set the maximum value. Table 17 shows the State/Territory policies related to assets tests. Highlights from 2012 include:

- Only two States (Nebraska and Rhode Island) use any sort of assets test for determining eligibility for the CCDF-funded child care program.
- Rhode Island's assets test only considers the value of liquid assets – accounts such as a savings or checking account that can be easily accessed. A family can have no more than \$10,000 in these types of accounts in order to be eligible for CCDF.
- Nebraska counts both liquid assets and some non-liquid assets. If the family owns a car worth more than \$12,000, the portion that exceeds \$12,000 is counted as an asset. The family must have total countable assets of no more than \$6,000 to be eligible for CCDF.

In both States, the value of homes, real property, household goods, and personal effects is excluded from the definition of a family's assets for purposes of the assets test.

Changes in Financial Eligibility Tests from 2011 to 2012

From 2011 to 2012, financial eligibility policies changed in approximately half of the States/Territories, with 27 States/Territories changing their eligibility thresholds. Twenty-two States/Territories increased their initial eligibility thresholds from 2011 to 2012, while five lowered their initial eligibility thresholds. Of the States/Territories that increased their initial thresholds, the percentage change ranged from less than 1 percent in Massachusetts to an 18 percent increase in Washington. One way to think about these changes is relative to the Consumer Price Index, a measure of the average change in prices paid by consumers over time. Among the States/Territories that increased their thresholds in 2012, the median increase in initial eligibility thresholds from 2011 to 2012 was three percent, greater than the two percent increase in the CPI from 2011 to 2012. Thus, in most States/Territories that increased the eligibility thresholds, the increases were greater than the rate of inflation.²⁵ Of the States/Territories that decreased their initial thresholds, the percentage change ranged from less than 1 percent (in Connecticut and Tennessee) to a 15 percent decrease (in Louisiana), with a median reduction of 1.6 percent.

In both 2011 and 2012, 17 States/Territories used higher eligibility thresholds for families already receiving subsidies. Of those 17 States/Territories, 11 changed their continuing eligibility thresholds from 2011 to 2012. Three States (Connecticut, Minnesota, and Utah) lowered their thresholds, while the remaining States/Territories increased their thresholds. In the States that lowered their thresholds, the percentage change ranged from less than one percent in Connecticut to three percent in Utah. In the States/Territories that increased their thresholds, the percentage

²⁵ From 2011 to 2012, the Consumer Price Index increased approximately two percent (available from the Bureau of Labor Statistics at <ftp://ftp.bls.gov/pub/special.requests/cpi/cpiiai.txt>). Of the States/Territories that increased their initial thresholds, only one increased the dollar amounts by two percent or less.

change ranged from less than one percent in Massachusetts and Texas to three percent in the remaining six States/Territories.²⁶

²⁶ Eligibility thresholds in Texas vary for different areas of the State. For the Book of Tables, the thresholds for the Gulf Coast Region are used.

Table 1. Maximum Age Allowed for CCDF Eligibility, 2012

State	Maximum Age for Most Children	Child Mentally or Physically Incapacitated	Child in Protective Services
Alabama	12	18	12
Alaska	12	18 ¹	12 ²
Arizona	12	12	12
Arkansas	12	18	18
California	12	21	12
Colorado	12	18	NA ³
Connecticut	12	18	12
Delaware	12	18	18
DC	12	18	18
Florida	12	18	18
Georgia	12	17	12 ⁴
Hawaii	12	17	17
Idaho	12	17 ⁵	17 ⁵
Illinois	12 ⁶	18	NA ³
Indiana	12	17	17
Iowa	12	18	12 ⁷
Kansas	12	18	12
Kentucky	12	18	12
Louisiana	12 ⁶	17 ⁸	12
Maine	12	18	12 ⁹
Maryland	12	18	NA ³
Massachusetts	12, unless the child turns 13 during the school year, then services may be provided for the remainder of the school year	15 ¹⁰	12 ¹¹
Michigan	12 ¹²	17 ¹³	12 ¹⁴
Minnesota	12	14	NA ³
Mississippi	12	18	12
Missouri	12	17 ¹⁵	17
Montana	12 ¹⁶	18 ¹⁷	17 ¹⁸
Nebraska	12	18	18
Nevada	12	18	12
New Hampshire	12	17	12
New Jersey	12	18	18
New Mexico	12	17	12
New York	12, unless the child turns 13 during the school year, then services may be provided for the remainder of the school year	17 ¹⁹	12 ²⁰
North Carolina	12	17	17
North Dakota	12	18	NA ²¹
Ohio	12	17	12

Table 1. Maximum Age Allowed for CCDF Eligibility, 2012

State	Maximum Age for Most Children	Child Mentally or Physically Incapacitated	Child in Protective Services
Oklahoma	12	18	12 ⁹
Oregon	11 ²²	17	NA ²³
Pennsylvania	12	18	12
Rhode Island	12	18	12
South Carolina	12	18	12
South Dakota	12	17 ²⁴	17 ²⁵
Tennessee	12	17	12
Texas	12	18 ²⁶	18 ²⁷
Utah	12	17	17 ⁴
Vermont	12	18	18 ²⁸
Virginia	12	17	17
Washington	12	18	NA ³
West Virginia	12 ²⁹	17 ³⁰	12 ⁴
Wisconsin	12	18	NA ³
Wyoming	11 ³¹	17	NA ³
American Samoa	12	12	12 ³²
Guam	12	18	18 ⁹
No Mariana Islands	12	12	12
Puerto Rico	12	18	18
Virgin Islands	12 ⁶	18 ³³	18 ³⁴

Source: CCDF Policies Database October 1, 2012 Data

¹ Eligibility ends on the last day of the month in which the child reaches age 19.

² Children ages 13 to 18 who require court-ordered adult supervision and who are receiving TANF benefits may continue to receive subsidized child care.

³ Child protective services child care is not provided under the state's primary child care subsidy program.

⁴ The age limit is 17 for children under court-ordered supervision.

⁵ The child may receive care until the month of his or her 18th birthday. A child who is a full-time student and expects to complete secondary school by the month of his or her 19th birthday is eligible until the month of the 19th birthday.

⁶ A child is eligible through the month of the child's 13th birthday.

⁷ Children age 13 up to age 16 may be eligible for child care benefits if there are special circumstances that put the safety and well-being of the children at risk if left home alone.

⁸ A child is eligible through the month of the child's 18th birthday.

⁹ The age limit is 18 for children under court-ordered supervision.

¹⁰ A child who turns 16 may remain in care for the remainder of the school year.

¹¹ Children involved with child protective services are treated the same as other children with an age limit of 12, or 13 if the child turns 13 during the school year, in which case services may be provided for the remainder of the school year.

¹² Children who turn 13 during a biweekly pay period are eligible through the end of that pay period.

- ¹³ At age 18, the child may continue to receive care if he or she requires constant care due to a physical, mental, or psychological condition or a court order, is a full-time high school student, and is reasonably expected to complete high school before age 19.
- ¹⁴ Children under court supervision may receive care up to age 17, or 18 if still in high school and expected to graduate before turning 19.
- ¹⁵ If the child is still in school, he or she may receive care through age 18.
- ¹⁶ A child is eligible through the day before the child's 13th birthday.
- ¹⁷ A child who has special needs is eligible through the day before the child's 19th birthday.
- ¹⁸ A child who is under protective services or court supervision is eligible through the day before the child's 18th birthday.
- ¹⁹ If the child is enrolled full-time in secondary school or in an equivalent level of vocational or technical training, he or she may receive care through age 18.
- ²⁰ Children who turn 13 during the school year may continue to receive care through the end of the school year using Title XX funding and using a provider with whom the district has a contract or letter of intent and is licensed or registered. Children under court supervision may receive care through age 17. If the child is enrolled full time in secondary school or in an equivalent level of vocational or technical training, he or she may receive care through age 18.
- ²¹ Child protective services child care is not provided under the state's primary child care subsidy program. The age limit is 18 for children under court-ordered supervision.
- ²² Children must be younger than 12 in order to meet the general age requirement. Children age 12 through 17 are eligible if they are physically or mentally incapable of self-care, under court supervision, receiving foster care, eligible for the special needs rate, or subject to circumstances that significantly compromise the child's safety or the caretaker's ability to work if child care is not available.
- ²³ Child protective services child care is not provided under the state's primary child care subsidy program. The age limit is 17 for children under court-ordered supervision.
- ²⁴ The maximum age is 18 if the child is enrolled in school and expected to graduate, and is physically or mentally incapable of self-care.
- ²⁵ The maximum age is 18 if the child is enrolled in school and expected to graduate, and is under court supervision.
- ²⁶ Subsidies for children over the age of 12 with disabilities are at the discretion of the local agency.
- ²⁷ Services for a child receiving protective services may continue as long as the child protective services agency authorizes the care.
- ²⁸ Children under court supervision or committed to the custody or guardianship of the commissioner are eligible through age 18.
- ²⁹ For home-based self-employed applicants and applicants taking web-based classes, the maximum age for a child who is not physically or mentally incapacitated is six.
- ³⁰ For home-based self-employed applicants the maximum age for a child who is physically or mentally incapacitated is 12, and for applicants taking web classes, the maximum age for a child who is physically or mentally incapacitated is 6.
- ³¹ A child who is not physically or mentally incapacitated may receive CCDF funding from birth through age 11.
- ³² Children under court supervision must be under age 13.
- ³³ Children are eligible through the month of their 19th birthdays.
- ³⁴ The age of a child in protective services must be exempt by a court order within the Virgin Islands code. Children are eligible through the month of their 19th birthday.

Table 2. Minimum Work Hours Per Week Required for CCDF Eligibility, 2012²

State	General Full-Time Requirement	Minimum Work Hours for Part-Time Care	Minimum Work Hours for a Two Parent Household ³
Alabama	15	15	Each parent must work 15 hours
Alaska	No minimum	No minimum	No minimum
Arizona	No minimum	No minimum	No minimum
Arkansas	30	30	Each parent must work 30 hours
California	No minimum	No minimum	No minimum
Colorado	No minimum	No minimum	No minimum
Connecticut	No minimum	No minimum	No minimum
Delaware	No minimum	No minimum	No minimum
DC	20	20	Each parent must work 20 hours
Florida	20 ⁴	20	Each parent must work 20 hours ⁴
Georgia	30 ⁵	30	Each parent must work 30 hours
Hawaii	No minimum	No minimum	No minimum
Idaho	No minimum	No minimum	No minimum
Illinois	No minimum	No minimum	No minimum
Indiana	No minimum	No minimum	No minimum
Iowa	28 ⁶	28 ⁶	Each parent must work 28 hours ⁶
Kansas	20 ⁷	20	Each parent must work 20 hours ⁶
Kentucky	20	20	Both must work a total of 40 hours ⁸
Louisiana	30	30	Each parent must work 30 hours
Maine	No minimum ⁹	No minimum	No minimum
Maryland	No minimum	No minimum	No minimum
Massachusetts	30	20	Each parent must work 30 hours ¹⁰
Michigan	No minimum	No minimum	No minimum
Minnesota	20	20	Each parent must work 20 hours
Mississippi	25 ¹¹	25	Each parent must work 25 hours ¹²
Missouri	20 ¹³	20	Each parent must work 20 hours
Montana	Other ¹⁴	Other ¹⁴	Other ¹⁴
Nebraska	No minimum	No minimum	No minimum
Nevada	No minimum	No minimum	No minimum
New Hampshire	No minimum	No minimum	No minimum
New Jersey	30 ¹⁵	30	Each parent must work 30 hours ¹⁵
New Mexico	No minimum	No minimum	No minimum
New York	20 ¹⁶	20 ¹⁶	Each parent must work 20 hours ¹⁶
North Carolina	30 ¹⁷	No minimum ¹⁷	Each parent must work 30 hours ¹⁷
North Dakota	No minimum	No minimum	No minimum
Ohio	No minimum	No minimum	No minimum
Oklahoma	No minimum ¹⁸	No minimum ¹⁸	No minimum ¹⁸
Oregon	No minimum	No minimum	No minimum
Pennsylvania	20 ¹⁹	20	Each parent must work 20 hours ¹⁹

Table 2. Minimum Work Hours Per Week Required for CCDF Eligibility, 2012²

State	General Full-Time Requirement	Minimum Work Hours for Part-Time Care	Minimum Work Hours for a Two Parent Household ³
Rhode Island	20 ²⁰	20	Each parent must work 20 hours ²⁰
South Carolina	30 ²¹	15	Each parent must work 30 hours ²²
South Dakota	20 ²³	20	Each parent must work 20 hours ²³
Tennessee	30	30	Each parent must work 30 hours
Texas	25 ²⁴	25	Both must work a total of 50 hours
Utah	15	15	One parent must work 30 hours and the other must work 15 hours
Vermont	No minimum	No minimum	No minimum
Virginia	No minimum	No minimum	No minimum
Washington	No minimum ²⁵	No minimum	No minimum
West Virginia	No minimum ²⁶	No minimum	No minimum ²⁶
Wisconsin	No minimum	No minimum	No minimum
Wyoming	No minimum	No minimum	No minimum
American Samoa	20	20	Each parent must work 20 hours
Guam	32	No minimum	Each parent must work 32 hours
No Mariana Islands	30	30	Each parent must work 30 hours
Puerto Rico	38 ²⁷	15	--- ¹
Virgin Islands	30	30	Each parent must work 30 hours ²⁸

Source: CCDF Policies Database October 1, 2012 Data

¹ Information not found in state's manual.

² This table captures whether there is an explicit policy for the minimum number of work hours required. This table does not capture work requirement differences between various eligibility groups. Work exemptions for parents with special needs are also not captured here.

³ When the minimum number of work hours varies for full-time care and part-time care, the full-time requirement is captured and the part-time requirement is described in the notes.

⁴ Parents or guardians must enter the program with a minimum of 20 hours but may remain eligible at a minimum of 15 hours if their hours are reduced by an employer due to circumstances beyond their control.

⁵ If in training, the participant must work 24 hours per week. If a participant's work hours are reduced for economic hardship-related reasons only, they must average 25 hours per week. New applicants must still meet the 30 hour requirement.

⁶ TANF recipients do not need to meet the minimum work hours requirement.

⁷ This minimum hour requirement does not apply to families receiving TANF. TANF recipients who gain employment and therefore lose their cash assistance are given a two month grace period during which they remain eligible for child care subsidies but do not have to meet the 20-hour per week minimum.

⁸ The minimum requirement for one parent in a two-parent household is five hours per week.

⁹ Applicants who are self-employed must participate in a self-employment activity a minimum average of 20 hours per week.

¹⁰ Part-time care may be authorized if one or both parents are working less than 30 hours, but at least 20 hours.

- ¹¹ Families in transitional child care do not need to meet the work hours requirement. The 25 hours per week work requirement is reduced for foreign students who hold a VISA because they are permitted to work only on campus for 20 hours per week. In order to remain eligible, a copy of the VISA must be submitted annually to make sure it is current.
- ¹² Each parent must be working at least 25 hours per week, or one parent must be working at least 25 hours per week and the other parent must be enrolled in an approved full-time educational or training program.
- ¹³ If individuals are employed and also participating in another eligibility activity, they can work less than 20 hours, as long as their combined hours of participation in all activities is at least 20 hours per week. If individuals are self-employed, they must be earning at least the equivalent of minimum wage, net after business expenses.
- ¹⁴ The work requirement is monthly. Two parent households must work 120 hours per month. Single parents must work 60 hours per month. Single parents attending school full-time are required to work 40 hours per month. The recipient must be earning at least the current applicable minimum wage to be eligible for assistance.
- ¹⁵ A parent or applicant may be considered to be working full time if work and education or training activities combine to equal a full-time equivalent.
- ¹⁶ Policies coded for New York City. New York State allows districts to set their own general work requirements. The work requirement for families receiving Transitional Child Care is 17.5 hours per week for a single parent working in a job exempt from minimum wage or a combined 25 hours per week for two parents working in jobs exempt from minimum wage. Families who are engaged in work for child care in lieu of temporary assistance must work a minimum of 55 hours (with one parent working at least 30 hours) for a two parent family.
- ¹⁷ Full-time employment is considered an average of 30 hours or more per week. Part-time care is approved for any number of hours less than full time.
- ¹⁸ Foster families must work a minimum of 20 hours per week.
- ¹⁹ Ten hours of training may be substituted for 10 hours of the 20-hour work requirement.
- ²⁰ Income eligible parents must work an average of at least 20 hours per week in a month.
- ²¹ TANF applicants may not be required to meet the minimum hours requirement. A parent who receives SSI may be eligible for assistance if he or she is employed at least part time or participating in an activity that will enable him or her to become employed.
- ²² If one or both parents work part time, only part-time care will be authorized. The parents must each work at least 15 hours in order to qualify for part-time care.
- ²³ Applicants must work a minimum of 80 hours per month. There are no minimum work requirements for foster parents; however, authorization for care can only be given for times when foster parents are working or going to school.
- ²⁴ A higher number of hours may be required by the local department.
- ²⁵ When a non-TANF client is receiving care for education or training, he or she must work a minimum of 20 hours a week or 16 hours in a federal or state work study program.
- ²⁶ Self-employed individuals must work a minimum of 20 hours per week.
- ²⁷ The recipient must work at least 7.5 hours daily.
- ²⁸ Any parent who is employed less than 30 hours per week is considered part-time.

Table 3. Approved Activities for CCDF Eligibility, 2012

State	<u>Job Search Activities</u>			High School/GED ²	ESL ²	Training ²	Post-Secondary Education ²
	Employment	Job Search	Job Search Time Limit				
Alabama	Yes	No	NA	Yes	No	Yes ³	Yes ³
Alaska	Yes	Yes, for initial and continuing eligibility	80 hours in a year ⁴	Yes	Yes	Yes	Yes
Arizona	Yes	Yes, only for continuing eligibility	30 days per job loss occurrence ⁵	Yes	Yes	Yes	Yes ⁶
Arkansas	Yes	Yes, for initial and continuing eligibility	60 days in a year ⁷	Yes	No	Yes	Yes
California	Yes	Yes, for initial and continuing eligibility	60 days in a year ⁸	Yes	Yes	Yes	Yes
Colorado	Yes	Yes, for initial and continuing eligibility	30 days in a year ⁹	Yes ¹⁰	Yes ¹⁰	Yes ¹⁰	Yes ¹⁰
Connecticut	Yes	Yes, only for continuing eligibility	Other ¹¹	Yes ¹²	No	No	No
Delaware	Yes	Yes, for initial and continuing eligibility	3 months per job loss occurrence	Yes	No	No	No ¹³
DC	Yes	Yes, for initial and continuing eligibility	No time limit	Yes	Yes	Yes	Yes
Florida	Yes	Yes, only for continuing eligibility ¹⁴	30 days per job loss occurrence	Yes ¹⁵	Yes ¹⁵	Yes ¹⁵	Yes ¹⁵
Georgia	Yes	Yes, only for continuing eligibility	8 weeks per job loss occurrence ¹⁶	Yes	No	Yes	No ¹⁷
Hawaii	Yes	Yes, for initial and continuing eligibility	30 days in a year ¹⁸	Yes	No	Yes	Yes
Idaho	Yes	No	NA	Yes	Yes	Yes	Yes
Illinois	Yes	Yes, only for continuing eligibility ¹⁹	30 days per job loss occurrence ¹⁹	Yes ²⁰	Yes ²⁰	Yes ²⁰	Yes ²¹

Table 3. Approved Activities for CCDF Eligibility, 2012

State	<u>Job Search Activities</u>			High School/GED ²	ESL ²	Training ²	Post-Secondary Education ²
	Employment	Job Search	Job Search Time Limit				
Indiana	Yes	Yes, only for continuing eligibility	13 weeks in a year	Yes ²²	Yes ²²	Yes ²²	Yes ²²
Iowa	Yes	Yes, for initial and continuing eligibility	30 days in a year ¹⁸	Yes	Yes	Yes	Yes
Kansas	Yes ²³	No	NA	Yes	No ²⁴	Yes	Yes
Kentucky	Yes	Yes, for initial and continuing eligibility ²⁵	4 weeks per job loss occurrence	Yes ²⁶	No	No ²⁷	No ²⁶
Louisiana	Yes	No	NA	Yes	No	Yes	Yes
Maine	Yes	Yes, only for continuing eligibility	2 months in 6 months ²⁸	Yes	No	Yes	Yes
Maryland	Yes	Yes, for initial and continuing eligibility	2 weeks per job loss occurrence ²⁹	Yes	No	Yes	Yes ³⁰
Massachusetts	Yes ³¹	Yes, for initial and continuing eligibility	12 weeks in a year ³²	Yes	Yes	Yes	Yes ³³
Michigan	Yes	No	NA	Yes	Yes	Yes	Yes
Minnesota	Yes	Yes, for initial and continuing eligibility	240 hours in a year ³⁴	Yes	Yes	Yes	Yes ³⁵
Mississippi	Yes	Yes, for initial and continuing eligibility	60 days per job loss occurrence ³⁶	Yes	No	Yes	Yes
Missouri	Yes	Yes, for initial and continuing eligibility	30 days per job loss occurrence ³⁷	Yes ³⁸	Yes	Yes	Yes ³⁹
Montana	Yes	Yes, only for continuing eligibility ⁴⁰	30 days per job loss occurrence ⁴¹	Yes	No	Yes	Yes ⁴²
Nebraska	Yes	Yes, for initial and continuing eligibility	2 months per job loss occurrence ⁴³	Yes	Yes	Yes	Yes ⁴⁴
Nevada	Yes ⁴⁵	Yes, for initial and continuing eligibility ⁴⁶	2 weeks in a year ⁴⁷	Yes ⁴⁸	No	Yes	Yes ⁴⁹

Table 3. Approved Activities for CCDF Eligibility, 2012

State	Job Search Activities			High School/GED ²	ESL ²	Training ²	Post-Secondary Education ²
	Employment	Job Search	Job Search Time Limit				
New Hampshire	Yes	Yes, for initial and continuing eligibility	40 days in 6 months ⁵⁰	Yes	Yes	Yes ⁵¹	Yes ⁵²
New Jersey	Yes	No	NA	Yes	Yes	Yes	Yes
New Mexico	Yes	Yes, for initial and continuing eligibility	30 days per job loss occurrence ⁵³	Yes ⁵⁴	Yes	Yes	Yes
New York	Yes	Yes, for initial and continuing eligibility ⁵⁵	6 months in a year ⁵⁶	Yes	Yes	Yes ⁵⁷	Yes ⁵⁸
North Carolina	Yes	Yes, for initial and continuing eligibility	60 days per job loss occurrence ⁵⁹	Yes	No	Yes	Yes ⁶⁰
North Dakota	Yes	Yes, for initial and continuing eligibility	8 weeks in a year ⁶¹	Yes	Yes	Yes ⁶²	Yes ⁶²
Ohio	Yes	No ⁶³	NA	Yes	Yes	Yes	Yes ⁶⁴
Oklahoma	Yes	Yes, only for continuing eligibility ⁶⁵	30 days per job loss occurrence ⁶⁵	Yes ⁶⁶	Yes ⁶⁶	Yes ⁶⁷	Yes ⁶⁸
Oregon	Yes ⁶⁹	Yes, only for continuing eligibility	1 month per job loss occurrence ⁷⁰	No	No	No	No ⁷¹
Pennsylvania	Yes	Yes, only for continuing eligibility	60 days per job loss occurrence ⁷²	Yes	Yes	Yes	Yes
Rhode Island	Yes ⁷³	Yes, only for continuing eligibility ⁷⁴	21 days in 6 months ⁷⁴	Yes ⁷⁵	--- ¹	Yes ⁷⁶	--- ¹
South Carolina	Yes ⁷⁷	No ⁷⁸	NA	Yes	No ⁷⁹	Yes	Yes
South Dakota	Yes	Yes, only for continuing eligibility ⁸⁰	30 days in 6 months ⁸⁰	Yes	No	Yes	Yes
Tennessee	Yes	No	NA	Yes	No	Yes	Yes
Texas	Yes	Yes, only for continuing eligibility ⁸¹	4 weeks in a year ⁸¹	Yes	Yes	Yes	Yes
Utah	Yes ⁸²	No ⁸³	NA	No ⁸⁴	No ⁸⁴	No ⁸⁴	No ⁸⁴

State	<u>Job Search Activities</u>				High School/GED ²	ESL ²	Training ²	Post-Secondary Education ²
	Employment	Job Search	Job Search Time Limit					
Vermont	Yes	Yes, for initial and continuing eligibility ⁸⁵	4 weeks in a year ⁸⁶	Yes	Yes	Yes ⁸⁷	Yes ⁸⁷	
Virginia	Yes ⁸⁸	No ⁸⁹	NA	Yes	Yes	Yes	Yes	
Washington	Yes	Yes, only for continuing eligibility ¹⁴	28 days per job loss occurrence ⁹⁰	Yes ⁹¹	Yes ⁹¹	Yes ⁹¹	Yes ⁹¹	
West Virginia	Yes	Yes, only for continuing eligibility	30 days in 6 months ⁹²	Yes	Yes	Yes	Yes	
Wisconsin	Yes	No ⁹³	NA	Yes ⁹⁴	Yes ⁹⁵	Yes ⁹⁶	Yes ⁹⁷	
Wyoming	Yes	No	NA	Yes	No	Yes	Yes ⁹⁸	
American Samoa	Yes	Yes, for initial and continuing eligibility	6 months in a year ⁹⁹	Yes ¹⁰⁰	--- ¹	Yes	Yes ¹⁰⁰	
Guam	Yes	Yes, for initial and continuing eligibility	3 months	Yes	No	Yes	Yes	
No Mariana Islands	Yes	Yes, for initial and continuing eligibility	30 days	Yes	No	Yes	Yes	
Puerto Rico	Yes	Yes, for initial and continuing eligibility	--- ¹	Yes ¹⁰¹	--- ¹	Yes ¹⁰²	Yes ¹⁰³	
Virgin Islands	Yes	No	NA	Yes	No	Yes	Yes	

Source: CCDF Policies Database October 1, 2012 Data

¹ Information not found in state's manual.

² States may require participants to meet work requirements in addition to education and training activities. This additional information can be found in the full detail of the CCDF Policies Database. Unless noted, care is generally not approved for graduate level education.

³ Training and educational activities are limited to non-academic vocational, trade, or technical training programs lasting no more than 24 calendar months from the parent's initial enrollment into the program; or, for parents who have already completed the first two years of a four-year college degree program, the last two years of the four-year degree program.

⁴ Job search activities are limited to 80 hours of care in a calendar year.

- ⁵ Job search activities are approved for up to two 30-day periods in a year for families already receiving child care subsidies.
- ⁶ Students must maintain a C average, or in cases where grades are not used, meet comparable requirements of the education or training program. The education activity must be related to a specific occupation, job, or job offer.
- ⁷ Job search activities are initially approved for 45 days. A hand written statement listing job contacts or documentation of job search can be submitted in order to receive an additional 15 calendar days of care. Only 60 calendar days of care for job search may be received in a calendar year, with a 60-month lifetime limit.
- ⁸ Job search activities are limited to 60 days per fiscal year, no more than five days per week, and less than 30 hours per week.
- ⁹ Job search activities are limited to 30 days of child care within a 12-month period.
- ¹⁰ Counties have the option of including training and education as eligible activities for the subsidy. Activities can lead to an associate's degree or a bachelor's degree, but they are limited to a first bachelor's degree.
- ¹¹ Job search activities are approved through the end of the month following the month in which employment ended.
- ¹² High school activities are approved for all parents under age 20.
- ¹³ Post-secondary education is only approved if it is part of a TANF Employment and Training program or if the applicant began education activities while in a SNAP Employment and Training program.
- ¹⁴ TANF clients are eligible for job search for initial and continuing eligibility.
- ¹⁵ A client's education activity must consist of at least 20 hours per week. For TANF clients, post-secondary education is limited to degrees related to their field of work.
- ¹⁶ If the client does not obtain employment after eight weeks, child care services may be suspended for up to 12 weeks, or services may be terminated.
- ¹⁷ Enrollment in a degree program is not an approved activity. Participation in vocational programs at colleges and universities is an approved activity.
- ¹⁸ Thirty consecutive days in a 12-month period may be approved for job search activities.
- ¹⁹ Families are limited to three 30-day grace periods in any 12-month period. TANF clients participating in an approved agency program are initially and continually eligible if job search activities are listed in their plan.
- ²⁰ Students must maintain a C average, or in cases where grades are not used, meet comparable requirements of the education or training program. Beginning with the 25th month of participation, the client must work 20 hours or more per week. The work requirement does not apply to a teen parent.
- ²¹ Students who do not work must maintain a 2.5 GPA, and students who work 20 hours or more per week must maintain a 2.0 GPA. The client cannot already have an associate's degree and be seeking a second one. The client cannot already have a bachelor's degree.
- ²² For TANF work program families, activities must be approved by a TANF work program caseworker. For other families, activities must be completed through a certified or accredited secondary or post-secondary training organization or institution. Benefits for post-secondary education may only be given for a maximum of 16 semesters and may only support one four year-degree or two Associate degrees.
- ²³ If a self-employed person is not earning the equivalent of the federal minimum wage after six months, child care services will be terminated.
- ²⁴ ESL is only authorized under the TANF work program.
- ²⁵ The parent must have lost employment within four weeks of application to initially qualify for job search activities.

- ²⁶ Education is an approved activity for teen parents or if it is part of the state work program requirement. For parents who are not teens or part of the work program, care may be provided during education activities if the parent qualifies for the subsidy based on employment.
- ²⁷ Training is only an approved activity if it is part of the state work program requirement.
- ²⁸ Job search activities may be approved for a maximum of two months in a six-month period. Job search activities are limited to 20 hours per week.
- ²⁹ The two-week time limit is per job loss occurrence. If the individual has difficulty finding employment, multiple job search periods may be approved.
- ³⁰ The education activity must be related to a specific occupation, job, or job offer.
- ³¹ The parent must earn at least the state minimum wage.
- ³² Parents already receiving benefits are allowed eight weeks of job search activities at the level of care they were receiving while employed. Parents not already receiving care are allowed eight weeks of job search activities at the full-time level of care. Four additional weeks of job search activities may be approved in extraordinary circumstances.
- ³³ Education activities must take place at an accredited college or university and lead to an associate's or bachelor's degree.
- ³⁴ A maximum of 240 hours per calendar year is allowed for job search. TANF families are exempt from this maximum if job search activities are a part of their employment plan.
- ³⁵ Education beyond a Baccalaureate degree is not an approved activity unless it is part of a cash welfare-approved employment plan.
- ³⁶ Job search is an eligible activity for 60 days from the last day of employment, provided the parent notified the agency of the loss of employment within 10 days.
- ³⁷ Job search activities are allowed for non-TANF families for 30 days at a time, twice per year. Families receiving TANF are allowed 12 weeks of job search activities per year.
- ³⁸ The student must maintain a 2.0 GPA on a 4.0 grade scale or be making satisfactory progress as defined by the institution. In extenuating circumstances, the student's GPA may be temporarily below 2.0.
- ³⁹ The student must maintain a 2.0 GPA on a 4.0 grade scale or its equivalent in another grading system. In extenuating circumstances, the student's GPA may be temporarily below 2.0.
- ⁴⁰ In the case of TANF recipients, job search activities are only approved for applicants who have job search in their family investment agreement/employability plan.
- ⁴¹ One grace period may be granted per job loss. There is no explicit limit on the number of times a parent may use the grace period, but an eligibility specialist can deny the request based on apparent misuse.
- ⁴² Post-secondary education is not allowed above a bachelor's degree. If, however, the parent received the last post-secondary degree or training certificate over five years ago, subsidies may be allowed for a second certificate or bachelor's degree.
- ⁴³ Clients may initially be given two consecutive calendar months for job search activities in a program year (July 1 through June 30). Each time the client loses a job, he or she is entitled to two months of care for job search activities.
- ⁴⁴ Post-secondary education is not approved for a client to earn a second bachelor's degree.

- ⁴⁵ Self-employment in the applicant's home is an approved activity if the business meets at least two of the three following criteria: has a valid business license, is zoned to legally operate a business, or has employees and is paying individuals to work for the business.
- ⁴⁶ Families are not eligible for job search if the eligible child is school age (between 6 and 12 years old) or is over 13 and has special needs. If the child is not in school due to school breaks or holidays, the job search will be approved.
- ⁴⁷ Job search activities are limited to two weeks in a calendar year.
- ⁴⁸ High school and GED activities are limited to minor parents. Minor parents who turn 18 and have not graduated or obtained their GED remain eligible for educational activities as long as they obtain their diploma or GED before turning 19.
- ⁴⁹ Subsidy benefits are approved for a maximum of 40 calendar months when the only need for care is education.
- ⁵⁰ For non-TANF families, care cannot be authorized for more than 40 days of child care services in any six-month period. For TANF families, all activities in the individual's employment plan are authorized.
- ⁵¹ Training is approved if it prepares the individual for employment.
- ⁵² Prerequisite courses for post-secondary education are not an eligible activity. All other courses that lead to a degree or certificate in an area of specialization are eligible activities. If the applicant is not participating in the state's employment program, the program cannot result in a bachelor's degree or higher.
- ⁵³ Job search activities may be approved for two 30-day periods in a year.
- ⁵⁴ Child care benefits for clients who are preparing for the GED are limited to one year.
- ⁵⁵ Job search activities are defined by each district.
- ⁵⁶ Job search activities can be approved for up to six months if a district selects this option in its Child and Family Services Plan and has funds available. Districts can limit job search activities to less than six months. This limitation is per year, unless otherwise noted in the district's Child and Family Services Plan.
- ⁵⁷ Enrollment in more than two consecutive vocational training programs, when care is needed, is not allowed.
- ⁵⁸ Approved post-secondary education activities include two-year programs other than ones with a specific vocational sequence leading to an associate degree and four-year college programs if the parent is also working at least 17.5 hours per week.
- ⁵⁹ Job search activities are initially approved for 30 days per job loss occurrence. Job search activities can be extended for another 30 days if the parent requests an extension and the caseworker determines that an extension is warranted.
- ⁶⁰ Post-secondary education is limited to 20 months and cannot be approved for graduate or postgraduate studies. If the 20-month limit occurs during a semester that the parent is enrolled, eligibility may be extended to the end of the semester.
- ⁶¹ Job search activities are allowed for 20 hours per week for eight weeks per calendar year.
- ⁶² Vocational training at a college or university must lead to a certificate, certificate of completion, or an Associate of Applied Science degree if the student has not previously completed any post-secondary education.
- ⁶³ Job search activities are approved only when they are part of the person's TANF self-sufficiency contract.

⁶⁴ Post-baccalaureate education is only approved if the education is necessary to meet specific requirements associated with maintaining employment, certification, or licensure. Post-secondary education is not approved for individuals who have already completed 140 undergraduate semester hours or 216 undergraduate quarter hours, or the combined equivalent.

⁶⁵ The individual must have received child care benefits for at least 30 calendar days prior to losing employment or completing a training or education program. Job search activities may be approved for 30 days no more than twice per calendar year, for a total of 60 days per year, and only if the individual was employed or attending school for at least 90 days between job search activities.

⁶⁶ Care is not approved for both parents to attend GED or ESL classes at the same time.

⁶⁷ Training is approved when it will qualify the individual to meet requirements for a job that the client could not meet without a certificate, accreditation, or licensure. The training program must qualify for federal financial aid from the U.S. Department of Education. In a two-parent household, the other parent must be employed during the hours the first parent is attending training. On-the-job training or apprenticeship programs that pay minimum wage are approved under employment activities.

⁶⁸ Post-secondary education must be expected to lead to a degree or certificate. In a two-parent household, care will not be authorized if both parents are attending a formal education or training program at the same time.

⁶⁹ Self-employed families are not eligible for the child care subsidy.

⁷⁰ Job search activities are generally allowed for one month. The participant may use the hours authorized in the final outstanding child care billing form. If participant's last day of work is at the end of the month, job search can extend into the following month. Job search activities must be approved by agency staff.

⁷¹ Child care for education activities is covered as long as the client is primarily an employee rather than a student. As a general rule, clients enrolled in enough credit hours to qualify for financial aid are considered students, and their class hours cannot be covered. There is a state-wide student child care subsidy program, but funding is very limited, and there is usually a long wait list.

⁷² Job search activities are approved for 30 days from the date employment ended. If on the 31st day, the parent is still unemployed, eligibility continues for an additional 30 days before payments are stopped. TANF families are given 30 days between a break in activities during which they may keep receiving subsidized child care.

⁷³ Each client must earn, per hour, an average of the greater of either the state or federal minimum wage.

⁷⁴ Income eligible parents receiving a child care subsidy may be granted a grace period not to exceed 21 days when the parents experience temporary unemployment or a transition between jobs.

⁷⁵ High school or GED activities are approved for teen parents, under the age of 20, without a high school degree or its equivalent. The applicant must be participating in the state's assistance program for teen parents. TANF applicants may participate in employment or education as approved in their employment plan.

⁷⁶ Training activities may be approved for teen parents, under the age of 20, without a high school degree or its equivalent. The applicant must be participating in the state's assistance program for teen parents. TANF applicants may participate in employment or education as approved in their employment plan.

⁷⁷ Employment includes subsidized employment, on-the-job training, and self-employment. It may also include part-time or work-study employment for at least 15 hours a week. A participant is considered employed if he or she is paid a salary. Self-employed participants must be making at least minimum wage.

⁷⁸ Job search activities are only approved for TANF recipients.

⁷⁹ ESL may be authorized for TANF recipients in order to comply with a family plan.

- ⁸⁰ If a person is already receiving child care assistance and suffers a loss of employment, 30 days of continued assistance can be granted from the last day of employment.
- ⁸¹ Job search is an eligible activity for up to four weeks per fiscal year.
- ⁸² Individuals must earn at least minimum wage.
- ⁸³ Job search activities are approved for CCDF eligibility only for homeless families.
- ⁸⁴ Care is authorized for education or training activities only if clients meet the minimum work requirement.
- ⁸⁵ Parents must demonstrate involvement in activities generally recognized as necessary to obtain employment or training leading to employment. Job search activities are not authorized for care of school age children during the school year or if both caretakers are seeking employment. Job search extensions may be authorized.
- ⁸⁶ Job search extensions may be authorized.
- ⁸⁷ Parents must demonstrate participation in a program that is likely to lead to employment within one year after completion of the program. The policy also applies to training or education programs required to maintain employment. Community service time/training are eligible activities. Volunteer work and post-bachelor education are not eligible activities.
- ⁸⁸ If the client has been self-employed for less than a year, he or she must provide proof of earnings equivalent to minimum wage for actual hours worked within three months of approval for the program.
- ⁸⁹ Job search activities are only approved if they are part of a TANF or SNAP work program.
- ⁹⁰ Job searches are limited to two times per year. Each job search period is for 28 days, and the job search periods may be used back to back, for a total of 56 days of job search per year.
- ⁹¹ Non-TANF clients over the age of 21 must work 20 hours in conjunction with education and training to be eligible for care.
- ⁹² Recipients can receive care for job search activities for up to 30 days in a six-month period. Job search activities are covered for five hours a day, four days a week.
- ⁹³ Job search is allowed if the applicant is participating in a TANF work program or the SNAP Employment and Training Program.
- ⁹⁴ If the parent is age 20 or older, approval for high school or GED activities is limited to 24 months. The time restriction does not apply to parents age 19 or younger. Parents age 20 and older must also participate in at least five hours of employment per week.
- ⁹⁵ ESL activities are limited to 24 months.
- ⁹⁶ Pre-job training is limited to two weeks. Apprenticeships are considered allowable employment.
- ⁹⁷ Education activities are limited to 24 months. The activity must provide skills that will help the individual maintain his or her current job or obtain a job in another field. Parents must also participate in at least five hours of employment per week.
- ⁹⁸ Approval for post-secondary education is limited to one degree, unless an associate's degree was earned as part of working toward completing a bachelor's degree. The participant must also maintain at least a 2.0 cumulative grade point average each term or semester.
- ⁹⁹ Job search activities can be approved for two months at a time and initially renewed up to a maximum of six months. The parent must then wait six months before qualifying for a second and final job search period, not to exceed an additional six months.
- ¹⁰⁰ Participants must be taking at least two classes each semester.

¹⁰¹ Any program from an institution that is accredited by the department of education resulting in a diploma or certificate is approved.

¹⁰² The program requires a minimum of 15 hours of weekly training.

¹⁰³ Any educational, training, or rehabilitation program licensed by the department of higher education with a specific vocational, education, or occupational goal that is geared towards the development of knowledge and skills necessary to secure employment is an eligible activity.

Table 4. Approved Activities for CCDF Eligibility (continued), 2012

State	SNAP E&T	Housing Search (Homeless)	Approved Activities for TANF Families	
			TANF Work Program ²	Other TANF Activities
Alabama	No	No	Yes	No
Alaska	No	No	Yes	Yes
Arizona	No	No	Yes	Yes
Arkansas	No	No	Yes	No
California	NA ³	Yes	Yes	Yes
Colorado	NA ³	No	Yes ⁴	No
Connecticut	No	No	Yes ⁵	Yes ⁵
Delaware	Yes	No	Yes ⁶	Yes ⁶
DC	Yes	No	Yes	Yes
Florida	NA ³	No	Yes	Yes
Georgia	No	No	Yes	Yes ⁷
Hawaii	No	No ⁸	Yes ⁹	Yes
Idaho	No	No	Yes	Yes ¹⁰
Illinois	No	No	Yes	Yes ¹¹
Indiana	No	No	Yes	No
Iowa	No	No	Yes	Yes
Kansas	Yes	No	Yes	Yes
Kentucky	No	No	Yes	No
Louisiana	No	No	Yes ¹²	No
Maine	No	No	No	No
Maryland	No	No	Yes	Yes
Massachusetts	No	Yes ¹³	Yes ¹⁴	Yes ¹⁴
Michigan	Yes ¹⁵	No	Yes	Yes
Minnesota	No	No	Yes ¹⁶	Yes ¹⁶
Mississippi	No	No	Yes	Yes
Missouri	NA ³	No	Yes ¹⁷	Yes ¹⁷
Montana	No	No	Yes ¹⁸	No
Nebraska	No	No	Yes	Yes
Nevada	No	No	Yes	Yes
New Hampshire	Yes ¹⁹	Other ²⁰	Yes ²¹	Yes ²¹
New Jersey	No	No	Yes	Yes
New Mexico	Yes	No	Yes	Yes
New York	No ²²	Yes ²³	Yes	No
North Carolina	Yes	No	Yes	Yes
North Dakota	No	No	Yes ²⁴	Yes ²⁴
Ohio	Yes	No	Yes ²⁵	Yes ²⁵
Oklahoma	NA ³	No	Yes	No
Oregon	No	No	No	No
Pennsylvania	No	No	Yes ²⁶	No
Rhode Island	--- ¹	No	Yes ²⁷	Yes ²⁷
South Carolina	No	No	Yes ²⁸	Yes ²⁸
South Dakota	No	No	Yes ²⁹	No

Table 4. Approved Activities for CCDF Eligibility (continued), 2012

State	SNAP E&T	Housing Search (Homeless)	Approved Activities for TANF Families	
			TANF Work Program ²	Other TANF Activities
Tennessee	No	No	Yes	Yes
Texas	Yes	No	Yes	No
Utah	No	Yes ³⁰	Yes	Yes
Vermont	No	Yes	Yes	No
Virginia	Yes	No	Yes	Yes
Washington	Yes	Yes	Yes	Yes ³¹
West Virginia	No	No	Yes	No
Wisconsin	Yes	No	Yes	No
Wyoming	Yes	No	Yes	No
American Samoa	No	No	NA ³²	NA ³²
Guam	NA ³³	No	NA ³³	No
No Mariana Islands	NA ³⁴	No	NA ³²	NA ³²
Puerto Rico	--- ¹	--- ¹	Yes	Yes
Virgin Islands	No	No	Yes ³⁵	Yes ³⁵

Source: CCDF Policies Database October 1, 2012 Data

¹ Information not found in state's manual.

² TANF work program activities are broadly defined as employment or training activities that are part of the State's/Territory's TANF program.

³ Child care for SNAP E&T participants is not provided under the state's primary child care subsidy program.

⁴ Eligibility is determined according to the TANF work program guidelines.

⁵ Approved activities include education, training, job search, substance abuse and mental health treatment, or any activity included in the participant's employment plan.

⁶ TANF participants must be employed, attending school, or participating in the TANF work program.

⁷ TANF participation requirements, as outlined in the family service plan, are approved activities.

⁸ Families with income below 100 percent of the Federal Poverty Guidelines who are employed and homeless are given priority.

⁹ Applicants may participate in a TANF work program or a treatment program.

¹⁰ Employment and other activities are approved under the state's TANF program. The family may participate in other activities as outlined in its personal responsibility contract.

¹¹ Approved activities include education, training, job search, substance abuse and mental health treatment, or any activity included in the participant's responsibility and services plan.

¹² Eligibility is approved for participation in the state program that provides education, employment, training, and related services for families receiving or applying for TANF assistance.

¹³ If the family is referred by the state's housing authority program, the family may participate in housing search and other shelter activities.

¹⁴ Families receiving TANF may receive child care if care is authorized by the department that administers the state's TANF program.

¹⁵ Department assigned employment preparation activities are approved.

- ¹⁶ TANF recipients must either be involved in an approved work program as developed by the participant and a job counselor, or one of the following activities outside of the work program: employment, job search, financial and employment services orientation, or appeals and hearings for cash assistance.
- ¹⁷ The applicant must be participating in work or education activities.
- ¹⁸ TANF case assistance parents have to be participating in family investment agreement/employability plan activities that require child care.
- ¹⁹ Care may be approved for up to 40 days in a six-month period if funding permits.
- ²⁰ Participants who are seeking both employment and housing can qualify for subsidized care.
- ²¹ TANF participants must be participating in employment, an associate's or bachelor's degree program, or a course of study necessary to meet the participants' goals for obtaining employment.
- ²² Policy coded for New York City.
- ²³ A county may pay for child care for housing search activities if the county selected this option in its child and family services plan.
- ²⁴ Approved activities include participation in employment, education, training, or any approved TANF work program.
- ²⁵ Child care is approved if it is necessary for the parent to comply with the requirements of a self-sufficiency contract.
- ²⁶ Participants in the TANF training or work support training program are eligible.
- ²⁷ TANF applicants may participate in employment or education as approved in their employment plan.
- ²⁸ A TANF participant who is participating in work, school, or training, complying with his or her TANF family plan, participating in a TANF countable component, attempting to start a countable component within two weeks, or incapacitated and unable to work for 90 or more days is eligible for child care assistance. Care may be authorized for up to 26 weeks at a time and up to 52 weeks per application.
- ²⁹ TANF families participating in activities approved by the TANF employment specialist are eligible for reimbursement of child care costs for those activities.
- ³⁰ Homeless families may use child care assistance for activities including, but not limited to, employment, job search, training, shelter search, or working through a crisis situation.
- ³¹ The following additional TANF activities are automatically approved for subsidized child care: community service, disability-related vocational rehabilitation, court-ordered alcohol or substance abuse treatment, resolution of homelessness, and parenting or family planning classes. The following TANF activities may be approved by the agency: pursuit of disability or veteran's benefits, voluntary alcohol or substance abuse treatment, family violence intervention, mental health services, learning disability services, and temporary physical disability.
- ³² This territory or outlying area does not have a TANF program.
- ³³ Child care for SNAP E&T and TANF work program participants is not provided under this territory or outlying area's primary child care subsidy program.
- ³⁴ This territory or outlying area does not have a SNAP E&T program.
- ³⁵ Any TANF parent who is working or officially enrolled or registered and actively participating in a job training or educational program is eligible.

Table 5. Exemptions from Parent/Caretaker Activity Requirements, 2012²

State	Elderly Exemption ³	Exemption for Parents with Special Needs ⁴
Alabama	No elderly exemption	Varies ⁵
Alaska	No elderly exemption	Varies ⁵
Arizona	No elderly exemption	No
Arkansas	No elderly exemption	Yes
California	No elderly exemption	Yes ⁶
Colorado	No elderly exemption	Varies ⁷
Connecticut	No elderly exemption	Varies ⁵
Delaware	No elderly exemption	Yes ⁸
DC	No elderly exemption	No
Florida	No elderly exemption	Yes
Georgia	60 ⁹	Varies ⁷
Hawaii	No elderly exemption	Varies ¹⁰
Idaho	No elderly exemption	Varies ⁷
Illinois	No elderly exemption	Varies ⁵
Indiana	No elderly exemption	Varies ¹¹
Iowa	No elderly exemption	Varies ¹²
Kansas	No elderly exemption	Varies ¹³
Kentucky	No elderly exemption	Yes
Louisiana	No elderly exemption	No
Maine	No elderly exemption	No
Maryland	No elderly exemption	Varies ⁵
Massachusetts	65 ¹⁴	Yes
Michigan	No elderly exemption	Yes
Minnesota	No elderly exemption	Varies ⁵
Mississippi	65 ¹⁵	Varies ¹⁶
Missouri	No elderly exemption	Yes
Montana	No elderly exemption	Varies ¹⁷
Nebraska	No elderly exemption	Yes ¹⁸
Nevada	No elderly exemption	Varies ¹⁹
New Hampshire	No elderly exemption	Varies ²⁰
New Jersey	61 ²¹	Varies ⁵
New Mexico	No elderly exemption	Varies ⁵
New York	No elderly exemption	Yes
North Carolina	No elderly exemption	Varies ⁵
North Dakota	No elderly exemption	Varies ²²
Ohio	No elderly exemption	Varies ⁵
Oklahoma	No elderly exemption	No
Oregon	No elderly exemption	Varies ⁵

State	Elderly Exemption ³	Exemption for Parents with Special Needs ⁴
Pennsylvania	No elderly exemption	Varies ²³
Rhode Island	No elderly exemption	Yes ²⁴
South Carolina	No elderly exemption	Yes
South Dakota	No elderly exemption	Varies ²⁵
Tennessee	No elderly exemption	Yes
Texas	No elderly exemption	Varies ²⁶
Utah	No elderly exemption	Varies ⁵
Vermont	No elderly exemption	Varies ²⁷
Virginia	No elderly exemption	Varies ²⁸
Washington	No elderly exemption	Varies ⁵
West Virginia	No elderly exemption	No
Wisconsin	No elderly exemption	Varies ⁷
Wyoming	No elderly exemption	Varies ⁷
American Samoa	No elderly exemption	--- ¹
Guam	No elderly exemption	Yes
No Mariana Islands	No elderly exemption	Varies ⁵
Puerto Rico	--- ¹	Yes
Virgin Islands	No elderly exemption	No

Source: CCDF Policies Database October 1, 2012 Data

¹ Information not found in state's manual.

² Federal CCDF Policies require families to meet at least one reason for care. States may choose to use state funds to provide subsidies for families who do not meet the federal guidelines.

³ The elderly exemption is the minimum age at which an individual would be potentially eligible for CCDF, regardless of work participation.

⁴ Variations in the exemption are noted. States are coded "yes" when their policy documents described an exemption for parents with special needs, but did not describe any variations in the policy for single-parent families, two-parent families, temporary special needs, or long-term special needs. Variations beyond what was described in the policy documents may exist.

⁵ Parents with special needs are exempt from meeting approved activity requirements if they are in a two-parent household where one parent is participating in an approved activity and the other is incapable of providing care because of a medically verified disability.

⁶ An incapacitated parent or caretaker is exempt from meeting approved activity requirements if he or she is temporarily or permanently unable to provide care and supervision of the child for all or part of the day due to a physical or mental health condition.

⁷ The family is eligible if one parent in a two-parent household participates in an eligible activity and the other parent is incapacitated. A single parent that is incapacitated and therefore not able to participate in an eligible activity is ineligible for a CCDF subsidy.

⁸ A parent or caretaker is eligible if he or she has a condition that makes him or her unable to care for his or her child for some portion of the day. For two-parent households, both parents must have a need for child care.

⁹ Grandparents raising grandchildren under age five are exempt from activity requirements if they are recipients of child-only TANF benefits and are at least age 60, or are under age 60 and receiving SSI or RSDI disability benefits.

¹⁰ Care is allowed for a two-parent family when one parent is permanently or temporarily disabled. Care is allowed in a one-parent household when the parent is temporarily disabled.

¹¹ In single-parent families, CCDF benefits can be continued when the parent has a temporary medical condition that prevents the parent from working or participating in training activities and when the parent's employer provides a statement indicating the parent has an assurance he or she may return to his or her job. In two-parent households, CCDF benefits may be provided to allow one parent to participate in employment or training activities if the disabled parent provides a valid doctor's statement indicating he or she is unable to participate in employment or training and is unable to care for his or her child. In two-parent families in which both parents are disabled, CCDF benefits can be continued if the condition of one parent is temporary, prevents the parent from working or participating in training activities, and the parent's employer provides a statement indicating the parent has an assurance he or she may return to his or her job.

¹² In a single-parent or two-parent household, care is authorized if the parent was previously eligible for child care for work or training purposes and becomes temporarily unable to work or attend training due to medical reasons.

¹³ Parents with a temporary emergency need, including hospitalization or otherwise being temporarily unable to provide adequate care, may be approved for subsidized care for up to six months.

¹⁴ Individuals age 65 and over and retired do not have to meet work requirements.

¹⁵ There is no employment requirement when a child lives in the home of a caretaker who is age 65 or older and is not the biological parent of the child.

¹⁶ When one parent in a two-parent home has documented special needs, the parent with special needs does not have to meet the work requirement. When a single parent has documented special needs and a guardian is responsible for the parent's affairs, the guardian must meet the work requirement. If there is no other responsible guardian, the parent does not have to meet the work requirement.

¹⁷ The minimum hourly work requirement for a parent with a severe disability may be waived if a licensed practitioner determines that the parent with a disability is unable to work the number of hours required to receive a subsidy and the family otherwise qualifies for subsidies. If the parent's work requirement is waived, he or she may not qualify for subsidies during school or training time.

¹⁸ Child care is approved when the parent has a medically verified disability.

¹⁹ Exemption requests are considered on a case-by-case basis when submitted with supporting documentation, such as medical documentation.

²⁰ Care is allowed for a two-parent family when one parent is permanently or temporarily disabled, and the other parent meets the eligibility criteria of the program. Care is allowed in a one parent household when the parent is temporarily disabled.

²¹ Individuals in the kinship child care program are exempt from the work requirement when they are over the age of 60.

²² In a two-parent household, care is approved when one parent is in an allowable activity and the other caretaker is disabled and unable to care for the child(ren). Verification must be obtained from a physician showing that the disabled parent cannot care for the child(ren), and the individual must be deemed disabled by the Social Security Administration.

²³ A single parent who becomes disabled following the determination of eligibility is exempt from work, education, or training activities for a period of 183 days. An individual in a two-parent home that is disabled and unable to work may be exempt if the other parent continues to meet the activity requirement.

²⁴ A family that has already been determined eligible for services may request an exception to the work requirement and provide documentation to support the claim.

²⁵ Exceptions can be made to the work and school requirements if extraordinary factors exist. These are considered on a case-by-case basis and require professional documentation as to why the program requirements cannot be met. These include physical or mental limitations of the parent or applicant.

²⁶ Local agencies have the option to make exemptions for parents with documented disabilities.

²⁷ The parent must be physically, mentally, or emotionally incapable of providing all the care and supervision to his or her children, as determined by an MD, NP, PA, or licensed psychologist. Authorization of child care financial assistance is limited to the number of days and hours per week recommended by the professional making the determination.

²⁸ Care is available for up to four weeks in a twelve month period if the parent is ill or incapacitated. The time period may be extended for justifiable reasons. In two-parent households, there must be a documented good cause as to why neither parent can provide child care.

Table 6. If Families Receiving Different Types of Benefits/Services have Different Parent Activity Requirements, 2012 ²

State	Transitional Child Care	Homeless	Child Protective Services	Foster Children
Alabama	TCC-specific requirements not specified in child care manual	Same as other families	Other ³	Other ⁴
Alaska	Same as other families	Same as other families	Other ⁵	Same as other families
Arizona	Other ⁶	Other ⁷	Other ⁸	Other ⁹
Arkansas	Same as other families	Same as other families	Other ¹⁰	Other ¹⁰
California	Other ¹¹	Other ¹²	No activity requirement ¹³	No activity requirement ¹⁴
Colorado	Same as other families ¹⁵	Same as other families	Not eligible	Not eligible
Connecticut	Same as other families	Same as other families	Same as other families	Same as other families
Delaware	Same as other families	No activity requirement	No activity requirement ¹⁶	Same as other families
DC	Same as other families	Same as other families	No activity requirement ¹⁷	Same as other families ¹⁸
Florida	Same as other families	Same as other families	Other ¹⁹	Other ¹⁹
Georgia	Other ²⁰	Same as other families	Varies depending on if child left in home ²¹	Same as other families
Hawaii	Same as other families	Same as other families	Other ²²	Same as other families ²³
Idaho	Same as other families	Same as other families	Other ²⁴	Same as other families
Illinois	Same as other families	Same as other families	Not eligible ²⁵	Not eligible ²⁵
Indiana	Same as other families	Same as other families	Varies depending on if child left in home ²⁶	Same as other families ²⁷
Iowa	Same as other families	Same as other families	Other ²⁸	Same as other families ²⁹
Kansas	Other ³⁰	Same as other families	Other ³¹	Other ³²
Kentucky	TCC-specific requirements not specified in child care manual	Same as other families	Other ³³	Not eligible
Louisiana	NA ³⁴	Same as other families	Other ³⁵	Other ³⁶
Maine	Same as other families	Same as other families	Same as other families	Same as other families
Maryland	Same as other families	Same as other families	Not eligible	Not eligible
Massachusetts	Same as other families	Other ³⁷	Other ³⁸	Same as other families ³⁹
Michigan	Same as other families ⁴⁰	Same as other families	Other ⁴¹	Other ⁴²
Minnesota	Other ⁴³	Same as other families	Not eligible	Not eligible

Table 6. If Families Receiving Different Types of Benefits/Services have Different Parent Activity Requirements, 2012 ²

State	Transitional Child Care	Homeless	Child Protective Services	Foster Children
Mississippi	TCC-specific requirements not specified in child care manual ⁴⁴	Same as other families	No activity requirement ⁴⁵	No activity requirement ⁴⁵
Missouri	Same as other families	Same as other families	No activity requirement	No activity requirement
Montana	Same as other families	Same as other families	Other ⁴⁶	Other ⁴⁷
Nebraska	Other ⁴⁸	Same as other families	Same as other families ⁴⁹	Same as other families ²³
Nevada	Same as other families	Same as other families	Other ⁵⁰	Other ⁵¹
New Hampshire	Same as other families	Other ⁵²	Varies depending on if child left in home ⁵³	Same as other families
New Jersey	TCC-specific requirements not specified in child care manual ⁵⁴	Same as other families	No activity requirement	No activity requirement ⁵⁵
New Mexico	TCC-specific requirements not specified in child care manual	Same as other families	Other ⁵⁶	Other ⁵⁶
New York	TCC-specific requirements not specified in child care manual ⁵⁷	Other ⁵⁸	No activity requirement	Other ⁵⁹
North Carolina	Same as other families	Same as other families	Varies depending on if child left in home ⁶⁰	No activity requirement ⁶¹
North Dakota	TCC-specific requirements not specified in child care manual	Same as other families	Not eligible	Not eligible
Ohio	Other ⁶²	No activity requirement	Varies depending on if child left in home ⁶³	Same as other families
Oklahoma	Same as other families	Same as other families	Other ⁶⁴	Same as other families ⁶⁵
Oregon	Same as other families	Same as other families	Not eligible	Same as other families
Pennsylvania	Other ⁶⁶	Same as other families	Same as other families	Same as other families ⁶⁷
Rhode Island	Same as other families	Same as other families	---1	Other ⁶⁸
South Carolina	Same as other families ⁶⁹	Same as other families	Other ⁷⁰	Same as other families ⁷¹
South Dakota	Other ⁷²	Same as other families	Other ⁷³	Other ⁷³
Tennessee	Same as other families	Same as other families	No activity requirement	No activity requirement
Texas	Same as other families	Same as other families	Other ⁷⁴	Other ⁷⁴

Table 6. If Families Receiving Different Types of Benefits/Services have Different Parent Activity Requirements, 2012 ²

State	Transitional Child Care	Homeless	Child Protective Services	Foster Children
Utah	Same as other families	Other ⁷⁵	Same as other families	Not eligible ⁷⁶
Vermont	NA ³⁴	Other ⁷⁷	Other ⁷⁸	Other ⁷⁹
Virginia	Same as other families	Same as other families	Other ⁸⁰	Not eligible
Washington	NA ³⁴	Same as other families	Not eligible	Not eligible
West Virginia	Same as other families	Same as other families	Other ⁵⁶	Same as other families ⁸¹
Wisconsin	Same as other families ⁸²	Same as other families	Not eligible	Other ⁸³
Wyoming	Same as other families	Same as other families	Not eligible	Same as other families
American Samoa	NA ⁸⁴	Other ⁸⁵	No activity requirement ⁸⁶	No activity requirement ⁸⁷
Guam	Same as other families	Same as other families	Other ⁸⁸	Other ⁸⁹
No Mariana Islands	NA ⁸⁴	Same as other families	Same as other families	Same as other families
Puerto Rico	Same as other families	No activity requirement ⁹⁰	No activity requirement	No activity requirement
Virgin Islands	Same as other families	Same as other families	Other ⁹¹	No activity requirement ⁹²

Source: CCDF Policies Database October 1, 2012 Data

¹ Information not found in state's manual.

² Federal CCDF policies require families to meet at least one reason for care. States may choose to use state funds to provide subsidies for families who do not meet the federal guidelines.

³ Any child for whom the department submits a written referral requesting services for a reason of protective services is eligible for care.

⁴ If the department has legal custody of the child or the parent has signed a boarding home agreement, and the department provides a written referral, the foster care child is eligible for care.

⁵ Eligibility is determined by the Office of Children's Services.

⁶ Families receiving transitional child care must be employed.

⁷ A client living in a homeless or domestic violence shelter is eligible for care based on participation in structured shelter activities as verified by the shelter, or if the client is unable to care for his or her child due to a physical, mental, or emotional disability.

⁸ Families are eligible for protective services child care when the protective services case file requires child care and there is either a confirmed case of abuse or a risk of abuse or neglect. Families receiving care through child protective services are not required to meet income guidelines.

⁹ Foster care families do not have to meet the same income requirements as other families. The department may pay for child care during the time foster parents spend at work, in training, counseling, or similar activities which are directly connected to their ability to care for foster children in their home.

- ¹⁰ Child protective services and foster children are categorically eligible when services are being provided to prevent abuse or neglect or to strengthen family functioning and overall well-being of the children. Protective services and foster care families have a separate eligibility process.
- ¹¹ Activity requirements for transitional child care families are generally the same as non-transitional child care families except that they may also be participating in job retention services approved by the county welfare department.
- ¹² Activities are approved if they are related to seeking permanent housing and, if the family is residing in a shelter, appointments or activities that are necessary to comply with shelter participation requirements.
- ¹³ If eligibility and need are based on child protective services, families do not have to meet income requirements.
- ¹⁴ Foster care cases are treated the same as child protective services cases for purposes of eligibility and income requirements.
- ¹⁵ Families transitioning from TANF to low-income child care do not have to complete an application until redetermination.
- ¹⁶ Families referred by and active with the Division of Family Services do not have to meet income requirements.
- ¹⁷ There are no requirements of the parents for training or employment. The child under protection may reside with a relative or guardian outside the District of Columbia.
- ¹⁸ The foster parent must be working a minimum of 20 hours per week. The child may reside with a foster parent or guardian outside the District of Columbia.
- ¹⁹ Eligibility is not dependent on family income or work requirements but rather on a documented referral from the child protective services department.
- ²⁰ Transitional child care recipients may work less than the hourly requirements but work at least the minimum hours that made them ineligible for TANF. Transitional child care clients must participate in one or more state approved activities a minimum of 24 hours per week for each responsible adult.
- ²¹ When the child is left in the home and care is needed for the child's protection, the family is not required to meet work requirements, but the family must meet income and residency criteria. When the child is placed in the care of another relative or family friend, the applicant must meet work or activity requirements as well as income and residency requirements.
- ²² The family must have a court order that specifies care is needed for a specific purpose, such as work. Child protective services families do not have to meet the same income requirements as other families.
- ²³ Foster care families do not have to meet the same income requirements as other families.
- ²⁴ A child is eligible for child care benefits if the child protection case plan requires constant supervision.
- ²⁵ The Department of Children and Family Services pays for child care provided for child protective services and foster care.
- ²⁶ Custodians or caretakers in child protective services cases in which children are in out-of-home placements are subject to the same requirements as non-child protective services families. In child protective services cases in which children remain in their own homes, families are categorically eligible (service and financial need requirements are waived) if the child protective services caseworker provides written documentation that child care is a necessary part of the case plan.
- ²⁷ Activities conferring eligibility for foster children are the same as for non-foster care families. However, licensed foster parents are not included in the unit for the purpose of calculating family income.
- ²⁸ Families are eligible for protective services child care when the protective services file requires child care and there is either a confirmed case of abuse or a risk of abuse or neglect. Families receiving care through child protective services are not required to meet income guidelines.
- ²⁹ Only relative foster families receive child care through the CCDF program. Children who are placed in licensed foster family homes do not receive child care through CCDF.

- ³⁰ TANF recipients who gain employment and therefore lose their cash assistance are given a two-month grace period during which they remain eligible for child care subsidies but do not have to meet the 20-hour per week minimum.
- ³¹ If a temporary emergency need for service is established and a social services program manager signs a request for social services child care, care may be approved for six months.
- ³² Care may be approved for juvenile offenders when the foster parent is employed and needs care. Children in licensed foster care are provided care through a different program.
- ³³ Care may be authorized for preventive services when the child is at risk of abuse or neglect or protective services when the child has been abused or neglected. Child protective services cases are not required to meet the same income thresholds as other participants.
- ³⁴ This state does not have transitional child care.
- ³⁵ Protective services children are eligible regardless of income when the child care services are necessary in order to maintain the child in his or her own home and when the need for care meets the eligibility policy for the protective services program.
- ³⁶ Foster children are eligible for care to maintain the child's current placement in a foster or adoptive home and when the need for care meets the eligibility policy for the foster care program.
- ³⁷ If the family is referred by the state's housing authority program, the family may participate in housing search and other shelter activities.
- ³⁸ The child protective services agency may authorize care on a case-by-case basis for families with active protective needs documented in a supported report of abuse or neglect within the previous 12 months or when there is a determination of need to begin or continue supportive child care at a supervisory progress review.
- ³⁹ The family is required to meet the activity requirement, but is exempt from the income requirement.
- ⁴⁰ Families are exempt from income determination.
- ⁴¹ Families are automatically eligible if child care is required by an active protective services plan. Families are exempt from income determination.
- ⁴² When the child needing care has an active department-paid case, and child care is a component of the foster care service plan, the child is automatically eligible for care without income determination.
- ⁴³ Transitional child care families are eligible for subsidies through employment or job search activities. Participants must be employed an average of 20 hours per week. Education does not confer eligibility for families under the transitional child care sub-program, but if a participant is a full-time student, he or she need only be employed a minimum of 10 hours per week. However, the participant will only be authorized for hours when he or she is working.
- ⁴⁴ Families in transitional child care do not need to meet the work hours requirement.
- ⁴⁵ Eligibility is determined by the foster care or child protective services case manager.
- ⁴⁶ To qualify for child protective services child care, the child must need care because of the danger of neglect or abuse. The physical or emotional risk to the child needs to be documented in the case record. Some families may be required to pay for child care services, as determined on a case-by-case basis.
- ⁴⁷ The department may pay for child care during the time foster parents spend at work, in training, in counseling, or participating in similar activities that are directly connected to their ability to care for foster children in their home.
- ⁴⁸ Transitional child care may be provided if all of the following criteria are met: the family loses TANF eligibility as a result of increased earnings or hours of employment, the family received a TANF grant for which they were eligible in three of the six months preceding ineligibility, the family provides financial information to determine eligibility and copayments, child care is necessary to accept or retain employment, and the family's gross earned and unearned income is equal to or less than 185 percent of the Federal Poverty Guidelines.
- ⁴⁹ Families who require emergency child protective services or require child protective family services may be eligible without regard to income. Families receiving protective services must still meet the need for service requirement.

- ⁵⁰ To be eligible under this category, children must be placed in the custody of an individual for a defined length of time, until they can be returned to their parents. If the child is placed in the custody of an individual who is related by blood or marriage, the applicant must become a licensed foster parent within six months of the placement.
- ⁵¹ Approved activities for foster parents must be verified by a caseworker. If the foster parent is related by blood or marriage, the eligible foster parent can receive up to two years of 100 percent of the state maximum reimbursement amount. After the two years, the foster parent will no longer be eligible as a foster care case.
- ⁵² Applicants can qualify for child care assistance if they are participating in a combination of job and housing search activities.
- ⁵³ If the children remain in the parents' home and child care is provided to prevent child abuse or neglect, to rehabilitate the family, or to reunite the family, the parents are not required to be employed.
- ⁵⁴ Transitional child care is available for families who are no longer eligible for TANF due to increased earnings or increased employment that results in increased earnings.
- ⁵⁵ Foster children in out-of-home settings are considered to be under child protective services and therefore automatically eligible.
- ⁵⁶ Eligibility is determined by the child protective services worker.
- ⁵⁷ The family must have received TANF for three of the previous six months, have income at or below 200 percent of the state income standard, meet child support requirements, and meet certain criteria for closing the TANF case. The TANF case must have been closed due to increased employment income, voluntary closure, or meeting the five-year time limit for assistance, and the family must not be applying for, eligible for, or in the process of applying for additional safety net assistance.
- ⁵⁸ Policies coded for New York City. Eligibility is limited to homeless families who are working or participating in an educational or vocational activity. One or more of the legally responsible adults must reside in an approved homeless family emergency shelter.
- ⁵⁹ Policies coded for New York City. The child must be referred by a voluntary foster care agency or the administration for children's services. Care is authorized for one year if the parent is employed or for six months if the parent is not employed.
- ⁶⁰ If a child is in protective services and needs child care in order to stay in his or her own home, the child is automatically eligible. If a child is removed from the home, he or she can no longer receive care as a child protective services case but must apply under another need category.
- ⁶¹ Children in foster care who are in the custody of a county and have been placed either with an adult other than their parents or in a licensed foster home are eligible.
- ⁶² The family must be in need of child care due to employment. The family's income must not exceed 150 percent of the Federal Poverty Guidelines, and the family must meet all requirements of the application and redetermination process.
- ⁶³ Protective child care is authorized only if the child resides in the home of the parent for whom the protective case plan is written and the case plan specifically requests child care.
- ⁶⁴ Child care may be approved in critical situations to prevent neglect, abuse, or exploitation.
- ⁶⁵ Parents must be working at least 20 hours per week or one parent must be working and the other have a significant disability that precludes providing care for the child.
- ⁶⁶ Families must meet work participation requirements, unless they lost TANF eligibility due to having earnings over the TANF income limit, in which case they do not have to meet minimum work hour requirements.
- ⁶⁷ Foster children are eligible for care as long as the foster parents meet the nonfinancial eligibility requirements.
- ⁶⁸ Foster parents must be working, or the developmental needs of the foster child must require that the child attend day care.

⁶⁹ Participants must fall into one of four program categories. The first transitional child care category applies to applicants who were terminated from TANF for earned income exceeding TANF guidelines and who received TANF assistance in the previous month. The second category is for applicants whose first year of transitional child care is ending or who previously received TANF and failed to apply for transitional child care. The third category is for applicants who become employed within two years of leaving TANF. The fourth category is for families who become employed or increase earnings during a full-family sanction in TANF and become ineligible for TANF. Applicants in all categories must meet income and work requirements.

⁷⁰ Care must be needed to enable the child to remain in the home of the parent, or a caretaker if the child is removed from the parent's home, and to reduce the effects of abuse and neglect by addressing physical, social, emotional, cognitive, and language development needs. The parent is not required to meet income or activity requirements.

⁷¹ The foster parent must meet the work requirement. Only the child's income is used to determine eligibility. Children placed in South Carolina from another state are not eligible for child care services through the state's primary child care program.

⁷² There is no minimum work requirement.

⁷³ In cases where the state or other licensed agency has legal custody of the child, foster parents are not required to meet income or work requirements. However, care is only authorized for the times the foster parents are working or attending school. In cases where the foster parents adopt the child or receive guardianship, the foster parents must meet the minimum work or school requirements.

⁷⁴ The child protective services agency has the responsibility for determining child care eligibility for children in the agency's protective care, including foster care.

⁷⁵ Homeless families may qualify under different activity requirements. If the individual has a referral from a recognized homeless agency, care may be approved for employment, job search, training, shelter search, or working through a crisis situation.

⁷⁶ Foster care parents are not eligible for child care benefits for their foster children. This includes the child of a teen parent in foster care.

⁷⁷ Care may be approved in order to protect children from harm.

⁷⁸ The family must have a referral from a child protective services worker. If a family is categorized as protective services, the family is eligible as long as funds are available.

⁷⁹ Foster families whose service need is based on the special needs of a foster child or foster parent are eligible for child care financial assistance at 100 percent of the state established rate, regardless of income.

⁸⁰ Child protective service is an approved activity for CCDF-eligible families if the families are receiving child protective services through the family assessment track, investigation track, or child protective services on-going. When parents are involved in activities included in the child protective services plan, the local department is required to approve child care.

⁸¹ The foster parent must be participating in an employment, education, or job training activity. The family must meet the income requirement, but it is based on the income of the child.

⁸² Families transitioning off of a TANF work program are assigned the minimum copayment based on the number of children in care for up to five weeks of care.

⁸³ Foster parents and subsidized guardians who need child care for their foster children are not required to provide their own income information if they are only applying for child care assistance. Foster parents and all foster children who are also minor parents must participate in an approved activity to receive child care assistance for their foster children.

⁸⁴ This territory or outlying area does not have transitional child care.

⁸⁵ If a family is categorized as protective services due to homelessness as a result of a natural disaster, the family is eligible as long as funds are available.

⁸⁶ Children referred by child protective services receive immediate placement.

⁸⁷ The parent is not required to participate in employment, education, or training activities.

⁸⁸ Income and copayment requirements are waived, and the parent must be participating in work, education, or training activities. If a non-parent caretaker is requesting child care for his or her own child in addition to the child in protective services, income is counted.

⁸⁹ Income and copayment requirements are waived, and the parent must be participating in work, education, or training activities. If a non-parent caretaker is requesting child care for his or her own child in addition to the child in foster care, income is counted. Children may also receive care while awaiting placement in a foster home, when the foster parent requires time to implement the case plan, or when the foster parent requires time away from the child.

⁹⁰ Children with families who have unstable housing are not required to meet eligibility requirements.

⁹¹ Applicants who have children in protective services must have a letter of recommendation or court order documenting it is in the best interest of the child to be placed in child care daily. On a case-by-case basis, the agency may waive income eligibility requirements.

⁹² Foster care parents are not required to work or participate in education or training activities.

Table 7. Defining the Family Unit and Income: Treatment of Children and Siblings, 2012²

State	Maximum Age Siblings Who are Not in School are Counted in the Unit	Maximum Age Siblings Who are Still in School are Counted in the Unit	Treatment of Children's and Siblings' Earnings (When Included in Family Size)
Alabama	17	17	Fully counted
Alaska	17 ³	17 ³	Not counted ⁴
Arizona	17	17	Varies/partially counted ⁵
Arkansas	NA ⁶	NA ⁶	Counted at age 18 and older
California	17	18	Not counted
Colorado	NA ⁷	NA ⁷	Not counted
Connecticut	17	17	Not counted
Delaware	17	17	Fully counted
DC	17	21	Not counted
Florida	NA ⁸	NA ⁸	Counted at age 18 and older ⁹
Georgia	17	17	Not counted
Hawaii	17	17	Varies/partially counted ¹⁰
Idaho	NA ¹¹	NA ¹¹	Counted at age 18 and older
Illinois	20 ¹²	20 ¹²	Counted at age 19 and older
Indiana	17	17	Not counted
Iowa	17	17	Counted at age 15 and older ¹³
Kansas	18	18	Counted at age 18 and older ¹⁴
Kentucky	18	18	Not counted
Louisiana	18	18	Not counted ¹⁵
Maine	17	17	Varies/partially counted ¹⁶
Maryland	17	21	Counted at age 15 and older ¹⁷
Massachusetts	17	23	Counted at age 21 and older
Michigan	17	17	Varies/partially counted ⁵
Minnesota	17	17 ¹⁸	Varies/partially counted ¹⁹
Mississippi	17 ²⁰	20 ²⁰	Not counted
Missouri	17	17	Varies/partially counted ⁵
Montana	17 ²¹	17 ²¹	Varies/partially counted ²²
Nebraska	18	18	Varies/partially counted ²³
Nevada	17	18	Varies/partially counted ²⁴
New Hampshire	17	19	Varies/partially counted ²⁵
New Jersey	NA ⁶	NA ⁶	Fully counted
New Mexico	17	18	Not counted
New York	17 ²⁶	17 ²⁶	Counted at age 14 and older
North Carolina	17	18 ²⁷	Not counted
North Dakota	18 ²⁸	18 ²⁸	Not counted
Ohio	17	17	Varies/partially counted ²⁹
Oklahoma	17	17	Varies/partially counted ³⁰
Oregon	17	18	Not counted

Table 7. Defining the Family Unit and Income: Treatment of Children and Siblings, 2012²

State	Maximum Age Siblings Who are Not in School are Counted in the Unit	Maximum Age Siblings Who are Still in School are Counted in the Unit	Treatment of Children's and Siblings' Earnings (When Included in Family Size)
Pennsylvania	17	21	Not counted
Rhode Island	17 ³¹	17 ³¹	Not counted
South Carolina	17	20	Counted at age 18 and older ³²
South Dakota	17	17	Not counted
Tennessee	17	18	Varies/partially counted ³³
Texas	NA ⁷	NA ⁷	Fully counted
Utah	17	18	Not counted
Vermont	NA ³⁴	NA ³⁴	Not counted
Virginia	17	17	Not counted
Washington	18	18 ³⁵	Not counted
West Virginia	17	17	Not counted
Wisconsin	17	18	Not counted ³⁶
Wyoming	17	17	Varies/partially counted ²⁹
American Samoa	--- ¹	--- ¹	Not counted
Guam	17 ³⁷	17 ³⁷	Fully counted
No Mariana Islands	17	17	Varies/partially counted ³⁸
Puerto Rico	20	20	--- ¹
Virgin Islands	17	18	Not counted

Source: CCDF Policies Database October 1, 2012 Data

¹ Information not found in state's manual.

² The policies shown here apply to children and siblings living in the home. They do not apply to teen parents.

³ Once a child turns 18, he or she is considered an adult and is no longer a dependent for child care subsidy purposes, unless that child has a developmental disability, in which case he or she remains a dependent until age 19.

⁴ Only unearned income is counted for children in the home.

⁵ If a child is attending school, his or her income is not counted.

⁶ Children and siblings are counted in the unit as long as they are dependent on the parent or applicant, regardless of age.

⁷ Children of the primary applicant continue to be counted as part of the family unit as long as they live with the primary applicant and are counted on his or her tax return.

⁸ Siblings are counted as long as they still reside with the family and are financially supported by the family.

⁹ Earned income is excluded for any family member who is under age 18, or age 18 if enrolled as a full-time student in a secondary school or its equivalent. Earned income of family members under the age of 22 is excluded if they are full-time students in a secondary school and receiving the John M. McKay Scholarship.

¹⁰ If the child is a student at least half time, his or her earnings are not counted.

¹¹ Children who are claimed as dependents for tax purposes are included in the unit.

- ¹² Children under age 21 may be included in the unit if they are dependent on the family for more than 50 percent of their support and are full-time students away at school. In order to be counted in the unit, they cannot establish residency outside of the family household.
- ¹³ Earnings of a child under age 15 are not counted. Earnings of a child under age 18 are not counted if the child is a full-time student.
- ¹⁴ The earnings of any child under 18, or 19 if the child is working toward the attainment of a high school diploma or its equivalent, are exempt.
- ¹⁵ When the child's earnings cannot be separated from those of other household members, the total earnings are prorated equally among the working members and the child's share is excluded.
- ¹⁶ Earned income is not counted if the child is 19 or younger, attending elementary or secondary school, and living with the applicant.
- ¹⁷ Earnings of a child under age 15 or a child under age 18 who is attending public school are not counted.
- ¹⁸ An adult age 18 or older who is a full-time high school or post-secondary student may be considered a dependent if 50 percent or more of the adult student's support is provided by the parents, stepparents, guardians and their spouses, or eligible relative caregivers and their spouses residing in the same family. To include the adult student as a dependent in the family, the family must verify that it provides 50 percent or more of the student's support.
- ¹⁹ The income of a full-time or part-time student under age 19 is not counted if he or she has not yet earned a high school diploma or GED.
- ²⁰ A child younger than 21 years old in the home attending school and/or disabled is considered a dependent and should be counted as a household member.
- ²¹ Adult siblings, age 18 and over, have the option of being counted as household members.
- ²² The earned income of a dependent child who is attending elementary or high school, regardless of age, is excluded.
- ²³ Earnings are not counted if the child is age 18 or under and in school. Summer earnings of a child age 18 or under are not counted if the caseworker verifies the child will return to school in the fall.
- ²⁴ If a sibling is attending high school, earnings are not counted. If earnings cannot be separated from those of other household members, total earnings are prorated equally among working members of the household and the sibling's portion is disregarded.
- ²⁵ Earned income of a child through the age of 19 is not counted if the child is a full-time student in high school or its equivalent.
- ²⁶ The district may elect to include 18, 19, or 20-year-old individuals in the same family unit. All individuals may be included or just those whose inclusion would benefit the family.
- ²⁷ A sibling is counted if he or she is still in high school and scheduled to graduate before his or her 19th birthday.
- ²⁸ A child is considered under 19 through the month of the child's 19th birthday.
- ²⁹ Earnings of a minor child are not counted as long as the child is a full-time student.
- ³⁰ Earnings of a child, age 17 or under, are not counted if the child is attending school full time or attending classes to obtain a GED.
- ³¹ A dependent child under the age of 18, or under the age of 19 if the child has a documented disability, is included in the unit.
- ³² Earned income of children under age 18 is not counted unless the children are emancipated or teen parents with a benefit case in their own name.
- ³³ Part-time income is not counted if the child or sibling is 18 or younger and in school.
- ³⁴ Siblings are counted in the unit as long as a caretaker in the household is legally responsible for them, regardless of age.

³⁵ Siblings up to 21 years of age may be included if they are participating in a special education program.

³⁶ Earned income is not counted for dependent minors, defined as children under age 18, or dependent 18-year-olds.

³⁷ Children under age 18 are included in the unit. If a child age 18 or over is a tax dependent of the applicant, he or she is included in the unit.

³⁸ Earnings of minor children who are students at least half-time are excluded, even during semester and vacation breaks.

Table 8. Defining the Family Unit and Income: Treatment of Teen Parents, 2012

State	Maximum Age a Parent is Considered a Teen	Treatment of a Teen Parent's Earnings	Definition of the Family Unit when the Teen Parent Has Siblings Receiving CCDF Funding	Definition of the Family Unit when the Teen Parent Has No Siblings Receiving CCDF Funding
Alabama	18 ²	Fully counted	Teen, child, parent, and siblings form one unit	Parents/caretakers and minor siblings of the teen parent included
Alaska	17	Fully counted	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included
Arizona	19 ³	Fully counted	Varies ⁴	Varies ⁵
Arkansas	17 ⁶	Varies/partially counted ⁷	Teen and child form one unit, and parent and siblings form another ⁸	Only teen parent and child(ren) included ⁸
California	18 ⁹	Fully counted	Teen and child form one unit, and parent and siblings form another ¹⁰	Only teen parent and child(ren) included ¹⁰
Colorado	20	Fully counted	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included
Connecticut	17	Fully counted	Teen, child, parent, and siblings form one unit ¹¹	Parents/caretakers and minor siblings of the teen parent included ¹¹
Delaware	17	Not counted	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included
DC	25 ¹²	Not counted	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included
Florida	17 ¹³	Fully counted	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included
Georgia	17	Not counted	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included
Hawaii	17 ¹⁴	Varies/partially counted ¹⁵	Teen, child, parent, and siblings form one unit	Parents/caretakers and minor siblings of the teen parent included
Idaho	17	Fully counted	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included
Illinois	19	Fully counted	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included

Table 8. Defining the Family Unit and Income: Treatment of Teen Parents, 2012

State	Maximum Age a Parent is Considered a Teen	Treatment of a Teen Parent's Earnings	Definition of the Family Unit when the Teen Parent Has Siblings Receiving CCDF Funding	Definition of the Family Unit when the Teen Parent Has No Siblings Receiving CCDF Funding
Indiana	17	Fully counted	Teen and child form one unit, and parent and siblings form another	Varies ¹⁶
Iowa	17	Fully counted	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included
Kansas	17	Fully counted	Varies ¹⁷	Varies ¹⁷
Kentucky	19 ¹⁸	Fully counted	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included
Louisiana	17	Fully counted	Teen, child, parent, and siblings form one unit	Parents/caretakers and minor siblings of the teen parent included
Maine	19 ¹⁹	Fully counted	Varies ²⁰	Only teen parent and child(ren) included
Maryland	17	Varies/partially counted ²¹	Varies ²²	Parents/caretakers and minor siblings of the teen parent included
Massachusetts	19	Fully counted	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included
Michigan	17 ²³	Varies/partially counted ²⁴	Teen, child, parent, and siblings form one unit	Parents/caretakers and minor siblings of the teen parent
Minnesota	17	Varies/partially counted ²⁵	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included
Mississippi	17	Not counted	Varies ²⁶	Varies ²⁶
Missouri	17	Fully counted	Varies ²⁷	Varies ²⁷
Montana	19	Fully counted	Teen, child, parent, and siblings form one unit	Only teen parent and child(ren) included
Nebraska	18	Varies/partially counted ²⁸	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included
Nevada	17	Varies/partially counted ²⁹	Teen, child, parent, and siblings form one unit	Parents/caretakers and minor siblings of the teen parent included
New Hampshire	19 ³⁰	Varies/partially counted ³¹	Teen, child, parent, and siblings form one unit	Parents/caretakers and minor siblings of the teen parent included
New Jersey	18	Fully counted	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included

Table 8. Defining the Family Unit and Income: Treatment of Teen Parents, 2012

State	Maximum Age a Parent is Considered a Teen	Treatment of a Teen Parent's Earnings	Definition of the Family Unit when the Teen Parent Has Siblings Receiving CCDF Funding	Definition of the Family Unit when the Teen Parent Has No Siblings Receiving CCDF Funding
New Mexico	19	Fully counted	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included
New York	20	Fully counted	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included
North Carolina	17	Fully counted	Varies ³²	Only teen parent and child(ren) included
North Dakota	20 ³³	Varies/partially counted ³³	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included
Ohio	17	Fully counted	Teen, child, parent, and siblings form one unit ³⁴	Parents/caretakers of the teen parent included ³⁴
Oklahoma	17	Fully counted	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included
Oregon	17	Varies/partially counted ³⁵	Varies ³⁵	Varies ³⁵
Pennsylvania	17	Not counted ³⁶	Varies ²⁷	Only teen parent and child(ren) included
Rhode Island	19	Fully counted	Varies ³⁷	Varies ³⁷
South Carolina	17 ³⁸	Fully counted	Varies ³⁹	Varies ³⁹
South Dakota	19	Fully counted	Teen and child form one unit, and parent and siblings form another ⁴⁰	Only teen parent and child(ren) included ⁴⁰
Tennessee	19	Fully counted	Varies ⁴¹	Varies ⁴²
Texas	19 ⁴³	Fully counted	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included
Utah	17	Fully counted	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included
Vermont	17	Fully counted	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included
Virginia	17	Not counted	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included
Washington	21 ⁴⁴	Fully counted	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included

Table 8. Defining the Family Unit and Income: Treatment of Teen Parents, 2012

State	Maximum Age a Parent is Considered a Teen	Treatment of a Teen Parent's Earnings	Definition of the Family Unit when the Teen Parent Has Siblings Receiving CCDF Funding	Definition of the Family Unit when the Teen Parent Has No Siblings Receiving CCDF Funding
West Virginia	17	Fully counted	Teen and child form one unit, and parent and siblings form another ⁴⁵	Only teen parent and child(ren) included ⁴⁵
Wisconsin	19 ⁴⁶	Not counted ⁴⁷	Teen, child, parent, and siblings form one unit	Parents/caretakers and minor siblings of the teen parent included
Wyoming	17	Fully counted	Varies ⁴⁸	Varies ⁴⁸
American Samoa	17	Varies/partially counted ⁴⁹	Varies ⁵⁰	Varies ⁵⁰
Guam	18 ⁵¹	Varies/partially counted ⁵²	Teen, child, parent, and siblings form one unit	Only teen parent and child(ren) included
No Mariana Islands	18 ⁵³	Varies/partially counted ⁵⁴	Teen, child, parent, and siblings form one unit	Parents/caretakers and minor siblings of the teen parent included
Puerto Rico	20	Not counted	--- ¹	--- ¹
Virgin Islands	19	Fully counted	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included

Source: CCDF Policies Database October 1, 2012 Data

¹ Information not found in state's manual.

² The maximum age is 18 if the parent remains in high school or its equivalent.

³ A minor parent is a parent under age 18. A teen parent is a parent age 13 through 19.

⁴ Policies for minor and teen parents vary. When the siblings of a minor parent receive subsidized child care, the minor, parent, adult parent, and siblings form one unit.

⁵ If the parent of the minor intends to claim either the minor or the minor's child as a dependent, they are both included in the unit. If the parent does not intend to count either the minor or the minor's child as a dependent, the minor and the minor's child are counted as a separate unit.

⁶ An individual under the age of 18 is considered an emancipated minor and allowed to apply for child care assistance if one of the following conditions exists: the individual is legally emancipated by court order; the individual is currently or previously married; or the individual is living outside the home of a custodial adult with no plans to return and no indication that his or her parents or custodians regard themselves as being responsible for his or her care and control. All other applicants must be at least 18 years of age and must have full-time physical custody of the child.

⁷ Parents attending high school full time are excluded from income requirements. If the teen parent is not attending high school full time and is considered an emancipated minor, he or she is treated the same as an adult applicant.

⁸ The policy applies to emancipated minors, who are considered and treated like adult applicants.

⁹ The maximum age is 17 if the teen parent is not enrolled in high school.

¹⁰ Teen parents have the option to specify a combined family unit on the application for child care.

- ¹¹ Any individuals who are counted as part of the family unit for TANF are also counted as part of the family unit for child care assistance.
- ¹² A parent age 25 or younger who lives with a parent or guardian and attends high school or college is considered a young adult and treated the same as a teen parent.
- ¹³ The maximum age applies unless the parent is married or emancipated.
- ¹⁴ Teen parents may be eligible for care if they meet the eligibility criteria and are not living in the same household as their adult parents or caretakers.
- ¹⁵ Income is counted if the teen parent is an emancipated minor.
- ¹⁶ The minor parent and his or her children are considered a separate family unless the minor parent is not the primary caregiver of his or her children, in which case the minor parent and his or her children are considered part of the CCDF unit of their mutual caregiver.
- ¹⁷ When a minor teen parent needs child care to finish high school or obtain a GED, the minor's caretaker is included in the unit. The teen parent's siblings are not included.
- ¹⁸ A teen parent is defined as being age 19 or younger and actively seeking a high school diploma or GED.
- ¹⁹ The teen parent must reside with his or her child and attend a secondary school or GED equivalency program.
- ²⁰ The family unit composition is decided on a case-by-case basis.
- ²¹ A disregard of 5,000 dollars of a family's annual gross income per child is allowed if the minor parent is attending public school full-time or if an adult with physical custody of the child is not the child's parent.
- ²² Teen parents apply as the head of household. When an adult parent has physical custody of children in need of care, another unit is established with the adult listed as head of household. The adult parent is still considered part of the unit in the teen parent's case.
- ²³ The applicant must be unmarried and living with his or her parent(s) to be considered a minor parent. Minor parents who have not completed high school must attend elementary or secondary school full-time or, if aged 16 or 17, participate in a TANF work program. Minor parents must also live in an adult-supervised living arrangement or show good cause for not living in an adult-supervised setting.
- ²⁴ Earnings are not counted if the teen parent is under age 18, attending school, and living with someone who provides care or supervision.
- ²⁵ The income of a full-time or part-time student under age 19 is not counted if he or she has not yet earned a high school diploma or GED.
- ²⁶ Any parent enrolled full-time in high school or in a GED program may make an application in his or her own name, as a family unit separate from his or her parent.
- ²⁷ A minor parent has the option of being considered a separate family unit.
- ²⁸ Earnings are not counted if the child is age 18 or under and in school. Summer earnings of a child age 18 or under are not counted if the caseworker verifies the child will return to school in the fall.
- ²⁹ If a teen is attending high school, earnings are not counted. If earnings cannot be separated from those of other household members, total earnings are prorated equally among working members of the household and the teen's portion is disregarded.
- ³⁰ Full-time students with a biological, foster, step, guardianship, or adoptive relationship to a parent in the household may be considered teen parents through age 19.
- ³¹ Income is counted unless the individual is under age 20 and attending high school or its equivalent full time.
- ³² The teen parent is counted in the adult parent's unit, but the teen parent's child is not.
- ³³ The parent must be enrolled in the Crossroads program to be eligible for income-excluded child care through age 20. Other teen parents do not receive preferential treatment.

- ³⁴ A minor parent who participates in the learning, earning, and parenting (LEAP) program may apply for child care benefits on his or her own. The family is then defined as the minor parent and the children of the minor parent.
- ³⁵ Minor parents who are employed and request a separate employment-related day care case are considered the caretaker of their own unit and their income is counted. If they do not request a separate case, they may be included in the adult parent's unit, and the income of the minor parent is not counted.
- ³⁶ The teen parent cannot be emancipated.
- ³⁷ If the teen parent is under the age of 16 and not an emancipated minor, the parent or legal guardian of the teen parent is included in the unit. A teen parent under the age of 16 may obtain child care assistance on his or her own if the inclusion of the parent or legal guardian would present an obstacle to receiving child care.
- ³⁸ In order to apply for child care, the parent must be 18 or within six months of turning 18. If the parent is not 18, he or she must be legally emancipated in order to apply for child care. If the minor is not legally emancipated, the minor's parent must apply for child care and meet all eligibility criteria. Teen parents under 18 receiving TANF do not have to be emancipated in order to receive child care.
- ³⁹ If the minor is legally emancipated, he or she is counted as a separate unit. If the minor is not emancipated, the minor and parents are counted as one unit.
- ⁴⁰ If a minor parent has a child, he or she is considered the applicant and must meet the minimum work or school requirements.
- ⁴¹ The parents of the minor parent are included in the unit but not the siblings.
- ⁴² A minor parent under age 18 may be considered a separate household if he or she is legally emancipated.
- ⁴³ A person can be considered a teen parent through age 19 if he or she is attending high school or its equivalent.
- ⁴⁴ Teen parents in high school or a GED program do not have to meet work requirements through age 21.
- ⁴⁵ The minor and child form one unit as long as the minor parent has legal custody of the child.
- ⁴⁶ The parent must be enrolled in a high school or GED program to be considered a teen parent.
- ⁴⁷ All earned income of minors is excluded, including earned income of minors in supervised independent living situations.
- ⁴⁸ If all three generations are part of the same TANF payment unit, they are considered one unit; otherwise the minor and child form one unit, and the minor's parents and siblings form another unit.
- ⁴⁹ If the teen parent is in school, his or her income is not counted.
- ⁵⁰ Grandparents may include grandchildren in the unit if they have legally adopted the children or if they provide more than 50 percent of the care for the children.
- ⁵¹ A teen parent is an unmarried parent who is under the age of 19, has not received a high school diploma or GED, lives in the home of his or her parent or guardian, and attends a high school program.
- ⁵² A teen parent's income is excluded if the teen parent and offspring reside with the teen's parents, an adult relative, or legal guardian, and the teen parent is attending school.
- ⁵³ The applicant must be unmarried, attending high school or a GED program, and be living with a parent, adult relative, or legal guardian.
- ⁵⁴ Earnings of minor children who are students at least half-time are excluded, even during semester and vacation breaks.

Table 9. Defining the Family Unit and Income: Treatment of Step-Parents and Temporarily Absent Parents, 2012

State	If a Step-Parent is Included when Defining the Family Size	Treatment of a Step-Parent's Earnings (When Included in Family Size)	How Blended Families are Treated when Defining the Family Size ²	Treatment of a Temporarily Absent Parent's Earnings (When Included in Family Size)
Alabama	Always included	Fully counted	The parents and children form one unit	Fully counted
Alaska	Always included	Fully counted	The parents and children form one unit	Fully counted
Arizona	Always included	Fully counted	The parents and children form one unit	Fully counted
Arkansas	Always included	Fully counted	The parents and children form one unit	Fully counted
California	Always included	Fully counted	The parents and children form one unit	Fully counted
Colorado	Always included	Fully counted	The parents and children form one unit	Varies/partially counted ³
Connecticut	Always included	Fully counted	The parents and children form one unit	Fully counted
Delaware	Always included	Fully counted	The parents and children form one unit	Fully counted
DC	Never included	NA	Each parent forms one unit with their children	Not counted
Florida	Always included	Fully counted	The parents and children form one unit	Not counted
Georgia	Always included	Fully counted	The parents and children form one unit	Varies/partially counted ⁴
Hawaii	Always included	Fully counted	The parents and children form one unit	Varies/partially counted ⁵
Idaho	Always included	Fully counted	Each parent forms one unit with their children	Fully counted
Illinois	Always included	Fully counted	The parents and children form one unit	Fully counted
Indiana	Always included	Fully counted	The parents and children form one unit	Fully counted
Iowa	Always included	Fully counted	The parents and children form one unit	Fully counted
Kansas	Always included	Fully counted	The parents and children form one unit	Fully counted
Kentucky	Always included	Fully counted	The parents and children form one unit	Fully counted ⁶
Louisiana	Always included	Fully counted	The parents and children form one unit	Fully counted
Maine	Always included	Fully counted	The parents and children form one unit	Fully counted
Maryland	Always included	Fully counted	The parents and children form one unit	Fully counted

Table 9. Defining the Family Unit and Income: Treatment of Step-Parents and Temporarily Absent Parents, 2012

State	If a Step-Parent is Included when Defining the Family Size	Treatment of a Step-Parent's Earnings (When Included in Family Size)	How Blended Families are Treated when Defining the Family Size ²	Treatment of a Temporarily Absent Parent's Earnings (When Included in Family Size)
Massachusetts	Always included	Fully counted	The parents and children form one unit	Not counted
Michigan	Always included	Fully counted	The parents and children form one unit	Fully counted
Minnesota	Always included	Fully counted	The parents and children form one unit	Fully counted
Mississippi	Always included	Fully counted	The parents and children form one unit	Fully counted
Missouri	Always included	Fully counted	The parents and children form one unit	Fully counted ⁷
Montana	Always included	Fully counted	The parents and children form one unit	Fully counted
Nebraska	Always included	Fully counted	The parents and children form one unit	Fully counted
Nevada	Always included	Fully counted	The parents and children form one unit	Fully counted
New Hampshire	Always included	Fully counted	The parents and children form one unit	Fully counted
New Jersey	Varies ⁸	Fully counted	The parents and children form one unit	Fully counted
New Mexico	Always included	Fully counted	The parents and children form one unit	Fully counted
New York	Always included	Fully counted	The parents and children form one unit	Varies/partially counted ⁹
North Carolina	Never included	NA	Each parent forms one unit with their children	Fully counted
North Dakota	Always included	Fully counted	The parents and children form one unit	Fully counted
Ohio	Always included	Fully counted	The parents and children form one unit	Fully counted
Oklahoma	Always included	Fully counted	The parents and children form one unit	Fully counted
Oregon	Always included	Fully counted	The parents and children form one unit	Fully counted
Pennsylvania	Always included	Varies/partially counted ¹⁰	The parents and children form one unit	Not counted
Rhode Island	Always included	Fully counted	The parents and children form one unit	Not counted
South Carolina	Always included	Fully counted	The parents and children form one unit	Fully counted
South Dakota	Always included	Fully counted	The parents and children form one unit	Varies/partially counted ¹¹

Table 9. Defining the Family Unit and Income: Treatment of Step-Parents and Temporarily Absent Parents, 2012

State	If a Step-Parent is Included when Defining the Family Size	Treatment of a Step-Parent's Earnings (When Included in Family Size)	How Blended Families are Treated when Defining the Family Size ²	Treatment of a Temporarily Absent Parent's Earnings (When Included in Family Size)
Tennessee	Always included	Fully counted	The parents and children form one unit	Fully counted
Texas	Always included	Fully counted	The parents and children form one unit	Fully counted
Utah	Always included	Fully counted	The parents and children form one unit	Fully counted
Vermont	Always included	Fully counted	The parents and children form one unit	Fully counted
Virginia	Always included	Fully counted	The parents and children form one unit ¹²	Fully counted
Washington	Always included	Fully counted	The parents and children form one unit	Fully counted
West Virginia	Always included	Fully counted	The parents and children form one unit	Fully counted
Wisconsin	Always included	Fully counted	The parents and children form one unit	Fully counted
Wyoming	Always included	Fully counted	The parents and children form one unit	Fully counted
American Samoa	Always included	Fully counted	The parents and children form one unit	--- ¹
Guam	Always included	Fully counted	The parents and children form one unit	Fully counted
No Mariana Islands	Always included	Fully counted	The parents and children form one unit	Fully counted
Puerto Rico	Always included	Fully counted	--- ¹	Varies/partially counted ¹³
Virgin Islands	Always included	Fully counted	The parents and children form one unit	Fully counted

Source: CCDF Policies Database October 1, 2012 Data

¹ Information not found in state's manual.

² For the purposes of the CCDF Policies Database, blended families are defined as families consisting of married parents with no children in common.

³ If the parent is involuntarily removed from the home, his or her income is not counted.

⁴ Income is counted for parents absent from the home due to military or work assignments.

⁵ Income is counted if the parent continues to maintain responsibility for the care, education, and financial support of the child.

⁶ Earnings of a temporarily absent parent are counted. Earnings of a parent who is absent from the household for 30 days or more due to incarceration or hospitalization are not counted and the parent is not included in the unit.

⁷ A family member who is in the military and stationed away from the residence is not included in the family unit for the purpose of determining household size, but any income sent to the family unit is included.

⁸ If the step-parent is legally responsible for the child, he or she is included.

⁹ Income is counted if the individual is contributing or required to contribute to the needs of the household.

¹⁰ There is a step-parent deduction if the child requesting care is not his or her biological child. The deduction varies by family size and county. If care is needed for either a child in common or his or her own children, the step-parent's income is fully counted.

¹¹ If the parent is absent because of work or school, his or her income is counted. If the parent is incarcerated for at least 30 consecutive days, his or her income is not counted.

¹² Unmarried couples are also treated as one unit if the couples are cohabiting as man and wife.

¹³ Income earned by parents who are migrant farm workers is taken into consideration during the time period in which they are employed.

Table 10. Defining the Family Unit and Income: Treatment of Non-Parent Caretakers, 2012 ¹

State	<u>Non-Parent, Relative Caretakers</u>			<u>Non-Parent, Non-Relative Caretakers</u>		
	If a Relative Caretaker Is Eligible to Apply for Subsidies	If a Relative Caretaker is Included when Defining the Family Size (When Eligible to Apply for Subsidies)	Treatment of a Relative Caretaker's Earnings (When Included in Family Size)	If a Non-Relative Caretaker Is Eligible to Apply for Subsidies	If a Non-Relative Caretaker is Included when Defining the Family Size (When Eligible to Apply for Subsidies)	Treatment of a Non-Relative Caretaker's Earnings (When Included in Family Size)
Alabama	Yes, all relative caretakers	Varies ²	Fully counted	Yes, only legal guardians ³	Varies ³	Fully counted
Alaska	Yes, all relative caretakers ⁴	Always included	Fully counted	Yes, all non-relative caretakers ⁴	Always included	Fully counted
Arizona	Yes, all relative caretakers	Varies ⁵	Fully counted ⁵	Yes, only legal guardians	Varies ⁶	Fully counted ⁶
Arkansas	Yes, all relative caretakers ⁷	Always included	Fully counted	Yes, only legal guardians ⁷	Always included	Fully counted
California	Yes, all relative caretakers	Never included	NA	Yes, all non-relative caretakers	Never included	NA
Colorado	Yes, all relative caretakers	Always included	Fully counted	Yes, all non-relative caretakers	Always included	Fully counted
Connecticut	Other ⁸	Always included ⁸	Fully counted	Yes, all non-relative caretakers	Always included	Fully counted
Delaware	Yes, all relative caretakers	Never included	NA	Yes, only legal guardians	Never included	NA
DC	Yes, only legal guardians	Always included	Not counted	Yes, only legal guardians	Always included	Not counted
Florida	Yes, all relative caretakers	Varies ⁹	Fully counted ⁹	Yes, all non-relative caretakers	Varies ⁹	Fully counted ⁹
Georgia	Yes, all relative caretakers	Always included	Fully counted	Yes, all non-relative caretakers	Always included	Varies/partially counted ¹⁰
Hawaii	Yes, all relative caretakers	Always included	Fully counted	Yes, all non-relative caretakers	Varies ¹¹	Fully counted
Idaho	Yes, all relative caretakers	Always included	Fully counted	Yes, all non-relative caretakers	Always included	Varies/partially counted ¹⁰

Table 10. Defining the Family Unit and Income: Treatment of Non-Parent Caretakers, 2012 ¹

State	<u>Non-Parent, Relative Caretakers</u>			<u>Non-Parent, Non-Relative Caretakers</u>		
	If a Relative Caretaker Is Eligible to Apply for Subsidies	If a Relative Caretaker is Included when Defining the Family Size (When Eligible to Apply for Subsidies)	Treatment of a Relative Caretaker's Earnings (When Included in Family Size)	If a Non-Relative Caretaker Is Eligible to Apply for Subsidies	If a Non-Relative Caretaker is Included when Defining the Family Size (When Eligible to Apply for Subsidies)	Treatment of a Non-Relative Caretaker's Earnings (When Included in Family Size)
Illinois	Yes, all relative caretakers ¹²	Always included	Varies/partially counted ¹³	Yes, only legal guardians	Always included	Fully counted
Indiana	Yes, all relative caretakers	Always included	Fully counted	Yes, all non-relative caretakers	Always included ¹⁴	Varies/partially counted ¹⁴
Iowa	Other ¹⁵	Never included	NA	Other ¹⁵	Never included	NA
Kansas	Yes, all relative caretakers	Always included	Fully counted	Yes, all non-relative caretakers	Always included	Fully counted
Kentucky	Yes, all relative caretakers	Always included	Fully counted	Yes, all non-relative caretakers ¹⁶	Always included	Fully counted
Louisiana	Yes, all relative caretakers	Always included	Fully counted	Yes, all non-relative caretakers	Always included	Fully counted
Maine	Yes, all relative caretakers	Never included	NA	Yes, all non-relative caretakers	Never included	NA
Maryland	Yes, all relative caretakers	Always included	Fully counted	Yes, all non-relative caretakers	Always included	Fully counted
Massachusetts	Yes, only legal guardians ¹⁷	Always included	Not counted	Yes, only legal guardians ¹⁷	Always included	Not counted
Michigan	Yes, all relative caretakers	Varies ¹⁸	Fully counted	Yes, all non-relative caretakers	Varies ¹⁸	Fully counted
Minnesota	Other ¹⁹	Always included	Fully counted	Yes, only legal guardians	Always included	Fully counted
Mississippi	Yes, all relative caretakers	Always included	Fully counted	Yes, all non-relative caretakers	Always included	Fully counted
Missouri	Yes, all relative caretakers	Always included	Fully counted	Yes, only legal guardians	Always included	Fully counted

Table 10. Defining the Family Unit and Income: Treatment of Non-Parent Caretakers, 2012 ¹

State	<u>Non-Parent, Relative Caretakers</u>			<u>Non-Parent, Non-Relative Caretakers</u>		
	If a Relative Caretaker Is Eligible to Apply for Subsidies	If a Relative Caretaker is Included when Defining the Family Size (When Eligible to Apply for Subsidies)	Treatment of a Relative Caretaker's Earnings (When Included in Family Size)	If a Non-Relative Caretaker Is Eligible to Apply for Subsidies	If a Non-Relative Caretaker is Included when Defining the Family Size (When Eligible to Apply for Subsidies)	Treatment of a Non-Relative Caretaker's Earnings (When Included in Family Size)
Montana	Yes, all relative caretakers	Always included	Fully counted	Yes, all non-relative caretakers	Always included	Fully counted
Nebraska	Yes, all relative caretakers	Always included	Fully counted	Yes, only legal guardians	Always included	Fully counted
Nevada	Other ²⁰	Always included	Fully counted	Other ²⁰	Always included	Fully counted
New Hampshire	Yes, all relative caretakers	Always included	Varies/partially counted ²¹	Yes, only legal guardians	Always included	Varies/partially counted ²¹
New Jersey	Yes, only legal guardians	Always included	Fully counted	Yes, only legal guardians	Always included	Fully counted
New Mexico	Other ²²	Always included	Fully counted	Yes, only legal guardians	Always included	Fully counted
New York	Yes, all relative caretakers ²³	Varies ²⁴	Fully counted	Yes, all non-relative caretakers	Varies ²⁴	Fully counted
North Carolina	Yes, all relative caretakers	Never included	NA	Yes, only legal guardians	Never included	NA
North Dakota	Yes, all relative caretakers	Always included	Fully counted	Yes, all non-relative caretakers	Always included	Fully counted
Ohio	Yes, all relative caretakers	Always included	Fully counted	Yes, all non-relative caretakers	Always included	Fully counted
Oklahoma	Yes, all relative caretakers	Varies ²⁵	Fully counted	Yes, all non-relative caretakers	Varies ²⁵	Fully counted
Oregon	Yes, all relative caretakers	Always included	Fully counted	Yes, all non-relative caretakers	Always included	Fully counted
Pennsylvania	Yes, all relative caretakers	Always included	Fully counted	Yes, all non-relative caretakers	Always included	Fully counted

Table 10. Defining the Family Unit and Income: Treatment of Non-Parent Caretakers, 2012 ¹

State	<u>Non-Parent, Relative Caretakers</u>			<u>Non-Parent, Non-Relative Caretakers</u>		
	If a Relative Caretaker Is Eligible to Apply for Subsidies	If a Relative Caretaker is Included when Defining the Family Size (When Eligible to Apply for Subsidies)	Treatment of a Relative Caretaker's Earnings (When Included in Family Size)	If a Non-Relative Caretaker Is Eligible to Apply for Subsidies	If a Non-Relative Caretaker is Included when Defining the Family Size (When Eligible to Apply for Subsidies)	Treatment of a Non-Relative Caretaker's Earnings (When Included in Family Size)
Rhode Island	Yes, all relative caretakers	Always included	Fully counted	Yes, only legal guardians	Always included	Fully counted
South Carolina	Yes, all relative caretakers	Always included	Fully counted	Yes, all non-relative caretakers	Always included	Fully counted
South Dakota	Other ²⁶	Always included	Not counted	Other ²⁶	Always included	Fully counted
Tennessee	Yes, all relative caretakers	Always included	Fully counted	Yes, all non-relative caretakers	Always included	Fully counted
Texas	Yes, all relative caretakers	Always included	Fully counted	Yes, all non-relative caretakers	Always included	Fully counted
Utah	Yes, all relative caretakers	Always included	Fully counted	Yes, only legal guardians	Always included	Fully counted
Vermont	Yes, all relative caretakers	Always included	Varies/partially counted ²⁷	Yes, all non-relative caretakers	Always included	Varies/partially counted ²⁷
Virginia	Yes, all relative caretakers	Always included	Fully counted	Yes, all non-relative caretakers	Always included	Fully counted
Washington	Yes, all relative caretakers	Never included	NA	Other ²⁸	Never included	NA
West Virginia	Yes, all relative caretakers	Always included	Fully counted	Yes, all non-relative caretakers	Always included	Fully counted
Wisconsin	Yes, all relative caretakers	Always included	Varies/partially counted ²⁹	Yes, all non-relative caretakers	Always included	Varies/partially counted ²⁹
Wyoming	Yes, all relative caretakers	Always included	Fully counted	Yes, only legal guardians ³⁰	Always included	Fully counted
American Samoa	Other ³¹	Always included	Fully counted	Other ³¹	Always included	Fully counted

Table 10. Defining the Family Unit and Income: Treatment of Non-Parent Caretakers, 2012 ¹

State	<u>Non-Parent, Relative Caretakers</u>			<u>Non-Parent, Non-Relative Caretakers</u>		
	If a Relative Caretaker Is Eligible to Apply for Subsidies	If a Relative Caretaker is Included when Defining the Family Size (When Eligible to Apply for Subsidies)	Treatment of a Relative Caretaker's Earnings (When Included in Family Size)	If a Non-Relative Caretaker Is Eligible to Apply for Subsidies	If a Non-Relative Caretaker is Included when Defining the Family Size (When Eligible to Apply for Subsidies)	Treatment of a Non-Relative Caretaker's Earnings (When Included in Family Size)
Guam	Yes, all relative caretakers	Always included	Varies/partially counted ³²	Yes, all non-relative caretakers	Always included	Varies/partially counted ³²
No Mariana Islands	Yes, all relative caretakers	Always included	Fully counted	Yes, all non-relative caretakers	Always included	Fully counted
Puerto Rico	Yes, all relative caretakers	Always included	Fully counted	Yes, all non-relative caretakers	Always included	Fully counted
Virgin Islands	Yes, only legal guardians	Always included	Fully counted	Yes, only legal guardians	Always included	Fully counted

Source: CCDF Policies Database October 1, 2012 Data

¹ For the purposes of the CCDF Policies Database, a caretaker situation exists when the child lives with the caretaker, the caretaker has assumed responsibility for the care of the child, and the child's parents do not live in the home with the child.

² Caretakers are included in the unit unless they are foster parents referred by the foster care program, in which case they are allowed to apply for subsidies, but they are not counted in the family size.

³ A non-parent, non-relative caretaker is included in the unit if he or she is the legal guardian. Caretakers are included in the unit unless they are foster parents referred by the foster care program, in which case they are allowed to apply for subsidies, but they are not counted in the family size.

⁴ Any adult who can demonstrate that they effectively have physical custody and financial responsibility for a child needing care can apply. It does not have to be legally established or a blood relationship.

⁵ When care is requested for the related child only, the caretaker is not included in the unit. When care is requested for the caretaker's own children in addition to the related child, the unit consists of the caretaker, the other responsible person if applicable, their children, and the related child. If a caretaker requests child care for his or her own children as well as a child for whom he or she cares, the income of the caretaker and spouse is counted.

⁶ Legal guardians are not included in the family size unless they apply for care for their own children in addition to the child in guardianship. If the legal guardian applies for child care assistance for his or her own children in addition to the children under guardianship, his or her income is included.

⁷ The caretaker must be related by blood or law, be at least 18 years of age or be emancipated, and have full-time custody of the child.

- ⁸ A non-parent, relative caretaker is allowed to apply for child care subsidies and included in the unit when he or she is under the cash assistance program.
- ⁹ Foster parents and caretakers who fall under the relative caretaker category of care are not included in the unit and their income is not counted. If caretakers have legal responsibility for the child, they are included in the unit and their income is counted.
- ¹⁰ The income of foster parents is not included.
- ¹¹ Foster parents are not included.
- ¹² All relative caretakers within the fifth degree of kinship are allowed to apply for child care subsidies.
- ¹³ The income of a caretaker relative who is not a parent or step-parent, is employed, and is the representative payee of a child who is receiving child-only or general assistance TANF is not counted for eligibility and copayment purposes. However, if the caretaker relative is in an education and training program, his or her income is counted for eligibility and copayment purposes.
- ¹⁴ The income of licensed foster parents is not included.
- ¹⁵ Licensed foster parents cannot apply for subsidies for their foster children. If a licensed foster parent needs child care for the purpose of employment this is handled by the foster care worker.
- ¹⁶ A non-relative caretaker must show verification of pursuit of legal custody within one year of application.
- ¹⁷ In order for a non-parent relative caretaker to be eligible to apply for a child care subsidy, the biological or adoptive parents must not reside in the house and the non-parent caretaker must be a legal guardian, foster parent, or designated caretaker.
- ¹⁸ A non-parent caretaker is included in the unit if he or she is the applicant for child care, with the exception of legal guardians, who are not included in the unit if they are not requesting care for other children.
- ¹⁹ Relative caretakers who are the caregiver for a child receiving a TANF grant are eligible for subsidies. Relative caretakers who are the caregiver for a child not receiving a TANF grant are not eligible for subsidies unless they are the child's legal guardian.
- ²⁰ Any adult with court-ordered custody of the child is allowed to apply for subsidies and is included in the unit.
- ²¹ If a caretaker requests child care for his or her own children as well as a child for whom he or she cares, the income of the caretaker and spouse is counted.
- ²² Legal guardians and grandparents, in addition to biological or step-parents, are allowed to apply for child care assistance. Grandparents have to be either legal guardians or determined to be providing for grandchildren's physical and emotional needs.
- ²³ Relatives within the third degree of consanguinity of the child may apply for child care subsidies.
- ²⁴ Non-parent caretakers are allowed to apply for subsidies but are not included in the family unit, unless the non-parent caregiver is receiving either TANF cash assistance or New York State-only cash assistance.
- ²⁵ The caretaker is included if he or she is court-ordered to be legally and financially responsible for the child.

²⁶ Any individual 18 years of age or older who has a signed statement from the child's parent or guardian giving the individual authority to exercise parental control of the child is allowed to apply for child care subsidies. The caretaker must open and maintain an active child support enforcement case within six months of initial eligibility.

²⁷ If the caretaker is legally responsible for the child's welfare, such as a biological, step, adoptive, or foster parent or legal guardian, then the caretaker's income is considered. However, if the child is living with an adult caretaker other than the legally responsible adult, then the legally responsible adult's income is considered, not the adult caretaker who lives in the home.

²⁸ The non-parent, non-relative caretakers must have a written, signed agreement between the parents and the caretakers assuming custodial responsibility or must receive a TANF grant on behalf of the child in their care in order to apply for child care subsidies.

²⁹ Income is excluded for kinship care relatives for court-ordered cases or subsidized guardians in Milwaukee county. Income is counted for all other individuals counted in the family size.

³⁰ A non-relative caretaker must have a court order giving legal responsibility or guardianship.

³¹ A non-parent caretaker is allowed to apply for subsidies if he or she is the child's legal guardian or acting in loco parentis. A person is considered to be acting in loco parentis when he or she has assumed guardianship and control of a child for a period of at least six months. This determination must be confirmed by the child's closest living relative.

³² The income of a non-parent caretaker is not counted if the child is receiving child protective services.

Table 11. Defining the Family Unit and Income: Treatment of Non-Parent, Non-Caretaker Adults, 2012 ²

State	<u>Non-Parent, Non-Caretaker Adult Relatives</u>		<u>Non-Parent, Non-Caretaker Adult Non-Relatives</u>	
	If a Relative Adult Who is Not a Parent or Caretaker is Included when Defining the Family Size	Treatment of an Adult Relative's Earnings if the Adult is Not a Parent or Caretaker (When Included in Family Size)	If a Non-Relative Adult Who is Not a Caretaker is Included when Defining the Family Size	Treatment of an Adult Non-Relative's Earnings if the Adult is Not a Caretaker (When Included in Family Size)
Alabama	Never included	NA	Never included	NA
Alaska	Never included	NA	Never included	NA
Arizona	Varies ³	Fully counted	Never included	NA
Arkansas	Always included	Fully counted	Never included	NA
California	Never included	NA	Never included	NA
Colorado	Never included	NA	Never included	NA
Connecticut	--- ¹	--- ¹	--- ¹	--- ¹
Delaware	Never included	NA	Never included	NA
DC	Never included	NA	Never included	NA
Florida	Varies ⁴	Fully counted	Never included	NA
Georgia	Never included	NA	Never included	NA
Hawaii	Never included	NA	Never included	NA
Idaho	Never included	NA	Never included	NA
Illinois	Varies ⁵	Fully counted	Never included	NA
Indiana	Never included	NA	Never included	NA
Iowa	Never included	NA	Never included	NA
Kansas	Never included	NA	Never included	NA
Kentucky	Never included	NA	Never included	NA
Louisiana	Never included	NA	Never included	NA
Maine	Never included	NA	Never included	NA
Maryland	Never included	NA	Never included	NA
Massachusetts	Varies ⁶	Fully counted	Never included	NA
Michigan	Never included	NA	Never included	NA
Minnesota	Never included	NA	Never included	NA
Mississippi	Never included	NA	Never included	NA
Missouri	Never included	NA	Never included	NA
Montana	Varies ⁷	Fully counted	Never included	NA
Nebraska	Never included	NA	Never included	NA
Nevada	Never included	NA	Never included	NA
New Hampshire	Never included	NA	Never included	NA
New Jersey	Varies ⁸	Fully counted	Varies ⁸	Fully counted
New Mexico	Never included	NA	Never included	NA
New York	Never included	NA	Never included	NA
North Carolina	Never included	NA	Never included	NA
North Dakota	Never included	NA	Never included	NA
Ohio	Never included	NA	Never included	NA
Oklahoma	Never included	NA	Never included	NA
Oregon	Never included	NA	Never included	NA
Pennsylvania	Never included	NA	Never included	NA

Table 11. Defining the Family Unit and Income: Treatment of Non-Parent, Non-Caretaker Adults, 2012 ²

State	<u>Non-Parent, Non-Caretaker Adult Relatives</u>		<u>Non-Parent, Non-Caretaker Adult Non-Relatives</u>	
	If a Relative Adult Who is Not a Parent or Caretaker is Included when Defining the Family Size	Treatment of an Adult Relative's Earnings if the Adult is Not a Parent or Caretaker (When Included in Family Size)	If a Non-Relative Adult Who is Not a Caretaker is Included when Defining the Family Size	Treatment of an Adult Non-Relative's Earnings if the Adult is Not a Caretaker (When Included in Family Size)
Rhode Island	Never included	NA	Never included	NA
South Carolina	Never included	NA	Varies ⁹	Fully counted
South Dakota	Never included	NA	Never included	NA
Tennessee	Never included	NA	Never included	NA
Texas	Varies ¹⁰	Fully counted	Varies ¹⁰	Fully counted
Utah	Never included	NA	Never included	NA
Vermont	Never included	NA	Never included	NA
Virginia	Never included	NA	Never included	NA
Washington	Never included	NA	Never included	NA
West Virginia	Never included	NA	Never included	NA
Wisconsin	Never included	NA	Never included	NA
Wyoming	Varies ¹¹	Not counted	Never included	NA
American Samoa	Never included	NA	Never included	NA
Guam	Never included	NA	Never included	NA
No Mariana Islands	Never included	NA	Never included	NA
Puerto Rico	Varies ¹²	Not counted	Varies ¹²	Not counted
Virgin Islands	Never included	NA	Never included	NA

Source: CCDF Policies Database October 1, 2012 Data

¹ Information not found in state's manual.

² For the purposes of the CCDF Policies Database, these variables capture policies for non-parent, non-caretaker adults (e.g., aunts, uncles, or family friends) living in the home when the parent or caretaker is present.

³ If the adult relative intends to claim a member of the eligible family as a dependent, the entire household is counted as one unit.

⁴ Any additional related adults who reside with the family and who are financially supported by the family are included in the unit and their income is counted.

⁵ Adult relatives may be included in the family unit and their earnings may be counted if they are dependent on the family for 50 percent or more of their support.

⁶ Dependent grandparents who reside in the same household may be included in the unit.

⁷ Adult siblings, age 18 and over, aunts, uncles, grandparents, and great grandparents have the option of being counted as household members.

⁸ If the adult is a dependent of the parent, he or she is included.

⁹ If the non-relative adult is counted in the TANF or SNAP budget, he or she is counted in the family unit for child care.

¹⁰ If an adult is considered a dependent for income tax purposes, he or she is included in the unit and income is counted.

¹¹ Grandparents are included in the unit if they are part of the assistance unit for TANF and the minor parent is under the age of 18.

¹² Adults older than 60 years old who live in the home 24 hours per day are included.

Table 12. Treatment of Various Types of Income and Benefits when Determining Eligibility, 2012

State	TANF	SSI	SSDI	Net Self-Employment Income	Child Support	Value of SNAP Benefits
Alabama	Varies/partially counted ¹	Fully counted	Fully counted	Fully counted ²	Counted for all children in the unit	Not counted
Alaska	Fully counted	Fully counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted
Arizona	Fully counted	Fully counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted
Arkansas	Varies/partially counted ³	Varies/partially counted ⁴	Fully counted	Fully counted	Not counted	Not counted
California	Fully counted	Not counted	Fully counted	Fully counted	Counted for all children in the unit ⁵	Not counted
Colorado	Not counted	Not counted	Not counted	Fully counted	Counted for all children in the unit	NA ⁶
Connecticut	Not counted	Fully counted	Fully counted	Fully counted	Not counted	Not counted
Delaware	Not counted	Fully counted	Fully counted	Fully counted ⁷	Counted for all children in the unit	Not counted
DC	Not counted	Not counted	Not counted	Fully counted	Counted only for CCDF- eligible children	Not counted
Florida	Fully counted	Varies/partially counted ⁸	Varies/partially counted ⁹	Fully counted	Counted for all children in the unit	NA ⁶
Georgia	Not counted	Not counted	Not counted	Fully counted	Counted for all children in the unit	Not counted
Hawaii	Fully counted	Fully counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted
Idaho	Varies/partially counted ¹⁰	Fully counted	Fully counted	Fully counted ¹¹	Counted for all children in the unit ¹²	Not counted
Illinois	Fully counted	Fully counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted
Indiana	Fully counted	Fully counted ¹³	Fully counted	Fully counted	Counted for all children in the unit	Not counted
Iowa	Fully counted ¹⁴	Fully counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted

Table 12. Treatment of Various Types of Income and Benefits when Determining Eligibility, 2012

State	TANF	SSI	SSDI	Net Self-Employment		Value of SNAP Benefits
				Income	Child Support	
Kansas	Not counted	Not counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted
Kentucky	Varies/partially counted ¹⁵	Fully counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted
Louisiana	Not counted	Fully counted	Fully counted	Fully counted ¹⁶	Counted for all children in the unit	Not counted
Maine	Fully counted	Fully counted	Fully counted	Fully counted	Counted for all children in the unit	Fully counted
Maryland	Not counted	Not counted	Fully counted	Fully counted	Counted for all children in the unit ¹⁷	Not counted
Massachusetts	Varies/partially counted ¹⁸	Fully counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted
Michigan	Not counted	Varies/partially counted ¹⁹	Fully counted	Fully counted	Counted for all children in the unit ²⁰	Not counted
Minnesota	Fully counted	Not counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted
Mississippi	NA ²¹	Varies/partially counted ⁸	Fully counted	Fully counted	Counted for all children in the unit	Not counted
Missouri	Fully counted	Not counted	Fully counted	Fully counted ²²	Counted for all children in the unit	Not counted
Montana	Varies/partially counted ²³	Not counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted
Nebraska	Not counted	Fully counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted
Nevada	Fully counted	Not counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted
New Hampshire	Fully counted	Fully counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted
New Jersey	Fully counted	Fully counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted
New Mexico	Fully counted	Not counted	Not counted	Fully counted	Counted for all children in the unit	Not counted

Table 12. Treatment of Various Types of Income and Benefits when Determining Eligibility, 2012

State	TANF	SSI	SSDI	Net Self-Employment Income	Child Support	Value of SNAP Benefits
New York	Fully counted	Fully counted	Fully counted	Fully counted	Counted for all children in the unit ²⁴	Not counted
North Carolina	Not counted	Not counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted
North Dakota	Not counted	Fully counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted ²⁵
Ohio	Not counted	Not counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted
Oklahoma	Not counted ²⁶	Varies/partially counted ²⁷	Fully counted	Fully counted ²⁸	Counted for all children in the unit	Not counted
Oregon	Fully counted ²⁹	Fully counted	Fully counted	Fully counted ³⁰	Counted for all children in the unit	Not counted
Pennsylvania	NA ³¹	Fully counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted
Rhode Island	Fully counted	Fully counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted
South Carolina	Fully counted	Not counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted
South Dakota	Fully counted	Not counted	Not counted	Fully counted	Counted for all children in the unit	Not counted
Tennessee	Fully counted	Fully counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted
Texas	Fully counted	Fully counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted
Utah	Not counted	Not counted ³²	Fully counted	Fully counted ³³	Counted for all children in the unit ³⁴	Not counted
Vermont	Not counted	Not counted	Not counted	Fully counted	Counted for all children in the unit	Not counted
Virginia	Not counted	Not counted	Not counted	Fully counted	Counted for all children in the unit ³⁵	Not counted
Washington	Varies/partially counted ³⁶	Fully counted	Fully counted	Fully counted ³⁷	Counted for all children in the unit	Not counted

State	TANF	SSI	SSDI	Net Self-Employment Income	Child Support	Value of SNAP Benefits
West Virginia	Fully counted	Fully counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted
Wisconsin	Not counted	Fully counted	Fully counted	Fully counted	Other ³⁸	Not counted
Wyoming	Fully counted	Not counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted
American Samoa	NA ³⁹	Fully counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted
Guam	Fully counted	Fully counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted
No Mariana Islands	NA ³⁹	Not counted	Not counted	Fully counted	Counted for all children in the unit	Not counted
Puerto Rico	Not counted	Not counted	Not counted	Fully counted	Not counted	Not counted
Virgin Islands	Not counted	Not counted	Not counted	Fully counted	Counted only for CCDF- eligible children	Not counted

Source: CCDF Policies Database October 1, 2012 Data

¹ If the TANF benefit amount is the sole reason for a family's income ineligibility, the TANF benefit is excluded for income eligibility purposes for six months.

² Forty percent of income from self-employment is deducted to cover the cost of operating the business.

³ Income is counted except when the person designated to represent the household is a relative applying on behalf of a child for whom he or she has full-time custody.

⁴ Income is counted except when the person designated to represent the household is the recipient of SSI.

⁵ If financial assistance is provided by the absent parent for housing or car expenses, that income is also counted.

⁶ Child care for SNAP participants is not provided under the state's primary child care subsidy program.

⁷ A standard deduction that is a percentage of the gross income applies to all families with costs to produce income. Self-employed households not claiming or verifying any costs to produce income do not get the deduction.

⁸ SSI of adults in the household is counted. SSI income of children is not counted.

⁹ SSDI income of adults in the household is counted. SSDI income of children is not counted.

¹⁰ Income is counted as entered in the temporary assistance program. The child care assistance program does not add any income for families receiving temporary assistance. Child-only non-parent cases use the child care assistance income guidelines.

- ¹¹ A standard deduction is determined by subtracting 50 percent of the gross monthly self-employment income.
- ¹² Child support payments are counted as income. Payments made by the non-custodial parent designated for work-related child care costs are not counted as income and are subtracted from the child care expenses.
- ¹³ Lump sum SSI payments are not counted.
- ¹⁴ Families who receive TANF, participate in the state's TANF work program, or receive child protective services are eligible for child care assistance regardless of income.
- ¹⁵ TANF child-only payments are excluded.
- ¹⁶ Personal, work-related expenses and depreciation are non-allowable deductions from self-employment income.
- ¹⁷ The first \$2500 of child support lump sum payments or arrearages are disregarded.
- ¹⁸ If the applicant is not receiving TANF cash benefits, any cash benefits the applicant receives for a child in his or her care are counted.
- ¹⁹ SSI is not counted when determining eligibility and copayments for children receiving SSI. If the household is applying for child care for any other children not receiving SSI, SSI is counted for determining eligibility for the other household members.
- ²⁰ Child support that goes directly to pay a creditor or service supplier, or that is retained by the department, is excluded.
- ²¹ Eligibility for child care service for TANF parents is determined by the TANF case manager.
- ²² In order to calculate net income, the state deducts allowable business expenses. Allowable expenses vary based on the nature of the self-employment.
- ²³ Only TANF cash assistance benefits, not including work support payments, and Tribal TANF benefits are counted.
- ²⁴ Lump sum child support arrears are not counted as income.
- ²⁵ Tribal food coupons are also excluded.
- ²⁶ Recipients of TANF are predetermined eligible and assigned no copayment.
- ²⁷ Children who receive SSI are predetermined eligible and assigned no copayment. If other children in the household are applying for child care, the SSI income is counted in determining the copayment for the other household members.
- ²⁸ The tax return for the previous year is used to determine self-employment income. If the tax return is no longer representative or the business is less than one year old, business records are used and a 50 percent deduction is given for expenses.
- ²⁹ Pre-TANF and post-TANF program payments are excluded.
- ³⁰ The gross amount is used when there are no allowable costs. If there are allowable costs, a standard deduction is determined by subtracting 50 percent of the gross monthly self-employment income, or the actual costs are deducted from the gross amount when they exceed 50 percent.
- ³¹ Eligibility for child care service for TANF parents is determined by the TANF case manager.
- ³² Any income, earned or unearned, of a household member receiving SSI, is not counted. The exception is child support income for a child in the household.

³³ A household may choose one of two options for claiming self-employment expenses. They may elect to have 40 percent of gross income deducted for business expenses or they may elect to claim actual expenses.

³⁴ The first 50 dollars of child support received by the household is deducted.

³⁵ Lump sum child support income is not counted.

³⁶ When a TANF client starts a new job, TANF income may be exempted for three months.

³⁷ Gross self-employment income is counted.

³⁸ Child support is disregarded if the household receives \$1250 or less per month. If the household receives over \$1250 per month in child support, then the entire amount is counted as income.

³⁹ This territory or outlying area does not have a TANF program.

Table 13. Treatment of Various Types of Income and Benefits when Determining Eligibility (continued), 2012

State	General Assistance ²	Value of Housing Assistance	LIHEAP	Foster Care Income	State EITC Refunds	Non-Recurring Lump Sum Income	Non-Recurring Gifts
Alabama	Fully counted	Not counted	Not counted	Not counted	Not counted	Fully counted	Not counted
Alaska	Fully counted	Varies/partially counted ³	Not counted	Fully counted ⁴	Not counted	Counted if above 500 dollars	Counted if above 500 dollars
Arizona	Fully counted	Not counted	Not counted	Not counted	Not counted	Varies/partially counted ⁵	Not counted
Arkansas	Fully counted	Not counted	Not counted	Not counted	Not counted	Not counted	Not counted
California	Fully counted	Fully counted	Not counted	Fully counted	Not counted	Varies/partially counted ⁶	Not counted
Colorado	Not counted	Not counted	Not counted	Not counted	Not counted	Fully counted ⁷	Fully counted ⁷
Connecticut	Fully counted	Not counted	Not counted	Not counted ⁸	Not counted	Counted if above 600 dollars yearly	Counted if above 1200 dollars yearly
Delaware	Fully counted	Not counted	Not counted	Not counted	Not counted	Fully counted	Not counted
DC	Not counted	Not counted	Not counted	Not counted	Not counted	Not counted	Not counted
Florida	Fully counted	Varies/partially counted ⁹	Not counted	Not counted	Not counted	Not counted	Not counted
Georgia	Not counted	Not counted	Not counted	Not counted	Not counted	Not counted	Not counted
Hawaii	Fully counted	Not counted	Not counted	Not counted	Not counted	Not counted	Not counted
Idaho	NA ¹⁰	Not counted	Not counted	Varies/partially counted ¹¹	Not counted	Varies/partially counted ¹²	Fully counted
Illinois	Fully counted	Not counted	Not counted	Not counted	Not counted	Varies/partially counted ¹³	Not counted
Indiana	Fully counted	Not counted	Not counted	Not counted	Not counted	Fully counted ¹⁴	Not counted ¹⁵
Iowa	Fully counted	Not counted	Not counted	Fully counted ¹⁶	Not counted	Not counted	Varies/partially counted ¹⁷
Kansas	Not counted	Not counted	Not counted	Not counted	Not counted	Not counted	Varies/partially counted ¹⁸
Kentucky	Fully counted	Not counted	Not counted	Not counted	Not counted	Not counted	Not counted
Louisiana	NA ¹⁰	Not counted	Not counted	Not counted	Not counted	Not counted	Not counted
Maine	Fully counted	Not counted	Not counted	Not counted	Varies/partially counted ¹⁹	Not counted	Not counted

Table 13. Treatment of Various Types of Income and Benefits when Determining Eligibility (continued), 2012

State	General Assistance ²	Value of Housing Assistance	LIHEAP	Foster Care Income	State EITC Refunds	Non-Recurring Lump Sum Income	Non-Recurring Gifts
Maryland	Not counted	Not counted	Not counted	Not counted	Not counted	Varies/partially counted ²⁰	Not counted
Massachusetts	NA ¹⁰	Not counted	Not counted	Not counted	Not counted	Varies/partially counted ²⁰	Not counted
Michigan	Not counted	Not counted	Not counted	Not counted	Not counted ²¹	Fully counted ²²	Counted if above 30 dollars quarterly
Minnesota	Fully counted	Not counted	Not counted	Not counted	Not counted	Varies/partially counted ²³	Varies/partially counted ²⁴
Mississippi	Not counted	Not counted	Not counted	Not counted	Not counted	Varies/partially counted ²⁵	Not counted
Missouri	Fully counted	Not counted	Not counted	Not counted	Not counted	Not counted	Varies/partially counted ²⁶
Montana	Varies/partially counted ²⁷	Not counted	Not counted	Not counted	Not counted	Fully counted	Counted if above 50 dollars
Nebraska	Not counted	Not counted	Not counted	Not counted ²⁸	Not counted	Varies/partially counted ²⁹	Not counted
Nevada	Fully counted	Not counted	Not counted	Not counted	Not counted	Varies/partially counted ³⁰	Counted if above 30 dollars quarterly ³¹
New Hampshire	Fully counted	Not counted	Not counted	Not counted	Not counted	Not counted	Not counted
New Jersey	Fully counted	Not counted	Not counted	Fully counted	Not counted	Fully counted ³²	Not counted
New Mexico	Not counted	Not counted	Not counted	Not counted	Not counted	Not counted	Not counted
New York	Not counted	Not counted	Not counted	Not counted	Not counted	Not counted	Not counted
North Carolina	Not counted	Varies/partially counted ³³	Not counted	Not counted	Not counted	Not counted	Not counted
North Dakota	Not counted	Not counted	Not counted	Not counted	Not counted	Not counted	Not counted
Ohio	Not counted	Not counted	Not counted	Not counted	Not counted	Not counted ³⁴	Fully counted ³⁵
Oklahoma	Not counted ³⁶	Not counted	Not counted	Not counted	Not counted	Not counted	Counted if above 30 dollars quarterly ³⁷

Table 13. Treatment of Various Types of Income and Benefits when Determining Eligibility (continued), 2012

State	General Assistance ²	Value of Housing Assistance	LIHEAP	Foster Care Income	State EITC Refunds	Non-Recurring Lump Sum Income	Non-Recurring Gifts
Oregon	NA ³⁸	Varies/partially counted ³⁹	Not counted	Varies/partially counted ⁴⁰	Not counted	Not counted	Not counted
Pennsylvania	Fully counted	Not counted	Not counted	Not counted	Not counted	Counted if above 100 dollars	Counted if above 100 dollars yearly ⁴¹
Rhode Island	Fully counted	Not counted	Not counted	Fully counted ⁴²	Not counted	Not counted	Not counted
South Carolina	Fully counted	Not counted	Not counted	Not counted	Not counted	Not counted	Not counted
South Dakota	Not counted	Not counted	Not counted	Not counted	Not counted	Fully counted	Not counted
Tennessee	NA ¹⁰	Not counted	Not counted	Fully counted	Not counted	Not counted	Not counted
Texas	Fully counted	Not counted	Not counted	Not counted	Not counted	Fully counted	Not counted
Utah	Not counted	Not counted	Not counted	Not counted	Not counted	Varies/partially counted ⁴³	Varies/partially counted ⁴⁴
Vermont	Not counted	Not counted	Not counted	Not counted	Not counted	Not counted	Not counted
Virginia	Not counted	Varies/partially counted ⁴⁵	Varies/partially counted ⁴⁶	Fully counted	Not counted	Not counted	Not counted ⁴⁷
Washington	Fully counted	Not counted ⁴⁸	Not counted	Not counted	Not counted	Fully counted ⁴⁹	Not counted
West Virginia	Fully counted	Not counted	Not counted	Not counted	Not counted	Varies/partially counted ²⁰	Not counted ⁵⁰
Wisconsin	Fully counted	Not counted	Not counted	Not counted	Not counted	Varies/partially counted ⁵¹	Not counted
Wyoming	Fully counted	Not counted	Not counted	Not counted	Not counted	Fully counted	Counted if above 50 dollars quarterly
American Samoa	Fully counted	--- ¹	--- ¹	Fully counted	--- ¹	--- ¹	--- ¹
Guam	Fully counted	Not counted	Not counted	Fully counted	Not counted	Not counted	Fully counted
No Mariana Islands	Fully counted	Not counted	Not counted	Not counted	Not counted	Not counted	Not counted
Puerto Rico	Not counted	Not counted	--- ¹	Not counted	--- ¹	Not counted	Not counted
Virgin Islands	Not counted	Not counted	Not counted	Not counted	Not counted	Not counted	Not counted

Source: CCDF Policies Database October 1, 2012 Data

¹ Information not found in state's manual.

- ² General assistance programs are state or locally funded cash assistance programs for low-income families.
- ³ Federal non-cash benefits are excluded. Housing allowances or the fair market value of employer-provided housing are counted.
- ⁴ Foster care payments are counted when the child is included in the family size.
- ⁵ Money received through lottery or gambling is counted.
- ⁶ The following are not counted in income: scholarships for educational purposes (except funding for living costs); tax refunds; GI Bill entitlements, hardship duty pay, hazardous duty pay, hostile fire pay, or imminent danger pay; insurance or court settlements (excluding lost wages and punitive damages); reimbursements for work-related expenses; disaster relief grants or payments (except portions for rental assistance or unemployment); adoption assistance payments. The following are counted in income: bonuses; gambling or lottery winnings; survivor or retirement benefits; inheritance; portion of student grants or scholarships not identified for education purposes such as tuition, books, or supplies; insurance or court settlements for lost wages or punitive damages; capital gains defined as net proceeds from sale of property or stocks.
- ⁷ Income can either be counted in the month it is received or divided over a 12-month period.
- ⁸ Foster children are a separate family unit of one. Their income does not count for the rest of the family.
- ⁹ Military FSSA housing assistance is fully counted. Housing assistance payments from Housing and Urban Development issued directly to a landlord are not counted.
- ¹⁰ The state does not have general assistance.
- ¹¹ Income is not counted when determining eligibility for the foster child. Income is counted when determining eligibility for the foster parent's child.
- ¹² Non-recurring lump sum income is not counted when it is used to pay medical bills for accidents or injuries or used to pay funeral or burial costs. Lump sum income, minus the exclusions, is counted in determining eligibility.
- ¹³ Lump sum inheritances or insurance payments are not counted. Other one-time lump sum payments may be counted.
- ¹⁴ Lump sums received through life insurance, Social Security, inheritances, lawsuit settlements, annual employment bonuses, gambling, or lottery winnings are counted. The total lump sum is divided by 12 to calculate monthly earnings.
- ¹⁵ Gifts are defined as contributions or money received from a source outside of the family with no intent to repay.
- ¹⁶ Only relative, non-licensed foster families receive child care through the CCDF program. If a licensed foster parent applies for CCA for his or her own children, the parent's foster care income is counted.
- ¹⁷ Gifts are counted if they are in the form of a cash payment, unless they are obtained and used under conditions that preclude their use for current living costs.
- ¹⁸ Income sources such as monetary gifts exceeding \$50 per month, royalties, trust fund income, or gambling winnings are counted.
- ¹⁹ State and local EITC payments are not excluded from income.
- ²⁰ Lump sum inheritances or insurance payments are not counted. Other non-recurring lump sum payments are counted.
- ²¹ Advanced payments of the earned income tax credit are excluded.

- ²² Lump-sum income, such as inheritances, insurance settlements and injury awards, are fully counted for the month they are received. With a single payment of benefits, such as veterans benefits and workers compensations, that includes both accumulated benefits and benefits intended as payment for the current month, only the current month portion should be counted as income.
- ²³ Non-recurring lump sum income that is earmarked and used for a specific purpose is not counted. All other lump sum income is counted.
- ²⁴ The income is not counted if funds are earmarked and used for a specific purpose or if funds are paid by a source other than the family directly to the family's child care provider. All other gifts are counted.
- ²⁵ Bonuses are not considered for income calculation.
- ²⁶ Gifts or casual income that exceed the state's TANF thresholds for basic needs are included as income.
- ²⁷ Assistance payments from other states are counted; however, supportive services which are specified in a public assistance program are excluded.
- ²⁸ Money received from participation in the foster grandparent program is not counted.
- ²⁹ Lump sum inheritances or insurance payments are not counted. Other one-time lump sum payments may be counted.
- ³⁰ If a lump sum is provided to assist with burial, legal, medical bills, or replacement of damaged or lost possessions, any amount earmarked and used for the purpose for which it was paid is disregarded. The agency may ask for verification if expenses seem questionable.
- ³¹ Cash gifts or contributions are counted unless the gifts total \$30 or less in a three-month period per household member or the gift is received too irregularly to be reasonably anticipated.
- ³² The income is averaged over the same time period used to calculate income.
- ³³ Rental assistance provided by an organization on a regular basis is counted; subsidized housing and housing allotments paid directly to the landlord, including military housing allotments, are not counted.
- ³⁴ Lump sum income is defined as money received in the form of a nonrecurring lump sum payment including, but not limited to, retroactive lump sum social security, SSI or pension benefits; retroactive lump sum insurance settlements; retroactive lump sum payment of child support; refunds of security deposits; or prevention, and retention and contingency payments not defined as cash assistance.
- ³⁵ Cash contributions received by the family from persons, organizations, or assistance agencies are fully counted.
- ³⁶ Recipients of public assistance payments are predetermined eligible and assigned no copayment.
- ³⁷ Income received irregularly but in excess of \$30 per quarter is considered income unless it is from an excluded income source.
- ³⁸ The state does not currently fund general assistance. When general assistance is funded, the payments are counted as unearned income.
- ³⁹ Payments from Housing and Urban Development are excluded. Payments from the Youthbuild Program are counted as earned income.
- ⁴⁰ The family unit can choose to include or exclude the foster child when determining family size. The foster care payment is counted as unearned income if the child is included in the unit; otherwise it is not counted.
- ⁴¹ Non-recurring cash gifts under \$100 per person per year are not counted.

- ⁴² Foster care payments are included when the child is included in the assistance unit. If the child is not included in the unit, foster care payments are excluded.
- ⁴³ The lump sum payment of a type of income normally not counted is not counted. Insurance settlements for destroyed exempt property are not counted.
- ⁴⁴ Cash contributions from non-household members are counted. Irregular income such as donations, cash prizes, gifts, and awards are counted only if they can be reasonably anticipated in a month. Irregular income less than or equal to \$30 per household member per quarter year is not counted.
- ⁴⁵ Housing assistance is not counted if paid directly to the landlord. Housing assistance for military personnel is not counted if the individual is living on base and the entire assistance amount is deducted on the leave and earning statement.
- ⁴⁶ Energy assistance is not counted if the assistance is paid directly to the vendor.
- ⁴⁷ Monetary gifts for identifiable one-time occasions or normal annual occasions are disregarded.
- ⁴⁸ Corporate compensation such as rent and living expenses are considered countable income.
- ⁴⁹ Lump sum income is divided by 12 to get a monthly income figure and applied for the remainder of the current eligibility period.
- ⁵⁰ Monetary gifts received on an infrequent basis, such as those received on birthdays or holidays, are not counted.
- ⁵¹ Tax refunds are excluded for determining eligibility and copayment rates. All other non-recurring income is counted in the month it is received.

Table 14. Income Disregards when Determining Eligibility, 2012

State	Amount of Monthly Earned Income Disregard	Amount of Child Support Paid Outside of Household that is Deducted
Alabama	0	None
Alaska	0	All ¹
Arizona	0	All
Arkansas	100 dollars ²	None
California	0	All
Colorado	0	All
Connecticut	0	All
Delaware	0	None
DC	0	All
Florida	0	All ¹
Georgia	0	None
Hawaii	0	None
Idaho	0	All
Illinois	0	All
Indiana	0	None
Iowa	0	None
Kansas	0	None
Kentucky	0	All ³
Louisiana	0	None
Maine	0	All
Maryland	0 ⁴	All
Massachusetts	0	All
Michigan	0	None
Minnesota	0	All
Mississippi	0	None
Missouri	0 ⁵	None
Montana	0	All
Nebraska	0	None
Nevada	0	All
New Hampshire	0	None
New Jersey	0	None
New Mexico	0	None
New York	0	None
North Carolina	0	All
North Dakota	0	All ⁶
Ohio	0	All
Oklahoma	0	All ⁷
Oregon	0	None
Pennsylvania	0	All
Rhode Island	0	None
South Carolina	0	None
South Dakota	4 percent ⁸	All
Tennessee	0	All
Texas	0	None
Utah	100 dollars ⁹	All
Vermont	0	All

Table 14. Income Disregards when Determining Eligibility, 2012

State	Amount of Monthly Earned Income Disregard	Amount of Child Support Paid Outside of Household that is Deducted
Virginia	0 ¹⁰	All
Washington	0	All
West Virginia	0	None
Wisconsin	0	None
Wyoming	200 dollars ¹¹	None
American Samoa	0	None
Guam	0	None
No Mariana Islands	0	None
Puerto Rico	15 percent ¹²	None
Virgin Islands	20 percent ¹³	None

Source: CCDF Policies Database October 1, 2012 Data

¹ The applicant must have a court order and pay stubs showing the child support is being deducted from pay or copies of check or money orders showing child support is being paid out.

² Each adult household member who is employed at least 30 hours per week receives a \$100 work-related deduction from his or her gross income to account for withholding and other mandatory work-related expenses. The only exception to this policy is an adult who is excluded from being counted in the household because of alien status.

³ Only legally obligated child support paid out is deductible and only up to the maximum amount ordered.

⁴ A disregard of \$5000 of a family's annual gross income per child is allowed if the minor parent is attending public school full-time.

⁵ Any monthly medical insurance premium for physician, vision, dental, or cancer insurance, medical supplement policies, or nursing care is deducted from income.

⁶ Child support and spousal support paid to someone outside the household is deducted.

⁷ Child support must be court ordered.

⁸ Gross income is adjusted with a 4 percent income disregard. Families with children with advanced special needs can receive a 20 percent income disregard, along with consideration of income at a maximum of 85 percent of the state median income.

⁹ Each household member whose earned income is counted will have up to 100 dollars deducted from his or her income. If a household member's countable earned income is less than 100 dollars, the full amount will be disregarded.

¹⁰ Earnings of less than \$25 per month are disregarded.

¹¹ There is a \$200 income disregard for each working adult whose income is used in determining eligibility.

¹² There is a special discount for residents of Vieques and Culebra Municipalities and a 15 percent discount for the increased cost of living for families not residing in Vieques and Culebra.

¹³ There is an income disregard for families with children with special needs enrolled in Head Start or private centers equal to the amount of medical and rehabilitative services incurred.

Table 15. Initial Eligibility Thresholds By Family Size: Maximum Monthly Countable Income to Initially Qualify for CCDF Subsidies, 2012 ¹

State	Family Size				
	1	2	3	4	5
Alabama	NA	1594	2007	2421	2835
Alaska	NA	4250	4524	4614	5045
Arizona	1537	2081	2626	3170	3715
Arkansas	1642	2204	2480	2720	3096
California	3283	3283	3518	3908	4534
Colorado ²	NA	2080	2625	3169	3714
Connecticut	2209	2889	3569	4249	4929
Delaware	1815	2452	3088	3725	4362
DC	2256	3035	3815	4594	5373
Florida ³	1396	1891	2386	2881	3376
Georgia	1387	1867	2347	2827	3307
Hawaii	2431	3179	3927	4675	5423
Idaho	NA	1640	2069	2498	2927
Illinois	NA	2333	2944	3554	4165
Indiana	1182	1601	2020	2439	2859
Iowa ⁴	1350	1828	2307	2785	3264
Kansas	NA	2333	2943	3554	4164
Kentucky ⁵	NA	1839	2317	2794	3272
Louisiana	NA	2060	2545	3030	3515
Maine	2269	3065	3860	4656	5381
Maryland	1547	2023	2499	2975	3451
Massachusetts	NA	2840	3508	4176	4844
Michigan	1607	1607	1990	2367	2746
Minnesota	NA	2279	2816	3352	3888
Mississippi	NA	2333	2917	3417	4000
Missouri	1212	1584	1960	2333	2704
Montana	NA	1821	2289	2756	3224
Nebraska	NA	1471	1854	2236	2617
Nevada	2315	3027	3740	4452	5164
New Hampshire	2328	3153	3978	4803	5628
New Jersey	1815	2452	3088	3725	4362
New Mexico	NA	2522	3182	3842	4502
New York	1862	2522	3182	3842	4502
North Carolina	2209	2889	3568	4248	4928
North Dakota	1498	2023	2548	3074	3599
Ohio	NA	1533	1931	2329	2726
Oklahoma ⁶	NA	2425	2925	3625	3625
Oregon	NA	2333	2944	3554	4165
Pennsylvania	1862	2522	3182	3842	4502
Rhode Island	NA	2270	2864	3458	4052
South Carolina	1396	1891	2386	2881	3376
South Dakota	NA	2207	2784	3362	3939
Tennessee	NA	2138	2641	3145	3648
Texas ⁷	NA	2522	3182	3842	4502
Utah	NA	2160	2668	3177	3685

Table 15. Initial Eligibility Thresholds By Family Size: Maximum Monthly Countable Income to Initially Qualify for CCDF Subsidies, 2012 ¹

State	Family Size				
	1	2	3	4	5
Vermont	3050	3050	3050	3674	4298
Virginia ⁸	1670	2247	2823	3400	3976
Washington	1862	2522	3182	3842	4502
West Virginia	1396	1891	2386	2881	3376
Wisconsin ⁹	NA	2333	2943	3554	4164
Wyoming	NA	2837	3580	4322	5065
American Samoa	2431	3179	3927	4675	5423
Guam	1361	1839	2316	2794	3271
No Mariana Islands	1707	1707	1986	2921	3453
Puerto Rico	935	1179	1423	1667	1911
Virgin Islands	NA	2530	2752	2974	3197

Source: CCDF Policies Database October 1, 2012 Data

¹ Family size refers to the number of household members included in the unit for determining eligibility. States determine which household members are included in the unit. This table does not capture eligibility threshold differences between various eligibility groups, such as TANF recipients.

² Policies coded for Denver County. Counties may establish initial eligibility thresholds between 130 and 225 percent of the Federal Poverty Guidelines.

³ Eligibility for families who are not TANF, transitional child care, or child protective services families is capped at 150 percent of the Federal Poverty Guidelines. Eligibility for TANF and transitional child care families is capped at 185 percent of the Federal Poverty Guidelines. Eligibility for child protective services families is capped at 200 percent of the Federal Poverty Guidelines.

⁴ Families requiring care for children with special needs use a different set of eligibility thresholds. If a family has children that meet the criteria for special needs and children that do not meet the criteria for special needs, the caseworker uses both sets of thresholds to determine eligibility.

⁵ Applicants whose state temporary assistance benefits were discontinued within 12 months of applying for child care are eligible if their income is at or below 165 percent of the Federal Poverty Guidelines.

⁶ Eligibility thresholds vary based on both family size and the number of children in care. These thresholds assume a family size two has one child in care, a family size three has two children in care, and a family size four or more has three or more children in care. The threshold for any family size with one child in care is \$2425 per month. The threshold for any family size with two children in care is \$2925 per month. The threshold for any family size with three or more children in care is \$3625 per month.

⁷ Policies coded for the Gulf Coast Region. Local boards have the authority to establish eligibility thresholds as either a percent of the Federal Poverty Guidelines or state median income, but not to exceed 85 percent of state median income.

⁸ Policies coded for areas in Group III. Across Virginia, eligibility thresholds range from 150 to 185 percent of the Federal Poverty Guidelines. Group III's eligibility thresholds are set at 185 percent of the Federal Poverty Guidelines.

⁹ Families' income cannot exceed 185 percent of the Federal Poverty Guidelines, unless providing foster or kinship care (set at 200 percent of the Federal Poverty Guidelines).

Table 16. Continuing Eligibility Thresholds By Family Size: Maximum Monthly Countable Income to Continue Receiving CCDF Subsidies, 2012 ¹

State	If Thresholds Vary for Initial and Continuing Eligibility	Family Size				
		1	2	3	4	5
Alabama	Yes	NA	1839	2316	2794	3271
Alaska	No	NA	4250	4524	4614	5045
Arizona	No	1537	2081	2626	3170	3715
Arkansas	No	1642	2204	2480	2720	3096
California	No	3283	3283	3518	3908	4534
Colorado ²	No	NA	2080	2625	3169	3714
Connecticut	Yes	3314	4334	5354	6373	7393
Delaware	No	1815	2452	3088	3725	4362
DC	Yes	2636	3447	4258	5070	5881
Florida	Yes	1862	2522	3182	3842	4502
Georgia	No	1387	1867	2347	2827	3307
Hawaii	No	2431	3179	3927	4675	5423
Idaho	No	NA	1640	2069	2498	2927
Illinois	No	NA	2333	2944	3554	4165
Indiana	Yes	1582	2143	2704	3265	3826
Iowa ³	No	1350	1828	2307	2785	3264
Kansas	No	NA	2333	2943	3554	4164
Kentucky ⁴	Yes	NA	2023	2549	3074	3599
Louisiana	No	NA	2060	2545	3030	3515
Maine	No	2269	3065	3860	4656	5381
Maryland	No	1547	2023	2499	2975	3451
Massachusetts	Yes	NA	4828	5964	7099	8235
Michigan	No	1607	1607	1990	2367	2746
Minnesota	Yes	NA	3249	4014	4778	5543
Mississippi	No	NA	2333	2917	3417	4000
Missouri ⁵	Yes	1327	1734	2145	2553	2960
Montana	No	NA	1821	2289	2756	3224
Nebraska	No	NA	1471	1854	2236	2617
Nevada	No	2315	3027	3740	4452	5164
New Hampshire	No	2328	3153	3978	4803	5628
New Jersey	Yes	2269	3065	3860	4656	5452
New Mexico	No	NA	2522	3182	3842	4502
New York	No	1862	2522	3182	3842	4502
North Carolina	No	2209	2889	3568	4248	4928
North Dakota	No	1498	2023	2548	3074	3599
Ohio	Yes	NA	2452	3090	3726	4362
Oklahoma	No	NA	2425	2925	3625	3625
Oregon	No	NA	2333	2944	3554	4165
Pennsylvania	Yes	2188	2963	3739	4514	5290
Rhode Island	No	NA	2270	2864	3458	4052
South Carolina	Yes	1629	2207	2784	3362	3939
South Dakota	No	NA	2207	2784	3362	3939
Tennessee	No	NA	2138	2641	3145	3648
Texas ⁶	Yes	NA	3183	3933	4682	5431
Utah	Yes	NA	2700	3335	3971	4606

Table 16. Continuing Eligibility Thresholds By Family Size: Maximum Monthly Countable Income to Continue Receiving CCDF Subsidies, 2012 ¹

State	If Thresholds Vary for Initial and Continuing Eligibility	Family Size				
		1	2	3	4	5
Vermont	No	3050	3050	3050	3674	4298
Virginia ⁷	No	1670	2247	2823	3400	3976
Washington	No	1862	2522	3182	3842	4502
West Virginia	Yes	1722	2333	2943	3554	4164
Wisconsin ⁸	Yes	NA	2522	3182	3842	4502
Wyoming	No	NA	2837	3580	4322	5065
American Samoa	No	2431	3179	3927	4675	5423
Guam	No	1361	1839	2316	2794	3271
No Mariana Islands	No	1707	1707	1986	2921	3453
Puerto Rico	No	935	1179	1423	1667	1911
Virgin Islands	No	NA	2530	2752	2974	3197

Source: CCDF Policies Database October 1, 2012 Data

¹ Family size refers to the number of household members included in the unit for determining eligibility. States determine which household members are included in the unit. This table does not capture eligibility threshold differences between various eligibility groups, such as TANF recipients.

² Policies coded for Denver County. Counties may establish continuing eligibility thresholds between 130 percent of the Federal Poverty Guidelines and 85 percent of state median income.

³ Families requiring care for children with special needs use a different set of eligibility thresholds. If a family has children that meet the criteria for special needs and children that do not meet the criteria for special needs, the caseworker uses both sets of thresholds to determine eligibility.

⁴ Applicants whose state temporary assistance benefits were discontinued within 12 months of applying for child care are eligible if their income is at or below 165 percent of the Federal Poverty Guidelines.

⁵ If an applicant is already receiving child care and his or her income increases to between 127 percent and 139 percent of the Federal Poverty Guidelines, he or she is classified under transitional child care. The applicant will then receive 75 percent of the calculated benefit amount. As a result of the reduced reimbursement rate, the individual may be responsible for paying the provider more than the copayment amount required by the agency.

⁶ Policies coded for the Gulf Coast Region. Local boards have the authority to establish eligibility thresholds as either a percent of the Federal Poverty Guidelines or state median income, but not to exceed 85 percent of state median income.

⁷ Policies coded for areas in Group III. Across Virginia, eligibility thresholds range from 150 to 185 percent of the Federal Poverty Guidelines.

⁸ Families' income cannot exceed 200 percent of the Federal Poverty Guidelines. If a family's income exceeds 200 percent of the Federal Poverty Guidelines for two consecutive months, the subsidy will be discontinued.

Table 17. Assets Test, 2012 ²

State	Maximum Countable Assets	Exempted Value of a Vehicle
Alabama	No limit	No limit
Alaska	No limit	No limit
Arizona	No limit	No limit
Arkansas	No limit	No limit
California	No limit	No limit
Colorado	No limit	No limit
Connecticut	No limit	No limit
Delaware	No limit	No limit
DC	No limit	No limit
Florida	No limit	No limit
Georgia	No limit	No limit
Hawaii	No limit	No limit
Idaho	No limit	No limit
Illinois	No limit	No limit
Indiana	No limit	No limit
Iowa	No limit	No limit
Kansas	No limit	No limit
Kentucky	No limit	No limit
Louisiana	No limit	No limit
Maine	No limit	No limit
Maryland	No limit	No limit
Massachusetts	No limit	No limit
Michigan	No limit	No limit
Minnesota	No limit	No limit
Mississippi	No limit	No limit
Missouri	No limit	No limit
Montana	No limit	No limit
Nebraska	6,000 dollars	12,000 dollar market value of one vehicle ³
Nevada	No limit	No limit
New Hampshire	No limit	No limit
New Jersey	No limit	No limit
New Mexico	No limit	No limit
New York	No limit	No limit
North Carolina	No limit	No limit
North Dakota	No limit	No limit
Ohio	No limit	No limit
Oklahoma	No limit	No limit
Oregon	No limit	No limit
Pennsylvania	No limit	No limit
Rhode Island	10,000 dollars ⁴	No limit
South Carolina	No limit	No limit
South Dakota	No limit	No limit
Tennessee	No limit	No limit
Texas	No limit	No limit
Utah	No limit	No limit
Vermont	No limit	No limit
Virginia	No limit	No limit
Washington	No limit	No limit

Table 17. Assets Test, 2012²

State	Maximum Countable Assets	Exempted Value of a Vehicle
West Virginia	No limit	No limit
Wisconsin	No limit	No limit
Wyoming	No limit	No limit
American Samoa	No limit	No limit
Guam	No limit	No limit
No Mariana Islands	No limit	No limit
Puerto Rico	--- ¹	--- ¹
Virgin Islands	No limit	No limit

Source: CCDF Policies Database October 1, 2012 Data

¹ Information not found in state's manual.

² States coded "No limit" do not have a limit on the amount of assets a family can hold. There is no assets test in these states.

³ The limit applies to the family's first motor vehicle or the vehicle with the greatest fair market value. The family's vehicle market value in excess of \$12,000 is applied to the countable asset limit of \$6,000.

⁴ Only liquid assets are counted for the assets test.

III. APPLICATION, REDETERMINATION, TERMS OF AUTHORIZATION, AND WAITING LISTS

Each CCDF program includes procedures governing how families apply for and retain subsidies, how the amount of child care (number of hours) is established, and how eligible applicants are prioritized for services when the number of eligible applicants exceeds the number of subsidies that the program can provide.

Application, Redetermination, and Terms of Authorization

Families who wish to obtain CCDF-funded child care subsidies go through an application process as established by each program. Many States/Territories require applications to be completed during an in-person interview, whereas some States/Territories mainly use telephone communication or call centers to process applicants. The application process may include providing documents that verify certain items of information.

Once a family is found eligible, the program establishes the “terms of authorization” based on the parents’ activities. The terms of authorization include policies that place a maximum on total hours of child care, as well as policies that limit care for certain types of activities, such as travel time between the parent’s workplace and the child care facility.

For families receiving subsidies, eligibility must generally be redetermined at specified intervals. Within those intervals, many States/Territories require families to report significant changes that might affect their eligibility or copayment. All of these aspects of policy, including applications, verification, and redetermination vary across CCDF programs.

Application Procedures (Table 18)

Table 18 captures two aspects of each program’s application process: the methods by which a family may apply for a child care subsidy and the timeframe within which an applicant is notified of his or her eligibility status and subsidy level. Findings from 2012 include:

- Every State/Territory gives potential clients the option of applying for child care subsidies in-person, and 10 States/Territories require that all applications be processed in-person.
- Applications can be submitted via e-mail or through an internet-based system in 27 States/Territories.
- States/Territories vary widely on how quickly they require applications to be processed, with Indiana and the Virgin Islands notifying clients at the time of the application interview, and some States/Territories allowing up to 45 days for notification. Many States/Territories commit to notifying applicants within 30 days.

The full Database covers other aspects of programs' application procedures, including the amount of time between a determination of eligibility and the point that coverage begins, and whether the subsidy may apply retroactively beginning on the date of application.

Information that Must be Verified with Documentation when Applying for CCDF Subsidies (Table 19)

States/Territories take different approaches to determining the validity of the information provided by the applicant. While some States/Territories require specific forms of documentation to verify certain eligibility criteria, others require only the applicant's signature attesting to the accuracy of the information. For example, many States/Territories do not require separate documentation of family composition; however, the applicant must sign a document stating, under penalty of law, that the list of household members is complete. For purposes of the CCDF Policies Database, "verification" is defined as a requirement for a separate item of documentation.

Table 19 indicates whether any additional documentation is required for each of six items of information: the identity of the applicant, the applicant's household composition, the applicant's relationship to the child(ren) needing care, the employment status of the applicant, the applicant's household income, and the immunization records of the child(ren) needing care. Findings for 2012 include:

- Every State/Territory requires applicants to provide proof of income, and almost every State/Territory requires verification of employment. Some States/Territories do not require verification for applicants receiving benefits from another program such as TANF.
- A majority of States/Territories require verification of the applicant's identity as well as his or her relationship to the children in need of care.
- Approximately half of the States/Territories require verification of household composition.
- Approximately one quarter of the States/Territories require verification of immunization status in at least some circumstances. (Most States/Territories do not require verification of child immunization records at application because this information is collected by child care providers.)

The full Database captures additional details on the types of information that must be verified (self-employment earnings, proof of residency of the child, and so on). The Database does not attempt to capture the types of documentation that are considered acceptable by each State/Territory, due to the wide variation in policies and the use of many State/Territory-specific documents.

Redetermination Requirements and Exemptions (Tables 20 and 21)

Recipients of child care subsidies receive assistance for a set period of time, often called an eligibility period or a benefit period. After that period, the family's eligibility and subsidy level must generally be redetermined. Redetermination policies vary by State/Territory and sometimes vary according to a family's particular circumstances or eligibility group. For instance, a State/Territory may have a 12-month redetermination period for most clients but require that child protective services cases be reassessed after six months. Some eligibility groups may be categorically exempt from the redetermination process. For example, in some States/Territories, families receiving TANF benefits may remain eligible for CCDF as long as they are participating in the TANF program. There may also be variation in the eligibility period within a State; in some States, a locality might be allowed to redetermine eligibility sooner than required by the State.

Table 20 displays three key redetermination requirement policies: the length of the redetermination (eligibility) period, if new documentation is required during redetermination (even if nothing has changed), and the minimum length of time between the point that a family is notified of an adverse change in the subsidy and the point that the change is implemented. Findings from 2012 include:

- Approximately half of the CCDF programs use a redetermination (eligibility) period of six months for most families. The remaining States/Territories have a redetermination period of 12 months for most families, with the exception of Connecticut (eight months) and Texas, where redetermination periods vary at the local level and are set at 11 months in the Gulf Coast Region.
- All programs but Guam require new documentation during the redetermination process. (Table 19 describes some of the policies concerning which items must be documented.)
- There is wide variation across programs concerning the length of time prior to an adverse change that a family must be notified of the change, from one day in Utah to 30 days in Maine and the Virgin Islands. A few States/Territories have no specific notification requirement.

Policies regarding notification often differ depending on the type of change – whether it is an increase in benefits or a decrease or termination of benefits. For instance, a State/Territory may require that families be notified at least 10 days prior to an increase in the copayment, but not have any explicit requirement for notification prior to a decrease in the copayment. Additional detail on the variation in notification requirements can be found in the table footnotes.

As in many other areas of child care subsidy policy, procedures may differ for different categories of families. For instance, redetermination policies may vary for students or for individuals whose hours of work are unpredictable. The table footnotes capture some of these policy details.

Some CCDF programs exempt some families from redetermination based on their involvement with another service or program. Table 21 examines exemptions for families

receiving TANF or SNAP benefits, families with foster children, and families involved with child protective services. Highlights for 2012 include:

- Most States/Territories do not exempt any families from redetermination.
- Families receiving TANF benefits are the most likely of these groups to be exempt from redetermination. Four States/Territories exempt families from redetermination as long as they are enrolled in TANF.
- No programs exempt families receiving SNAP benefits.
- Three States/Territories exempt families involved with the child protective services system, and only Mississippi exempts families receiving care for a foster child.

Reporting Changes in Income, Employment, or Family Circumstances (Table 22)

In addition to requiring eligibility and subsidy amounts to be redetermined at regular intervals, most CCDF programs require participants to report certain changes, such as changes in hours of work or hourly wage, as they occur. Participants failing to report changes as required may suffer sanctions or interruptions in child care subsidy benefits. Table 22 shows the number of days within which a subsidized family is expected to report key changes to the program. The table also shows the requirements for reporting specific types of changes, including changes in employment, income, and household composition. Findings for 2012 include:

- The majority of CCDF programs require families to report key changes within 10 days.
- All but three States/Territories require changes in employment to be reported.
- Only five States/Territories do not require families to report changes in income. Thirty-four States/Territories require all changes in income to be reported, while some States/Territories only require changes over a certain dollar amount to be reported.
- Every State/Territory requires families to report changes in household composition.

Additional information related to these policies, including additional types of changes that must be reported, and whether a full redetermination is required when certain changes are reported, is available in the full Database.

Maximum Hours Approved for Child Care Assistance (Table 23)

Families that are determined eligible to receive child care benefits are authorized to use child care for approved activities, for a certain number of hours. Some States/Territories have general maximum hours of care policies that limit the amount of care an individual can receive in a given period of time. Additionally, States/Territories may establish policies that allow care for travel, rest, or other related activities within certain limitations. For example, some States/Territories take into consideration the travel time between the parent's workplace and the child care facility, and in some States/Territories, parents who work an overnight shift (a shift crossing over midnight) may be eligible to receive subsidies during the day in order to allow for rest or sleep time. Table 23 captures the policies for maximum hours of care, variations for

parents working part time, policies for travel time, and policies for rest hours. Findings from 2012 include:

- Twenty-two States/Territories have policies for maximum hours of care that can be paid through the subsidy program.
- Of the States/Territories that utilize a maximum hours of care policy, only one State (Massachusetts) has a different policy for part-time workers (maximum of 30 hours of care).
- Fifty States/Territories allow care to be authorized for travel time. Of these, half have policies for an explicit maximum number of hours, while the allowed hours for the other half can vary at the caseworker's discretion.
- Similarly, 40 States/Territories allow care for rest hours. Twenty-five specify a maximum number of hours, ranging from four to nine hours daily; the rest allow the number of rest hours to be authorized at the caseworker's discretion.

Care During Breaks in Activities (Table 24)

In addition to establishing the amount of care authorized for approved activities, States/Territories may continue subsidies during temporary breaks in employment, such as school breaks or maternity/paternity leave. These policies may vary depending on whether the parent is expected to return to the approved activity (e.g., work or school) or whether the family will lose its child care slot if care is temporarily suspended. Table 24 captures the policies for authorizing care during school breaks for parents who are students and during maternity/paternity leave. Key findings from 2012 include:

- Thirteen States/Territories allow care to be continued during school breaks for parents who are students. An additional 10 States/Territories vary the policy according to certain circumstances.
- Twenty-six States/Territories allow care to be continued for a certain length of time while parents are on maternity/paternity leave, ranging from two weeks to 12 weeks. Of these, 11 States/Territories have policies specifying that the parent's job must be available upon return in order to authorize care during the leave.

The full Database captures additional information on how States/Territories determine the allowable hours of child care, such as care for full-time versus part-time education activities and care for study hours for parents who are students.

Breaks in employment due to job loss are not included in this section, as job search activities fall under the list of activities that confer eligibility. State/Territory policies for job search activities are outlined in Table 3.

Changes in Application, Verification, and Authorization Policies from 2011 to 2012

A total of nine States/Territories made changes from 2011 to 2012 in their policies regarding applications, verification, redetermination, and reporting requirements. Four States/Territories added options for submitting an application in 2012, with three of those States/Territories adding email or online application options. Maryland was the only State/Territory to change its verification requirements, requiring families to verify the applicant's identity with separate documentation in 2012. Four States changed their redetermination periods from 6 to 12 months in 2012, and Alaska implemented a 10 day policy for notifying families prior to adverse subsidy changes. In Mississippi, the policies for exempting families from redetermination were changed in 2012 to exempt families receiving TANF, foster care, or child protective services. The number of days families have to report changes in circumstances changed in three of the States/Territories, and Idaho changed its requirements for reporting income changes by no longer requiring families to report all changes in income.

A handful of States/Territories made changes to their authorization policies, with three States/Territories lowering the number of hours that could be authorized for subsidized care. Two States (Idaho and Missouri) implemented a maximum for the number of travel hours that could be approved; both States had previously not limited the number of travel hours. One State (Michigan) changed its policy to no longer cover travel time in 2012. Two States made changes to their policies for covering rest hours, with Missouri implementing a maximum amount of time that could be approved in 2012, while in 2011 there was no explicit policy limiting the number of rest hours. In 2012, Montana no longer covered rest time. For care authorized for school breaks, only one State changed its policy, with Pennsylvania lowering the number of days approved. Maternity leave policies changed in two of the States/Territories, most notably with New Jersey no longer approving care during maternity leave.

Priority Groups and Waiting Lists

CCDF subsidies are not a guaranteed benefit. It is possible that more families will apply for and be found eligible for the CCDF-funded subsidy program in a particular State/Territory than can be subsidized with the State's/Territory's available funds. States/Territories may establish priority groups among eligible families and may use waiting lists for families who cannot be served immediately.

Priority Policies for Different Groups (Tables 25 and 26)

Tables 25 and 26 describe if and how States/Territories give priority to certain groups of applicants. The categories of applicants covered in Table 25 are families with children with special needs, families with very low income, families who receive TANF, families who are transitioning off TANF benefits, families who are at risk of becoming dependent on TANF, and families with children under child protective services. Table 25 also provides the States'/Territories' definition of families with very low income. The categories of applicants covered in Table 26 are families with foster care children, families with children in Head Start,

families with children in publicly-funded pre-k, homeless families, teen parent families, families with teen parents in school, and military families. For each group of families, the tables indicate whether that group is treated the same as all other families, whether that group has priority (but without a guarantee of a subsidy when funds are limited), or whether that group of families is guaranteed a subsidy. Findings from 2012 include:

- Twenty-two States/Territories guarantee subsidies for all families enrolled in TANF under their CCDF-funded program. Even more States/Territories guarantee subsidies for TANF families if they are participating in the State's/Territory's TANF work program. (As mentioned earlier, it is important to note that States/Territories may serve TANF families through a child care program other than the CCDF-funded program covered in this Book of Tables.)
- Families transitioning off TANF are guaranteed subsidies in 18 States/Territories. There is almost always a time limit associated with this type of transitional child care.
- No State/Territory guarantees subsidies for families at risk of becoming dependent on TANF, but five give priority to these families.
- Children in Head Start are given priority in South Carolina and Virginia. Subsidies are guaranteed for these families in Virginia. No States/Territories give priority for children enrolled in publicly-funded pre-kindergarten.
- Five States/Territories guarantee subsidies for teen parents in school; only the Virgin Islands guarantees subsidies for all teen parents.

The overall Database provides more detail about priority policies, including information on how States/Territories rank their priority groups.

Waiting List Policies (Table 27)

Table 27 describes if and how each State/Territory utilizes a waiting list. If a State/Territory has written waiting list policies for use when full funding is not available, the State/Territory is coded as using a waiting list, even if the waiting list is not currently in use. Some States/Territories maintain a State/Territory-wide list while others maintain waiting lists at a sub-state or local level. States/Territories may have specific policies for when waiting lists must be reviewed to see which families are still in need of care and/or are still eligible for care. Additionally, some States/Territories require agency staff to notify families of their status on the waiting list periodically. Other States/Territories only contact families once a subsidy becomes available. Still other States/Territories may require the families to check in periodically in order to remain on the waiting list. Highlights from the 2012 policies include:

- Roughly two-thirds of the States/Territories have established waiting list policies.
- Of the States/Territories with waiting list policies, half use sub-state/local area lists and half use a statewide list.
- A majority of the States/Territories do not require the child care agency to notify families of their status on the waiting list until a child care space becomes available.

Waiting list policies are closely connected to priority policies in that groups who are guaranteed subsidies receive child care benefits regardless of funding issues and are not subject to the waiting list. Additionally, some States/Territories place families with higher priority higher up on the waiting list so that they may receive subsidies sooner than families who are not in a priority group.

Changes in Priority and Waiting List Policies from 2011 to 2012

From 2011 to 2012, the priority policies captured in the tables did not change in any State/Territory. Similarly the States'/Territories' waiting list policies also went unchanged from 2011 to 2012.

Table 18. Application Procedures, 2012¹

State	Method for Submitting Application	Within How Many Days Applicant Must Be Notified of Eligibility After Submitting the Application
Alabama	In-person ²	30
Alaska	In-person, mail, fax	30
Arizona	In-person, mail, fax, email ³	30
Arkansas	In-person, mail, fax	45 ⁴
California	In-person	30
Colorado	In-person, mail, online	15
Connecticut	In-person, mail	30
Delaware	In-person, mail, fax, online	30
DC	In-person	30
Florida	In-person, mail, fax, email, online, phone	Other ⁵
Georgia	In-person, mail, fax, email, online	30 ⁶
Hawaii	In-person, mail ⁷	30 ⁸
Idaho	In-person, mail, fax	30
Illinois	In-person, mail, fax	30 ⁹
Indiana	In-person, mail, fax	Other ¹⁰
Iowa	In-person, mail, online ¹¹	30 ¹²
Kansas	In-person, mail, fax, online	30
Kentucky	In-person ¹³	30
Louisiana	In-person, mail, fax, email, online	30
Maine	In-person, mail	30
Maryland	In-person, mail, fax, online	30
Massachusetts	In-person, mail, fax	Other ¹⁴
Michigan	In-person, mail, fax, online	45
Minnesota	In-person, mail, online	30 ¹⁵
Mississippi	In-person, mail, email	14
Missouri	In-person, mail, fax	15
Montana	In-person, mail, fax	30
Nebraska	In-person, mail, fax, email, online	30 ¹⁶
Nevada	In-person, mail, fax	30
New Hampshire	In-person, mail, fax, email, online, phone	30
New Jersey	In-person, mail	45
New Mexico	In-person, mail	14 ¹⁷
New York	In-person, mail	45 ¹⁸
North Carolina	In-person, mail	30
North Dakota	In-person, mail, fax, email, online	15 ¹⁹
Ohio	In-person, mail, fax, email, online ²⁰	30
Oklahoma	In-person, mail, fax, email	Other ²¹
Oregon	In-person, mail, online ²²	45
Pennsylvania	In-person, mail, fax, online	30

State	Method for Submitting Application	Within How Many Days Applicant Must Be Notified of Eligibility After Submitting the Application
Rhode Island	In-person	Other ²³
South Carolina	In-person, mail, fax, email	15 ²⁴
South Dakota	In-person, mail, fax, email, online	10 ²⁵
Tennessee	In-person, mail, fax, online ²⁶	30 ²⁷
Texas	In-person, mail, fax, email, online	20
Utah	In-person, mail, fax, online	30
Vermont	In-person, mail, fax	NA ²⁸
Virginia	In-person, mail, fax, online	30
Washington	In-person, mail, fax, online, phone ²⁹	30
West Virginia	In-person	Other ³⁰
Wisconsin	In-person, mail, fax, online	9 ³¹
Wyoming	In-person, mail, fax	30
American Samoa	In-person	10 ³²
Guam	In-person, mail	10 ³³
No Mariana Islands	In-person	15
Puerto Rico	In-person	30
Virgin Islands	In-person ³⁴	Other ³⁵

Source: CCDF Policies Database October 1, 2012 Data

¹ Policies for initial application procedures are captured. Policies for submitting information during the redetermination process are not included.

² Families enrolled in TANF work programs, families with members in protective services, and families with members in foster care may use a written referral from the appropriate department.

³ No face-to-face interview is required if the information needed for verifying identity and citizenship/legal residency status is already on file with the department or if the required information can be obtained through another method.

⁴ Once all required information has been received, the state has 45 days to either deny the application, approve the family for benefits, or place the application on the pending list.

⁵ This policy is decided at the local level. However, TANF and child protective services cases are required to have action taken within 10 days.

⁶ The caseworker has 30 calendar days to determine eligibility beginning the next business day after receipt of the application.

⁷ The initial application must be submitted in writing.

⁸ The application interview to establish eligibility must be arranged by staff as soon as possible but no later than 30 days after receipt of the signed and dated application and supporting documentation. When the application is denied, the agency must give timely notice of 10 days prior to the effective date of the denial action.

⁹ All applicants must receive either an approval, denial, or request for more information form within 30 calendar days from the date the application is received.

¹⁰ The applicant is notified at the time of the appointment.

- ¹¹ Families can apply at the department's local office.
- ¹² If the application is denied for failure to provide requested information, the applicant is entitled to a 14-day grace period to supply the missing information and have eligibility determined without having to file a new application.
- ¹³ The applicant may submit the form indicating he or she intends to apply for child care services by mail, but the applicant must meet with the caseworker in order to complete the application.
- ¹⁴ Applicants must be notified within 10 days if the application is denied, but there is no requirement for when applicants must be notified if the application is approved.
- ¹⁵ The response time can be extended by 15 days with the applicant's consent.
- ¹⁶ The case worker must take action on the application within 30 days of receipt of the application, and a notice of action must be sent to the applicant.
- ¹⁷ The applicant is notified immediately if he or she submits all required documentation at the time of application. Otherwise, the applicant is given 14 days to submit documentation and then notified of eligibility.
- ¹⁸ Eligibility decisions must be made within 30 calendar days from the date of application, and a written notice must be sent to the family within 15 calendar days of the eligibility decision.
- ¹⁹ The application must be acted upon within 15 days unless there are extenuating circumstances, such as an applicant waiting for a provider to become licensed.
- ²⁰ Applicants may apply at locations other than the department office that are convenient and accessible for families.
- ²¹ The worker must determine eligibility within two working days of completing an interview and receiving all verification.
- ²² If the family is applying for SNAP and employment related day care together, the online SNAP application may be used.
- ²³ Applicants receive timely notice, and the application must be completed within 30 days.
- ²⁴ The caseworker must make every effort to enter the application into the child care database within 15 calendar days of receiving the complete application. Once the applicant is in the database, an eligibility letter is sent to the client.
- ²⁵ Eligibility is determined within 10 days and then a written notice is sent to the family.
- ²⁶ The online option for submitting the application is available if the individual is applying for TANF and child care.
- ²⁷ Child care for TANF families is approved during the TANF application processing period, which is limited to 45 days.
- ²⁸ This state does not have a specific time frame for eligibility determination.
- ²⁹ Applicants may apply by telephone through the state's call center.
- ³⁰ Applicants receive an eligibility decision during in-person application if they have provided all requested information. If additional information is needed, it must be provided to the case worker and eligibility must be determined within 13 days.
- ³¹ The agency must determine eligibility within seven days and the client must be issued a child care authorization within two business days after eligibility is determined. If the client has not selected an approved provider, the authorization may be delayed.
- ³² Eligibility determination must be made within 10 days and the applicant must be given notice, either hand delivered or mailed.
- ³³ Eligibility is determined within 10 work days.
- ³⁴ Applicants are required to have an appointment with a subsidy counselor at the agency.
- ³⁵ Applicants make an appointment to submit paperwork and complete the application process. Eligibility is determined during that appointment.

Table 19. Information that Must be Verified with Documentation When Applying for CCDF Subsidies, 2012²

State	Applicant Identity	Household Composition	Applicant's Relationship to Child	Employment ³	Income	Child's Immunization Record ⁴
Alabama	Yes	Yes	Yes	Yes	Yes	No
Alaska	Yes	Yes	Yes	Yes	Yes	No
Arizona	Yes ⁵	No	Varies ⁶	Yes	Yes ⁷	No
Arkansas	No ⁸	Yes ⁸	Yes	Yes	Yes ⁹	No
California	No ¹⁰	Yes	Yes	Yes	Yes ¹¹	Varies ¹²
Colorado	Yes	No	Yes	Yes	Yes ¹³	Varies ¹⁴
Connecticut	Yes ¹⁵	No ¹⁶	No	Yes	Yes	No ¹⁷
Delaware	No	No	No	Yes	Yes	No
DC	Yes	Yes	Yes	Yes	Yes	Yes
Florida	Yes	No ¹⁶	No ¹⁶	Yes	Yes	Yes ¹⁸
Georgia	Yes	Yes	No	Yes	Yes	Varies ¹⁹
Hawaii	Yes	Yes	Yes	No	Yes	No
Idaho	No	No	No	Yes	Yes	Yes
Illinois	Yes	Yes	Yes	Yes	Yes	No
Indiana	Yes	Yes ²⁰	No ²¹	Yes	Yes	No
Iowa	No ¹⁶	No ¹⁶	No ¹⁶	Yes	Yes ²²	No
Kansas	No	No ¹⁶	No	Yes	Yes	No
Kentucky	Yes	Yes	Yes	Yes	Yes	Varies ²³
Louisiana	No	No ¹⁶	No	Yes	Yes	Yes
Maine	Yes	No	No	No	Yes	No
Maryland	Yes	No	No	Yes	Yes	Yes
Massachusetts	Yes	No	Yes	Yes	Yes	No
Michigan	Yes	No ¹⁶	No ¹⁶	Yes	Yes	No
Minnesota	Yes	No ²⁴	Yes	Yes	Yes	No
Mississippi	Yes	Yes	Yes	Yes	Yes	No
Missouri	Yes	Yes	Yes	Yes	Yes	Yes
Montana	Yes	Yes	Yes	Yes	Yes	No
Nebraska	No ¹⁶	No ¹⁶	No ¹⁶	Yes	Yes ²⁵	No
Nevada	Yes	No ¹⁶	Yes	Yes	Yes ²⁶	No

Table 19. Information that Must be Verified with Documentation When Applying for CCDF Subsidies, 2012²

State	Applicant Identity	Household Composition	Applicant's Relationship to Child	Employment ³	Income	Child's Immunization Record ⁴
New Hampshire	Yes	Yes	Yes	Yes	Yes	No
New Jersey	Yes	No	Yes	Yes	Yes	No
New Mexico	Yes	Yes	Yes	Yes	Yes	No
New York	Yes	Yes	Yes	Yes	Yes	No
North Carolina	No	No	No	No	Yes	No
North Dakota	Yes	Yes	Yes	Yes ²⁷	Yes	No
Ohio	No	No	No	Yes	Yes	No
Oklahoma	Yes	No ¹⁶	No	Yes	Yes ²⁸	No
Oregon	No ²⁹	No ²⁹	No ²⁹	Yes	Yes	No ²⁹
Pennsylvania	Yes	Yes	Yes	Yes	Yes	No
Rhode Island	--- ¹	--- ¹	Yes	Yes	Yes	--- ¹
South Carolina	No	No	No	Yes	Yes	No
South Dakota	No	No	Varies ³⁰	Yes	Yes	No
Tennessee	No	Yes	Yes	Yes	Yes	Varies ³¹
Texas	Yes	Yes	Yes	Yes	Yes	No
Utah	Yes	No ¹⁶	Yes	Yes	Yes	No
Vermont	No	No	Varies ³²	Yes	Yes	No
Virginia	No	No	No	Yes	Yes ³³	Varies ³⁴
Washington	Yes	No	Yes	Yes	Yes	No
West Virginia	Yes	No ¹⁶	No	Yes	Yes	No
Wisconsin	Yes	Yes	Yes	Yes	Yes	No
Wyoming	Yes	No	Yes	Yes	Yes	No
American Samoa	Yes	Yes	Yes	Yes	Yes	Yes
Guam	Yes	Yes	Yes	Yes	Yes	Yes
No Mariana Islands	Yes	Yes	Yes	Yes	Yes	No
Puerto Rico	Yes	Yes	Varies ³⁵	Varies ³⁶	Yes	Yes
Virgin Islands	No	No	Varies ³⁷	Yes	Yes	Yes

Source: CCDF Policies Database October 1, 2012 Data

¹ Information not found in state's manual.

- ² When the applicant is required to submit documentation, it is counted as verification. If the applicant is only required to make a verbal statement, it is not counted as verification for the purposes of the CCDF Policies Database.
- ³ This variable captures whether the family must verify employment, and may include documentation of the parent's work schedule or hours of employment.
- ⁴ This variable captures whether information must be verified with the lead agency at the time of application. In many cases, the provider is required to maintain immunization records. While not captured here, this information can be found in the full database detail.
- ⁵ Applicants with current or prior cash assistance cases or SNAP cases are exempt from identification verification since their information is already in the system.
- ⁶ Verification is not required for natural, step, or adoptive parents.
- ⁷ Applicants who have an open cash assistance, SNAP, or medical assistance case in the system are not required to provide documentation of income, if the income amount displayed in the system is within \$50 of the stated income amount on the child care application.
- ⁸ While not required for eligibility, the agency attempts to verify a valid Social Security Number for every household member for identification purposes.
- ⁹ If the family has an open TANF or SNAP case, the state has the option of using income information available from the state information system, unless it is over 30 days old, or re-verifying income information.
- ¹⁰ Policy coded for Non-CalWORKs Alternative Payment Program.
- ¹¹ Income is not verified for cases where eligibility is not based on income.
- ¹² Documentation of immunization records is not required for children receiving services in licensed facilities or in public or private elementary schools.
- ¹³ Applicants must submit written verification of all earned and unearned income. Verbal attestation can be provided at the time of application, but written verification must be submitted within 30 days.
- ¹⁴ Verification must be provided to either the child care provider or the county, as required by the county policy.
- ¹⁵ A condition is considered verified when the available evidence indicates that it is more likely to be true than not. The department should not deny assistance, discontinue a family's benefits, or reduce a family's benefits if the parent can establish good cause for not providing the requested verification.
- ¹⁶ The agency may require verification if the case worker has reason to believe the client provided incorrect information.
- ¹⁷ The agency may require verification if the child is in unregulated care and the case worker has reason to believe the client provided incorrect information.
- ¹⁸ Service may be terminated if a child's immunization records are not up to date.
- ¹⁹ Immunizations must be verified for children in regulated child care settings, children in public school settings, or children who receive TANF benefits.
- ²⁰ Documentation to verify the identity of other children and adult members in the unit is required.
- ²¹ The relationship to the child does not have to be verified, except for foster parents applying for care for a foster child.
- ²² Applicants receiving protective child care services, participating in the TANF work program, or receiving TANF are not required to verify income.
- ²³ Documentation is not required if the child is currently attending a licensed child care center, certified child care home, public school, Head Start, or other type of care that requires proof of immunization for enrollment.

- ²⁴ With the exception of parental relationship, household composition does not need to be verified unless questionable.
- ²⁵ A declaration from the client is acceptable regarding unearned income, unless the client has a history of program abuse.
- ²⁶ TANF cash assistance case referrals from the department do not have to verify income. The income statement on the referral form is accepted.
- ²⁷ Job search hours must also be verified.
- ²⁸ Income is not verified for caretakers who are not legally and financially responsible for the child. Adopted families do not have to verify income when the child was adopted through the state's department of human services or a federally recognized Indian tribe, the parent has an adoption assistance agreement, both the adoptive parent and child reside in the state, the child is age five or younger, and need for care is for employment only.
- ²⁹ Anything questionable that affects eligibility or benefit level must be verified.
- ³⁰ Applicants who have accepted parental control of the children must provide documentation.
- ³¹ Documentation is not required for children placed in regulated care since licensed providers are required to document child immunizations.
- ³² If the applicant is not the biological, adoptive, or foster parent of the child for whom he or she is requesting a child care subsidy, it must be verified through court documentation that the primary caretaker is the legal guardian.
- ³³ The local agency should accept a parent's written statement that he or she has no income unless there is reason to doubt the statement.
- ³⁴ If the child is already enrolled in another program that requires immunization records, the documentation does not have to be verified.
- ³⁵ In cases where a family has agreed to give the minor to another family or individual, evidence of permanent or temporary custody issued by the court or department for children and families is required.
- ³⁶ Documentation is only required to verify work hours for self-employed applicants.
- ³⁷ Applicants who are foster parents are required to have a letter documenting that they are the foster parent.

Table 20. Redetermination Requirements, 2012

State	Redetermination Period (in months) ²	If New Documentation is Required During Redetermination	Number of Days that Individuals Will Be Notified Prior to an Adverse Subsidy Change
Alabama	6	Yes	10 ³
Alaska	6	Yes ⁴	10
Arizona	6	Yes	10 ⁵
Arkansas	6 ⁶	Yes	10
California	12 ⁷	Yes	14 ⁸
Colorado	12	Yes ⁹	11
Connecticut	8	Yes	10
Delaware	12 ¹⁰	Yes	10
DC	12	Yes	15
Florida	12 ¹¹	Yes	10 ¹²
Georgia	12	Yes	12 ¹³
Hawaii	6	Yes	10 ¹⁴
Idaho	6 ¹⁵	Yes	NA ¹⁶
Illinois	6 ¹⁷	Yes	10 ¹⁸
Indiana	6	Yes	10 ¹⁹
Iowa	6 ²⁰	Yes	10
Kansas	12	Yes	10
Kentucky	12 ²¹	Yes	10 ²²
Louisiana	12	Yes	5 ²³
Maine	12 ²⁴	Yes	30
Maryland	12	Yes	5 ²⁵
Massachusetts	12 ²⁶	Yes	14
Michigan	12 ²⁷	Yes ²⁸	11 ²⁹
Minnesota	6 ³⁰	Yes	15
Mississippi	12 ³¹	Yes	14
Missouri	12	Yes	Other ³²
Montana	6 ³³	Yes ³⁴	15 ³⁵
Nebraska	12	Yes ³⁶	10 ³⁷
Nevada	6 ³⁸	Yes	10
New Hampshire	12	Yes	10 ³⁹
New Jersey	12	Yes	10
New Mexico	6 ⁴⁰	Yes	14
New York	12	Yes	10 ⁴¹
North Carolina	12	Yes ⁴²	10
North Dakota	6	Yes	NA ¹⁶
Ohio	12	Yes	15 ⁴³
Oklahoma	6 ⁴⁴	Yes	10 ⁴⁵
Oregon	6 ⁴⁶	Yes	10
Pennsylvania	6	Yes	10

Table 20. Redetermination Requirements, 2012

State	Redetermination Period (in months) ²	If New Documentation is Required During Redetermination	Number of Days that Individuals Will Be Notified Prior to an Adverse Subsidy Change
Rhode Island	12 ⁴⁷	Yes	10 ⁴⁸
South Carolina	12 ⁴⁹	Yes	10
South Dakota	6 ⁵⁰	Yes	Other ⁵¹
Tennessee	6 ⁵²	Yes	10 ⁵³
Texas	11 ⁵⁴	Yes	15
Utah	6 ⁵⁵	Yes	1 ⁵⁶
Vermont	12	Yes ⁵⁷	Other ⁵⁸
Virginia	12	Yes ⁵⁹	10
Washington	12	Yes	10
West Virginia	6	Yes	13 ⁶⁰
Wisconsin	6	Yes	10 ⁶¹
Wyoming	6	Yes	Other ⁶²
American Samoa	6	Yes	--- ¹
Guam	12	No ⁶³	15
No Mariana Islands	6	Yes	10
Puerto Rico	12	--- ¹	10
Virgin Islands	6	Yes ⁶⁴	30 ⁶⁵

Source: CCDF Policies Database October 1, 2012 Data

¹ Information not found in state's manual.

² The redetermination period is how often the family's eligibility must be reviewed in order to continue receiving care.

³ Individuals will be notified within 10 days unless advance notification requirements do not apply or a parent signs a written statement waiving the right to an advance notice.

⁴ Families seeking to continue participation past their initial child care authorization period must complete a new application and an update interview, either in person or by telephone, at the end of their eligibility period.

⁵ An advance notice of 10 days is required if the family will have an increase in its copayment. The change is effective the first day of the month following the expiration of the 10 day notice. If the family will have a decrease in its copayment, adequate notice is required, but a 10-day advance notice is not required.

⁶ Students must complete the redetermination process before the start of each new school semester.

⁷ If employment hours are unpredictable, redetermination must take place at least every four months. If a child is receiving care due to risk of abuse, neglect, or exploitation, eligibility is limited to three months, at which point the family must be redetermined eligible under a different need criteria.

⁸ If notification is mailed, the number of days is extended to 19 days.

⁹ Employed parents must submit written proof of employment, scheduled hours that child care is needed, and wage information. Self-employed parents must show a net profit from their self employment.

¹⁰ Parents must complete an interim form every six months.

¹¹ Redetermination for protective services is every six months. Redetermination periods may vary by coalition, but the minimum is 12 months.

- ¹² Individuals are given 10 days notice prior to a decrease in benefits or other adverse action.
- ¹³ Clients must be given timely notice of 12 days prior to fee increases, changes in eligible children, or sanctions. Adequate notice is required when fees are reduced or changes in rates were not previously reflected on the certificate for child care.
- ¹⁴ Families are given timely notice of 10 days prior to an adverse action. Changes that result in higher benefits will take effect the first of the month following the month in which the change is reported. Timely notice is not required when the family requests that services end or when funds are not available.
- ¹⁵ Redetermination is completed at least every six months. Redetermination is completed more often for protective service cases (every three months).
- ¹⁶ There is no requirement for notification.
- ¹⁷ Families must be redetermined every six months except when parents are enrolled in an education or training program that lasts less than six months, the family has a service plan that indicates the activity lasts less than six months, or the child is participating in an approved Head Start or Pre-K program.
- ¹⁸ Individuals are given 10 days notice when benefits are cancelled. Changes to copayments are implemented on the first of the month following notification of the change.
- ¹⁹ The rule applies to adverse actions, including a denial or termination of services, increased fees, or reduction of services.
- ²⁰ Families are certified for a period of up to six months. Families may have shorter certification periods depending on their need for child care.
- ²¹ Redetermination for protection and permanency cases is every six months.
- ²² Required notification varies. Changes that increase benefits do not require advance notice. Changes that decrease benefits require 10 days notice.
- ²³ Notification is required within five work days.
- ²⁴ Full redetermination is done at 12 months. At six months, the family must indicate that the information on file is still correct.
- ²⁵ The family is entitled to five working days' notice, which does not include state holidays.
- ²⁶ Families are reassessed for eligibility every 12 months, unless the activity is scheduled to last fewer than 12 months (end of the semester for school activities), the activity is only authorized for 12 months (job search, maternal leave), or if the parent is newly employed (reassessed after eight weeks and then every 12 months). Families authorized by the TANF or child welfare agencies may be authorized for less than 12 months, depending on their needs. Families can request extensions for redetermination due to extraordinary circumstances such as the death or illness of a family member or a natural disaster.
- ²⁷ Families are also subject to a mid-redetermination contact, during which verification of any changes in employment, need for care, or hours of care is required.
- ²⁸ Income must be verified at redetermination.
- ²⁹ A timely notice is mailed at least 11 days before an intended negative action takes effect. For an increase in benefits, notice is sent to the client at the same time an action takes effect.
- ³⁰ Redetermination of eligibility for some high school students under the age of 21 is deferred beyond six months, not to exceed 12 months, to the end of the student's school year.
- ³¹ In addition to redetermination after 12 months, if the next year's state funds are not enough to serve all eligible families and their providers, current parents and providers' child care certificates will end September 30. Parents and providers are required to re-apply beginning October 1, and parents are rolled-over based upon the established priorities.
- ³² An increase in the copayment will take affect the month after notice is sent. A decrease in copayment will take affect in the month notice is sent.
- ³³ Recertification is conducted periodically, usually every six months.

- ³⁴ Parents must verify their employment and or training program if the participant has changed jobs or it is a new semester. If the participant has not changed jobs, he or she must submit consecutive pay stubs for the previous 60 days of employment. Verification of child support must also be included.
- ³⁵ Parents who are subject to an adverse action (denial, suspension, reduction, or termination of subsidy, or a repayment demand from the state) are entitled to mailed written notification 15 calendar days prior to the adverse action. For all other changes to a parent's policy, the parent is notified in writing.
- ³⁶ The parent must complete a new application reflecting his or her current situation.
- ³⁷ For termination or reduction of services, the client must be given 10 days' notice. If fraud has been verified, notice of termination or reduction of services must be provided no later than the effective date of the action. No notice is required if the client did not complete the redetermination process at the end of the service period.
- ³⁸ Redetermination for minor students is required every school period (i.e. semester or quarter).
- ³⁹ Notification varies. If the benefits will be decreased, the family is given notice 10 calendar days prior to the action. If the family moves from a lower income eligibility level to a higher income eligibility level or if there is a change in the expected copayment, the family is notified, but a 10-day notice is not required.
- ⁴⁰ Participants in high school may recertify at the end of the school year. Clients who have received child care assistance continuously for at least two years, have been employed at the same location for at least two years, and who have not had frequent changes to their cases, may recertify every 12 months.
- ⁴¹ Ten days' notice is required if benefits will be reduced or the change will force the family to find different child care arrangements. Timely notice of 10 days is not required when benefits will increase.
- ⁴² Participants in the SNAP program do not have to provide new income documentation at redetermination.
- ⁴³ When the department is proposing to reduce or terminate benefits, notice is sent no less than 15 days prior to the date of the proposed action.
- ⁴⁴ Redetermination is completed every six months, except for families receiving TANF or a state supplemental payment, in which case redetermination is completed every 12 months.
- ⁴⁵ If there is an increase in benefits, advance notice is not required. If there is a decrease in benefits, advance notice of 10 days is generally required.
- ⁴⁶ Recertification is generally required at six months. If the client has a companion SNAP case and is using the state's simplified reporting system, the recertification period is 12 months with changes reported at six months. The recertification period may be shorter if care is needed for fewer than six months.
- ⁴⁷ Certification periods cannot exceed 12 months. Income eligible families are subject to redetermination every 3 to 12 months depending on employment circumstances. For those with a 12-month certification period, a six-month interim report is required.
- ⁴⁸ Families must be notified at least 10 days prior to the effective date of a change that results in a reduction, suspension, or discontinuance of the subsidy.
- ⁴⁹ Child care is authorized for 26 weeks at a time for TANF recipients.
- ⁵⁰ Assistance can be granted for a period of 12 months for applicants utilizing child care providers participating in the Head Start full day/full year program. Families transitioning off TANF can receive one year of continuous eligibility if their income does not exceed 85 percent of the state median income.
- ⁵¹ Notice is sent to the client and provider no later than the date the provider would normally receive a child care payment.
- ⁵² The redetermination period for TANF families is 12 months.
- ⁵³ Individuals are given 10 days' notice prior to a decrease in benefits or other adverse action.
- ⁵⁴ Policies coded for the Gulf Coast Region.

- ⁵⁵ Households where all members are elderly and/or disabled with no earned income are certified for up to 12 months. All other households are certified for a period of up to six months.
- ⁵⁶ The department must provide at least one day advance notice on most negative actions.
- ⁵⁷ Participants are required to provide current documentation of income, service need, residence, citizenship or legal alien status, and any change in family relationships prior to the authorization end date.
- ⁵⁸ If a family's circumstances change significantly, a new annual re-determination is required, and a new 12-month period begins at the time the significant changes occur. If the significant change decreases the family's subsidy, the change becomes effective at the annual review in order to give the family time to prepare for the reduction in their benefit.
- ⁵⁹ Redetermination is conducted in the same manner as initial determination, except the parent does not have to complete a new affidavit of citizenship.
- ⁶⁰ The family must be notified at least 13 days prior to termination of services or any other negative action. Copayment increases resulting from redetermination are not considered negative actions and do not require a 13-day notice.
- ⁶¹ When benefits are reduced or terminated, the family is given at least 10 days' notice.
- ⁶² For adverse actions, adequate notice must be received by the family no later than the date the benefits would have been received. Notice is not required when benefits are increased.
- ⁶³ New documentation is not required unless there is a change in provider.
- ⁶⁴ The participant is required to bring the income verification form filled out by the employer, two most recent pay stubs, and birth certificates and Social Security cards for each child.
- ⁶⁵ If adjustments are made to the amount paid to the provider, both the parent and provider are notified at least one month in advance.

Table 21. If Families Receiving Different Types of Benefits/Services are Exempt from Redetermination, 2012

State	TANF	SNAP	Foster Care	Child Protective Services
Alabama	No	No	No	No
Alaska	No	No	No	No
Arizona	No	No	No	No
Arkansas	No	No	No	No
California	No	No	No	No
Colorado	Yes	NA ²	NA ³	NA ⁴
Connecticut	No	No	No	No
Delaware	No	No	No	No
DC	No	No	No	No
Florida	No	NA ²	No	No
Georgia	No	No	No	No
Hawaii	No	No	No	No
Idaho	No	No	No	No
Illinois	No	No	NA ³	NA ⁴
Indiana	No	No	No	No
Iowa	No	No	No ⁵	No
Kansas	No	No	No	No
Kentucky	No ⁶	No	NA ³	No ⁷
Louisiana	Yes	No	No	No
Maine	No	No	No	No
Maryland	No	No	NA ³	NA ⁴
Massachusetts	No	No	No	No
Michigan	No ⁸	No ⁸	No	No
Minnesota	No	No	NA ³	NA ⁴
Mississippi	Yes	No	Yes	Yes
Missouri	No	No	No	No
Montana	No	No	No	No
Nebraska	No	No	No	Yes ⁹
Nevada	Yes	No	No	No
New Hampshire	No	No	No	No
New Jersey	No	No	No	No
New Mexico	No	No	No	No
New York	No ¹⁰	No	No ¹¹	Yes ¹²
North Carolina	No	No	No	No
North Dakota	No	No	NA ³	NA ⁴
Ohio	No	No	No	No
Oklahoma	No	No	No	No
Oregon	No	No ¹³	No	NA ⁴
Pennsylvania	No ¹⁴	No	No	No
Rhode Island	No ¹⁵	No	No	No
South Carolina	No	No	No	No
South Dakota	No	No	No	No
Tennessee	No	No	No	No

Table 21. If Families Receiving Different Types of Benefits/Services are Exempt from Redetermination, 2012

State	TANF	SNAP	Foster Care	Child Protective Services
Texas	No	No	No	No
Utah	No	No	NA ³	No
Vermont	No	No	No	No
Virginia	No	No	NA ³	No
Washington	No	No	NA ³	NA ⁴
West Virginia	No	No	No	No
Wisconsin	No	No	No	NA ⁴
Wyoming	No	No	No	NA ⁴
American Samoa	NA ¹⁶	---	---	---
Guam	No	No	No	No
No Mariana Islands	NA ¹⁶	No	No	No
Puerto Rico	---	---	---	---
Virgin Islands	No	No	No	No

Source: CCDF Policies Database October 1, 2012 Data

¹ Information not found in state's manual.

² Child care for SNAP clients is not provided under the state's primary child care subsidy program.

³ Foster child care is not provided under the state's primary child care subsidy program.

⁴ Child protective services child care is not provided under the state's primary child care subsidy program.

⁵ Only relative, non-licensed foster families receive child care through the CCDF program.

⁶ TANF applicants must complete redetermination with the department that determined their initial eligibility.

⁷ Child protective services applicants must complete redetermination with the department that determined their initial eligibility.

⁸ Redetermination periods for families participating in multiple programs are aligned so the families do not have to complete an additional redetermination for child care.

⁹ Child protective services cases are not required to submit or resubmit application materials if a child abuse or neglect report has been filed or there is a court order.

¹⁰ Districts that have an online inquiry system can verify TANF recipients every 12 months through the system instead of the usual redetermination process.

¹¹ Redeterminations are made at least every six months for a child in receipt of foster care maintenance payments.

¹² Policy coded for New York City.

¹³ When the family has a companion SNAP case in the state's simplified reporting system, the eligibility period is extended to 12 months and aligned with the SNAP recertification process. In addition, SNAP families submit an interim change report during the sixth month of the SNAP eligibility period.

¹⁴ TANF applicants must complete redetermination with the department that determined their initial eligibility.

¹⁵ Families who qualify based on participation in the state's TANF program are not exempt from redetermination, but they do have a different time frame for redetermination. They are subject to redetermination every 12 months, rather than every six months.

¹⁶ This territory or outlying area does not have a TANF program.

Table 22. Reporting Changes in Income, Employment, or Family Circumstances, 2012

State	Within How Many Days the Individual Must Notify the Agency of Changes	If Changes in Employment Must Be Reported	If Changes in Income Must Be Reported	If Changes in Household Composition Must Be Reported
Alabama	10	Yes	Yes, all changes	Yes
Alaska	10	Yes ¹	Yes, changes of 200 dollars or more monthly	Yes ¹
Arizona	2	Yes	Yes, all changes	Yes
Arkansas	10	Yes ¹	Yes, all changes ¹	Yes ¹
California	5 ²	Yes	Yes, all changes	Yes
Colorado	Other ³	Yes ⁴	Other ³	Yes
Connecticut	10	Yes	Yes, all changes	Yes
Delaware	10	Yes	Yes, changes of 75 dollars or more monthly	Yes
DC	3	Yes	Yes, all changes	Yes
Florida	10	Yes	Yes, all changes	Yes
Georgia	10	Yes	Yes, all changes	Yes
Hawaii	10	No	Other ⁵	Yes
Idaho	Other ⁶	Yes	Other ⁷	Yes
Illinois	10	Yes	Yes, all changes	Yes
Indiana	10	Yes ⁸	No ⁹	Yes ¹⁰
Iowa	10	Yes	Yes, all changes	Yes
Kansas	10	Yes ¹¹	Yes, changes of more than 100 dollars monthly ¹²	Yes
Kentucky	10	Yes	Yes, all changes	Yes
Louisiana	10	Yes	Yes, changes of more than 100 dollars monthly ¹³	Yes
Maine	10	Yes	Yes, changes of 100 dollars or more monthly	Yes
Maryland	10	Yes	Yes, all changes	Yes
Massachusetts	10 ¹⁴	Yes	Other ¹⁵	Yes
Michigan	10 ¹	Yes	Yes, changes of more than 50 dollars monthly ¹⁶	Yes ¹⁷
Minnesota	10	Yes	Yes, all changes	Yes
Mississippi	10	Yes	Yes, all changes	Yes
Missouri	10	Yes	Yes, all changes	Yes
Montana	10	Yes	Yes, all changes	Yes
Nebraska	10	Yes	Yes, all changes	Yes
Nevada	10	Yes	Yes, all changes ¹⁸	Yes

Table 22. Reporting Changes in Income, Employment, or Family Circumstances, 2012

State	Within How Many Days the Individual Must Notify the Agency of Changes	If Changes in Employment Must Be Reported	If Changes in Income Must Be Reported	If Changes in Household Composition Must Be Reported
New Hampshire	10	Yes	Yes, all changes	Yes
New Jersey	10	Yes	Yes, all changes	Yes
New Mexico	14	Yes	No	Yes
New York	Other ¹⁹	Yes	Yes, all changes	Yes
North Carolina	5	Yes	Yes, all changes	Yes
North Dakota	10	No	No	Yes
Ohio	10	Yes	Yes, all changes	Yes
Oklahoma	10	Yes	Yes, all changes	Yes
Oregon	10 ²⁰	Yes ²¹	Yes, all changes ²²	Yes ²³
Pennsylvania	10	Yes	No	Yes
Rhode Island	10	Yes	Yes, changes of 25 dollars or more monthly	Yes
South Carolina	10	Yes	Yes, all changes	Yes
South Dakota	10 ²⁴	Yes ²⁵	Yes, all changes ²⁵	Yes
Tennessee	10	Yes	Yes, all changes	Yes
Texas	10	Yes	Yes, all changes	Yes
Utah	10	No ²⁶	Other ²⁷	Yes ²⁸
Vermont	10	Yes	Yes, all changes	Yes
Virginia	5	Yes	Other ²⁹	Yes
Washington	10 ³⁰	Yes	Other ⁷	Yes
West Virginia	5	Yes	No ³¹	Yes
Wisconsin	10	Yes	Other ³²	Yes
Wyoming	10	Yes	Yes, all changes	Yes
American Samoa	10	Yes	Yes, changes of 25 dollars or more	Yes
Guam	10	Yes ³³	Yes, changes of 25 dollars or more	Yes
No Mariana Islands	10	Yes	Yes, all changes	Yes
Puerto Rico	10	Yes	Yes, all changes	Yes
Virgin Islands	10 ³⁴	Yes	Yes, all changes	Yes

Source: CCDF Policies Database October 1, 2012 Data

¹ Clients must report changes in circumstances that potentially affect eligibility or benefit amount.

² Families must report changes in employment, income, and family size within five days unless they receive care based on child protective services, risk of abuse or neglect, homelessness, or receipt of cash assistance.

³ Participants must report and verify changes in income that exceed 85 percent of the state median income within 10 calendar days of the change. If the parent or caretaker is no longer in his or her qualifying activity, the change must be reported in writing within four calendar weeks.

⁴ If the parent or caretaker is no longer in his or her qualifying activity, the change must be reported in writing within four calendar weeks.

- ⁵ Changes in income only need to be reported when monthly gross income and the source of household income is in excess of 85 percent of the state median income.
- ⁶ Parents must report changes by the 10th day of the month following the month in which the change occurred.
- ⁷ Changes in income must be reported only if the change would cause countable income to exceed the maximum eligibility limit.
- ⁸ Only loss of employment must be reported.
- ⁹ When adding a household member with income, proof of current income for all CCDF household members must be provided.
- ¹⁰ When adding an adult family member, the applicant must provide proof of identity and proof of service need. When adding an adult family member with income, income must be verified for all members. When adding a family member who is a child, the applicant must provide proof of identity and date of birth.
- ¹¹ Participants must verify the termination of their employment.
- ¹² Changes must be reported when earned income increases or decreases by more than 100 dollars per month or when unearned income increases or decreases by more than \$50 per month. Families that do not qualify for aid based on income are not required to report changes in income until redetermination.
- ¹³ Changes in the household's gross monthly income of more than \$100 in earned income or \$50 in unearned income must be reported.
- ¹⁴ Individuals must notify the agency of changes within 10 business days.
- ¹⁵ A significant change, defined as a 20 percent increase or decrease in total household income, must be reported.
- ¹⁶ Changes in rate of pay and changes in gross monthly income of more than \$50 since the last time they were reported must be reported. Earned income related changes must be reported within 10 days of receiving the first payment reflecting the change.
- ¹⁷ A telephone interview may be required to determine any needed verification when a person is added to the household.
- ¹⁸ All earned income changes must be reported. Unearned income changes under \$50 within the last 30 days do not need to be reported.
- ¹⁹ The client must report changes immediately.
- ²⁰ Changes in the state's change reporting system must be reported within 10 days. Clients with companion SNAP cases using the state's simplified reporting system have until the 10th of the month following the change to report it.
- ²¹ Changes in employment status must be reported in the states change reporting system. Clients with companion SNAP cases using the states simplified reporting system are only required to report a loss of employment.
- ²² Changes in income source, including rate of pay, must be reported in the state's change reporting system. Clients with companion SNAP cases using the state's simplified reporting system are only required to report if their income increases above 130 percent of the Federal Poverty Guidelines.
- ²³ Changes in membership of the filing group must be reported in the state's change reporting system. Clients with companion SNAP cases using the state's simplified reporting system are only required to report when a parent of a child or unborn child or the spouse of the caretaker moves in.
- ²⁴ Most changes must be reported by the individual within 10 days. All changes in child care provider arrangements must be reported in writing within five days of the change.
- ²⁵ Changes of employment or income require documentation prior to the change being made.
- ²⁶ Parents only have to report if they are no longer meeting the minimum work requirement. Also, the family must report if a parent or child's schedule changes so that child care is no longer needed during the hours of approved employment or training activities.
- ²⁷ Changes in income have to be reported when gross income exceeds 70 percent of the state median income.

²⁸ If a member is added to the household, the change must be reported including a parent, a step-parent, a spouse, or a former spouse. Changes also have to be reported when marriages occur and when a child receiving care moves outside of the home.

²⁹ Changes to the family's gross monthly income causing the total amount to exceed the income eligibility threshold must be reported. Also, if a family no longer has income, it must be reported.

³⁰ A change in providers must be reported within five days.

³¹ Income changes reported prior to redetermination will not affect eligibility unless the parent asks for a redetermination in order to reduce parent fees when income decreases.

³² Changes must be reported if monthly income increases by at least \$250, decreases by \$100 or more, or if the increase in income will raise gross income above 200 percent of the Federal Poverty Guidelines.

³³ Clients must report a change in their source of income.

³⁴ The parent must notify the department of any change in family circumstances immediately but not later than 10 days from the occurrence.

Table 23. Maximum Hours Approved for Child Care Subsidies, 2012

State	Maximum Hours of Care Paid for By Subsidy	If Maximum Hours of Care Policy Differs for Part-Time Workers ²	If Travel Hours are Paid By the Subsidy	Maximum Number of Rest Hours Paid for By Subsidy ³
Alabama	No maximum	NA	Yes, 8 hours weekly	No
Alaska	255 per month	No difference	Yes, 1 hour daily ⁴	Yes, 8 hours daily ⁵
Arizona	No maximum	NA	Yes, no explicit maximum/at caseworker's discretion	Yes, no explicit maximum/at caseworker's discretion
Arkansas	10 per day ⁶	No difference	Yes, 2 hours daily	Yes, no explicit maximum/at caseworker's discretion
California	No maximum	NA	Yes, 4 hours daily ⁷	Yes, 8 hours daily ⁸
Colorado	No maximum	NA	Yes, no explicit maximum/at caseworker's discretion ⁹	Varies ¹⁰
Connecticut	280 per month ¹¹	No difference	Yes, 1 hour daily ¹²	Yes, 4 hours daily ¹³
Delaware	No maximum	NA	Yes, no explicit maximum/at caseworker's discretion	Yes, 8 hours daily if the subsidy is not needed during work hours
DC	No maximum	NA	Yes, 3 hours daily ¹⁴	No
Florida	No maximum	NA	Yes, no explicit maximum/at caseworker's discretion	Yes, no explicit maximum/at caseworker's discretion
Georgia	No maximum	NA	No	Yes, 8 hours daily if the subsidy is not needed during work hours
Hawaii	No maximum	NA	Yes, other amount ¹⁵	Yes, no explicit maximum/at caseworker's discretion
Idaho	No maximum	NA	Yes, 12 hours monthly ¹⁶	No
Illinois	No maximum	NA	Yes, no explicit maximum/at caseworker's discretion ¹⁷	Yes, 8 hours daily ¹⁸
Indiana	No maximum	NA	Yes, 2 hours daily ¹⁹	Yes, no explicit maximum/at caseworker's discretion, if the subsidy is not needed during work hours ²⁰
Iowa	Varies ²¹	No difference	Yes, no explicit maximum/at caseworker's discretion ²²	Yes, other amount ²³
Kansas	215 per month ²⁴	No difference	Yes, 1 hour daily ²⁵	Yes, 6 hours daily ²⁶

Table 23. Maximum Hours Approved for Child Care Subsidies, 2012

State	Maximum Hours of Care Paid for By Subsidy	If Maximum Hours of Care Policy Differs for Part-Time Workers ²	If Travel Hours are Paid By the Subsidy	Maximum Number of Rest Hours Paid for By Subsidy ³
Kentucky	18 per day	No difference	Yes, no explicit maximum/at caseworker's discretion	Yes, no explicit maximum/at caseworker's discretion, if the subsidy is not needed during work hours ²⁷
Louisiana	No maximum	NA	Yes, 1 hour daily	Yes, no explicit maximum/at caseworker's discretion, if the subsidy is not needed during work hours
Maine	50 per week ²⁸	No difference	Yes, no explicit maximum/at caseworker's discretion ²⁹	Yes, 8 hours daily ³⁰
Maryland	No maximum	NA	Yes, 1 hour daily ³¹	No
Massachusetts	50 per week	30 per week	Yes, 5 hours weekly ³²	Yes, no explicit maximum/at caseworker's discretion, if the subsidy is not needed during work hours
Michigan	40 per week ³³	No difference	No	Yes, 8 hours daily
Minnesota	60 per week ³⁴	No difference	Yes, 2 hours daily	Yes, no explicit maximum/at caseworker's discretion ³⁵
Mississippi	No maximum ³⁶	NA	Yes, 1 hour daily ³⁷	No
Missouri	No maximum	NA	Yes, 2 hours daily ³⁸	Yes, 8 hours daily ³⁹
Montana	20 per day ⁴⁰	No difference	Yes, no explicit maximum/at caseworker's discretion	No
Nebraska	60 per week ⁴¹	No difference	Yes, no explicit maximum/at caseworker's discretion ⁴²	Yes, 8 hours daily
Nevada	14 per day ⁴³	No difference	Yes, 2 hours daily	Yes, 8 hours daily ⁴⁴
New Hampshire	No maximum	NA	Yes, no explicit maximum/at caseworker's discretion	Yes, 8 hours daily ⁴⁵
New Jersey	No maximum	NA	---	---
New Mexico	No maximum	NA	Yes, no explicit maximum/at caseworker's discretion	No

Table 23. Maximum Hours Approved for Child Care Subsidies, 2012

State	Maximum Hours of Care Paid for By Subsidy	If Maximum Hours of Care Policy Differs for Part-Time Workers ²	If Travel Hours are Paid By the Subsidy	Maximum Number of Rest Hours Paid for By Subsidy ³
New York	No maximum	NA	Yes, 3 hours daily ⁴⁶	Yes, 8 hours daily
North Carolina	No maximum	NA	Yes, no explicit maximum/at caseworker's discretion	Yes, no explicit maximum/at caseworker's discretion
North Dakota	No maximum	NA	Yes, other amount ⁴⁷	Yes, 6 hours daily
Ohio	No maximum	NA	Yes, 4 hours daily ⁴⁸	Yes, 8 hours daily
Oklahoma	No maximum	NA	Yes, no explicit maximum/at caseworker's discretion ⁴⁹	Yes, 8 hours daily if the subsidy is not needed during work hours ⁵⁰
Oregon	323 per month	No difference	Yes, other amount ⁵¹	Yes, 5 hours daily ⁵²
Pennsylvania	No maximum	NA	Yes, no explicit maximum/at caseworker's discretion	Yes, no explicit maximum/at caseworker's discretion ⁵³
Rhode Island	No maximum	NA	Yes, 1 hour daily ³¹	--- ¹
South Carolina	No maximum	NA	Yes, 1 hour daily ³¹	Yes, 8 hours daily
South Dakota	210 per month	No difference	Yes, no explicit maximum/at caseworker's discretion ⁵⁴	Yes, 8 hours daily ⁵⁵
Tennessee	No maximum	NA	Yes, no explicit maximum/at caseworker's discretion	No
Texas	18 per day	No difference	No ⁵⁶	No ⁵⁶
Utah	172 per month	No difference	Yes, no explicit maximum/at caseworker's discretion ⁵⁷	Yes, 6 hours daily if the subsidy is not needed during work hours ⁵⁸
Vermont	No maximum	NA	Yes, 2 hours daily	Yes, 8 hours daily
Virginia	60 per week ⁵⁹	No difference	Yes, no explicit maximum/at caseworker's discretion ⁶⁰	Yes, no explicit maximum/at caseworker's discretion ⁶¹
Washington	16 per day	No difference	Yes, no explicit maximum/at caseworker's discretion	Yes, 8 hours daily
West Virginia	No maximum	NA	Yes, no explicit maximum/at caseworker's discretion	Yes, 8 hours daily ⁶²
Wisconsin	75 per week	No difference	Yes, no explicit maximum/at caseworker's discretion	Yes, other amount ⁶³
Wyoming	16 per day ⁶⁴	No difference	Yes, 1 hour daily	No

Table 23. Maximum Hours Approved for Child Care Subsidies, 2012

State	Maximum Hours of Care Paid for By Subsidy	If Maximum Hours of Care Policy Differs for Part-Time Workers ²	If Travel Hours are Paid By the Subsidy	Maximum Number of Rest Hours Paid for By Subsidy ³
American Samoa	No maximum	NA	--- ¹	--- ¹
Guam	No maximum	NA	Yes, 1 hour daily	No
No Mariana Islands	9 per day	No difference	Yes, 1 hour daily	Yes, 9 hours daily if the subsidy is not needed during work hours
Puerto Rico	No maximum	NA	Yes, 3 hours daily	--- ¹
Virgin Islands	No maximum	NA	No	No

Source: CCDF Policies Database October 1, 2012 Data

¹ Information not found in state's manual.

² The column captures the maximum amount of care that may be authorized for parents working part time. It does not capture the general definition of part-time care.

³ Rest hours apply for individuals' with work shifts that cross over midnight. In this case, states may choose to pay for subsidized care while the parent rests during the day.

⁴ Travel time is allowed for up to a half-hour before and a half-hour after the eligible activity. However, if the parent uses public transportation, or travels more than 30 miles from the provider, he or she may seek authorization to increase the allowed travel time up to one hour before and one hour after the activity.

⁵ Sleep time is limited to eight hours before or after the parent works a night shift that requires a minimum of six work and travel hours between 8pm and 6am.

⁶ If more care is needed, clients must submit documentation and request a specific number of additional hours per day.

⁷ Travel hours cannot exceed half of the weekly hours authorized for employment, up to a maximum of four hours per day.

⁸ If the parent is employed any time between 10 pm and 6 am, maximum rest hours cannot exceed the number of hours authorized for employment and travel between those hours.

⁹ Travel time is authorized at the caseworker's discretion. Counties may opt to set a specific policy regarding the maximum amount of travel time allowed.

¹⁰ The policy is determined at the county level.

¹¹ There is also a maximum of 12 hours per day and of 65 hours per week.

¹² Travel time is limited to a maximum of one hour per day unless the parent verifies that additional time is needed.

¹³ Care is not authorized between 11pm and 7am if the child care provider is a person who resides in the same home as the child, unless the child is less than three years of age or has special needs.

¹⁴ Travel time may be approved for 1.5 hours each way.

- ¹⁵ Travel time is authorized in accordance with the amount of care the family qualifies for, full-time, two-thirds care, one-third care, or casual care.
- ¹⁶ Care is authorized for 12 hours per month, or three hours per week.
- ¹⁷ The amount of travel time must be reasonable based on the parent's situation and is determined on a case-by-case basis.
- ¹⁸ If a parent works five hours or more during the third shift (defined as the hours from 11pm to 7am), care may be authorized during daytime hours in order to sleep if all other income and eligibility requirements are met and the child for whom care is requested is age six or under or during days when a school age child is not attending school. Care can be authorized only on days that follow an overnight work schedule.
- ¹⁹ Care is paid for as needed to cover actual travel time to and from activity that confers need for child care.
- ²⁰ The amount of rest hours authorized must correspond with the family's documented service need.
- ²¹ Families may be approved for two half-day units of service, up to five hours each, in a 24-hour period. With supervisory approval, up to four half-day units of service, up to five hours each, may be approved in a 24-hour period.
- ²² Care is authorized for travel time between the child care provider's location and the parent's place of employment or school. There is no limit on travel time.
- ²³ Care for sleep during daytime hours may be authorized if the parent works at least six hours between 8pm and 6am and there is no other parent in the home or the other parent meets the need for service during the daytime hours. If the parent requests care for both work time and sleep time one half-day unit may be approved. If the parent requests care only for the sleep time, two half-day units may be approved.
- ²⁴ A maximum of 215 hours per month is the suggested guideline, but additional hours may be approved on a case-by-case basis with approval from the caseworker's supervisor.
- ²⁵ The state suggests a maximum of 30 minutes of travel time each way. More time may be approved on a case-by-case basis.
- ²⁶ Sleep time may be approved when the majority of hours are worked between 9 pm and 7 am. The state recommends a maximum of 6 hours of sleep time per day be approved.
- ²⁷ Care is authorized for non-work hours as long as the amount of child care assistance does not exceed the amount of assistance that would be granted during employment. There is no maximum for the number of rest hours, but care is generally not approved for more than 8 hours per day.
- ²⁸ Exceptions can be approved on a case-by-case basis by the department supervisor.
- ²⁹ The amount of related travel time authorized is based on the caseworker's discretion. Total enrollment hours cannot exceed 50 hours per week. Exceptions can be made to accommodate the applicant's work, education, or job training schedule.
- ³⁰ Children cannot remain in care longer than 18 hours within a 24-hour period.
- ³¹ More time may be authorized if the client provides documentation of need for more travel time.
- ³² Before travel time may be added to an applicant's service need, the applicant must establish a minimum of at least 20 hours in an approved activity. For the purposes of establishing the minimum 20 hours of service need, the travel time is not an approved activity. Up to five hours each week may be authorized for travel time.
- ³³ The maximum number of hours of care that can be authorized is 80 hours biweekly per child.

- ³⁴ The maximum number of hours of care allowed is 120 per child every two weeks. The maximum payment to an individual unlicensed provider is 50 hours per week. The maximum payment to an individual licensed provider is the maximum weekly rate.
- ³⁵ Care is authorized for non-work hours as long as the amount of child care assistance does not exceed the amount of assistance that would be granted during employment.
- ³⁶ Care in excess of 24 hours must be due to the nature of the parents' work, education, or training.
- ³⁷ Travel time is covered for a maximum of 30 minutes of travel time each way.
- ³⁸ Travel time is authorized based on the reasonable need of the parent, but cannot exceed one hour each way, to and from work or other activity.
- ³⁹ Care may be authorized if the parent works any part of a shift that is between 10 pm and 6 am.
- ⁴⁰ Twenty-four hour care is paid as two full-time days.
- ⁴¹ The state has both a weekly limit and a daily limit. The daily limit is 18 hours of care and it must comply with the 60 hour weekly limit.
- ⁴² The amount of time approved for travel to and from work is decided on a case-by-case basis. Travel time may be approved for more than two hours per day when needed, if the caseworker determines the potential earnings would exceed the total cost of care.
- ⁴³ A child in care for more than 14 hours in a 24-hour period may be referred to CPS.
- ⁴⁴ Care is authorized for clients who work midnight shifts when there is no other parent or caretaker available during that period. Rest hours are only allowed for parents of non-school age children unless they are on summer or track break.
- ⁴⁵ Rest hours may be covered if the individual worked any four hours of the previous day between 10 pm and 6 am and the child would otherwise be without supervision.
- ⁴⁶ A reasonable amount of time is allowed for travel between the child care site and the work or activity site. A maximum of three hours of travel time is allowed for training activities.
- ⁴⁷ For all activities except searching for a job, an additional 25 percent of the caretakers' allowable weekly activity hours will be added to their hours to allow for travel time and lunch breaks.
- ⁴⁸ Travel time is paid for four hours round trip.
- ⁴⁹ The amount of travel time that is authorized depends on what is reasonable for the client.
- ⁵⁰ Night work hours are defined as the hours between 11 pm and 7 am. Care may be authorized for a maximum of eight hours plus regional travel time.
- ⁵¹ The system adds 25 percent to work hours to account for travel and meal time.
- ⁵² Care is authorized if the caretaker works an overnight shift and care is necessary for both work and sleep hours. This would ordinarily not apply during the school year for school age children.
- ⁵³ Care is authorized for sleep time when the work shift ends between 12 am and 9 am. The caseworker determines the amount of time approved based on the amount of time needed. There is no maximum for the number of rest hours that may be approved, but care is generally approved for either a full-time or part-time unit.

⁵⁴ Generally, one half hour each way can be allowed for travel time; however, there may be situations that require more or less travel time depending on the location of the provider and the applicant's place of employment.

⁵⁵ Child care for sleep time is limited to eight hours per day if the applicant works at least six hours between the hours of 6 pm and 8 am.

⁵⁶ Policies coded for the Gulf Coast Region.

⁵⁷ Additional time for travel may be included on a case-by-case basis when circumstances create a hardship for the client to complete approved activities. The distance must be at least one hour in each direction.

⁵⁸ Child care services may be authorized for the graveyard shift or during the day for sleep time, but not for both. The amount of care cannot exceed the number of actual work hours. In a two-parent household, the other parent has to be participating in an approved activity during the hours that sleep time is being authorized.

⁵⁹ If a client's employment requires him or her to work more than 60 hours some weeks, but the total amount of care for the month does not exceed 60 hours a week, payment will be made.

⁶⁰ Transportation time needed for parents to travel from the vendor to the site of their approved activity and from the activity to the vendor is included in determining the amount of care needed at the case worker's discretion.

⁶¹ Care can be authorized in situations where the parent works non-traditional hours and must sleep for some of the hours while the children are awake. The total number of hours covered cannot exceed that which would have been needed for work only.

⁶² Parents who work at night may be approved for a maximum of eight additional hours of sleep time. However, children cannot remain in care longer than 18 hours within a 24-hour period.

⁶³ When parents need care during rest time, care may be authorized for a maximum of 75 hours per week. This includes both rest and non-rest hours.

⁶⁴ Child care may be authorized for more than 16 hours if overnight travel is required for the parent to maintain or accept employment.

Table 24. Care During Breaks in Activities, 2012

State	If Care May be Approved for School Breaks for Parents who are Students ²	If Care May be Approved for Maternity/Paternity Leave ³
Alabama	No	No ⁴
Alaska	No ⁵	No
Arizona	No	No
Arkansas	Varies ⁶	Yes, 6 weeks
California	No	No ⁷
Colorado	Varies ⁸	Yes, 12 weeks ⁹
Connecticut	No	No
Delaware	No	No
DC	Varies ¹⁰	Yes, 12 weeks if job will be available upon return
Florida	Yes, 30 days	Yes, 60 days
Georgia	No ¹¹	No
Hawaii	Varies ¹²	Yes, 6 weeks if job will be available upon return
Idaho	Yes, 1 month if child will lose slot in child care program	No
Illinois	Yes, 30 days	Yes, 6 weeks if job will be available upon return ¹³
Indiana	No ¹⁴	Yes, 12 weeks if job will be available upon return
Iowa	No	No ¹⁵
Kansas	No ¹⁶	No
Kentucky	No ¹⁷	Yes, 6 weeks if job will be available upon return
Louisiana	No ¹⁸	No ¹⁸
Maine	Yes, paid for entire break ¹⁹	Yes, 2 weeks ²⁰
Maryland	Yes, 30 days	Yes, 30 days
Massachusetts	Yes, 6 weeks ²¹	Yes, 12 weeks
Michigan	No	No
Minnesota	Varies ²²	No
Mississippi	No	Yes, 6 weeks
Missouri	Varies ²³	Yes, amount not specified, if job will be available upon return
Montana	No ²⁴	No ²⁵
Nebraska	No	No
Nevada	No	No
New Hampshire	Varies ²⁶	Yes, 6 weeks
New Jersey	--- ¹	No ²⁷
New Mexico	No ²⁸	No
New York	Yes, paid for entire break ²⁹	No ³⁰
North Carolina	Varies ³¹	Yes, 8 weeks if job will be available upon return
North Dakota	Yes, 31 days ³²	No

State	If Care May be Approved for School Breaks for Parents who are Students ²	If Care May be Approved for Maternity/Paternity Leave ³
Ohio	No	No
Oklahoma	No	No
Oregon	No	No
Pennsylvania	Yes, 30 days	Yes, 12 weeks
Rhode Island	--- ¹	Yes, 21 days if job will be available upon return ³³
South Carolina	Varies ³⁴	Yes, amount not specified, if job will be available upon return
South Dakota	No	Yes, 30 days ³⁵
Tennessee	Varies ³⁶	Yes, 6 weeks
Texas	No	Yes, 60 days if job will be available upon return
Utah	No ³⁷	No ³⁷
Vermont	Yes, other amount ³⁸	Yes, 12 weeks ³⁹
Virginia	Yes, 1 month if child will lose slot in child care program ⁴⁰	No
Washington	No	No
West Virginia	Yes, 15 days ⁴¹	No ⁴²
Wisconsin	No	Yes, 6 weeks if job will be available upon return ⁴³
Wyoming	No	No
American Samoa	--- ¹	--- ¹
Guam	No ⁴⁴	No ⁴⁵
No Mariana Islands	No	Yes, 45 days
Puerto Rico	--- ¹	Yes, amount not specified ⁴⁶
Virgin Islands	Yes, 60 days	Yes, 60 days

Source: CCDF Policies Database October 1, 2012 Data

¹ Information not found in state's manual.

² School breaks include summer, holidays, or other periods of time when classes are not in session for parents who are students. This variable does not capture school breaks for the family's children.

³ Maternity and paternity leave apply to working parents or guardians who are temporarily not working due to the birth of a child.

⁴ Parents may request to suspend services for up to 90 days so that they do not need to reapply for services.

⁵ Care is only approved when parents are participating in eligible activities.

⁶ Full-time students are eligible for care during all school breaks, except summer if the student is not attending school.

⁷ Local agencies may, but are not required to, authorize a limited term service leave of up to 16 weeks for maternity leave during which subsidies are not authorized, but the family is not disenrolled from the subsidy program.

⁸ Colorado allows for child care during school breaks if the child care arrangements would otherwise be lost, but the actual policy is determined at the county level.

⁹ Paternity leave is not covered.

¹⁰ Young parents under age 26 living with a parent, guardian, or relative and who are in high school or GED activities can receive care during the summer if it is already provided during the school year, regardless of school and work status.

¹¹ Care may be authorized during school breaks if the parent is working 30 hours per week during the break.

¹² Care during school breaks may or may not be authorized depending on the amount of care the family qualifies for, full-time, two-thirds care, one-third care, or casual care.

¹³ Child care services are approved for the length of the maternity leave or six weeks, whichever is sooner.

¹⁴ Care may be classified under "approved leave" during breaks in school for up to four weeks, provided the applicant plans to return to school at the end of the break. If the parent is a junior or senior high school parent, approved leave is possible for up to 12 weeks. Services are not paid for periods of "approved leave."

¹⁵ Child care assistance is generally not provided for maternity leave. Care may be approved for a mother who is on maternity leave if the mother meets the criteria for care under the medical incapacity policy. If the family was eligible based on the mother's work or training need, but the mother is temporarily absent from the home due to hospitalization or is present but unable to work, attend training, or care for her children, care may be paid for a limited period of time.

¹⁶ Care is authorized for summer breaks for a teen parent if he or she is employed and plans to return to school in the fall.

¹⁷ Care may be approved during school breaks for time a teen parent who is working. The teen parent is not required to meet the minimum work hour requirement.

¹⁸ If the parent is temporarily not enrolled in a job training or education program, the household remains eligible, but no payments are made for up to six weeks, if the individual is scheduled to return to the same employment, educational, or job training program within six weeks.

¹⁹ A student must be enrolled for benefits to continue.

²⁰ The enrollment period includes 12 weeks of maternity leave, but payments are limited to only 2 weeks during the 12 weeks of maternity leave.

²¹ Care can be approved for a maximum of 6 weeks when the parent attended the previous semester of school and is enrolled for the next semester.

²² Care during breaks is intended for full-time students attending a full-time education or training program. The student must be expected to return to school full time after breaks. If education is the only authorized activity, then care will be suspended for breaks lasting longer than 15 days. However, if the break lasts longer than 15 days and there is another authorized activity, the number of hours authorized for care will be reduced.

²³ For winter and spring breaks, care is authorized if the parent will be returning to school. Care is only authorized for summer breaks if there is a continued need for service, such as employment or school attendance.

²⁴ Teen parents may maintain eligibility for child care if they meet the work requirement during summer break.

²⁵ Policies specific to the parent's situation may apply and allow for care to be authorized (e.g., a medical emergency).

²⁶ Payments will only be made if the child would lose his or her slot in the child care program, and payments cannot exceed 30 days in a 12-month period. Care is not authorized during summer break.

²⁷ A child care slot can be held for 60 to 90 days during a leave of absence, but subsidy payments will not be made during that time.

²⁸ The family may request a temporary suspension of benefits, not to exceed three months, without losing eligibility.

²⁹ If a TANF recipient is going to return to an approved or required activity within two weeks, then child care benefits continue for the two-week period. If the recipient does not return within two weeks but will return within one month of the break, child care benefits will continue if child care placement would be lost if the benefits were not continued. There is no maximum number of breaks per year.

³⁰ Districts may elect to pay for child care services if a parent or caretaker is physically or mentally incapacitated. A district may choose to include a mother who is physically incapacitated after the birth of her child under the definition of incapacitated.

³¹ Temporary breaks are generally covered if the parent will return to an approved activity. Extended breaks, such as summer breaks, are generally not covered, but the local purchasing agency may choose to pay for child care for an extended period of time or discontinue payment during the extended period and reinstate payment when the parent returns to the activity.

³² Care is paid for a caretaker who has a school break of less than a full calendar month if the provider charges for time during the break.

³³ Care may be authorized during approved leave from work for a maximum of 21 days. Absences beyond 21 days must be reported and may affect eligibility.

³⁴ Care is approved for the entire break for temporary breaks. Care is not authorized for summer breaks.

³⁵ Thirty days of continued assistance can be allowed for maternity leave beginning the date of the birth of the baby.

³⁶ Teen parents must be in a summer program to receive care during the summer months. They may work, attend full-time summer school, or volunteer for self-improvement or training programs. Teen parents who are enrolled in and attending high school are not subject to work or summer school requirements.

³⁷ If child care services were provided at the beginning of the month, the parent is eligible for child care for the duration of the month.

³⁸ School breaks are paid for up to two pay periods.

³⁹ Reasonable time off is allowed to care for dependent children in instances such as death, illness, birth, or adoption. The parent must have received full-time child care services for at least a year.

⁴⁰ Care can be authorized for up to one month during a break in employment or training if a subsequent activity is scheduled to begin within that period and if child care arrangements would otherwise be lost. Child care payments may be suspended for up to three months if a temporary interruption in child care is necessary and the interruption can be resolved within three months.

⁴¹ If a school break exceeds 45 days, the client must select another activity in order to continue receiving child care assistance. The agency will only pay for care for 15 days of the school break period.

⁴² Care is not authorized for maternal or paternal leave, but it can be authorized for physician-ordered bed rest.

⁴³ Authorization for care is based on enrollment with a particular provider. Care is not authorized for attendance-based care.

⁴⁴ Care is temporarily suspended during the school break.

⁴⁵ Care is temporarily suspended during maternity or paternity leave.

⁴⁶ Care is authorized for maternal leave that is in accordance with the employer's policies.

Table 25. Priority Policies for Different Groups, 2012¹

State	Children with Special Needs	Families with Very Low Income	Definition of Very Low Income if Families are Given Priority	TANF Recipients	Families Transitioning Off TANF	Families At Risk of Becoming Dependent on TANF	Children Under CPS
Alabama	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	NA	Varies ²	Subsidy guaranteed	Same priority as other CCDF-eligible children	Subsidy guaranteed
Alaska	Subsidy guaranteed	Priority over other children, subsidy not guaranteed ³	Income equal to or less than 55 percent of the State Median Income standard	Same priority as other CCDF-eligible children	Subsidy guaranteed ⁴	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children
Arizona	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed ⁵	Income at or below 100 percent of the Federal Poverty Guidelines	Subsidy guaranteed	Subsidy guaranteed	Same priority as other CCDF-eligible children	Subsidy guaranteed
Arkansas	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed ⁶	Income at or below 40 percent of the State Median Income standard	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Subsidy guaranteed
California	Varies ⁷	Priority over other children, subsidy not guaranteed ⁸	Income at or below 40 percent of the State Median Income standard ⁹	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children ⁹	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed ¹⁰
Colorado	Priority over other children, subsidy not guaranteed	Varies ¹¹	Income below 130 percent of the Federal Poverty Guidelines	Varies ¹²	Varies ¹²	Varies ¹²	NA ¹³
Connecticut	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed	Income below 50 percent of the State Median Income	Priority over other children, subsidy not guaranteed ¹⁴	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children

Table 25. Priority Policies for Different Groups, 2012¹

State	Children with Special Needs	Families with Very Low Income	Definition of Very Low Income if Families are Given Priority	TANF Recipients	Families Transitioning Off TANF	Families At Risk of Becoming Dependent on TANF	Children Under CPS
Delaware	Subsidy guaranteed	Subsidy guaranteed	Income below 40 percent of the Federal Poverty Guidelines prior to or after allowable deductions	Subsidy guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Subsidy guaranteed
DC	Subsidy guaranteed	Same priority as other CCDF-eligible children	NA	Subsidy guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Subsidy guaranteed
Florida	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	NA	Subsidy guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Varies ¹⁵
Georgia	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	NA	Varies ¹⁶	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed
Hawaii	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed ¹⁷	Income below 100 percent of the Federal Poverty Guidelines	Varies ¹⁸	Priority over other children, subsidy not guaranteed ¹⁷	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed ¹⁷
Idaho	NA ¹⁹	NA ¹⁹	NA ¹⁹	NA ¹⁹	NA ¹⁹	NA ¹⁹	NA ¹⁹
Illinois	NA ¹⁹	NA ¹⁹	NA ¹⁹	NA ¹⁹	NA ¹⁹	NA ¹⁹	NA ¹³
Indiana	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	The lowest income level where the family is at risk of becoming dependent on public assistance	Varies ²⁰	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed

Table 25. Priority Policies for Different Groups, 2012¹

State	Children with Special Needs	Families with Very Low Income	Definition of Very Low Income if Families are Given Priority	TANF Recipients	Families Transitioning Off TANF	Families At Risk of Becoming Dependent on TANF	Children Under CPS
Iowa	Varies ²¹	Priority over other children, subsidy not guaranteed	Income at or below 100 percent of the Federal Poverty Guidelines when the parent is working 28 hours per week, under age 21 participating in an education program that will lead to a high school diploma or its equivalent, or under age 21 and participating in an approved training or education program	Subsidy guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Subsidy guaranteed
Kansas	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	NA	Varies ²²	Subsidy guaranteed	Same priority as other CCDF-eligible children	Subsidy guaranteed
Kentucky	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	NA	Priority over other children, subsidy not guaranteed ²³	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed
Louisiana	Subsidy guaranteed	Same priority as other CCDF-eligible children	NA	Subsidy guaranteed	Subsidy guaranteed ²⁴	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children
Maine	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	Gross income at or below 100 percent of the Federal Poverty Guidelines	Subsidy guaranteed	Subsidy guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children

Table 25. Priority Policies for Different Groups, 2012¹

State	Children with Special Needs	Families with Very Low Income	Definition of Very Low Income if Families are Given Priority	TANF Recipients	Families Transitioning Off TANF	Families At Risk of Becoming Dependent on TANF	Children Under CPS
Maryland	Varies ²⁵	Priority over other children, subsidy not guaranteed	Income less than or equal to the minimum amount listed for the applicant's family size in the state's fee schedule	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	NA ¹³
Massachusetts	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	NA	Subsidy guaranteed ²⁶	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	Subsidy guaranteed ²⁷
Michigan	NA ¹⁹	NA ¹⁹	NA ¹⁹	NA ¹⁹	NA ¹⁹	NA ¹⁹	NA ¹⁹
Minnesota	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	NA	Subsidy guaranteed ²⁸	Subsidy guaranteed	Same priority as other CCDF-eligible children	NA ¹³
Mississippi	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	Income at or below 50 percent of the State Median Income	Subsidy guaranteed	Subsidy guaranteed	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed
Missouri	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	Income at or below 15 percent of the State Median Income	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed
Montana	Subsidy guaranteed	Priority over other children, subsidy not guaranteed	Lower income, relative to family size	Subsidy guaranteed	Priority over other children, subsidy not guaranteed ²⁹	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children
Nebraska	NA ¹⁹	NA ¹⁹	NA ¹⁹	NA ¹⁹	NA ¹⁹	NA ¹⁹	NA ¹⁹

Table 25. Priority Policies for Different Groups, 2012¹

State	Children with Special Needs	Families with Very Low Income	Definition of Very Low Income if Families are Given Priority	TANF Recipients	Families Transitioning Off TANF	Families At Risk of Becoming Dependent on TANF	Children Under CPS
Nevada	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	Income at or below 130 percent of the Federal Poverty Guidelines where the family is considered at-risk	Subsidy guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children
New Hampshire	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed	Income at or below 100 percent of the Federal Poverty Guidelines	Subsidy guaranteed	Subsidy guaranteed ³⁰	Same priority as other CCDF-eligible children	Subsidy guaranteed
New Jersey	Priority over other children, subsidy not guaranteed ³¹	Priority over other children, subsidy not guaranteed ³¹	Income at or below 150 percent of the Federal Poverty Guidelines	Subsidy guaranteed ³¹	Subsidy guaranteed ³¹	Priority over other children, subsidy not guaranteed ³¹	Subsidy guaranteed
New Mexico	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	Income at or below 100 percent of the Federal Poverty Guidelines	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	Subsidy guaranteed
New York	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	Districts set an income level at or below 200 percent of the state income standard which defines the upper income level for families with very low income	Subsidy guaranteed ³²	Subsidy guaranteed	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed

Table 25. Priority Policies for Different Groups, 2012¹

State	Children with Special Needs	Families with Very Low Income	Definition of Very Low Income if Families are Given Priority	TANF Recipients	Families Transitioning Off TANF	Families At Risk of Becoming Dependent on TANF	Children Under CPS
North Carolina	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	NA	Subsidy guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Subsidy guaranteed
North Dakota	NA ¹⁹	NA ¹⁹	NA ¹⁹	NA ¹⁹	NA ¹⁹	NA ¹⁹	NA ¹³
Ohio	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	NA	Subsidy guaranteed	Subsidy guaranteed	Same priority as other CCDF-eligible children	Subsidy guaranteed
Oklahoma	NA ¹⁹	NA ¹⁹	NA ¹⁹	NA ¹⁹	NA ¹⁹	NA ¹⁹	NA ¹⁹
Oregon	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	NA	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	NA ¹³
Pennsylvania	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	NA	Varies ³³	Subsidy guaranteed ³⁴	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children
Rhode Island	NA ¹⁹	NA ¹⁹	NA ¹⁹	NA ¹⁹	NA ¹⁹	NA ¹⁹	NA ¹⁹
South Carolina	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed	Income below 150 percent of the Federal Poverty Guidelines	Subsidy guaranteed	Subsidy guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children
South Dakota	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	Income at or below 100 percent of the Federal Poverty Guidelines	Priority over other children, subsidy not guaranteed ³⁵			
Tennessee	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	NA	Subsidy guaranteed	Subsidy guaranteed	Same priority as other CCDF-eligible children	Subsidy guaranteed
Texas	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	NA	Varies ³⁶	Subsidy guaranteed	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed

Table 25. Priority Policies for Different Groups, 2012¹

State	Children with Special Needs	Families with Very Low Income	Definition of Very Low Income if Families are Given Priority	TANF Recipients	Families Transitioning Off TANF	Families At Risk of Becoming Dependent on TANF	Children Under CPS
Utah	NA ¹⁹	NA ¹⁹	NA ¹⁹	NA ¹⁹	NA ¹⁹	NA ¹⁹	NA ¹⁹
Vermont	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed ³⁷	Income at or below 100 percent of the Federal Poverty Guidelines	Subsidy guaranteed	Subsidy guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children
Virginia	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	NA	Subsidy guaranteed	Subsidy guaranteed	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed ³⁸
Washington	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	NA	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	NA ¹³
West Virginia	NA ¹⁹	NA ¹⁹	NA ¹⁹	NA ¹⁹	NA ¹⁹	NA ¹⁹	NA ¹⁹
Wisconsin	NA ¹⁹	NA ¹⁹	NA ¹⁹	NA ¹⁹	NA ¹⁹	NA ¹⁹	NA ¹³
Wyoming	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	Income at or below 150 percent of the Federal Poverty Guidelines	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	NA ¹³
American Samoa	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed ³⁹	Income at or below 50 percent of the State Median Income	NA ⁴⁰	NA ⁴⁰	NA ⁴⁰	Priority over other children, subsidy not guaranteed
Guam	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	Income at or below 100 percent of the Federal Poverty Guidelines	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children
No Mariana Islands	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	Income at or below the 85 percent of the State Median Income guideline	NA ⁴⁰	NA ⁴⁰	NA ⁴⁰	Same priority as other CCDF-eligible children

State	Children with Special Needs	Families with Very Low Income	Definition of Very Low Income if Families are Given Priority	TANF Recipients	Families Transitioning Off TANF	Families At Risk of Becoming Dependent on TANF	Children Under CPS
Puerto Rico	Subsidy guaranteed	Priority over other children, subsidy not guaranteed	Income below 50 percent of the State Median Income	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed
Virgin Islands	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	Income below 85 percent of the State Median Income	Subsidy guaranteed	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	Subsidy guaranteed

Source: CCDF Policies Database October 1, 2012 Data

¹ Written policies for prioritizing groups when funds are limited are captured. All groups may be served when funds are not limited. These policies are often used when a waiting list is in place. An entry of "Priority over other children, subsidy not guaranteed" indicates priority is given for the group of children, but when funds are limited the children may not be guaranteed a subsidy.

² The subsidy is guaranteed if the family is enrolled in the TANF work program and a referral is sent by the family's case worker.

³ Parents who are lowest on the income scale and working or attending school receive higher priority.

⁴ A child whose parents left TANF within the last 12 months because of employment is exempt from a wait list, if established.

⁵ There are varying priority levels depending on income.

⁶ Low-income families who qualify for copayment exemptions are given higher priority.

⁷ Policies coded for Non-CalWORKs Alternative Payment Program. If two or more families have the same income rank, families with children with exceptional needs are admitted first.

⁸ Policies coded for Non-CalWORKs Alternative Payment Program. Families from the lowest income ranks are admitted into the program first.

⁹ Policies coded for Non-CalWORKs Alternative Payment Program.

¹⁰ Policies coded for Non-CalWORKs Alternative Payment Program. First priority is given to children receiving child protective services or at risk of abuse, neglect, or exploitation.

¹¹ Families with very low income are given priority. Whether or not the subsidy is guaranteed may vary depending on whether enrollment at the county level is suspended or partially suspended.

- ¹² If a county chooses to partially suspend enrollment, the county must develop policies for which groups of applicants are given priority. Statewide, priority is given to very low-income applicants with income below 130 percent of the Federal Poverty Guidelines and children of teen parents. The county may assign additional priority groups.
- ¹³ Child protective services child care is not provided under the state's primary child care subsidy program.
- ¹⁴ This applies to parents receiving TANF who are employed.
- ¹⁵ Priority is given for children under school age only.
- ¹⁶ Applicants participating in TANF job search or work activities are given priority.
- ¹⁷ Families with the least amount of monthly income are given first priority within the priority group.
- ¹⁸ If the family receives TANF and is considered very low-income with income below 100 percent of the Federal Poverty Guidelines, the family falls into priority group three and is given priority over other families.
- ¹⁹ All CCDF-eligible children receive the same priority.
- ²⁰ The subsidy is guaranteed for families in the TANF work program. Families receiving TANF but not in the work program are prioritized but not guaranteed a subsidy. If CCDF program funding is not available to serve an eligible TANF work program family, other families must be terminated to release funding. Families with higher incomes who have received CCDF assistance for a longer period of time are the first to be terminated when funds are unavailable for families with higher priority.
- ²¹ Children with special needs are given priority if the family's income is below 200 percent of the poverty guidelines and the parents are working at least 28 hours per week.
- ²² Families participating in the TANF work program and receiving TANF or SNAP benefits are provided child care benefits without being placed on a waiting list.
- ²³ Applicants are given priority if they are working or participating in work preparation activities.
- ²⁴ Families who lose TANF eligibility due to increased income are given priority.
- ²⁵ Primary consideration within each priority group is given to children with special needs.
- ²⁶ If families have an authorization with the department that administers TANF, they are given immediate access to child care without having to be placed on a waiting list.
- ²⁷ The state's department for children and families may authorize care on a case-by-case basis for families with active protective needs documented in a supported report of abuse or neglect within the previous 12 months or when there is a determination of need to begin or continue supportive child care at a supervisory progress review.
- ²⁸ In addition to TANF cash assistance, families in the four-month TANF work program can receive care for those four months.
- ²⁹ When a family transitions from TANF cash assistance and receives a TANF work support payment, it is still considered a TANF family until the end of the month in which the work support payment was received.
- ³⁰ Children are given priority if TANF assistance ended within the last 90 days.

- ³¹ Priority for subsidies is ranked according to three income-based tiers, A, B, and C. Tier A is given first priority and consists of families with income at or below 150 percent of the Federal Poverty Guidelines, followed by Tier B for families with income from 151 to 175 percent of the Federal Poverty Guidelines, and finally, Tier C for families with income from 176 to 200 percent of the Federal Poverty Guidelines. Priority is given according to tier and then to each of the priority categories within each tier.
- ³² State policy guarantees subsidized care for TANF families participating in work activities, families who are eligible for public assistance and choose to receive child care assistance in lieu of public assistance, and families transitioning off of TANF.
- ³³ Families participating in TANF employment and training activities are guaranteed subsidies.
- ³⁴ The subsidy is guaranteed if the family is applying within 183 days of transitioning off of TANF.
- ³⁵ The child must be under court supervision.
- ³⁶ Families enrolled in the TANF work program are automatically eligible.
- ³⁷ Very low income families are eligible for 90 to 100 percent of the child care financial assistance rate on the sliding fee scale.
- ³⁸ The priority for children in protective services also includes children in foster care prevention.
- ³⁹ Within the very low-income priority group, defined as families with income at or below 50 percent of the state median income, single-parent households are given first priority and two-parent households are given second priority.
- ⁴⁰ This territory or outlying area does not have a TANF program.

Table 26. Priority Policies for Different Groups (continued), 2012¹

State	Children in Foster Care	Children in Head Start	Children in Pre-K	Homeless Families	Teen Parents	Teen Parents in School	Military Families
Alabama	Subsidy guaranteed ²	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Subsidy guaranteed	Same priority as other CCDF-eligible children
Alaska	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Subsidy guaranteed	Same priority as other CCDF-eligible children
Arizona	Subsidy guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children
Arkansas	Subsidy guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children
California	Priority over other children, subsidy not guaranteed ³	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children
Colorado	NA ⁴	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Varies ⁵	Varies ⁵	Same priority as other CCDF-eligible children
Connecticut	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed ⁶	Same priority as other CCDF-eligible children
Delaware	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Subsidy guaranteed ⁷	Same priority as other CCDF-eligible children	Subsidy guaranteed ⁸	Same priority as other CCDF-eligible children
DC	Subsidy guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Subsidy guaranteed ⁹	Same priority as other CCDF-eligible children
Florida	Varies ¹⁰	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children

Table 26. Priority Policies for Different Groups (continued), 2012 ¹

State	Children in Foster Care	Children in Head Start	Children in Pre-K	Homeless Families	Teen Parents	Teen Parents in School	Military Families
Georgia	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children			
Hawaii	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Varies ¹¹	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children
Idaho	NA ¹²	NA ¹²	NA ¹²	NA ¹²	NA ¹²	NA ¹²	NA ¹²
Illinois	NA ⁴	NA ¹²	NA ¹²				
Indiana	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children
Iowa	Same priority as other CCDF-eligible children ¹³	Same priority as other CCDF-eligible children	Varies ¹⁴	Same priority as other CCDF-eligible children			
Kansas	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children
Kentucky	NA ⁴	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Varies ¹⁵	Varies ¹⁵	Same priority as other CCDF-eligible children
Louisiana	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children
Maine	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children
Maryland	NA ⁴	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children				

Table 26. Priority Policies for Different Groups (continued), 2012¹

State	Children in Foster Care	Children in Head Start	Children in Pre-K	Homeless Families	Teen Parents	Teen Parents in School	Military Families
Massachusetts	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children
Michigan	NA ¹²	NA ¹²	NA ¹²	NA ¹²	NA ¹²	NA ¹²	NA ¹²
Minnesota	NA ⁴	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed ¹⁶	Priority over other children, subsidy not guaranteed
Mississippi	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Varies ¹⁷	Varies ¹⁷	Priority over other children, subsidy not guaranteed ¹⁸
Missouri	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children
Montana	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children
Nebraska	NA ¹²	NA ¹²	NA ¹²	NA ¹²	NA ¹²	NA ¹²	NA ¹²
Nevada	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children
New Hampshire	Subsidy guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children
New Jersey	Subsidy guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed ¹⁹	Priority over other children, subsidy not guaranteed ¹⁹	Priority over other children, subsidy not guaranteed ¹⁹	Same priority as other CCDF-eligible children

Table 26. Priority Policies for Different Groups (continued), 2012¹

State	Children in Foster Care	Children in Head Start	Children in Pre-K	Homeless Families	Teen Parents	Teen Parents in School	Military Families
New Mexico	Subsidy guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children
New York	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children
North Carolina	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children ²⁰	Same priority as other CCDF-eligible children ²¹	Same priority as other CCDF-eligible children ²¹	Priority over other children, subsidy not guaranteed ²¹	Same priority as other CCDF-eligible children ²¹
North Dakota	NA ⁴	NA ¹²	NA ¹²	NA ¹²	NA ¹²	NA ¹²	NA ¹²
Ohio	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children
Oklahoma	NA ¹²	NA ¹²	NA ¹²	NA ¹²	NA ¹²	NA ¹²	NA ¹²
Oregon	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children
Pennsylvania	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children
Rhode Island	NA ¹²	NA ¹²	NA ¹²	NA ¹²	NA ¹²	NA ¹²	NA ¹²
South Carolina	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children			
South Dakota	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children
Tennessee	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children

Table 26. Priority Policies for Different Groups (continued), 2012¹

State	Children in Foster Care	Children in Head Start	Children in Pre-K	Homeless Families	Teen Parents	Teen Parents in School	Military Families
Texas	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed
Utah	NA ¹²	NA ¹²	NA ¹²	NA ¹²	NA ¹²	NA ¹²	NA ¹²
Vermont	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children
Virginia	NA ⁴	Subsidy guaranteed	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children
Washington	NA ⁴	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Varies ²²	Same priority as other CCDF-eligible children
West Virginia	NA ¹²	NA ¹²	NA ¹²	NA ¹²	NA ¹²	NA ¹²	NA ¹²
Wisconsin	NA ¹²	NA ¹²	NA ¹²	NA ¹²	NA ¹²	NA ¹²	NA ¹²
Wyoming	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children
American Samoa	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Varies ²³	Priority over other children, subsidy not guaranteed ²⁴	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children
Guam	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children
No Mariana Islands	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children

State	Children in Foster Care	Children in Head Start	Children in Pre-K	Homeless Families	Teen Parents	Teen Parents in School	Military Families
Puerto Rico	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed ²⁵	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children
Virgin Islands	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Subsidy guaranteed	Subsidy guaranteed	Same priority as other CCDF-eligible children

Source: CCDF Policies Database October 1, 2012 Data

¹ Written policies for prioritizing groups when funds are limited are captured. All groups may be served when funds are not limited. These policies are often used when a waiting list is in place. An entry of "Priority over other children, subsidy not guaranteed" indicates priority is given for the group of children, but when funds are limited the children may not be guaranteed a subsidy.

² If the department has legal custody of the child or the parent has signed a boarding home agreement, and the department provides a written referral, the foster care child is automatically eligible. Counties have local options for how to prioritize these families when they have a waiting list in place.

³ Policies coded for Non-CalWORKs Alternative Payment Program. Children in foster care are treated the same as children in child protective services and therefore receive first priority.

⁴ Foster child care is not provided under the state's primary child care subsidy program.

⁵ Families with teen parents are given priority. Whether or not the subsidy is guaranteed may vary depending on whether enrollment at the county level is suspended or partially suspended. If a county chooses to partially suspend enrollment, the county must develop policies for which groups of applicants are given priority. Statewide, priority is given to applicants below 130 percent of the Federal Poverty Guidelines and children of teen parents. The county may assign additional priority groups.

⁶ Priority applies to parents under the age of 20 who attend high school. All parents receiving cash assistance, including teen parents, are in the highest priority group.

⁷ Homeless families are provided care for up to three months or until they find suitable living arrangements.

⁸ Eligible families may be receiving SNAP benefits, but cannot be participating in SNAP E&T. Participants may be attending high school, adult basic education classes, or GED classes.

⁹ All parents under age 26 living with a parent, guardian, or relative and in high school or GED activities are included in this category.

¹⁰ Priority is for children under school age only.

¹¹ If the family is employed, homeless, and has income less than 100 percent of the Federal Poverty Guidelines, the family is given priority over other families.

¹² All CCDF-eligible children receive the same priority.

- ¹³ Only non-licensed relative foster families receive child care through the CCDF program.
- ¹⁴ Priority is given to minor parents working towards a high school diploma or its equivalent and secondly to minor parents who are participating in an approved training program if the family's income is below 100 percent of the Federal Poverty Guidelines.
- ¹⁵ If the teen parent is a TANF recipient, he or she is given priority over others and placed in priority group two.
- ¹⁶ Parents under age 18 are given priority over parents ages 18 to 20 within this group.
- ¹⁷ Priority varies based on the income level of the teen parent. Teen parents currently enrolled in high school full time with incomes less than 50 percent the state median income receive a priority number of six. Parents working the required 25 hours per week or enrolled in an approved education program and with income between 50 percent and 85 percent of the state median income receive a priority number of eight.
- ¹⁸ Children of parents deployed in the Mississippi National Guard or Reserve qualify for this priority status.
- ¹⁹ Priority for subsidies is ranked according to three income-based tiers, A, B, and C. Tier A is given first priority and consists of families with income at or below 150 percent of the Federal Poverty Guidelines, followed by Tier B for families with income from 151 to 175 percent of the Federal Poverty Guidelines, and finally, Tier C for families with income from 176 to 200 percent of the Federal Poverty Guidelines. Priority is given according to tier and then to each of the priority categories within each tier.
- ²⁰ Children in Pre-K are only eligible for wraparound care. Counties have local options for how to prioritize these families when they have a waiting list in place.
- ²¹ Counties have local options for how to prioritize these families when they have a waiting list in place.
- ²² Teen parents who are not living with a parent or guardian and who are full-time students in a high school with a school-sponsored on-site child care center are given priority.
- ²³ If the family is classified as child protective services due to homelessness resulting from a natural disaster, the family is given priority as long as funds are available.
- ²⁴ Families with a minor parent are considered to have special needs and given priority over other families.
- ²⁵ Families with unstable housing are given priority over other children.

Table 27. Waiting List Policies, 2012 ²

State	If the State Uses a Waiting List When Needed	Geographic Coverage of the Waiting List	How Often the Waiting List is Reviewed for Eligibility	If Applicants Must be Notified of Their Status on the Waiting List ³
Alabama	Yes	Sub-state area	Every 6 months	Yes ⁴
Alaska	Yes ⁵	Sub-state area	Every 1 month ⁶	No ⁶
Arizona	Yes	Statewide list	Every 12 months	No ⁷
Arkansas	Yes	Sub-state area	No explicit review	Yes
California	Yes ⁸	Sub-state area	No explicit review	No ⁹
Colorado	Yes ¹⁰	Sub-state area	No explicit review	Varies ¹¹
Connecticut	Yes	Statewide list	No explicit review	No
Delaware	Yes ¹²	Statewide list	No explicit review	No ¹³
DC	Yes	Statewide list	No explicit review	No
Florida	Yes	Sub-state area	Every 6 months	No ¹⁴
Georgia	No	NA	NA	NA
Hawaii	No	NA	NA	NA
Idaho	No	NA	NA	NA
Illinois	No	NA	NA	NA
Indiana	Yes	Sub-state area	Every 90 days ¹⁵	No
Iowa	Yes	Sub-state area	No explicit review ¹⁶	No ¹⁷
Kansas	Yes	Statewide list	Every 6 months	No
Kentucky	No	NA	NA	NA
Louisiana	Yes	Sub-state area	No explicit review ¹⁸	No ¹⁷
Maine	Yes	Statewide list ¹⁹	Every 12 months	Yes
Maryland	Yes	Sub-state area	No explicit review	No
Massachusetts	Yes	Statewide list	Every 12 months	No
Michigan	No	NA	NA	NA
Minnesota	Yes	Sub-state area	Every 6 months	No
Mississippi	Yes	Statewide list	No explicit review ²⁰	No ²⁰
Missouri	Yes	Statewide list	Every 12 months	No
Montana	Yes ²¹	Statewide list	Every 10 days	No
Nebraska	No	NA	NA	NA
Nevada	Yes	Statewide list	No explicit review ¹³	No ¹⁷
New Hampshire	Yes	Statewide list	Every 6 months	No
New Jersey	Yes	Sub-state area	Every 6 months	Yes
New Mexico	Yes	Statewide list ²²	No explicit review	No
New York	Yes ²³	Sub-state area	No explicit review ²⁴	No ²⁴
North Carolina	Yes	Sub-state area	Every 12 months ²⁵	No
North Dakota	No	NA	NA	NA
Ohio	No	NA	NA	NA
Oklahoma	No	NA	NA	NA
Oregon	Yes ²⁶	Statewide list	No explicit review	No ¹⁷
Pennsylvania	Yes	Sub-state area	Every 6 months	Yes
Rhode Island	No	NA	NA	NA

Table 27. Waiting List Policies, 2012²

State	If the State Uses a Waiting List When Needed	Geographic Coverage of the Waiting List	How Often the Waiting List is Reviewed for Eligibility	If Applicants Must be Notified of Their Status on the Waiting List ³
South Carolina	No	NA	NA	NA
South Dakota	No	NA	NA	NA
Tennessee	No	NA	NA	NA
Texas	Yes	Sub-state area	No explicit review ²⁷	No
Utah	No	NA	NA	NA
Vermont	No	NA	NA	NA
Virginia	Yes	Sub-state area	Every 6 months ²⁸	Yes
Washington	Yes	Statewide list	No explicit review	No ²⁹
West Virginia	No	NA	NA	NA
Wisconsin	No	NA	NA	NA
Wyoming	No	NA	NA	NA
American Samoa	Yes	Statewide list	Every 1 month	Yes
Guam	Yes	Statewide list	No explicit review	No
No Mariana Islands	No	NA	NA	NA
Puerto Rico	Yes	Statewide list	--- ¹	--- ¹
Virgin Islands	Yes ³⁰	Sub-state area	Every 1 month	Yes

Source: CCDF Policies Database October 1, 2012 Data

¹ Information not found in state's manual.

² Written policies concerning the maintenance and review of a waiting list are captured. The policies reflect whether or not states use a waiting list when funds are not available to serve all families. A state may appear on this list as having waiting list policies, even if no family is currently on the waiting list.

³ The policy reflects whether the family must be notified of its status on the waiting list, such as whether it has been moved up the list, and not whether the family is notified when it is initially placed on the list or removed from the list.

⁴ Waiting list families must be reassessed for eligibility at six-month intervals, at which point a written notice is sent out.

⁵ If available funding is not sufficient to provide full program benefits for participating families, or to add new families, one or more of the following actions may be taken: terminate program benefits for participating families; limit the eligible activities required for program benefits; establish a wait list; reduce program benefits for all participating families by a percentage based on any shortfall in available funding; establish an alternative plan for the necessary or required actions.

⁶ Families must maintain contact on a monthly basis. Eligibility is redetermined for any families reporting changes. Failure to make monthly contact results in removal from the waiting list.

⁷ Clients are notified by mail when an opening is available in the child care program.

⁸ Child care agencies are required to maintain a waiting list. This requirement may be satisfied by participating in a county child care centralized eligibility list, where available.

⁹ Child care agencies are required to contact families in order of priority from the waiting list as vacancies occur.

¹⁰ Counties have the option to maintain a waiting list. If the county chooses to maintain a waiting list, it must develop waiting list policies and report those policies to the state agency.

¹¹ Counties must develop a plan for managing the waiting list, which may require families to check in periodically to keep their place on the waiting list.

- ¹² Families are placed on a waiting list either because funds are not available or because the agency cannot match the child's need with an available provider at that time.
- ¹³ Applicants are reviewed and notified when funds become available.
- ¹⁴ This policy may vary by coalition.
- ¹⁵ Caseworkers contact families to verify continuing need for the subsidy but not to verify income.
- ¹⁶ Once families are placed on the waiting list, they are notified when funds become available and must reapply to determine if they are still eligible for child care benefits.
- ¹⁷ Families are notified when they are placed on the waiting list and notified when funds become available.
- ¹⁸ When funds become available, applications less than 12 months old are reviewed and information such as earnings and activities must be verified. Applications 12 months or older than the date funds became available are reevaluated and the applicant must resubmit the application and all required verification.
- ¹⁹ The department and contracted slots agencies must each maintain a waiting list.
- ²⁰ Applicants are reviewed and notified when funds become available. Applicants on the waiting list not served prior to May 31st must reapply annually prior to September 1st.
- ²¹ A statewide waiting list is maintained for non-TANF families when the demand for non-TANF subsidies exceeds the resources.
- ²² Waiting lists are maintained by the four regional child care assistance offices and then combined to create a statewide list.
- ²³ Districts may maintain waiting lists when funds are not available for all eligible families.
- ²⁴ Policies coded for New York City.
- ²⁵ The list is reviewed every 12 months, though the agency may choose to do so more often.
- ²⁶ New applicants who received a partial or full month of refugee program benefits, state family pre-SSI or SSDI program benefits, or TANF program cash benefits from the state in at least one of the preceding three months, and those reapplying for employment-related day care without a break in benefits of two months, are not subject to the reservation list.
- ²⁷ Local agencies are required to establish a waitlist review policy.
- ²⁸ Local departments are required to update their waiting lists at least each April and October.
- ²⁹ Applicants are reviewed and notified when funds become available. Applicants may call in to request information concerning their status on the waiting list.
- ³⁰ A waiting list of 25 applicants is maintained. Any person who contacts the department after the waiting list is full is recorded in a telephone log book.

IV. FAMILY COPAYMENTS

Each State/Territory sets its own policies for family payments—often termed “copayments”—within the broader federal guidelines on sliding fee scales.¹ Copayment amounts often vary by family size, income, number of children in care, and a number of other factors.

Under the federal guidelines, States/Territories may choose to waive copayments in some cases.² Across the States/Territories, copayment exemptions vary based on the family’s income, participation in another assistance program, or other characteristics, such as the special needs of the child.

States/Territories also establish different policies for how copayments are administered. Copayment administration policies outline who the family must pay as well as what the family must pay, including policies concerning payments for days the child is absent from care.

States/Territories use a number of different methods to calculate copayments, including a flat dollar amount, percent of income, percent of the cost of care, and percent of the maximum rate. Some States/Territories use even more complicated measures, such as using a flat dollar amount for lower income families while using a percentage, capped at a predetermined amount, for higher income families. States/Territories may also set a minimum copayment for all families and may adjust copayments based on the number of children in care or the amount or type of care needed.

Copayment Exemptions (Tables 28 and 29)

Many programs exempt at least some families from paying any copayment. (In other words, these families receive child care for free.) One commonly-used exemption is to exempt all families living in poverty from having to pay a copayment; States/Territories that use this exemption may use the current poverty guideline or an earlier year’s guideline. States/Territories may also choose to exempt families receiving benefits or services from certain other programs. Table 28 shows whether each State/Territory exempts families from paying copayments when the family has income below the poverty level or when the family is associated with one of several benefits or services. Highlights for 2012 include:

¹ Under federal CCDF guidelines, States/Territories must establish and periodically revise a sliding fee scale based on income and family size; other factors may also be considered. (Code of Federal Regulations 45 CFR Parts 98 and 99: Child Care and Development Fund: Final Rule may be accessed via the U.S. Government Printing Office website (<http://www.gpo.gov/fdsys/pkg/CFR-2011-title45-vol1/pdf/CFR-2011-title45-vol1-part98.pdf>). Federal policy does not establish maximum copayments, but HHS/ACF documents have suggested that copayments of no more than 10 percent of family income would generally be considered affordable.

² As stated earlier, when State/Territory policies appear to conflict with federal guidelines, it is assumed that State/Territory dollars are used to fund those aspects of the program. Federal guidelines allow States/Territories to waive copayments for families with income at or below the Federal Poverty Guidelines or on a case-by-case basis for families in need of protective services. How States/Territories define families in need of protective services varies and may include such groups as families with teen parents or foster children.

- Seven States/Territories exempt all families with income below 100 percent of the Federal Poverty Guidelines from paying copayments, with the year of the poverty guidelines used by the States/Territories ranging from 2009 to 2012 (the current guidelines).
- Three States (Maryland, Michigan, and Oklahoma) exempt SSI recipients from paying copayments.
- Two States (Kansas and Virginia) allow for some type of exemption for participants in the SNAP Employment and Training program, while two States (Pennsylvania and Texas) fully exempt participants in the SNAP Employment and Training program from paying copayments.
- Eight States/Territories allow for some type of copayment exemption for families with teen parents. In some of these cases, the teen parent must be attending school.
- Two States/Territories (Missouri and Puerto Rico) have established some type of copayment exemption for families with children with special needs.
- More than half (32) of the States/Territories allow for some type of copayment exemption for families with protective services cases, while a little less than half (28) of the States/Territories allow for some type of copayment exemption for families with foster children. In the case of foster care and child protective services cases, it is common for States/Territories to allow for a copayment exemption on a case by case basis, as determined by the family's caseworker in the other program.

Table 29 focuses on the extent to which families associated in some way with the TANF program are exempt from paying copayments. Subsets of TANF families examined in the table include families receiving TANF who have versus do not have earned income, “child-only” TANF families (cases when the parents/guardians are not considered part of the assistance unit³), families transitioning out of the TANF program, families applying for TANF benefits, and families at risk of becoming dependent on TANF. Key findings from 2012 include:

- Less than half (19) of the States/Territories exempt all families currently receiving TANF from paying copayments.
- Eight States/Territories allow for some type of copayment exemption for families transitioning off of TANF, while 13 States/Territories have established copayment exemptions for families in the process of applying for TANF benefits.
- Two States (North Dakota and Vermont) have established copayment exemptions for families at risk of becoming dependent on TANF.

³ The TANF program excludes parents/guardians from the assistance unit for five reasons: when the child is living with non-parent relative caretakers (usually grandparents) and they are either not allowed to be in the assistance unit or they choose not to be included; when the parents are ineligible due to immigrant status (for instance the parents are undocumented immigrants but the children are citizens); when the parents receive SSI; when the parents have been excluded from the unit due to a sanction; and, in a small number of States, when the parents have been excluded from the unit after reaching a time limit.

Copayment Administration (Table 30)

Copayment policies regarding how and what families are expected to pay also vary across the States/Territories. Table 30 provides policies for who collects the copayment, whether families are expected to pay providers for any charges that exceed the maximum reimbursement rate that will be paid by the State/Territory, and what families are required to pay for absences, including days the child is out sick, days the family is on vacation, and days the provider is not open due to approved closings, such as national holidays. Highlights from 2012 include:

- All but three States/Territories (California, American Samoa, and the Northern Mariana Islands) require all copayments to be paid to the provider. American Samoa does not require families to make copayments.
- In all but 11 States/Territories, in cases when the family is using child care with a full cost in excess of the State's/Territory's established maximum rates, the family must always or sometimes pay the difference between the provider's charges and the State's/Territory's maximum reimbursement rate. In some States/Territories the parents may be asked to pay the difference only when required by the provider or only for certain types of providers. (Tables 34 through 37 give State/Territory maximum rates for different types of providers.)
- In more than half of the States/Territories, the family continues to pay the regular copayment when the child is ill or on vacation. In four States/Territories (Guam, Oklahoma, Washington, and West Virginia), parents are not required to pay any copayment for days the child is absent due to the child being ill or on family vacation, while New Hampshire and Wyoming require families to pay the entire cost of care for absences due to illness or vacation. Michigan, New York City, and North Dakota require parents to pay the entire cost of care for absences due to vacation.
- More than half of the States/Territories require the parent to pay the regular copayment for days when the child care provider is closed. Five States/Territories (Guam, Nebraska, Oklahoma, Washington, and West Virginia) do not require parents to pay a copayment for days the provider is closed, while five States (Georgia, New Hampshire, North Dakota, South Dakota, and Wyoming) require parents to pay the entire cost of care.

Copayment Calculation (Table 31)

States/Territories use a variety of methods to compute the copayment (when families are not exempt from copayments). In determining the amount of the copayment, States/Territories generally establish copayment charts or fee schedules. In most cases, the fee schedules are broken down by family size and income level. Typically, for a particular family size and income range, the copayment is given as a dollar amount, a percentage of income, or a percentage of the cost of child care. Dollar amount copayments may be hourly, daily, weekly, or monthly amounts. When the copayment is a dollar amount, it may remain constant even if the family's income changes slightly, as long as the family's income remains within the specified range. If the copayment is a percentage of income, it will change with every change in a family's income.

Table 31 shows each State's/Territory's basic computation method, and also indicates if each State/Territory uses a different income definition for computing copayments and/or uses a minimum copayment. Key findings from 2012 include:

- In 32 States/Territories, the copayment chart gives a dollar amount; in nine States, the chart gives a percentage that is applied to family income; in eight States/Territories, the copayment is a percentage of the cost of child care. One State (Michigan) computes the copayment as a percentage of the maximum rate. In five States/Territories, the copayment is calculated using a more complex formula, such as using both dollar amounts and percentages or the lower of the percentages of the cost versus maximum reimbursement rate.
- Only New York uses different income definitions for establishing eligibility versus copayment amounts. New York's income definition for determining the family's copayment uses only the percentage of income that exceeds the poverty guideline.
- Nine States/Territories have explicitly defined a minimum copayment for all families, which may supersede the minimum copayment produced by the established fee schedule. Minimum copayments are reflected as monthly dollar amounts (ranging from \$5 per month in Colorado to \$27 per month in Oregon), weekly dollar amounts (ranging from \$1 per week in New York to \$5 per week in Pennsylvania), and a percentage of the cost of care (five percent of the cost of care in Nevada). In these States/Territories, if the standard formula (such as a percentage of income) would result in a copayment lower than the State/Territory statutory minimum, the family instead pays the State/Territory statutory minimum copayment.

Copayment Adjustments (Table 32)

Three issues that may affect copayments are the number of children receiving subsidized care, whether care is full-time or part-time, and whether care is being provided for a child with special needs. If a State/Territory computes copayments using dollar amounts that vary with family income level or as a percentage of family income, the State/Territory must determine whether to vary the copayments based on the number of children, the hours of child care, or the need for special-needs care. Table 32 describes these policies.

Highlights from 2012 concerning the number of children in care include:

- In 20 States/Territories, the copayment is a dollar amount or percentage of income and is family-level; it does not vary with the number of children in the family who are receiving subsidized child care.
- In eight States/Territories, the copayment is a dollar amount or percentage of income and is per-child; the family's copayment equals the per-child copayment multiplied by the number of children receiving subsidized child care.
- In other programs with a copayment equal to a dollar amount or percentage of income, the copayment is adjusted when more than one child is in care. Rather than paying the same amount for each child, the family pays a lower fee for the additional children in care. In these States/Territories, the copayment for the second child ranges from 50

percent of a one-child copayment in Florida, Massachusetts, New Mexico, and Puerto Rico, to 75 percent of a one-child copayment in New Jersey and D.C. Copayment adjustments for the third child in care range from 25 percent of a one-child copayment in Massachusetts, New Mexico, and Puerto Rico to 50 percent of a one-child copayment in Florida.

- Ten States/Territories set copayments as a percent of the maximum reimbursement rate or cost of care. These States/Territories do not establish separate policies for copayment adjustments based on the number of children in care; in general, the higher cost of care for more children will result in a higher copayment.

Highlights from 2012 concerning part-time care and special-needs care include:

- Among the States/Territories that compute copayments as a dollar amount or a percentage of family income, more than half make no adjustment to the copayment when the child is in care part time.
- Among the States/Territories that do adjust the copayment for part-time care, the adjustments range from 50 percent of the full-time copayment to 75 percent of the full-time copayment. In most States/Territories that reduce the copayment for part-time care, the copayment is reduced by half.
- Six States/Territories make some type of adjustment to the copayment for children with special needs. For example, Missouri and Puerto Rico do not require any copayment for special-needs care, and Mississippi asks families with special-needs children to pay only \$10 per month. In contrast, in Delaware the copayment for a special-needs child is five percent higher than the copayment for a child without special needs.

Copayment Amounts (Tables 33, 34, and 35)

After determining the income level and family size, each family in need of care (and not exempt from copayments) is assigned a copayment amount. The amounts vary greatly across States/Territories. In some States, copayments also vary across counties or regions. Tables 33, 34, and 35 provide copayments for select family sizes and income levels. In the States in which copayments may vary in different areas of the State (Colorado, Florida, Maryland, New York, Texas, and Virginia), the copayments shown in the tables are for the most populous area of the State.

The three tables each focus on a different family situation. Table 33 shows copayments for a single-parent family with a 2-year-old child, Table 34 looks at a single-parent family with a 2-year-old and a 4-year-old, and Table 35 gives copayments for a two-parent family with a 2-year-old and a 4-year-old. For each family situation, the table shows the monthly copayment in each program if the family has earnings at different annual earnings levels. The copayments in the tables are the result of applying each State's/Territory's detailed copayment policies to each hypothetical family situation; copayments that are expressed by the State/Territory in hourly, daily, or weekly terms are all converted to monthly terms for cross-State/Territory comparability. The tables all assume that the children are in center-based child care for eight hours per day, five days per week; none of the children have special needs; all income is earned income; and the

earnings are received evenly over the year. In States/Territories that base the copayment on a percentage of the cost of care, the maximum reimbursement rate was used to calculate the copayment amount. Finally, for purposes of noting when a family at a particular earnings level is no longer eligible for the subsidy, the table assumes the family is just beginning to receive subsidies. (In other words, the initial eligibility thresholds are used rather than the continuing eligibility thresholds.) Further assumptions, as noted below, were made for each table.

Table 33 provides monthly copayments for a two-person family. In addition to the assumptions noted above, the table also assumes the family consists of one parent and one child, and the child is 24 months old. (The age of the child most commonly affects copayments that are based on a percentage of the cost of care or maximum reimbursement rate.) Key findings from 2012 include:

- Copayments for a two-person family with \$15,000 in annual earnings range from \$0 per month in Arkansas, California, Indiana, Iowa, Rhode Island, South Dakota, Vermont, Wyoming, American Samoa and Virgin Islands to \$419 per month in Hawaii. The median copayment is \$65.
- Copayments for a two-person family with \$20,000 in annual earnings range from \$0 per month in California, American Samoa, and the Virgin Islands to \$698 per month in Hawaii. In eight States/Territories, a two-person family at this income level does not qualify for subsidized care. The median copayment across the States/Territories is \$119.
- Copayments for a two-person family with \$25,000 in annual earnings range from \$0 per month in American Samoa and the Virgin Islands to \$977 per month in Hawaii. In 22 States/Territories, a two-person family at this income level does not qualify for subsidized care. The median copayment across all the States/Territories is \$185.
- Copayments for a two-person family with \$30,000 in annual earnings range from \$0 per month in American Samoa to \$1,256 per month in Hawaii. In 36 States/Territories, a two-person family at this income level does not qualify for subsidized care. Across the States/Territories, the median copayment is \$250.

Table 34 provides monthly copayments for a three-person family. In addition to the assumptions used for all of the copayment amount tables, the table assumes the family consists of one parent and two children, ages 24 months and 48 months. Key findings from 2012 include:

- Copayments for a three-person family with \$15,000 in annual earnings range from \$0 per month in Arkansas, California, Indiana, Iowa, Nebraska, New Jersey, Rhode Island, South Dakota, Vermont, Wyoming, American Samoa, Guam, and the Virgin Islands to \$414 per month in Hawaii. The median copayment is \$64.
- Copayments for a three-person family with \$20,000 in annual earnings range from \$0 per month in Arkansas, California, Wyoming, American Samoa, and the Virgin Islands to \$828 per month in Hawaii. The median copayment is \$122.
- Copayments for a three-person family with \$25,000 in annual earnings range from \$0 per month in American Samoa and the Virgin Islands to \$1,035 per month in Hawaii. In nine States/Territories, a three-person family at this income level does not qualify for subsidized care. The median copayment across the States/Territories is \$188.

- Copayments for a three-person family with \$30,000 in annual earnings range from \$0 per month in American Samoa and the Virgin Islands to \$1,449 per month in Hawaii. In 18 States/Territories, a three-person family at this income level does not qualify for subsidized care. Across the States/Territories, the median copayment is \$250.

Table 35 provides monthly copayments for a four-person family. This table uses the same basic assumptions used for all of the copayment amount tables, and it also assumes the family consists of two parents and two children, ages 24 months and 48 months. Highlights from 2012 include:

- Copayments for a four-person family with \$15,000 in annual earnings range from \$0 per month in Arkansas, California, Indiana, Iowa, Kansas, Massachusetts, Minnesota, Nebraska, New Jersey, Rhode Island, South Dakota, Vermont, Wyoming, American Samoa, Guam, and the Virgin Islands to \$207 per month in Hawaii. The median copayment is \$52.
- Copayments for a four-person family with \$30,000 in annual earnings range from \$0 per month in American Samoa and the Virgin Islands to \$1,035 per month in Hawaii. In eight States/Territories, a four-person family at this income level does not qualify for subsidized care. Across the States/Territories, the median copayment is \$218.
- Copayments for a four-person family with \$40,000 in annual earnings range from \$0 per month in American Samoa to \$1,656 per month in Hawaii. In 26 States/Territories, a four-person family at this income level does not qualify for subsidized care. The median copayment across the States/Territories is \$333.

The CCDF Policies Database provides a much greater level of detail concerning copayment policies, including copayment amounts for additional family sizes and income levels.

Changes in Copayment Policies from 2011 to 2012

From 2011 to 2012, there were several changes in States’/Territories’ copayment policies, with most of the changes occurring in the amount families are required to pay. Relatively few changes were seen in other policies related to copayments. With the exception of updating the year of the poverty guidelines used for the poverty exemption in some States, policies for exempting some families from paying copayments remained unchanged from 2011 to 2012 in all of the States/Territories. Also, there were no changes between 2011 and 2012 in State/Territory policies regarding absences or in whether families are required to pay the difference between the maximum reimbursement rate and the provider’s charges.

Policies establishing a minimum copayment for families remained the same in all but one of the States/Territories. In Oregon, the minimum copayment was increased from \$25 to \$27 per month. State/Territory policies regarding copayment adjustments went unchanged from 2011 to 2012.

From 2011 to 2012, there were changes in copayments in 25 States/Territories, with a mix of increases and decreases, but more increases than decreases. Copayments for a two-person

family with \$15,000 in annual earnings changed in 22 States/Territories, increasing in 7 and decreasing in 15. Copayments for a two-person family with \$20,000 in annual earnings changed in 15 States/Territories, increasing in eight and decreasing in seven. Copayments for a two-person family with \$25,000 in annual earnings changed in nine States/Territories from 2011 to 2012, increasing in four and decreasing in five. In Louisiana, two-person families at this income level were no longer eligible in 2012. Copayments for a two-person family with \$30,000 in annual earnings increased in one State/Territory (Wyoming). In six States/Territories, two-person families at this income level were not eligible in 2011, but in 2012 they were eligible.

From 2011 to 2012, copayments for a three-person family with \$15,000 in annual earnings changed in nine States/Territories, increasing in three and decreasing in six. Copayments for a three-person family with \$20,000 in annual earnings changed in 13 States/Territories, increasing in eight and decreasing in five. Copayments for a three-person family with \$25,000 in annual earnings changed in 14 States/Territories from 2011 to 2012, increasing in eight and decreasing in six. Copayments for a three-person family with \$30,000 in annual earnings changed in 15 States/Territories, increasing in seven and decreasing in eight.

From 2011 to 2012, copayments for a four-person family with \$15,000 in annual earnings changed in nine States/Territories, increasing in five and decreasing in four. Copayments for a four-person family with \$30,000 in annual earnings changed in 15 States/Territories from 2011 to 2012, increasing in eight and decreasing in seven. Copayments for a four-person family with \$40,000 in annual earnings changed in eight States/Territories, increasing in six and decreasing in two. In Louisiana and Utah, four-person families at this income level were no longer eligible in 2012, while in Washington four-person families at this income level were not eligible in 2011, but in 2012, they were eligible.

Table 28. Copayment Exemptions, 2012 ²

State	Poverty Exemption ³		If Different Groups are Exempt from Paying Copayments					
	If All Families with Income Under 100 Percent of the Federal Poverty Guidelines are Exempt	Year of Poverty Guidelines Used for Exemption	SSI Recipients	Families with a Foster Child	SNAP E&T Participants	Teen Parents	Families with a Child with Special Needs	Families with CPS Cases
Alabama	No ⁴	NA	No	No	No	No	No	Varies ⁵
Alaska	No	NA	No	No	No	No	No	No
Arizona	No	NA	No	Yes	No	No	No	Yes
Arkansas	No	NA	No	Yes	No	Varies ⁶	No	Yes
California	No ⁷	NA	No	Yes ⁸	NA ⁹	No	No	Yes ⁸
Colorado	No ¹⁰	NA	No	NA ¹¹	NA ⁹	Varies ¹²	No	NA ¹³
Connecticut	No	NA	No	No	No	No	No	No
Delaware	No	NA	No	No	No ¹⁴	Varies ¹⁵	No	Yes
DC	No ¹⁶	NA	No	Yes	No	Yes	No	Yes
Florida	No ¹⁷	NA	No	Varies ¹⁷	NA ⁹	No	No	Varies ¹⁷
Georgia	No	NA	No	Yes	No	Varies ¹⁸	No	Varies ¹⁹
Hawaii	No	NA	No	Yes	No	No	No	Yes
Idaho	No	NA	No	Yes	No	No	No	No
Illinois	No	NA	No	NA ¹¹	No	No	No	NA ¹³
Indiana	Yes	2012	No	No	No	No	No	No
Iowa	Yes	2012	No	No ²⁰	No	No	No	Yes
Kansas	No ²¹	NA	No	No	Varies ²²	No	No	No
Kentucky	No ²³	NA	No	NA ¹¹	No	No	No	Varies ²⁴
Louisiana	No	NA	No	Yes	No	No	No	Yes ²⁵
Maine	No	NA	No	No	No	No	No	No
Maryland	No	NA	Yes	NA ¹¹	No	No	No	NA ¹³
Massachusetts	No	NA	No	Yes	No	No	No	Varies ²⁶
Michigan	No	NA	Yes	Yes	No	No	No	Yes
Minnesota	No ²⁷	NA	No	NA ¹¹	No	No	No	NA ¹³
Mississippi	No	NA	No	No	No	No	No	No

Table 28. Copayment Exemptions, 2012 ²

State	<u>Poverty Exemption ³</u>		<u>If Different Groups are Exempt from Paying Copayments</u>					
	If All Families with Income Under 100 Percent of the Federal Poverty Guidelines are Exempt	Year of Poverty Guidelines Used for Exemption	SSI Recipients	Families with a Foster Child	SNAP E&T Participants	Teen Parents	Families with a Child with Special Needs	Families with CPS Cases
Missouri	No ²⁸	NA	No	Yes	NA ⁹	No	Yes	Yes
Montana	No	NA	No	No	No	No	No	Yes
Nebraska	No ²⁹	NA	No	Varies ³⁰	No	No	No	Varies ³⁰
Nevada	No	NA	No	Yes	No	No	No	Yes
New Hampshire	No	NA	No	Varies ³¹	No	No	No	Varies ³¹
New Jersey	Yes	2012	No	Yes ³²	No	No	No	Varies ³³
New Mexico	No	NA	No	Yes	No	No	No	Yes
New York	No	NA	No	No ³⁴	No	No	No	Yes
North Carolina	No	NA	No	Yes	No	No	No	Yes
North Dakota	No ³⁵	NA	No	NA ¹¹	No	Varies ³⁶	No	NA ¹³
Ohio	No ³⁷	NA	No	No	No	No	No	Yes
Oklahoma	No	NA	Yes ³⁸	Yes	NA ⁹	No	No	Varies ²⁶
Oregon	No	NA	No	No	No	No	No	NA ¹³
Pennsylvania	No	NA	No	No	Yes	No	No	No
Rhode Island	Yes	2009	No	--- ¹	No	No	No	No
South Carolina	No	NA	No	Yes ³⁹	No	No	No	No
South Dakota	Yes	2012	No	Yes	No	No	No	No
Tennessee	No	NA	No	No	No	No	No	Yes
Texas	No	NA	No	Yes	Yes	No	No	Yes ⁴⁰
Utah	No	NA	No	NA ⁴¹	No	No	No	No
Vermont	No	NA	No	Yes	No	No	No	Varies ⁴²
Virginia	No	NA	No	NA ¹¹	Varies ⁴³	No	No	No
Washington	No	NA	No	NA ¹¹	No	No	No	NA ¹³
West Virginia	No	NA	No	Yes	No	No	No	Varies ⁴⁴
Wisconsin	No	NA	No	Yes	No	Varies ⁴⁵	No	NA ¹³

Table 28. Copayment Exemptions, 2012 ²

State	<u>Poverty Exemption ³</u>		<u>If Different Groups are Exempt from Paying Copayments</u>					
	If All Families with Income Under 100 Percent of the Federal Poverty Guidelines are Exempt	Year of Poverty Guidelines Used for Exemption	SSI Recipients	Families with a Foster Child	SNAP E&T Participants	Teen Parents	Families with a Child with Special Needs	Families with CPS Cases
Wyoming	Yes	2012	No	No	No	No	No	NA ¹³
American Samoa	NA ⁴⁶	NA ⁴⁶	NA ⁴⁶	NA ⁴⁶	NA ⁴⁶	NA ⁴⁶	NA ⁴⁶	NA ⁴⁶
Guam	Yes	2011	No	Yes	NA ⁹	No	No	Yes
No Mariana Islands	No	NA	No	No	NA ⁴⁷	No	No	No
Puerto Rico	No ⁴⁸	NA	---	Yes	No	Yes	Yes	Yes
Virgin Islands	No	NA	No	Varies ⁴⁹	No	No	No	Varies ²⁶

Source: CCDF Policies Database October 1, 2012 Data

¹ Information not found in state's manual.

² Federal CCDF policies allow for copayments to be waived for all or a subset of families whose incomes are at or below the Federal Poverty Guidelines or for children who are in need of protective services. States may choose to use state funds to waive copayments for families who do not meet the federal guidelines.

³ The poverty exemption is an explicit exemption, specifically stated in the state's policies. In states with a poverty exemption, families below 100 percent of the Federal Poverty Guidelines are exempt. Exemptions below 100 percent of the Federal Poverty Guidelines are footnoted.

⁴ Families with income below 30 percent of the Federal Poverty Guidelines pay no copayment.

⁵ The parental fee is not required unless the referral from the child protective services department specifically indicates that the parental fee requirement applies.

⁶ Parents attending high school full time are exempt from copayment.

⁷ Families with income below 40 percent of state median income are exempt from copayment.

⁸ Families may be exempt from paying fees for up to 12 months if the referral prepared by the child welfare services worker specifies it is necessary to exempt the family from paying the fee.

⁹ Child care for SNAP E&T participants is not provided under this State or Territory's primary child care subsidy program.

- ¹⁰ In some cases, due to financial hardship, the family may find it difficult to pay the parental fee. In these cases, the parental fee can be reduced to the hardship fee of five dollars. Counties determine what constitutes a hardship and when a parental fee can be reduced. To reduce a client's fee, the hardship reason must be documented in the case file and written approval must be obtained from the county director. A reduction of a parental fee is a temporary reduction for up to three months, although hardship awards may be extended if conditions causing hardship persist.
- ¹¹ Foster child care is not provided under the state's primary child care subsidy program.
- ¹² Teen households where all parents are in junior high, high school, or obtaining their GED and for whom payment of the parental fee would produce a hardship do not have to pay a parental fee.
- ¹³ Child protective services child care is not provided under the state's primary child care subsidy program.
- ¹⁴ Exemptions are limited to caretakers who are SNAP recipients (not SNAP E&T participants) caring for a child who receives TANF or general assistance, where the adult requesting the child care is not the child's natural or adoptive parent.
- ¹⁵ Exemptions are limited to teen parents 18 and younger attending high school or its equivalent.
- ¹⁶ Families with income equal to or below 50 percent of the Federal Poverty Guidelines are exempt from copayments.
- ¹⁷ Reduced fees or copayment exemptions are decided on a case-by-case basis.
- ¹⁸ Minor parents, under 18 years old, who are attending middle or high school are exempt.
- ¹⁹ Families with open child protective services cases are not exempt from copayments. Children in state custody, not including foster homes, are exempt from the copayment.
- ²⁰ Only non-licensed relative foster families receive child care through the CCDF program.
- ²¹ Employed families with income below 70 percent of the Federal Poverty Guidelines are not assigned a copayment.
- ²² SNAP E&T clients are exempt from copayments if the household consists of a single parent who is unemployed or two parents with only one parent employed.
- ²³ Families whose monthly income is below \$900, regardless of family size, pay no copayment.
- ²⁴ The department may choose to waive the copayment for child protective services cases, but not all child protective services cases are exempt from copayments. If the court orders the family to pay a specified copayment, that amount is paid in place of the standard copayment.
- ²⁵ Children under protective services are eligible regardless of income when the child care services are necessary in order to maintain the children in their own home and when the need for care meets the eligibility policy for the protective services program.
- ²⁶ The child protective services agency has the discretion to waive the copayment on an as needed basis.
- ²⁷ Families with income below 75 percent of the Federal Poverty Guidelines are exempt from copayments.
- ²⁸ Families whose income is below 25 percent of the state median income pay only one dollar annually.
- ²⁹ For families size two through eight, it is implicit in the state's fee schedule that the copayment is zero if income is below 100 percent of the Federal Poverty Guidelines. This does not apply for families size nine and above, who use the same income thresholds as families size eight.

- ³⁰ The family pays no copayment if the service is supportive of the family case plan and the caseworker determines it is in the best interest of the family to pay no copayment.
- ³¹ Exemption from copayment for foster care and child protective services cases is determined on a case-by-case basis.
- ³² There is no copayment for a child under department child protective services supervision who is in a paid foster placement.
- ³³ Case managers may waive or reduce copayments on a case-by-case basis if the determined copayment amount will cause undue hardship to a child protective services family.
- ³⁴ Foster care cases are charged the minimum fee of one dollar for child care.
- ³⁵ The state may choose to waive the copayment requirement for families with very low income.
- ³⁶ Teen parents participating in the Crossroads program are exempt from copayments.
- ³⁷ Families with income below 10 percent of the Federal Poverty Guidelines are not assigned a copayment.
- ³⁸ There is no copayment for the child receiving SSI, but the SSI income is considered when determining the copayment assigned for other children in the household.
- ³⁹ The family is exempt from the copayment requirement, but may be asked to pay the difference between what the provider charges and the maximum reimbursement rate.
- ⁴⁰ Families are exempt unless the child protective services agency assigns a copayment.
- ⁴¹ Foster child care is not provided under the state's primary child care subsidy program. This includes the child of a teen parent in foster care.
- ⁴² When a child is in transition to reunification with his or her biological parents, the family is exempt from copayments for six months. Child protective services children living with foster parents are exempt.
- ⁴³ For SNAP E&T participants, if income falls at or below 100 percent of the Federal Poverty Guidelines, the family is exempt from copayments.
- ⁴⁴ Families are not exempt unless the child protective services worker waives the fee as part of an approved safety or treatment plan.
- ⁴⁵ Teen parents who participate in the state's program to assist school-age children in TANF families in attending and completing school are exempt from the copayment. All other teen parents have their copayment set at the lowest copayment level based on the number of children in care.
- ⁴⁶ American Samoa serves families that all fall below the Federal Poverty Guidelines and waives the copayment for all eligible families.
- ⁴⁷ This territory or outlying area does not have a SNAP E&T program.
- ⁴⁸ Families with income below 50 percent of the state median income are exempt from copayments.
- ⁴⁹ For the purposes of CCDF funding, foster children are considered in protective services, and the agency may waive copayments on a case-by-case basis.

Table 29. Copayment Exemptions for TANF Families, 2012¹

State	All Current TANF Families ²	TANF Families with No Earned Income	TANF Families with Earned Income	Child-Only TANF Families	Families Transitioning Off TANF ³	TANF Applicants	Families at Risk of
							Becoming Dependent on TANF ³
Alabama	No	No	No	No	No	No	No
Alaska	Yes	Yes	Yes	Yes	No	Yes	No
Arizona	Yes	Yes	Yes	Yes	Varies ⁴	No	No
Arkansas	No	Varies ⁵	Varies ⁶	NA ⁷	No	No	No
California	Yes	Yes	Yes	Yes	No	No	No
Colorado	No	Yes	No	NA ⁷	No	No	No
Connecticut	No	Yes	No	Yes	No	No	No
Delaware	Yes	Yes	Yes	Yes	No	No	No
DC	No	Yes	No	Yes	No	No	No
Florida	No	No	No	Varies ⁸	No	No	No
Georgia	No ⁹	No	Yes	Yes	No	No	No
Hawaii	No	No	No	No	No	No	No
Idaho	Yes ¹⁰	Yes ¹⁰	Yes ¹⁰	Yes ¹⁰	Yes ¹⁰	Yes ¹⁰	No
Illinois	No	No	No	Yes ¹¹	No	No	No
Indiana	No	No	No	No	No	No	No
Iowa	Yes	Yes	Yes	Yes	No	No	No
Kansas	Yes	Yes	Yes	Yes	Yes	Yes	No
Kentucky	No	No	No	No	No	No	No
Louisiana	Yes ¹²	Yes ¹²	Yes ¹²	Yes ¹²	No	Yes	No
Maine	No	No	No	No	No	No	No
Maryland	No	Yes	Yes	No	No	Yes	No
Massachusetts	No ¹³	Yes ¹³	Yes ¹³	No	No	No	No
Michigan	Yes	Yes	Yes	Yes	Yes	Yes ¹⁴	No
Minnesota	No	No	No	No	No	No	No
Mississippi	Yes	Yes	Yes	Yes	No	No	No
Missouri	No ¹⁵	No	No	No	No	No	No
Montana	No	No	No	No	No	No	No
Nebraska	Yes	Yes	Yes	Yes	No	Yes	No
Nevada	No	Yes	Yes	No	No	Yes	No

Table 29. Copayment Exemptions for TANF Families, 2012¹

State	All Current TANF Families ²	TANF Families with No Earned Income	TANF Families with Earned Income	Child-Only TANF Families	Families Transitioning Off TANF ³	Families at Risk of Becoming Dependent on TANF ³	
						TANF Applicants	TANF ³
New Hampshire	No	No	No	No	No	No	No
New Jersey	No	Yes	No	Yes	No	No	No
New Mexico	No	No	No	No	No	No	No
New York	Yes ¹⁶	Yes	Yes	Yes	No	Yes ¹⁷	No
North Carolina	No	No	No	Yes ¹⁸	No	No	No
North Dakota	No ¹⁹	Yes ¹⁹	Yes ¹⁹	Varies ²⁰	Varies ²¹	No	Yes ¹⁹
Ohio	Yes	Yes	Yes	Yes	Yes	No	No
Oklahoma	Yes	Yes	Yes	Yes	No	Yes	No
Oregon	No	No	No	No	Varies ²²	No	No
Pennsylvania	No	Yes ²³	No	NA ⁷	No	No	No
Rhode Island	Yes	Yes	Yes	Yes	No	No	No
South Carolina	No	Yes ²⁴	Yes ²⁴	No	No	Yes	No
South Dakota	Yes	Yes	Yes	Yes	No	No	No
Tennessee	Yes	Yes	Yes	Yes	No	No	No
Texas	No ²⁵	Yes	No	No	No	No	No
Utah	No	Yes	Yes	NA ⁷	Yes	Yes	No
Vermont	Yes	Yes	Yes	Yes	No	No	Yes
Virginia	Yes	Yes	Yes	Yes	No	No	No
Washington	No	No	No	No	No	No	No
West Virginia	No	No	No	No	No	No	No
Wisconsin	No	No	No	NA ⁷	No ²⁶	No	No
Wyoming	No	No	No	No	No	No	No
American Samoa	NA ²⁷	NA ²⁷	NA ²⁷	NA ²⁷	NA ²⁷	NA ²⁷	NA ²⁷
Guam	No	Yes	No	No	No	No	No
No Mariana Islands	NA ²⁷	NA ²⁷	NA ²⁷	NA ²⁷	NA ²⁷	NA ²⁷	NA ²⁷
Puerto Rico	No	Yes	No	No	No	No	No
Virgin Islands	No	Yes ²⁸	No	No	No	Yes ²⁸	No

Source: CCDF Policies Database October 1, 2012 Data

- ¹ Federal CCDF policies allow for copayments to be waived for all or a subset of families whose incomes are at or below the Federal Poverty Guidelines or for children who are in need of protective services. States may choose to use state funds to waive copayments for families who do not meet the federal guidelines. States coded "yes" above waive copayments, or assign a zero dollar copayment for the specified group.
- ² An entry of "Yes" indicates all TANF families, including TANF families with no earnings, TANF families with earnings, and TANF families with child-only cases, are exempt from paying a copayment.
- ³ How states define families transitioning off of TANF or families at risk of becoming dependent on TANF may vary.
- ⁴ Families receiving transitional child care are exempt from copayments beyond the third child in the family.
- ⁵ Clients with no earned income who are enrolled in the TANF work program are exempt from copayment.
- ⁶ Clients with earnings receiving services through TANF extended support services are exempt from copayment for one year.
- ⁷ Child-only TANF families are not served under the state's primary child care subsidy program.
- ⁸ Reduced fees or copayment exemptions are decided on a case-by-case basis.
- ⁹ Only TANF families participating in state approved activities, such as education, training, and employment, are exempt.
- ¹⁰ TANF families and families with pending TANF cases pay no copayment. They are responsible for any amount the provider charges above the market rate.
- ¹¹ All participants must share in the cost of child care except employed non-parent caretaker relatives who receive a child only or general assistance benefit for children needing care due to the relatives' employment.
- ¹² TANF families are required to pay any amount above what the agency pays, which is 100 percent of the maximum rate.
- ¹³ Families with authorization from the department that administers TANF are exempt from copayments.
- ¹⁴ Families are exempt from copayments if child care will be needed to attend TANF activities.
- ¹⁵ If the family's only income is TANF income, the family pays only one dollar annually.
- ¹⁶ Families receiving temporary assistance pay no copayment, unless they are repaying an overpayment. Families who choose to receive child care in lieu of temporary assistance pay the minimum copayment of one dollar per week.
- ¹⁷ TANF applicants who meet work requirements are not required to pay a copayment.
- ¹⁸ Children with no countable income residing with an adult other than their parents are exempt. TANF income is not countable income.
- ¹⁹ The family is responsible for paying any amount that is over the allowable maximum child care amount.
- ²⁰ If the TANF caretaker is ineligible, a copayment may be assessed. The TANF caretaker is always responsible for paying any amount that is over the allowable maximum child care amount.
- ²¹ Families transitioning off of TANF are not assigned a copayment if the children in the family receive SSI. The family is still responsible for paying any amount that is over the allowable maximum child care amount.
- ²² There is no copayment for the first month to allow for a 10-day notice to transition to Employment Related Day Care.

²³ TANF families that are not working but in the employment and training program are exempt.

²⁴ The family is exempt from the copayment requirement, but may be asked to pay the difference between what the provider charges and the maximum reimbursement rate.

²⁵ Only TANF work program participants are exempt from copayment.

²⁶ Families transitioning off of a TANF work program are assigned the minimum copayment based on the number of children in care for up to five weeks of care.

²⁷ This territory or outlying area does not have a TANF program.

²⁸ Copayments are waived for TANF and other families with income below the Federal Poverty Guidelines.

Table 30. Copayment Administration, 2012

State	Who Collects the Copayment	If Family is Required to Pay the Difference Between the Maximum Reimbursement Rate and the Provider Rate ²	What the Family Pays for Absences		
			Illness	Vacation	Approved Closings
Alabama	Provider	Always	Copayment	Copayment	Copayment
Alaska	Provider	Always	Varies ³	Varies ³	Varies ³
Arizona	Provider	Always ⁴	Varies ⁵	Varies ⁵	Varies ⁵
Arkansas	Provider	Sometimes ⁶	Varies ⁵	Varies ⁵	Varies ⁵
California	Other ⁷	Always	Copayment	Copayment	Copayment
Colorado	Provider	Never ⁸	Copayment ⁹	Copayment ⁹	Copayment ⁹
Connecticut	Provider	Always ¹⁰	Copayment	Copayment	Copayment
Delaware	Provider	Sometimes ¹¹	Copayment ¹²	Copayment ¹²	Copayment ¹²
DC	Provider	Never	Copayment ¹³	Copayment ¹⁴	Copayment ¹⁵
Florida	Provider	Always	Copayment ¹⁶	Copayment ¹⁶	Copayment ¹⁶
Georgia	Provider	Sometimes ¹⁷	Copayment ¹⁸	Varies ¹⁹	Entire cost of care ²⁰
Hawaii	Provider	Always	Copayment	Copayment	Copayment
Idaho	Provider	Always	Copayment	Copayment	Copayment
Illinois	Provider	Sometimes ²¹	Copayment	Copayment	Copayment
Indiana	Provider	Always ²²	Copayment	Copayment	Copayment
Iowa	Provider	Never ²³	Copayment ²⁴	Copayment ²⁴	Copayment ²⁴
Kansas	Provider ²⁵	Always ²⁶	Varies ²⁶	Varies ²⁶	Varies ²⁶
Kentucky	Provider	Always	Copayment ²⁷	Copayment ²⁷	Copayment ²⁷
Louisiana	Provider	Always	Copayment ²⁸	Copayment ²⁸	Copayment ²⁸
Maine	Provider	Never	Copayment	Copayment	Copayment
Maryland	Provider	Sometimes ⁵	Varies ⁵	Varies ⁵	Varies ⁵
Massachusetts	Provider	Never ²⁹	Copayment	Copayment ³⁰	Copayment ³¹
Michigan	Provider	Always	Copayment ³²	Entire cost of care	Copayment ³²
Minnesota	Provider	Always ³³	Copayment ³⁴	Copayment ³⁴	Copayment ³⁴
Mississippi	Provider	Always	Copayment ³⁵	Copayment ³⁵	Copayment
Missouri	Provider	Always	Copayment	Copayment	Copayment

Table 30. Copayment Administration, 2012

State	Who Collects the Copayment	If Family is Required to Pay the Difference Between the Maximum Reimbursement Rate and the Provider Rate ²	What the Family Pays for Absences		
			Illness	Vacation	Approved Closings
Montana	Provider	Always	Varies ³⁶	Varies ³⁶	Varies ³⁶
Nebraska	Provider	Never ³⁷	Varies ³⁸	Varies ³⁸	No copayment
Nevada	Provider	Always	Copayment ³⁹	Copayment ³⁹	Copayment ³⁹
New Hampshire	Provider	Always ⁴	Entire cost of care	Entire cost of care	Entire cost of care
New Jersey	Provider	Always	Copayment	Copayment	Copayment
New Mexico	Provider	Never ⁴⁰	Copayment	Copayment	Copayment
New York	Provider ⁴¹	Always	Copayment ⁴²	Entire cost of care ⁴²	Copayment ⁴²
North Carolina	Provider	Always ⁴³	Copayment	Copayment ⁴⁴	Copayment
North Dakota	Provider	Always	Varies ⁴⁵	Entire cost of care	Entire cost of care
Ohio	Provider	Never	Varies ⁴⁶	Varies ⁴⁶	Varies ⁴⁶
Oklahoma	Provider	Never ⁴⁷	No copayment ⁴⁸	No copayment ⁴⁸	No copayment ⁴⁸
Oregon	Provider	Sometimes ⁴⁹	Copayment ⁵⁰	Copayment ⁵⁰	Copayment ⁵⁰
Pennsylvania	Provider	Always ⁴	Copayment ⁵¹	Copayment ⁵²	Copayment
Rhode Island	Provider	--- ¹	Copayment ⁵³	Copayment ⁵³	Copayment ⁵³
South Carolina	Provider	Always	Copayment	Copayment	Copayment
South Dakota	Provider	Always	Copayment	Copayment	Entire cost of care
Tennessee	Provider	Sometimes ⁵⁴	Copayment	Copayment	Copayment
Texas	Provider	Sometimes ⁵⁵	Copayment	Copayment	Copayment
Utah	Provider	Always ⁴	Copayment	Copayment	Copayment
Vermont	Provider	Always	Copayment ⁵⁶	Copayment ⁵⁷	Copayment ⁵⁸
Virginia	Provider	Sometimes ⁵⁹	Varies ⁶⁰	Varies ⁶⁰	Varies ⁶⁰
Washington	Provider	Never	No copayment	No copayment	No copayment
West Virginia	Provider	Never ⁶¹	No copayment	No copayment	No copayment
Wisconsin	Provider	Always	Varies ⁶²	Varies ⁶³	Varies ⁶⁴
Wyoming	Provider	Always	Entire cost of care	Entire cost of care	Entire cost of care
American Samoa	NA ⁶⁵	NA ⁶⁵	NA ⁶⁵	NA ⁶⁵	NA ⁶⁵

State	Who Collects the Copayment	If Family is Required to Pay the Difference Between the Maximum Reimbursement Rate and the Provider Rate ²	What the Family Pays for Absences		
			Illness	Vacation	Approved Closings
Guam	Provider	Always	No copayment ⁶⁶	No copayment ⁶⁶	No copayment ⁶⁶
No Mariana Islands	Other ⁶⁷	Always	Copayment	Copayment	Copayment
Puerto Rico	Provider	Always	--- ¹	--- ¹	--- ¹
Virgin Islands	Provider	Always	Copayment	Copayment	Copayment

Source: CCDF Policies Database October 1, 2012 Data

¹ Information not found in state's manual.

² This column captures the policies for whether the family is required to pay the difference when the provider charges a higher rate than the maximum reimbursement rate. An entry of "Always" is coded if providers are allowed to charge a higher rate, and when they choose to do so the family is required to pay the difference. An entry of "Never" indicates that providers are never allowed to charge the client more than the established copayment for general child care services.

³ What the family pays depends on the provider's policies and how the provider bills the agency. Families must pay a copayment and any additional costs charged by the provider for absences.

⁴ If the provider chooses to charge the family for the difference between the provider's rate and the maximum reimbursement rate, the family is required to pay the difference.

⁵ What the parent is required to pay depends on the provider's written policy.

⁶ The parent is never required to pay the difference unless the provider has received state quality accreditation. Those providers have the option of charging a parent the difference between the county-determined rate and the established rate the provider charges for equal services.

⁷ At the discretion of the local agency, copayments may be collected by either the provider or the local agency.

⁸ Parents cannot be asked to pay more than the amount the county pays unless the parent chooses to have the child participate in optional activities, owes late fees, fails to give adequate notice of withdrawal from services to the provider, or has absences beyond the maximum number allowed by the county.

⁹ Parental fees are not pro-rated for partial months of service. Absences beyond the maximum number allowed by the county are the responsibility of the parent. Parents can request additional absences for illness if they have a note from a doctor.

¹⁰ The parent is responsible for all costs not paid by the state on behalf of the parent.

¹¹ Families are only asked to pay the difference when using a Purchase of Care Plus provider.

¹² If absences exceed five days, the family may lose their subsidy or spot.

- ¹³ Excused absences may be approved for up to 15 days in a month. The family must provide documentation to the provider, and the provider then must submit the documentation with the monthly attendance report.
- ¹⁴ A child may be absent for vacation for up to 15 days per year. The parent or guardian must notify the provider in writing of plans to be absent.
- ¹⁵ Providers are approved to close for 11 designated holidays every year as well as the President's Inauguration Day every four years. Licensed child care centers and licensed family child care providers are allowed to be closed for four days per year for professional development. Child care facilities may also be closed and still paid for care whenever public schools close due to inclement weather.
- ¹⁶ The agency pays for three unexcused absences per month per child and up to seven additional absences with documentation of extraordinary circumstances.
- ¹⁷ For special needs child care, the parent may request a waiver if the provider's rate exceeds the state's maximum reimbursement rate. For children in state custody, the case manager must first negotiate a lower rate. If negotiation is unsuccessful, the case manager must request a waiver.
- ¹⁸ If the provider charges less for absences, the county can reduce its share of the cost. The client's fee does not change.
- ¹⁹ Parents are required to pay the copayment for days the child is absent from care, but care may be suspended for summer breaks and holidays.
- ²⁰ The provider cannot bill the subsidy program for days the facility is not open.
- ²¹ Providers under the certificate program may require parents to pay the difference. Site-contracted providers cannot ask parents to pay the difference.
- ²² The parent assumes responsibility for paying the difference unless the caregiver is willing to accept a lower rate of reimbursement.
- ²³ Providers cannot request additional payment from families except for late fees, activity fees, or the cost of care if the family uses care beyond the amount approved by the agency.
- ²⁴ Payments may be made to providers for four absences per month.
- ²⁵ The state agency pays the child care benefit directly to the parent.
- ²⁶ The parent and provider contract outlines the parent's responsibilities for making payments to the provider. The provider may choose to charge the parent the difference between the maximum reimbursement rate and the provider rate. What the parent pays for absences is dependent on the provider's policies, as outlined in the parent and provider contract.
- ²⁷ Payments may be made to providers for five absences per child, per month without verification. Providers can be paid for up to ten holidays or closings per year, and the provider can choose which ten holidays are paid.
- ²⁸ The copayment does not change if the child is absent no more than two of the authorized days per month.
- ²⁹ Families cannot be asked to pay the difference from the provider rate. The family may be required to pay the difference for optional services the family chooses to use or fees for late pick-ups.
- ³⁰ A maximum of two weeks is allowed for vacation.
- ³¹ Parent's are not required to pay a copayment when the center was closed without advanced approval.
- ³² The state will reimburse the provider for up to 208 hours if the child is absent due to an illness or holiday, the child would have regularly been in the care of the provider that day, and the provider charges all parents for absences due to holidays and illness.

- ³³ Payment of the difference is not a condition of child care eligibility.
- ³⁴ There is no change in copayment for child absences except when absent days exceed 10 days in a row or 25 days in a calendar year, in which case, the family pays the entire cost of care. Exceptions may be made for documented medical conditions. The county agency may exceed these limits if it is the prevailing practice among private payers.
- ³⁵ Children in licensed child care facilities are allowed 15 vacation or absence days per federal fiscal year.
- ³⁶ If the family is responsible for paying the provider when a child is temporarily absent from full-time care in a licensed or registered care facility, the state will pay for up to 70 hours if the provider is providing full-time care, the provider is open while the child is absent, the provider charges non-subsidized families when their children are absent, the time charged reflects the time the child was expected to be in attendance, and the provider believes the child will return to the facility following the absence.
- ³⁷ Providers are not allowed to charge the parent the difference between what the agency pays and the provider's private pay rate, except late fees for parents who fail to pick their child up on time and care provided to foster children and children receiving guardianship or adoption subsidies.
- ³⁸ The agency will not pay for days the children are not in care. The provider may charge the client if the child is absent on a scheduled day. The provider cannot charge for any days the child was not scheduled to be in care.
- ³⁹ The state reimburses providers for absences for up to 15 days per calendar year. For those 15 days, the family still pays a copayment.
- ⁴⁰ The case manager may adjust the copayment in certain situations if the provider cost exceeds the maximum rate.
- ⁴¹ Each district determines how the copayment is collected. The district may choose to have either the provider or the district collect the copayment.
- ⁴² Policies coded for New York City.
- ⁴³ If the parent selects a provider who charges more than the maximum reimbursement rate, the parent is responsible for paying the difference. The local purchasing agency cannot require the parent to pay the difference between the maximum reimbursement rate and the provider's rate and must allow the parent to select a different provider if the parent is unwilling to pay the difference.
- ⁴⁴ Payment for subsidized child care service is typically based on enrollment but in some instances may be based on attendance. The county has the option to pay based on attendance when the child has been absent for more than five days but less than 10 days in a month and the provider did not notify the agency, the child has been absent for 10 consecutive days, or the provider charges on the basis of attendance.
- ⁴⁵ Up to 16 hours per calendar month can be reimbursed for a child who is absent from child care for illness or medical appointments if the provider charges for those days.
- ⁴⁶ Families are charged their regular copayment if the provider claims an absence, and they do not pay anything if the provider does not claim the absence.
- ⁴⁷ Allowable extra charges by the provider are limited to registration fees, transportation fees, late fees, and charges for time not approved by the agency. The family may be asked to pay additional costs if the family failed to correctly use the EBT card to document service. The family cannot be charged for time covered by the agency if the EBT card was correctly used, even if the time exceeds the usual amount for full-time care.
- ⁴⁸ Providers cannot charge parents for absences unless the family failed to correctly record time and attendance using the EBT card during the month of service, thus causing the provider to lose the absent day payment.

- ⁴⁹ Parents may be responsible for paying the difference when the provider's rate exceeds the maximum reimbursement rate.
- ⁵⁰ The agency will pay the provider for up to five days per month when a child is absent from care if the child was scheduled to be in care on the absent days and the provider held the slot open for the child, the provider bills for the time the child was absent, and it is the provider's policy to bill all families for absent days. The agency will not pay for more than five consecutive absent days that overlap from one month to the next if the child does not return during that next month.
- ⁵¹ The state will pay for a maximum of 25 days of absences in a state fiscal year.
- ⁵² The state will pay for a maximum of five consecutive days and up to 25 days in a state fiscal year.
- ⁵³ The agency will continue to pay the provider for up to two weeks of absences in a 12-month period if the parent authorizes the payment.
- ⁵⁴ Parents are responsible for paying the difference in cost when providers charge more than the state reimbursement rate, as long as the provider notifies the parent of the difference in cost and the parent agrees in writing to pay the difference.
- ⁵⁵ The local board may develop a policy that prohibits providers from charging the difference between their published rate and the reimbursement rate. Providers are prohibited from charging families who are exempt from copayments.
- ⁵⁶ License-exempt providers are not reimbursed for child sick days.
- ⁵⁷ Absences for vacation are reimbursed for a maximum of 10 days per fiscal year.
- ⁵⁸ Absences for days the provider is closed are reimbursed for a maximum of 15 days per fiscal year.
- ⁵⁹ Parents who choose a provider with a rate above the maximum reimbursement rate are responsible for payment of any additional amount, unless the local department elects to pay additional child care costs with local funding. Child care subsidy funds may be used to pay up to a 100 dollar annual registration fee. No child care subsidy funds may be used to pay provider activity fees.
- ⁶⁰ Copayments for absences are based on provider enrollment, provider attendance practices, and local department payment policies.
- ⁶¹ Allowable extra charges by the provider are limited to registration fees, transportation fees, late fees and charges for time not approved by the agency.
- ⁶² The agency will pay for up to six weeks of absences in order to hold the child care slot for providers who are authorized based on enrollment. Providers who are paid based on attendance are not paid by the agency. The family may be responsible for the cost of care.
- ⁶³ The agency will pay for up to two weeks of absences in order to hold the child care slot for providers who are authorized based on enrollment. Providers who are paid based on attendance are not paid by the agency. The family may be responsible for the cost of care.
- ⁶⁴ The agency will pay for up to one week for providers who are authorized based on enrollment. Providers who are paid based on attendance are not paid by the agency. The family may be responsible for the cost of care.
- ⁶⁵ American Samoa serves families that all fall below the Federal Poverty Guidelines and waives the copayment for all eligible families.
- ⁶⁶ The family pays no copayment if the child is absent less than 10 days in a row.
- ⁶⁷ All copayments are made directly to the CNMI treasury.

Table 31. Copayment Calculation, 2012

State	Copayment Calculation Method	Copayment Income Definition	Minimum Copayment ¹
Alabama	Dollar amount	Same as for determining eligibility	NA ²
Alaska	Percent of income	Same as for determining eligibility	20 dollars monthly
Arizona	Dollar amount	Same as for determining eligibility	NA
Arkansas	Percent of child care cost	Same as for determining eligibility	NA
California	Dollar amount	Same as for determining eligibility	NA
Colorado	Other ³	Same as for determining eligibility	5 dollars monthly ⁴
Connecticut	Percent of income	Same as for determining eligibility	NA
Delaware	Percent of child care cost	Same as for determining eligibility	NA
DC	Dollar amount	Same as for determining eligibility	NA
Florida	Dollar amount	Same as for determining eligibility	NA
Georgia	Dollar amount	Same as for determining eligibility	NA
Hawaii	Other ⁵	Same as for determining eligibility	NA
Idaho	Percent of child care cost	Same as for determining eligibility	NA
Illinois	Dollar amount	Same as for determining eligibility	NA
Indiana	Percent of income ⁶	Same as for determining eligibility	NA
Iowa	Dollar amount	Same as for determining eligibility	NA
Kansas	Dollar amount	Same as for determining eligibility	NA
Kentucky	Dollar amount	Same as for determining eligibility	NA
Louisiana	Percent of child care cost	Same as for determining eligibility	NA
Maine	Percent of income	Same as for determining eligibility	NA
Maryland	Dollar amount	Same as for determining eligibility	NA
Massachusetts	Dollar amount	Same as for determining eligibility	NA

Table 31. Copayment Calculation, 2012

State	Copayment Calculation Method	Copayment Income Definition	Minimum Copayment ¹
Michigan	Percent of maximum rate	Same as for determining eligibility	NA
Minnesota	Dollar amount	Same as for determining eligibility	NA
Mississippi	Dollar amount	Same as for determining eligibility	10 dollars monthly
Missouri	Dollar amount	Same as for determining eligibility	NA ⁷
Montana	Percent of income ⁸	Same as for determining eligibility	10 dollars monthly
Nebraska	Dollar amount	Same as for determining eligibility	NA
Nevada	Percent of child care cost	Same as for determining eligibility	5 percent of cost of care ⁹
New Hampshire	Percent of income	Same as for determining eligibility	NA
New Jersey	Dollar amount	Same as for determining eligibility	NA
New Mexico	Dollar amount	Same as for determining eligibility	NA
New York	Dollar amount	Varies ¹⁰	1 dollar weekly ¹¹
North Carolina	Percent of income	Same as for determining eligibility	NA ¹²
North Dakota	Dollar amount ¹³	Same as for determining eligibility	NA
Ohio	Dollar amount	Same as for determining eligibility	NA
Oklahoma	Dollar amount	Same as for determining eligibility	NA
Oregon	Other ¹⁴	Same as for determining eligibility	27 dollars monthly ¹⁵
Pennsylvania	Dollar amount	Same as for determining eligibility	5 dollars weekly
Rhode Island	Percent of income	Same as for determining eligibility	NA
South Carolina	Dollar amount	Same as for determining eligibility	NA
South Dakota	Other ¹⁶	Same as for determining eligibility	NA ¹⁷
Tennessee	Dollar amount	Same as for determining eligibility	NA
Texas	Dollar amount	Same as for determining eligibility	NA
Utah	Dollar amount	Same as for determining eligibility	NA

Table 31. Copayment Calculation, 2012

State	Copayment Calculation Method	Copayment Income Definition	Minimum Copayment ¹
Vermont	Percent of child care cost	Same as for determining eligibility	NA
Virginia	Percent of income	Same as for determining eligibility	NA
Washington	Other ¹⁸	Same as for determining eligibility	15 dollars monthly
West Virginia	Dollar amount	Same as for determining eligibility	NA
Wisconsin	Dollar amount	Same as for determining eligibility	NA
Wyoming	Dollar amount	Same as for determining eligibility	NA
American Samoa	NA ¹⁹	NA ¹⁹	NA ¹⁹
Guam	Percent of child care cost	Same as for determining eligibility	NA
No Mariana Islands	Percent of child care cost	Same as for determining eligibility	NA
Puerto Rico	Dollar amount	Same as for determining eligibility	NA
Virgin Islands	Dollar amount	Same as for determining eligibility	NA

Source: CCDF Policies Database October 1, 2012 Data

¹ The minimum copayment applies when there is a statutory minimum that may override the copayment found in the state's copayment formula or fee schedule. The minimum is not derived from the lowest copayment found on the fee schedule.

² Families whose income falls below the lowest copayment income range do not have to pay a fee.

³ Families pay a percentage of their income for the first child in care, plus a dollar amount for each additional child in care.

⁴ Families with financial hardship can have their fee reduced to \$5. The copayment can be waived for families with teen parents, where both parents are in high school or obtaining their GED and paying the fee would produce a hardship.

⁵ The copayment is either a percentage of the maximum child care rate or child care cost, whichever is less.

⁶ The copayment amount varies according to the number of years a family has been receiving assistance. The percentage of monthly income required as a copayment for a particular income category increases by one percentage point for each year the family receives assistance.

⁷ Families whose only income is TANF income and families below 25 percent of the state median income pay \$1 annually.

⁸ A parent may compensate a child care provider with goods or services in lieu of paying the copayment in cash. The provider indicates his or her satisfaction with the arrangement by marking the copayment as paid-in-full on the monthly invoice.

⁹ Families must pay a minimum five percent copayment unless they are a TANF, foster care, or child protective services case.

¹⁰ In order to determine the copayment, the amount of income over the state income standard is used in the calculation. The copayment calculation is a percentage of the income that exceeds the state income standard.

¹¹ The minimum family copayment is required of low-income families but not TANF families.

¹² When the assessed copayment is less than \$5 a month, it is disregarded.

¹³ The amount paid to the provider is rounded down to the nearest dollar.

¹⁴ The copayment is calculated by a mathematical formula that gradually increases the copay as family income increases. Workers calculate copayment amounts by entering a family's monthly income and family size into a web tool.

¹⁵ Families whose income is at or below 50 percent of the 2007 Federal Poverty Guidelines pay either 1.5 percent of their countable income or \$27, whichever is greater.

¹⁶ Households with income between 100 and 105 percent of the Federal Poverty Guidelines pay \$10 monthly. Households with income above 105 percent of the Federal Poverty Guidelines have a copayment between 4.5 percent and 7.5 percent of their income.

¹⁷ Households with income between 100 percent and 105 percent of the Federal Poverty Guidelines have a minimum \$10 copayment.

¹⁸ Families with income up to 137.5 percent of the Federal Poverty Guidelines pay a flat dollar amount based on income. For families with income above 137.5 percent of the Federal Poverty Guidelines, the state subtracts 137.5 percent of the Federal Poverty Guidelines from countable income, multiplies the amount times 0.50, and then adds \$65.

¹⁹ American Samoa serves families that all fall below the Federal Poverty Guidelines and waives the copayment for all eligible families.

Table 32. Other Copayment Calculation Policies, 2012

State	<u>Copayment for Families with Multiple Children</u>		<u>Copayment for Part-Time Care</u>		
	Adjustment for Second Child in Care	Adjustment for Third Child in Care	Adjustment for Part-Time Care	Maximum Number of Hours Considered Part-Time Care if Copayment is Adjusted	Adjustment for Children with Special Needs
Alabama	Copayment is per child	Copayment is per child	50 percent of full-time copayment	25 hours weekly	No adjustment
Alaska	Copayment is family level, does not vary by number of children in care	Copayment is family level, does not vary by number of children in care	No adjustment	NA	No adjustment
Arizona	Copayment is per child	Copayment is per child	50 percent of full-time copayment	Less than 6 hours daily	No adjustment
Arkansas	NA (Copay is percent of cost or maximum rate)	NA (Copay is percent of cost or maximum rate)	NA (Copay is percent of cost or maximum rate) ²	NA	No adjustment
California	Copayment is family level, does not vary by number of children in care	Copayment is family level, does not vary by number of children in care	50 percent of full-time copayment ³	Less than 6.5 hours daily ⁴	No adjustment
Colorado	Varies ⁵	Varies ⁵	55 percent of full-time copayment ⁶	Less than 5 hours daily	No adjustment
Connecticut	Copayment is family level, does not vary by number of children in care	Copayment is family level, does not vary by number of children in care	No adjustment	NA	No adjustment
Delaware	NA (Copay is percent of cost or maximum rate)	NA (Copay is percent of cost or maximum rate)	NA (Copay is percent of cost or maximum rate)	NA	105 percent of copay for non-special needs child
DC	75 percent of one child copayment	NA ⁷	50 percent of full-time copayment	5 hours daily	No adjustment
Florida	50 percent of one child copayment	50 percent of one child copayment	50 percent of full-time copayment	Less than 6 hours daily	No adjustment
Georgia	Varies ⁸	Varies ⁸	No adjustment	NA	No adjustment
Hawaii	NA (Copay is percent of cost or maximum rate)	NA (Copay is percent of cost or maximum rate)	NA (Copay is percent of cost or maximum rate)	NA	No adjustment
Idaho	NA (Copay is percent of cost or maximum rate)	NA (Copay is percent of cost or maximum rate)	NA (Copay is percent of cost or maximum rate)	NA	No adjustment

Table 32. Other Copayment Calculation Policies, 2012

State	<u>Copayment for Families with Multiple Children</u>		<u>Copayment for Part-Time Care</u>		
	Adjustment for Second Child in Care	Adjustment for Third Child in Care	Adjustment for Part-Time Care	Maximum Number of Hours Considered Part-Time Care if Copayment is Adjusted	Adjustment for Children with Special Needs
Illinois	Copayment is family level, does not vary by number of children in care	Copayment is family level, does not vary by number of children in care	No adjustment ⁹	NA	No adjustment
Indiana	Copayment is family level, does not vary by number of children in care	Copayment is family level, does not vary by number of children in care	No adjustment	NA	No adjustment
Iowa	Varies ¹⁰	Varies ¹¹	50 percent of full-time copayment ¹²	5 hours daily ¹²	No adjustment
Kansas	Copayment is family level, does not vary by number of children in care	Copayment is family level, does not vary by number of children in care	No adjustment	NA	No adjustment
Kentucky	Varies ¹³	Varies ¹³	No adjustment	NA	No adjustment
Louisiana	NA (Copay is percent of cost or maximum rate)	NA (Copay is percent of cost or maximum rate)	NA (Copay is percent of cost or maximum rate)	NA	No adjustment
Maine	Copayment is family level, does not vary by number of children in care	Copayment is family level, does not vary by number of children in care	No adjustment	NA	No adjustment
Maryland	Varies ¹⁴	Varies ¹⁴	67 percent of full-time copayment ¹⁵	Less than 6 hours daily ¹⁵	No adjustment
Massachusetts	50 percent of one child copayment ¹⁶	25 percent of one child copayment	50 percent of full-time copayment ¹⁷	Less than 6 hours daily	No adjustment
Michigan	NA (Copay is percent of cost or maximum rate)	NA (Copay is percent of cost or maximum rate)	NA (Copay is percent of cost or maximum rate)	NA	No adjustment
Minnesota	Copayment is family level, does not vary by number of children in care	Copayment is family level, does not vary by number of children in care	No adjustment	NA	No adjustment
Mississippi	Varies ¹⁸	Varies ¹⁸	50 percent of full-time copayment	Less than 6 hours daily ¹⁹	10 dollars monthly

Table 32. Other Copayment Calculation Policies, 2012

State	<u>Copayment for Families with Multiple Children</u>		<u>Copayment for Part-Time Care</u>		
	Adjustment for Second Child in Care	Adjustment for Third Child in Care	Adjustment for Part-Time Care	Maximum Number of Hours Considered Part-Time Care if Copayment is Adjusted	Adjustment for Children with Special Needs
Missouri	Copayment is per child	Copayment is per child	Other ²⁰	Less than 5 hours daily	No copayment
Montana	Copayment is family level, does not vary by number of children in care	Copayment is family level, does not vary by number of children in care	No adjustment ²¹	NA	No adjustment
Nebraska	Copayment is per child	Copayment is per child	No adjustment	NA	No adjustment
Nevada	NA (Copay is percent of cost or maximum rate)	NA (Copay is percent of cost or maximum rate)	NA (Copay is percent of cost or maximum rate)	NA	No adjustment
New Hampshire	Copayment is family level, does not vary by number of children in care	Copayment is family level, does not vary by number of children in care	No adjustment	NA	No adjustment
New Jersey	75 percent of one child copayment	NA ⁷	50 percent of full-time copayment	Less than 6 hours daily	No adjustment
New Mexico	50 percent of one child copayment	25 percent of one child copayment	75 percent of full-time copayment ²²	29 hours weekly ²²	No adjustment
New York	Copayment is family level, does not vary by number of children in care	Copayment is family level, does not vary by number of children in care	75 percent of full-time copayment ²³	30 hours weekly ²³	No adjustment
North Carolina	Copayment is family level, does not vary by number of children in care	Copayment is family level, does not vary by number of children in care	75 percent of full-time copayment ²⁴	31 hours weekly ²⁴	No adjustment
North Dakota	Copayment is family level, does not vary by number of children in care	Copayment is family level, does not vary by number of children in care	No adjustment	NA	No adjustment
Ohio	Copayment is family level, does not vary by number of children in care	Copayment is family level, does not vary by number of children in care	No adjustment	NA	No adjustment
Oklahoma	Varies ²⁵	Varies ²⁵	No adjustment	NA	No adjustment

Table 32. Other Copayment Calculation Policies, 2012

State	<u>Copayment for Families with Multiple Children</u>		<u>Copayment for Part-Time Care</u>		
	Adjustment for Second Child in Care	Adjustment for Third Child in Care	Adjustment for Part-Time Care	Maximum Number of Hours Considered Part-Time Care if Copayment is Adjusted	Adjustment for Children with Special Needs
Oregon	Copayment is family level, does not vary by number of children in care	Copayment is family level, does not vary by number of children in care	No adjustment	NA	No adjustment
Pennsylvania	Copayment is family level, does not vary by number of children in care	Copayment is family level, does not vary by number of children in care	No adjustment	NA	No adjustment
Rhode Island	Copayment is family level, does not vary by number of children in care	Copayment is family level, does not vary by number of children in care	No adjustment	NA	--- ¹
South Carolina	Copayment is per child ²⁶	Copayment is per child ²⁶	No adjustment	NA	No adjustment
South Dakota	Copayment is family level, does not vary by number of children in care	Copayment is family level, does not vary by number of children in care	No adjustment	NA	Other ²⁷
Tennessee	Varies ²⁵	Varies ²⁵	50 percent of full-time copayment	Less than 20 hours weekly	No adjustment
Texas	Varies ²⁸	Varies ²⁸	60 percent of full-time copayment ²⁹	Less than 6 hours daily ²⁹	No adjustment
Utah	Varies ²⁵	Varies ²⁵	No adjustment	NA	Other ³⁰
Vermont	NA (Copay is percent of cost or maximum rate)	NA (Copay is percent of cost or maximum rate)	NA (Copay is percent of cost or maximum rate)	NA	No adjustment ³¹
Virginia	Copayment is family level, does not vary by number of children in care	Copayment is family level, does not vary by number of children in care	No adjustment	NA	No adjustment
Washington	Copayment is family level, does not vary by number of children in care	Copayment is family level, does not vary by number of children in care	No adjustment	NA	No adjustment
West Virginia	Copayment is per child	Copayment is per child	No adjustment ³²	NA	No adjustment
Wisconsin	Varies ²⁵	Varies ²⁵	50 percent of full-time copayment	20 hours weekly	No adjustment

Table 32. Other Copayment Calculation Policies, 2012

State	<u>Copayment for Families with Multiple Children</u>		<u>Copayment for Part-Time Care</u>		
	Adjustment for Second Child in Care	Adjustment for Third Child in Care	Adjustment for Part-Time Care	Maximum Number of Hours Considered Part-Time Care if Copayment is Adjusted	Adjustment for Children with Special Needs
Wyoming	Copayment is per child	Copayment is per child	No adjustment ³³	NA	No adjustment
American Samoa	NA ³⁴	NA ³⁴	NA ³⁴	NA ³⁴	NA ³⁴
Guam	NA (Copay is percent of cost or maximum rate)	NA (Copay is percent of cost or maximum rate)	NA (Copay is percent of cost or maximum rate)	NA	No adjustment
No Mariana Islands	NA (Copay is percent of cost or maximum rate)	NA (Copay is percent of cost or maximum rate)	NA (Copay is percent of cost or maximum rate)	NA	No adjustment
Puerto Rico	50 percent of one child copayment	25 percent of one child copayment	---	Less than 5 hours daily	No copayment
Virgin Islands	Copayment is per child	Copayment is per child	No adjustment	NA	No adjustment

Source: CCDF Policies Database October 1, 2012 Data

¹ Information not found in state's manual.

² Part-time care is defined as less than three hours but not including three hours of care per day. Half-time care is defined as between three and five total hours per day.

³ If there is more than one child in care, the full-time versus part-time copayment is determined according to the child who is in care for the greatest number of hours.

⁴ Full-time care is six and a half hours per day. Part-time care is less than six and a half hours per day.

⁵ Families pay a percentage of their income for the first child in care, plus a dollar amount for each additional child in care. The dollar amount is the same for each additional child in the family and varies based on family income. For counties opting to serve families for up to an additional six months once their income goes above 225 percent of the Federal Poverty Guidelines, the copayment for the first child in care is 12 percent to 25 percent of household income, determined on a case-by-case basis and increased incrementally, and the fee for each additional child in care is 40 dollars.

⁶ Part-time care is defined as an average of less than 13 full-time or equivalent units of care per month. A part-time unit is defined as less than five hours of care in a day. Part-time units are converted to equivalent full-time units using a factor of 0.55.

⁷ No additional copayment is required when there are more than two children in care.

⁸ The copayment is a family fee that increases with each additional child in care. Separate fee schedules are provided based on the number of children in care. The amount varies for different income levels.

⁹ If all of the children in care are school age and approved for part-day care for any month September through May, the copayment will be reduced by one half for that month.

¹⁰ If there are two children in care, the families pay a copayment that is 50 cents higher per day (25 cents per half day) than the amount if only one child is in care, except for the first income level, where the copayment remains zero.

¹¹ For a third child in care the copayment is one dollar higher per day (50 cents per half day) than the copayment for one child in care, except for the first income level where the copayment remains zero.

¹² Copayments are based on a half-day rate, multiplied by two to calculate the full-day rate. Part-time care of up to five hours uses the half-day rate. If the hours of care needed exceed five, two or more units of care are used and the half-day rate is multiplied by the number of daily units of care used.

¹³ The copayment is family level and varies depending on the number of children in care. Two different fee scales are provided, one for families with one child in care and one for families with two or more children in care. Families with two or more children in care pay the same copayment, regardless of the number of additional children in care.

¹⁴ A separate copayment schedule is provided for additional children in care. The adjustment for the second child in care is the same as the adjustment for the third child in care.

¹⁵ Care for more than three but less than six hours per day is charged a copayment of 66.67 percent of the full-time rate. Care for three hours or less per day is charged a copayment of 33.33 percent of the full-time rate.

¹⁶ The adjusted copayment of 50 percent of the full copayment is applied to the second oldest child receiving care.

¹⁷ There is no adjustment for school-age blended copayments.

¹⁸ The copayment varies by family size, number of children in care, and the majority type of care provided (full-time or part-time care).

¹⁹ Full-time care is defined as care for six or more hours of a 24-hour day.

²⁰ Half-time care is defined as care lasting from three hours up to five hours. The half-time care copayment is a dollar amount ranging from 65 to 70 percent of the full-time copayment depending on the family's income level. An additional part-time copayment ranging from 45 to 50 percent of the full-time care copayment, depending on the family's income level, is used for care provided up to three hours per day.

²¹ If the month's cost of child care is less than the monthly copayment, the family is obligated to pay only the cost of care, not the full copayment indicated on the child care certificate plan.

²² The adjustment for part-time care varies depending on the amount of care used. For care provided 20 to 29 hours per week, the adjustment is 75 percent of the full-time rate. For care provided 6 to 19 hours per week, the adjustment is 50 percent of the full-time rate. For care provided five hours or less per week, the adjustment is 25 percent of the full-time rate.

²³ Policies coded for New York City.

²⁴ If the child is in care for an average of 18 through 31 hours per week, the part-time copayment is 75 percent of the full-time copayment. If the child is in care for an average of 17 hours or less per week, the part-time copayment is 50 percent of the full-time copayment.

²⁵ The copayment is a family fee that increases with each additional child in care. Separate fee schedules are provided based on the number of children in care.

²⁶ A percentage discount is established by the provider for families with multiple children receiving care from the same provider. It is applied to all children except the youngest.

²⁷ Copayments for care for children with advanced special needs are capped at 10 percent of gross monthly income.

²⁸ Policies coded for the Gulf Coast Region. For multiple children receiving child care assistance, there is an additional per child fee that depends on the household income.

²⁹ Policies coded for the Gulf Coast Region. If all children are receiving child care less than six hours per day, the parent fee is reduced by 40 percent.

³⁰ There is a separate eligibility and copayment schedule for families with children with special needs.

³¹ Families that foster children with special needs or receive an adoption subsidy for a child with special needs are exempt; otherwise, the copayment is the same as for non-special needs children.

³² Partial days of care are converted into full days for purposes of copayments and reimbursement.

³³ The copayment is hourly. The copayment for part-time care provided less than five hours per day is four times the hourly copayment.

³⁴ American Samoa serves families that all fall below the Federal Poverty Guidelines and waives the copayment for all eligible families.

Table 33. Copayment Amounts for a Single Parent with a Two-Year-Old Child in Full-Time Care (Monthly Dollar Amounts), 2012 ¹

State	<u>Annual Earnings</u>			
	\$15,000	\$20,000	\$25,000	\$30,000
Alabama	78	Not eligible	Not eligible	Not eligible
Alaska	38	50	83	150
Arizona	43	65	Not eligible	Not eligible
Arkansas	0	106	318	Not eligible
California	0	0	76	167
Colorado ²	113	183	Not eligible	Not eligible
Connecticut	50	67	125	200
Delaware ³	92	184	287	459
DC	44	75	134	192
Florida ⁴	52	87	Not eligible	Not eligible
Georgia	113	143	Not eligible	Not eligible
Hawaii ⁵	419	698	977	1256
Idaho ⁶	194	Not eligible	Not eligible	Not eligible
Illinois	50	120	192	Not eligible
Indiana	0	Not eligible	Not eligible	Not eligible
Iowa	0	117	Not eligible	Not eligible
Kansas	18	110	175	Not eligible
Kentucky	87	173	Not eligible	Not eligible
Louisiana ⁷	80	240	Not eligible	Not eligible
Maine	100	150	208	250
Maryland ⁸	143	214	Not eligible	Not eligible
Massachusetts	97	173	271	379
Michigan ⁷	32	Not eligible	Not eligible	Not eligible
Minnesota	4	50	80	Not eligible
Mississippi	60	102	143	Not eligible
Missouri ⁹	110	Not eligible	Not eligible	Not eligible
Montana	50	183	Not eligible	Not eligible
Nebraska	98	Not eligible	Not eligible	Not eligible
Nevada ¹⁰	30	121	243	364
New Hampshire	66	175	344	650
New Jersey	77	93	122	Not eligible
New Mexico	52	99	153	218
New York ¹¹	65	152	299	425
North Carolina	125	167	208	250
North Dakota	77	111	Not eligible	Not eligible
Ohio	90	Not eligible	Not eligible	Not eligible
Oklahoma	65	139	170	Not eligible
Oregon	117	238	397	Not eligible
Pennsylvania	87	139	178	247
Rhode Island	0	83	167	Not eligible
South Carolina	48	74	Not eligible	Not eligible
South Dakota	0	240	300	Not eligible

Table 33. Copayment Amounts for a Single Parent with a Two-Year-Old Child in Full-Time Care (Monthly Dollar Amounts), 2012 ¹

State	Annual Earnings			
	\$15,000	\$20,000	\$25,000	\$30,000
Tennessee ¹²	90	116	146	Not eligible
Texas ¹³	120	220	270	330
Utah	13	115	203	Not eligible
Vermont ¹⁴	0	23	173	318
Virginia ¹⁵	125	167	208	Not eligible
Washington	65	65	240	448
West Virginia	108	157	Not eligible	Not eligible
Wisconsin ¹²	90	185	258	Not eligible
Wyoming	0	19	38	196
American Samoa ¹⁶	0	0	0	0
Guam	118	235	Not eligible	Not eligible
No Mariana Islands ⁷	60	75	Not eligible	Not eligible
Puerto Rico	46	Not eligible	Not eligible	Not eligible
Virgin Islands	0	0	0	17

Source: CCDF Policies Database October 1, 2012 Data

¹ Numbers are rounded to the nearest dollar amount. In calculating the monthly copayment, the following assumptions were made. The family consists of one parent and one child. The child is 24 months old and does not have any special needs. The family receives full-time care. The family is receiving subsidized child care for the first time, and eligibility is determined under initial eligibility thresholds. Families who already receive subsidized care may be eligible at somewhat higher income levels in some states. Families receiving additional assistance, such as transitional child care or TANF, may also qualify for child care subsidies at higher income levels than shown here. All income is earned. If the state uses an income disregard for calculating copayments, the disregard was applied. The lowest earnings level shown (15,000 dollars) is approximately equal to full-time full-year pay at the federal minimum wage of \$7.25 per hour. Unless noted, the calculation for monthly copayments uses 8 hours per day, 5 days per week, and 4.333 weeks per month when hourly, daily, or weekly copayments were provided.

² Copayment amounts for Denver.

³ Copayment amounts based on center reimbursement rates for New Castle.

⁴ Copayment amounts for Miami-Dade County.

⁵ Copayment amounts based on reimbursement rates for licensed centers and center based infant and toddler care.

⁶ Copayment amounts based on center reimbursement rates for Region 4.

⁷ Copayment amounts based on center reimbursement rates.

⁸ Copayment amounts for center care in the Baltimore City Region.

⁹ Copayments are calculated using a multiplier of 22 days per month.

¹⁰ Copayment amounts based on licensed center reimbursement rates for Clark.

¹¹ Copayment amounts for New York City.

¹² Copayments are calculated using a multiplier of 4.3 to convert weekly rates to monthly rates.

¹³ Copayment amounts for the Gulf Coast Region.

¹⁴ Copayment amounts based on licensed center reimbursement rates.

¹⁵ Copayment amounts for Group III. The state-wide standard copayment for families receiving child care subsidies is 10 percent of their countable monthly gross income. Local departments have the option to use a different amount established by a state approved local alternate copayment schedule.

¹⁶ American Samoa serves families that all fall below the Federal Poverty Guidelines and waives the copayment for all eligible families.

Table 34. Copayment Amounts for a Single Parent with a Two-Year-Old Child and a Four-Year-Old Child in Full-Time Care (Monthly Dollar Amounts), 2012 ¹

State	Annual Earnings			
	\$15,000	\$20,000	\$25,000	\$30,000
Alabama	91	156	Not eligible	Not eligible
Alaska	25	50	83	125
Arizona	43	130	130	433
Arkansas	0	0	395	790
California	0	0	54	132
Colorado ²	118	182	254	335
Connecticut	25	67	83	150
Delaware ³	138	241	367	551
DC	48	77	131	206
Florida ⁴	78	104	130	Not eligible
Georgia	139	182	221	Not eligible
Hawaii ⁵	414	828	1035	1449
Idaho ⁶	217	577	Not eligible	Not eligible
Illinois	33	82	152	210
Indiana	0	83	Not eligible	Not eligible
Iowa	0	30	117	Not eligible
Kansas	22	58	138	207
Kentucky	108	152	238	Not eligible
Louisiana ⁷	156	312	468	468
Maine	75	133	188	250
Maryland ⁸	103	313	384	Not eligible
Massachusetts	65	211	292	487
Michigan ⁷	54	54	Not eligible	Not eligible
Minnesota	4	46	63	98
Mississippi	65	107	148	190
Missouri ⁹	132	220	Not eligible	Not eligible
Montana	13	83	229	Not eligible
Nebraska	0	122	Not eligible	Not eligible
Nevada ¹⁰	55	110	221	442
New Hampshire	66	133	219	338
New Jersey	0	137	157	204
New Mexico	63	119	182	260
New York ¹¹	65	65	186	334
North Carolina	125	167	208	250
North Dakota	62	97	139	179
Ohio	74	125	Not eligible	Not eligible
Oklahoma	95	169	200	226
Oregon	81	172	295	451
Pennsylvania	69	130	165	225
Rhode Island	0	33	104	200
South Carolina	95	121	147	Not eligible
South Dakota	0	10	300	360
Tennessee ¹²	159	211	249	301

Table 34. Copayment Amounts for a Single Parent with a Two-Year-Old Child and a Four-Year-Old Child in Full-Time Care (Monthly Dollar Amounts), 2012 ¹

State	Annual Earnings			
	\$15,000	\$20,000	\$25,000	\$30,000
Texas ¹³	160	225	290	360
Utah	17	58	158	277
Vermont ¹⁴	0	46	342	627
Virginia ¹⁵	125	167	208	250
Washington	15	65	65	221
West Virginia	108	152	195	Not eligible
Wisconsin ¹²	65	142	237	305
Wyoming	0	0	38	76
American Samoa ¹⁶	0	0	0	0
Guam	0	235	470	Not eligible
No Mariana Islands ⁷	120	150	Not eligible	Not eligible
Puerto Rico	60	72	Not eligible	Not eligible
Virgin Islands	0	0	0	0

Source: CCDF Policies Database October 1, 2012 Data

¹ Numbers are rounded to the nearest dollar amount. In calculating the monthly copayment, the following assumptions were made. The family consists of one parent and two children. The children are 24 and 48 months old and do not have any special needs. The family receives full-time care. The family is receiving subsidized child care for the first time, and eligibility is determined under initial eligibility thresholds. Families who already receive subsidized care may be eligible at somewhat higher income levels in some states. Families receiving additional assistance, such as transitional child care or TANF, may also qualify for child care subsidies at higher income levels than shown here. All income is earned. If the state uses an income disregard for calculating copayments, the disregard was applied. The lowest earnings level shown (15,000 dollars) is approximately equal to full-time full-year pay at the federal minimum wage of \$7.25 per hour. Unless noted, the calculation for monthly copayments uses 8 hours per day, 5 days per week, and 4.333 weeks per month when hourly, daily, or weekly copayments were provided.

² Copayment amounts for Denver.

³ Copayment amounts based on center reimbursement rates for New Castle.

⁴ Copayment amounts for Miami-Dade County.

⁵ Copayment amounts based on reimbursement rates for licensed centers and center based infant and toddler care.

⁶ Copayment amounts based on center reimbursement rates for Region 4.

⁷ Copayment amounts based on center reimbursement rates.

⁸ Copayment amounts for center care in the Baltimore City Region.

⁹ Copayments are calculated using a multiplier of 22 days per month.

¹⁰ Copayment amounts based on licensed center reimbursement rates for Clark.

¹¹ Copayment amounts for New York City.

¹² Copayments are calculated using a multiplier of 4.3 to convert weekly rates to monthly rates.

¹³ Copayment amounts for the Gulf Coast Region.

¹⁴ Copayment amounts based on licensed center reimbursement rates.

¹⁵ Copayment amounts for Group III. The state-wide standard copayment for families receiving child care subsidies is 10 percent of their countable monthly gross income. Local departments have the option to use a different amount established by a state approved local alternate copayment schedule.

¹⁶ American Samoa serves families that all fall below the Federal Poverty Guidelines and waives the copayment for all eligible families.

Table 35. Copayment Amounts for a Two Parent Household with a Two-Year-Old Child and a Four-Year-Old Child in Full-Time Care (Monthly Dollar Amounts), 2012 ¹

State	Annual Earnings		
	\$15,000	\$30,000	\$40,000
Alabama	69	Not eligible	Not eligible
Alaska	25	125	300
Arizona	43	130	Not eligible
Arkansas	0	593	Not eligible
California	0	76	236
Colorado ²	100	300	Not eligible
Connecticut	25	100	200
Delaware ³	115	367	689
DC	28	131	265
Florida ⁴	52	130	Not eligible
Georgia	139	260	Not eligible
Hawaii ⁵	207	1035	1656
Idaho ⁶	113	Not eligible	Not eligible
Illinois	25	183	334
Indiana	0	Not eligible	Not eligible
Iowa	0	117	Not eligible
Kansas	0	166	281
Kentucky	87	282	Not eligible
Louisiana ⁷	156	468	Not eligible
Maine	63	225	333
Maryland ⁸	62	384	Not eligible
Massachusetts	0	292	487
Michigan ⁷	54	Not eligible	Not eligible
Minnesota	0	74	171
Mississippi	60	185	267
Missouri ⁹	44	Not eligible	Not eligible
Montana	13	275	Not eligible
Nebraska	0	Not eligible	Not eligible
Nevada ¹⁰	55	221	552
New Hampshire	66	263	550
New Jersey	0	157	235
New Mexico	51	215	390
New York ¹¹	65	221	511
North Carolina	113	225	300
North Dakota	49	168	Not eligible
Ohio	59	Not eligible	Not eligible
Oklahoma	95	226	Not eligible
Oregon	57	355	684
Pennsylvania	74	208	312
Rhode Island	0	125	267
South Carolina	95	147	Not eligible
South Dakota	0	360	480
Tennessee ¹²	151	318	Not eligible

Table 35. Copayment Amounts for a Two Parent Household with a Two-Year-Old Child and a Four-Year-Old Child in Full-Time Care (Monthly Dollar Amounts), 2012 ¹

State	Annual Earnings		
	\$15,000	\$30,000	\$40,000
Texas ¹³	85	290	360
Utah	21	189	Not eligible
Vermont ¹⁴	0	342	855
Virginia ¹⁵	125	250	333
Washington	15	65	411
West Virginia	76	152	Not eligible
Wisconsin ¹²	43	237	335
Wyoming	0	38	263
American Samoa ¹⁶	0	0	0
Guam	0	470	Not eligible
No Mariana Islands ⁷	90	180	Not eligible
Puerto Rico	56	Not eligible	Not eligible
Virgin Islands	0	0	52

Source: CCDF Policies Database October 1, 2012 Data

¹ Numbers are rounded to the nearest dollar amount. In calculating the monthly copayment, the following assumptions were made. The family consists of two parents and two children. The children are 24 and 48 months old and do not have any special needs. The family receives full-time care. The family is receiving subsidized child care for the first time, and eligibility is determined under initial eligibility thresholds. Families who already receive subsidized care may be eligible at somewhat higher income levels in some states. Families receiving additional assistance, such as transitional child care or TANF, may also qualify for child care subsidies at higher income levels than shown here. All income is earned. If the state uses an income disregard for calculating copayments, the disregard was applied. The lowest earnings level shown (15,000 dollars) is approximately equal to full-time full-year pay for one parent at the federal minimum wage of \$7.25 per hour. Unless noted, the calculation for monthly copayments uses 8 hours per day, 5 days per week, and 4.333 weeks per month when hourly, daily, or weekly copayments were provided.

² Copayment amounts for Denver.

³ Copayment amounts based on center reimbursement rates for New Castle.

⁴ Copayment amounts for Miami-Dade County.

⁵ Copayment amounts based on reimbursement rates for licensed centers and center based infant and toddler care.

⁶ Copayment amounts based on center reimbursement rates for Region 4.

⁷ Copayment amounts based on center reimbursement rates.

⁸ Copayment amounts for center care in the Baltimore City Region.

⁹ Copayments are calculated using a multiplier of 22 days per month.

¹⁰ Copayment amounts based on licensed center reimbursement rates for Clark.

¹¹ Copayment amounts for New York City.

¹² Copayments are calculated using a multiplier of 4.3 to convert weekly rates to monthly rates.

¹³ Copayment amounts for the Gulf Coast Region.

¹⁴ Copayment amounts based on licensed center reimbursement rates.

¹⁵ Copayment amounts for Group III. The state-wide standard copayment for families receiving child care subsidies is 10 percent of their countable monthly gross income. Local departments have the option to use a different amount established by a state approved local alternate copayment schedule.

¹⁶ American Samoa serves families that all fall below the Federal Poverty Guidelines and waives the copayment for all eligible families.

V. POLICIES FOR PROVIDERS

Each CCDF program includes extensive policies related to child care providers. These policies operate within the context of a State's/Territory's broader policies concerning child care licensing and regulation. However, some policies related to providers are specific to the CCDF program. These include the maximum reimbursement rates that will be paid by the State/Territory for CCDF-subsidized care, and rules for "legally unregulated" providers who are outside the scope of a State's/Territory's broader child care regulations but who must meet certain standards in order to be paid through the subsidy system.

Reimbursement Rates

Each CCDF program determines the maximum amounts that will be paid to child care providers – termed "maximum reimbursement rates". The States/Territories establish these rates by conducting market rate surveys of child care prices throughout each State/Territory. Maximum rates affect not only providers but also families. For families, the maximum rates may establish the highest-cost care that the family can obtain with the subsidy, without paying an additional cost beyond the copayment. (Table 30 shows whether States/Territories may require a family to pay the difference between the maximum reimbursement rate and the provider's full rate.)

Within each State/Territory, rates may differ based on a number of factors, including provider type, amount of care (full-time, part-time, before-and-after, or summer care), and the age of the child. States/Territories may also provide higher rates for providers who qualify for increased payments based on meeting additional criteria beyond the basic licensing requirements (e.g., higher quality ratings). When States/Territories use this "tiered" approach, the general rate (for providers who do not qualify for the additional payments) is termed the "base rate". States/Territories may also use higher rates for care provided during non-traditional hours or care for children with special needs.

States/Territories may express their maximum rates in hourly, daily, weekly, and/or monthly terms; most States/Territories use more than one metric, with rules for how to determine the maximum rate in different situations. (For example, a State/Territory may use a daily rate when child care is provided for less than a certain number of days per week, but use a weekly or monthly rate in other cases.) Finally, it is very common for maximum rates to vary across different sub-areas of a State. A State/Territory may have just a few different sets of maximum rates or dozens of different sets of maximum rates.

Tables 36 through 39 show maximum reimbursement rates for four basic types of providers – child care centers, family child care homes, group child care homes, and in-home child care providers. While States/Territories may use different terminology for categorizing

different types of providers, for the purposes of the CCDF Policies Database, the four types of providers are defined as follows¹:

- Child care centers are usually licensed, non-residential child care facilities that typically care for a larger number of children at one time than residentially-based facilities.
- Family child care homes are residential child care programs that are typically licensed or otherwise accredited.
- Group child care homes are similar to family child care homes but are usually allowed to care for more children at the same time than a family child care home. (Many States/Territories consider all child care homes as one group and do not use this category.)
- In-home child care usually refers to legally unregulated care provided in the child's home. In some cases, the State/Territory also refers to legally unregulated care provided in the provider's home as in-home care and provides two different in-home rates. In these cases, the table captures the rates for care provided in the home of the child. States/Territories vary widely on the amount of oversight and credentials required for in-home providers.

Each of the four tables shows the maximum reimbursement rate for a child at four different ages: infant (11 months, just before the 1st birthday), toddler (35 months, just before the 3rd birthday), preschool (59 months, just before the 5th birthday), and school-age before-and-after care (84 months, exactly 7 years old). The ages are precise to allow comparability across States/Territories, since different States/Territories use different numbers of age categories and define terms such as “toddler” or “preschool” in somewhat different ways. The tables all assume that the 11-, 35-, and 59-month-old children are all in full-time care and that the 7-year-old is in before-and-after care. For all States/Territories and each of the four ages, maximum reimbursement rates are shown in monthly terms, even if a State/Territory computes the rates in hourly, daily, or weekly terms. The tables assume that the younger children are in care for eight hours per day and five days a week, and that the school-age child requires before-and-after care for a total of four hours per day and five days a week. Rates are computed assuming that children do not have special needs, and that they receive care during traditional hours. Finally, in States where rates vary by locality, the tables show the information for the region or county providing subsidized child care for the largest number of children.

The tables also reflect both the base rates and highest tiered or accredited rates for each provider type and age group. In the case of center care, family child care homes, and group child care homes, the base rates reflect the reimbursement rates for licensed child care providers. For States/Territories that do not provide reimbursement rates for licensed providers, the rates for

¹ States/Territories often define provider types differently, so broad definitions were developed to allow State/Territory policies to be categorized consistently. These definitions vary slightly from the definitions used by the Office of Child Care (OCC). In particular, the definitions used by OCC include the distinction that family child care homes are programs with one provider and group homes are programs with two or more providers. However, this level of detail is not always available in the caseworker manuals used for the CCDF Policies Database.

Additional detail about provider types included in the full database may assist users in linking specific States'/Territories' provider types with the definitions used in the administrative data. The ACF-800 reporting instructions for States/Territories provide the provider definitions used by OCC:

<http://www.acf.hhs.gov/programs/occ/resource/acf-800-reporting-instructions-definitions>.

registered or certified providers are used. For in-home child care providers, the base rates reflect the rates for unlicensed providers. For all provider types, for States/Territories with tiered reimbursement rates, the highest rates reflect the highest tiered or accredited rates available. For States/Territories that do not use tiered reimbursement rates, the highest rates are identical to the base rates. As noted above, States/Territories may use tiered reimbursement rates for different reasons, such as for providers who complete additional training requirements. However, the tiers are not always defined in the States’/Territories’ caseworker manuals, and so for the purposes of the CCDF Policies Database, the tiers are not categorized according to a common definition. The table footnotes provide the name of the base and highest tiers for States/Territories that use higher rates.

Maximum Reimbursement Rates for Licensed Child Care Centers (Table 36)

Table 36 shows the maximum amount a State/Territory will pay to CCDF child care providers falling into the category of child care center. Findings from 2012 include:

- Monthly base rates for infant care in child care centers range from \$280 in Puerto Rico to \$1,430 in New York. The average monthly base rate is \$717, and the median monthly base rate is \$674.
- Monthly base rates for toddler care in child care centers range from \$200 in American Samoa to \$1,105 in New York. The average monthly base rate is \$596, and the median monthly base rate is \$574.
- Monthly base rates for preschool care in child care centers range from \$200 in American Samoa to \$940 in New York. The average monthly base rate is \$549, and the median monthly base rate is \$521.
- Monthly base rates for before-and-after care in child care centers range from \$80 in Puerto Rico to \$638 in Minnesota. The average monthly base rate is \$304, and the median monthly base rate is \$299.
- Twenty-four States/Territories use higher tiered or accredited rates in addition to their base rates for care provided in child care centers.

Maximum Reimbursement Rates for Licensed Family Child Care Homes (Table 37)

Table 37 shows the maximum amount a State/Territory will pay to CCDF child care providers falling into the category of family child care home. Findings from 2012 include:

- Monthly base rates for infant care in family child care homes range from \$245 in Mississippi to \$919 in Massachusetts. The average monthly base rate is \$552, and the median monthly base rate is \$525.
- Monthly base rates for toddler care in family child care homes range from \$200 in American Samoa to \$837 in Massachusetts. The average monthly base rate is \$501, and the median monthly base rate is \$477.

- Monthly base rates for preschool care in family child care homes range from \$200 in American Samoa to \$837 in Massachusetts. The average monthly base rate is \$481, and the median monthly base rate is \$460.
- Monthly base rates for before-and-after care in family child care homes range from \$100 in the Northern Mariana Islands to \$502 in California. The average monthly base rate is \$278, and the median monthly base rate is \$260.
- Twenty-two States/Territories use higher tiered or accredited rates in addition to their base rates for care provided in family child care homes.

Maximum Reimbursement Rates for Licensed Group Child Care Homes (Table 38)

Table 38 captures the maximum amount a State/Territory will pay to CCDF child care providers falling into the category of group child care home. Findings from 2012 include:

- Monthly base rates for infant care in group child care homes range from \$217 in Puerto Rico to \$976 in Connecticut. The average monthly base rate is \$547, and the median monthly base rate is \$507.
- Monthly base rates for toddler care in group child care homes range from \$200 in American Samoa to \$976 in Connecticut. The average monthly base rate is \$497, and the median monthly base rate is \$474.
- Monthly base rates for preschool care in group child care homes range from \$200 in American Samoa to \$770 in Connecticut. The average monthly base rate is \$469, and the median monthly base rate is \$458.
- Monthly base rates for before-and-after care in group child care homes range from \$58 in Puerto Rico to \$498 in New York (New York, Bronx, Kings, Queens, and Richmond counties). The average monthly base rate is \$263, and the median monthly base rate is \$247.
- Fifteen States/Territories use higher tiered or accredited rates in addition to their base rates for care provided in group child care homes.

Maximum Reimbursement Rates for In-Home Child Care (Table 39)

Table 39 captures the maximum amount a State/Territory will pay to CCDF child care providers falling into the category of in-home child care providers. Findings from 2012 include:

- Monthly base rates for infant care for in-home child care providers range from \$152 in Alabama to \$1,571 in Iowa. The average monthly base rate is \$459, and the median monthly base rate is \$347.
- Monthly base rates for toddler care for in-home child care providers range from \$152 in Alabama to \$1,571 in Iowa. The average monthly base rate is \$436, and the median monthly base rate is \$325.
- Monthly base rates for preschool care for in-home child care providers range from \$152 in Alabama to \$1,571 in Iowa. The average monthly base rate is \$424, and the median monthly base rate is \$319.

- Monthly base rates for before-and-after care for in-home child care providers range from \$60 in Hawaii to \$785 in Iowa. The average monthly base rate is \$229, and the median monthly base rate is \$160.
- Eight States/Territories use higher tiered or accredited rates in addition to their base rates for care provided by in-home providers.
- In several States/Territories, the policies for the rates paid to in-home providers involve a requirement that they be paid at least the State/Territory minimum wage.

Changes in Reimbursement Rate Policies from 2011 to 2012

From 2011 to 2012, several States/Territories made changes to their reimbursement rates for all four types of providers. Center child care rates for infant care changed in 10 States/Territories in 2012, increasing in seven States/Territories and decreasing in two. In Wisconsin, the base rate was slightly lowered, while the highest infant center rate increased. Center child care rates for toddler and preschool care changed in 10 States/Territories, increasing in seven States/Territories and decreasing in two. As with its infant rates, Wisconsin lowered its base rates while increasing its highest toddler and preschool rates. Center child care rates for before-and-after care changed in 12 States/Territories from 2011 to 2012. Rates increased in eight States/Territories, decreased in three, and the changes varied in Wisconsin.

Family child care home rates for infant care changed in eight States/Territories from 2011 to 2012, increasing in six and decreasing in one. As with its center rates, Wisconsin decreased all of its base family child care home rates and increased all of its highest family child care home rates. Family child care home rates for toddler care changed in 10 States/Territories, increasing in seven States/Territories, decreasing in two, and the changes varying in Wisconsin. Family child care home rates for preschool care changed in nine states. Six states raised their toddler rates, two lowered their rates, and Wisconsin's rate changes varied. Family child care home rates for before-and-after care changed in 10 States/Territories from 2011 to 2012, increasing in six, decreasing in three, and both increasing and decreasing in Wisconsin.

From 2011 to 2012, group child care home rates for infant care changed in nine States/Territories. The rates increased in eight States/Territories, and in Wisconsin the base rate decreased while the highest rate increased. Group child care home rates for toddler and preschool care changed in 10 States/Territories from 2011 to 2012, increasing in eight States/Territories, decreasing in one, and the changes varying in Wisconsin. Group child care home rates for before-and-after care changed in 11 States/Territories from 2011 to 2012, increasing in eight States/Territories, decreasing in two, and both increasing and decreasing in Wisconsin.

In-home child care rates for infant and preschool care changed in seven States/Territories from 2011 to 2012, increasing in three States/Territories and decreasing in four. In-home child care rates for toddler and before-and-after care changed in eight States/Territories, increasing in four States/Territories and decreasing in four.

Policies for Unregulated Child Care Providers

To ensure the health and safety of children whose care is paid for through CCDF, States/Territories must establish minimum health and safety policies regarding physical and building premises, infectious diseases, and training. Many CCDF child care providers are licensed by the State/Territory in which they provide care and therefore must meet all requirements (regarding facility safety, staff training requirements, employee/volunteer criminal history checks, and so on) that are imposed by the license. However, some providers are not licensed, such as most in-home care providers, relative providers, some family child care homes, and religious exempt child care centers. These providers are often referred to as “legally unregulated providers,” and each State/Territory establishes policies for these providers within the framework of federal requirements.

States/Territories vary considerably on the requirements they place on legally unregulated providers. There are differences across States/Territories in the requirements for background checks and training, the minimum age requirements for providers, and the rules for which individuals are allowed to provide CCDF-subsidized care (e.g., relatives living in the home). Tables 40, 41, and 42 review these types of policies.

Unregulated Provider Background Check Requirements (Table 40)

States/Territories may require unregulated providers to have some sort of background check or screening. If care is provided in the home of the provider instead of the home of the child, States/Territories may require others in the home to have background checks as well. For example, a State/Territory may require all members of the provider’s household over the age of 18 to be screened, while another State/Territory may require any person who might have access to the children while they are in care to be screened. Criminal history background checks may include local-level checks, State/Territory-level checks, FBI checks, and sex offender registry checks. Additionally, many States/Territories require that providers be screened by a child protective services database or an adult protective services database.

Table 40 describes the background checks to which legally unregulated providers are subject if they wish to receive CCDF payments. Findings from 2012 include:

- Thirty-eight States/Territories require criminal history background checks for the provider and other staff members. Nine States/Territories require criminal history background checks for only the provider, while nine States/Territories do not require the provider or other staff members to complete a criminal history background check.
- A majority of the States/Territories (44) require providers to undergo some sort of child protective services screening, while only 13 States/Territories require providers to undergo an adult protective services check.
- Requirements may vary depending on whether the unregulated provider is a relative.

Unregulated Provider Training Requirements (Table 41)

States/Territories are required to ensure that child care providers undergo minimum health and safety training, even if they are otherwise unregulated. (Relatives who provide CCDF-funded care are not covered by the federal health and safety requirements, but may still face State/Territory requirements.) Regulations do not specify what trainings should be included, but these range from CPR and Shaken Baby Syndrome training to child safety classes and child nutrition classes. Some States/Territories require providers to undergo training for a minimum number of hours each year, while others may require providers to undergo certain trainings before they may become eligible for payment under the CCDF program. Certain types of provider training may make an in-home provider eligible to receive higher reimbursement rates.

Table 41 focuses on two aspects of training: whether States/Territories require unregulated providers to be certified in CPR and/or First Aid. Some States/Territories require every child care provider to be trained in CPR and/or First Aid, while others may require only that someone on the site where care is being provided be certified. Findings from 2012 include:

- Thirteen States/Territories require the provider to be CPR certified, while another six States/Territories require at least one person on site to be CPR certified.
- Fifteen States/Territories require the provider to have First Aid certification, while another six States/Territories require at least one person on site to have First Aid certification.

Provider Policies: Who May Provide Care (Table 42)

Table 42 describes who may be authorized to provide care under each State's/Territory's child care subsidy program, based on the person's age and his or her relationship to the child. Findings from 2012 include:

- Whereas most States/Territories require providers to be at least 18 years of age, New Hampshire will pay an unregulated provider as young as 16, and some States/Territories require a minimum age of 21.
- All States/Territories allow relatives living outside of the home of the child to provide care.
- States/Territories differ in their rules concerning relatives who live in the same home as the child. For instance, a little more than half of the States/Territories allow relatives living in the home to provide care if they are not counted as part of the family unit when determining CCDF eligibility.

Changes in Unregulated Provider Policies from 2011 to 2012

When compared to 2011, few States/Territories saw changes in the unregulated provider policies captured in the CCDF Policies Database. Background check policies for informal providers changed in only a few States/Territories from 2011 to 2012. Montana added additional

levels of background checks, including FBI and sex offender registry checks, and South Carolina added a child protective services background check. In Wisconsin, the State began requiring background checks, with State, FBI, and sex offender registry checks. Wisconsin also added both child and adult protective services background checks. From 2011 to 2012, training requirements remained the same in all but one of the States/Territories. In Minnesota, requirements were added for CPR and First Aid training.

Policies outlining who is allowed to provide care under the subsidy program remained the same in all but one of the States/Territories from 2011 to 2012. In Minnesota, relatives and non-relatives living in the home were allowed to provide care for the children in 2011, but this policy was changed in 2012 to no longer allow them to provide care for children living in the same home.

Table 36. Maximum Reimbursement Rates for Licensed Child Care Centers (Monthly Dollar Amounts), 2012 ¹

State	<u>Full-Time Care</u>						<u>Before-and-After Care</u>	
	<u>Infant (11 months)</u>		<u>Toddler (35 months)</u>		<u>Preschool (59 months)</u>		<u>School Age (84 months)</u>	
	Base Rate	Highest Rate	Base Rate	Highest Rate	Base Rate	Highest Rate	Base Rate	Highest Rate
Alabama ²	481	481	442	442	442	442	204	204
Alaska ³	850	850	800	800	650	650	375	375
Arizona ⁴	654	720	576	634	516	567	347	381
Arkansas ⁵	552	552	531	531	457	457	324	324
California ⁶	1029	1029	744	744	744	744	386	386
Colorado ⁷	714	902	520	697	520	697	286	383
Connecticut ⁸	976	1025	976	1025	770	808	460	483
Delaware ⁹	708	708	574	574	574	574	275	275
DC ¹⁰	882	1179	863	1102	633	910	265	416
Florida ¹¹	507	608	429	515	403	484	273	328
Georgia ¹²	602	602	559	559	494	494	282	282
Hawaii ¹³	1395	1395	675	710	675	710	155	155
Idaho ¹⁴	594	594	492	492	492	492	151	151
Illinois ¹⁵	1007	1007	851	851	709	709	354	354
Indiana ¹⁶	945	1040	815	897	693	763	377	416
Iowa	685	685	552	552	552	552	249	249
Kansas ¹⁷	588	588	395	395	395	395	197	197
Kentucky ¹⁸	520	520	520	520	455	455	282	282
Louisiana ¹⁹	407	407	407	407	385	385	193	193
Maine ²⁰	1018	1018	910	910	810	810	347	347
Maryland ²¹	794	1143	474	597	474	597	316	398
Massachusetts ²²	1182	1182	795	795	795	795	354	354
Michigan	650	650	433	433	433	433	217	217
Minnesota ²³	1125	1294	838	964	838	964	638	733
Mississippi ²⁴	339	375	326	357	312	339	183	201

Table 36. Maximum Reimbursement Rates for Licensed Child Care Centers (Monthly Dollar Amounts), 2012¹

State	<u>Full-Time Care</u>						<u>Before-and-After Care</u>	
	<u>Infant (11 months)</u>		<u>Toddler (35 months)</u>		<u>Preschool (59 months)</u>		<u>School Age (84 months)</u>	
	Base Rate	Highest Rate	Base Rate	Highest Rate	Base Rate	Highest Rate	Base Rate	Highest Rate
Missouri ²⁵	605	726	354	424	354	424	229	275
Montana ²⁶	715	715	624	624	624	624	468	468
Nebraska ²⁷	812	867	704	737	672	737	390	433
Nevada ²⁸	672	672	607	607	498	498	206	206
New Hampshire ²⁹	854	854	810	810	713	713	325	325
New Jersey ³⁰	695	730	573	604	573	604	287	302
New Mexico ³¹	521	653	471	603	440	572	391	523
New York ³²	1430	1430	1105	1105	940	940	542	542
North Carolina ³³	536	789	490	751	477	702	317	445
North Dakota	663	663	600	600	565	565	300	300
Ohio ³⁴	713	849	652	776	570	678	253	302
Oklahoma ³⁵	336	758	292	601	292	487	173	303
Oregon ³⁶	900	900	894	894	705	705	524	524
Pennsylvania ³⁷	910	964	780	834	715	769	498	523
Rhode Island ²⁹	815	815	815	815	680	680	308	308
South Carolina ³⁸	455	650	455	650	390	624	212	303
South Dakota ³⁹	650	650	650	650	572	572	260	260
Tennessee ⁴⁰	568	679	426	512	426	512	215	258
Texas ⁴¹	713	749	586	615	508	533	297	312
Utah ³⁰	620	620	525	525	480	480	396	396
Vermont ⁴²	594	832	578	809	562	786	300	419
Virginia ⁴³	1213	1213	845	845	845	845	455	455
Washington ⁴⁴	976	976	684	684	684	684	420	420
West Virginia ⁴⁵	560	640	480	560	460	540	190	230
Wisconsin ⁴⁶	948	1097	817	946	735	851	409	473

Table 36. Maximum Reimbursement Rates for Licensed Child Care Centers (Monthly Dollar Amounts), 2012 ¹

State	<u>Full-Time Care</u>						<u>Before-and-After Care</u>	
	<u>Infant (11 months)</u>		<u>Toddler (35 months)</u>		<u>Preschool (59 months)</u>		<u>School Age (84 months)</u>	
	Base Rate	Highest Rate	Base Rate	Highest Rate	Base Rate	Highest Rate	Base Rate	Highest Rate
Wyoming ⁴⁷	675	675	531	531	521	521	336	336
American Samoa	400	400	200	200	200	200	130	130
Guam	525	525	470	470	470	470	400	400
No Mariana Islands ⁴⁸	300	300	300	300	300	300	100	100
Puerto Rico ²⁹	280	280	280	280	273	273	80	80
Virgin Islands	300	300	300	300	300	300	150	150

Source: CCDF Policies Database October 1, 2012 Data

¹ The rates represent the maximum reimbursement rates for licensed child care providers. For states that have tiered reimbursement systems, the base rates reflect the base licensed rates and the highest rates reflect the highest tiered or accredited rates available. For states that do not have tiered reimbursement systems, the base and highest rates are identical. For states that do not specify reimbursement rates for licensed providers, the rates for registered or certified providers are used. Rates for the largest, most populous area are provided for states in which rates vary at a sub-state level. Numbers are rounded to the nearest dollar amount. Maximum rates may be higher for special needs children or for care during non-traditional hours. For the purposes of calculating the monthly rate, the following assumptions were made. The child receives full-time center based child care. The child is in care for 8 hours per day, 5 days per week. For children receiving before-and-after care, the child is in care for 4 hours per day. Unless noted, when hourly, daily, or weekly rates were provided, the monthly rates were calculated using 8 hours per day, 5 days per week, and 4.333 weeks per month. When a before-and-after care or part-time school-age rate was not available, the before-and-after care rate was calculated using half of the full-time school-age rate.

² Center reimbursement rates for the Birmingham Region.

³ Center reimbursement rates for Anchorage.

⁴ Base rates are licensed center reimbursement rates for District 1. Highest rates are licensed accredited center reimbursement rates for District 1.

⁵ Infant-toddler center rates for Pulaski County.

⁶ Center reimbursement rates for Los Angeles.

⁷ Base rates are reimbursement rates for centers with no additional rating in Denver. Highest rates are tier 5 center reimbursement rates for Denver.

⁸ Base rates are licensed center reimbursement rates for the Southwest Region. Highest rates are licensed accredited center reimbursement rates for the Southwest Region. Rates were calculated using a multiplier of 4.3 to convert weekly rates to monthly rates.

⁹ Center reimbursement rates for New Castle.

- ¹⁰ Base rates are bronze tier center reimbursement rates. Highest rates are gold tier center reimbursement rates.
- ¹¹ Base rates are licensed or exempt center reimbursement rates for Miami-Dade County. Highest rates are Gold Seal center reimbursement rates for the Miami-Dade Coalition.
- ¹² Center reimbursement rates for Zone 1.
- ¹³ Base rates are licensed center reimbursement rates. Highest rates are licensed accredited center reimbursement rates.
- ¹⁴ Center reimbursement rates for Region 4.
- ¹⁵ Licensed center reimbursement rates for Group 1A. The state sets a number of days each month that families may be eligible for care. The daily rate is then multiplied by the number of eligible days in the month. The rate may vary each month, depending on the number of eligible days.
- ¹⁶ Base rates are licensed center reimbursement rates for Marion. Highest rates are accredited center reimbursement rates for Marion.
- ¹⁷ Center reimbursement rates for Sedgwick County.
- ¹⁸ Licensed center reimbursement rates for Central Region Urban Counties.
- ¹⁹ This state authorizes a maximum of 22 days per month. The multiplier for converting maximum daily rates to maximum monthly rates is 22.
- ²⁰ Licensed center reimbursement rates for Cumberland County.
- ²¹ Base rates are unaccredited center reimbursement rates for Baltimore City. Highest rates are level 4 center reimbursement rates for Baltimore City.
- ²² Center reimbursement rates for Region 6.
- ²³ Base rates are unaccredited center reimbursement rates for Hennepin County. Highest rates are accredited center reimbursement rates for Hennepin County.
- ²⁴ Base rates are tier 2 center reimbursement rates. Highest rates are tier 1 center reimbursement rates.
- ²⁵ Base rates are licensed center reimbursement rates for St. Louis County. Highest rates are licensed accredited center reimbursement rates for St. Louis County. Rates were calculated using a multiplier of 22 days per month.
- ²⁶ Center reimbursement rates for the Billings Region.
- ²⁷ Base rates are unaccredited center reimbursement rates for Lancaster, Dakota, Douglas, and Sarpy Counties. Highest rates are accredited center reimbursement rates for the entire state.
- ²⁸ Licensed center reimbursement rates for Clark.
- ²⁹ Licensed center reimbursement rates.
- ³⁰ Base rates are licensed center reimbursement rates. Highest rates are accredited center reimbursement rates.
- ³¹ Base rates are licensed center reimbursement rates for Metro Areas. Highest rates are 5-Star licensed center reimbursement rates for Metro Areas. Before-and-after school care rates are paid at the full-time rate for licensed child care provided for 20 hours or more per week.
- ³² Day care center reimbursement rates for Group 5 counties: New York, Bronx, Kings, Queens, and Richmond.

- ³³ Base rates are licensed 1-Star center reimbursement rates for Mecklenburg County. Highest rates are licensed 5-Star center reimbursement rates for Mecklenburg County. The before-and-after school rate is calculated at 75 percent of the full-time rate.
- ³⁴ Base rates are licensed center reimbursement rates for Cuyahoga County. Highest rates are three star center reimbursement rates for Cuyahoga County.
- ³⁵ Base rates are one star center reimbursement rates for Enhanced Areas. Highest rates are three star center reimbursement rates for Enhanced Areas. Before-and-after care rates are blended rates for a traditional school year.
- ³⁶ Certified center reimbursement rates for Group Area A.
- ³⁷ Base rates are reimbursement rates for centers with no star rating for Philadelphia. Highest rates are Star 4 center reimbursement rates for Philadelphia.
- ³⁸ Base rates are level C licensed center reimbursement rates for urban counties. Highest rates are level AA highest achieving center reimbursement rates for urban counties. The highest reimbursement rates include a quality incentive bonus of an additional 20 dollars for full-time care and 10 dollars for part-time care. Providers who do not receive the quality incentive bonus are reimbursed at 10 to 20 dollars less per week.
- ³⁹ Licensed center reimbursement rates for Minnehaha County.
- ⁴⁰ Base rates are reimbursement rates for centers with no star rating for the Top Tier counties. Highest rates are three star center reimbursement rates for the Top Tier counties. Rates were calculated using a multiplier of 4.3 to convert weekly rates to monthly rates.
- ⁴¹ Base rates are licensed center rates for the Gulf Coast Region. Highest rates are licensed reimbursement rates for centers with Texas Rising Star Certification for the Gulf Coast Region.
- ⁴² Base rates are licensed center reimbursement rates. Highest rates are licensed five start center reimbursement rates.
- ⁴³ Level 2 center reimbursement rates for Fairfax.
- ⁴⁴ Center reimbursement rates for Region 4. Rates were calculated using a multiplier of 22 days per month. School-age before-and-after care rates are authorized at 30 half day units when care is provided for five days per week.
- ⁴⁵ Base rates are tier 1 center reimbursement rates. Highest rates are tier 3 center reimbursement rates.
- ⁴⁶ Base rates are licensed 2 star center rates for Milwaukee. Highest rates are licensed 5 star center rates for Milwaukee. This state uses a multiplier of 4.3 to convert weekly rates to monthly rates.
- ⁴⁷ Licensed center reimbursement rates. The state sets a maximum reimbursement rate for all children at 675 dollars. With a quality capacity payment added to the infant rate, the calculated rate exceeded 675 dollars, and so the lower rate was used.
- ⁴⁸ Territory approves a maximum of three hours of care per day for after school programs.

Table 37. Maximum Reimbursement Rates for Licensed Family Child Care Homes (Monthly Dollar Amounts), 2012 ²

State	<u>Full-Time Care</u>						<u>Before-and-After Care</u>	
	<u>Infant (11 months)</u>		<u>Toddler (35 months)</u>		<u>Preschool (59 months)</u>		<u>School Age (84 months)</u>	
	Base Rate	Highest Rate	Base Rate	Highest Rate	Base Rate	Highest Rate	Base Rate	Highest Rate
Alabama ³	386	386	360	360	360	360	182	182
Alaska ⁴	700	700	650	650	545	545	301	301
Arizona ⁵	433	477	433	477	390	429	260	286
Arkansas ⁶	509	509	487	487	405	405	320	320
California ⁷	753	753	683	683	683	683	502	502
Colorado ⁸	549	685	456	573	456	573	251	315
Connecticut ⁹	744	781	744	781	744	781	460	483
Delaware ¹⁰	498	498	448	448	448	448	217	217
DC ¹¹	617	758	588	737	477	607	260	335
Florida ¹²	438	608	386	515	381	484	256	328
Georgia ¹³	477	477	433	433	416	416	221	221
Hawaii ¹⁴	650	650	600	600	600	600	155	155
Idaho ¹⁵	489	489	460	460	460	460	151	151
Illinois ¹⁶	682	682	656	656	615	615	307	307
Indiana ¹⁷	563	620	542	598	433	477	329	364
Iowa ¹⁸	530	530	497	497	497	497	221	221
Kansas ¹⁹	409	409	347	347	347	347	173	173
Kentucky ²⁰	455	455	455	455	412	412	282	282
Louisiana ²¹	352	352	352	352	330	330	165	165
Maine ²²	650	650	650	650	607	607	282	282
Maryland ²³	596	769	450	576	450	576	300	384
Massachusetts ²⁴	919	919	837	837	837	837	419	419
Michigan	503	503	416	416	416	416	208	208
Minnesota ²⁵	706	812	615	707	615	707	410	471
Mississippi ²⁶	245	272	237	259	223	245	112	125

Table 37. Maximum Reimbursement Rates for Licensed Family Child Care Homes (Monthly Dollar Amounts), 2012 ²

State	<u>Full-Time Care</u>						<u>Before-and-After Care</u>	
	<u>Infant (11 months)</u>		<u>Toddler (35 months)</u>		<u>Preschool (59 months)</u>		<u>School Age (84 months)</u>	
	Base Rate	Highest Rate	Base Rate	Highest Rate	Base Rate	Highest Rate	Base Rate	Highest Rate
Missouri ²⁷	378	454	300	360	300	360	185	222
Montana ²⁸	585	585	542	542	542	542	433	433
Nebraska ²⁹	563	607	542	542	542	542	303	347
Nevada ³⁰	650	650	585	585	563	563	249	249
New Hampshire ¹⁴	665	665	650	650	635	635	260	260
New Jersey ³¹	655	688	514	538	514	538	257	269
New Mexico ³²	410	542	370	502	369	501	364	496
New York ³³	693	693	693	693	650	650	433	433
North Carolina ³⁴	446	566	423	538	404	509	303	380
North Dakota ¹⁴	480	480	470	470	460	460	240	240
Ohio ³⁵	600	600	547	547	504	504	259	259
Oklahoma ³⁶	314	601	265	515	265	515	152	303
Oregon ³⁷	860	860	745	745	688	688	450	450
Pennsylvania ³⁸	737	791	650	704	611	665	433	458
Rhode Island ³⁹	672	672	672	672	650	650	308	308
South Carolina ⁴⁰	377	494	377	494	347	455	186	260
South Dakota ⁴¹	477	477	477	477	459	459	238	238
Tennessee ⁴²	430	516	366	439	366	439	215	258
Texas ⁴³	457	485	402	426	379	402	223	237
Utah	500	500	493	493	462	462	389	389
Vermont ⁴⁴	495	693	477	667	428	600	232	325
Virginia ⁴⁵	802	802	715	715	715	715	412	412
Washington ⁴⁶	881	881	645	645	645	645	422	422
West Virginia ⁴⁷	400	480	400	480	400	480	160	200
Wisconsin ⁴⁸	776	899	715	828	674	780	326	419

Table 37. Maximum Reimbursement Rates for Licensed Family Child Care Homes (Monthly Dollar Amounts), 2012 ²

State	<u>Full-Time Care</u>						<u>Before-and-After Care</u>	
	<u>Infant (11 months)</u>		<u>Toddler (35 months)</u>		<u>Preschool (59 months)</u>		<u>School Age (84 months)</u>	
	Base Rate	Highest Rate	Base Rate	Highest Rate	Base Rate	Highest Rate	Base Rate	Highest Rate
Wyoming ⁴⁹	675	675	488	488	478	478	318	318
American Samoa	400	400	200	200	200	200	130	130
Guam	525	525	470	470	470	470	400	400
No Mariana Islands ⁵⁰	300	300	300	300	300	300	100	100
Puerto Rico	--- ¹	--- ¹	--- ¹	--- ¹	--- ¹	--- ¹	--- ¹	--- ¹
Virgin Islands	300	300	300	300	300	300	150	150

Source: CCDF Policies Database October 1, 2012 Data

¹ Information not found in state's manual.

² The rates represent the maximum reimbursement rate for licensed child care providers. For states that have tiered reimbursement systems, the base rates reflect the base licensed rates and the highest rates reflect the highest tiered or accredited rates available. For states that do not have tiered reimbursement systems, the base and highest rates are identical. For states that do not specify reimbursement rates for licensed providers, the rates for registered or certified providers are used. Rates for the largest, most populous area are provided for states in which rates vary at a sub-state level. Numbers are rounded to the nearest dollar amount. Maximum rates may be higher for special needs children or for care during non-traditional hours. For the purposes of calculating the monthly rate, the following assumptions were made. The child receives full-time care in a family child care home. The child is in care for 8 hours per day, 5 days per week. For children receiving before-and-after care, the child is in care for 4 hours per day. Unless noted, when hourly, daily, or weekly rates were provided, the monthly rates were calculated using 8 hours per day, 5 days per week, and 4.333 weeks per month. When a before-and-after care or part-time school-age rate was not available, the before-and-after care rate was calculated using half of the full-time school-age rate.

³ Family day care rates for the Birmingham Region.

⁴ Family home care rates for Anchorage.

⁵ Base rates are certified family child care home rates for District 1. Highest rates are accredited family child care home rates for District 1.

⁶ Registered child care family home rates for Pulaski County.

⁷ Licensed family child care home rates for Los Angeles.

⁸ Base rates are reimbursement rates for family child care homes with no additional rating for Denver. Highest rates are tier 5 family child care home rates for Denver.

⁹ Base rates are licensed family child care home rates for the Southwest Region. Highest rates are licensed accredited family child care home rates for the Southwest Region. Rates were calculated using a multiplier of 4.3 to convert weekly rates to monthly rates.

- ¹⁰ Licensed family child care home rates for New Castle.
- ¹¹ Base rates are bronze tier family child care home reimbursement rates. Highest rates are gold tier family child care home reimbursement rates.
- ¹² Base rates are licensed family child care home reimbursement rates for Miami-Dade County. Highest rates are Gold Seal family child care home rates for the Miami-Dade Coalition.
- ¹³ Family child care home rates for Zone 1.
- ¹⁴ Licensed family child care home rates.
- ¹⁵ Family child care home rates for Region 4.
- ¹⁶ Licensed family child care home rates for Group 1A. The state sets a number of days each month that families may be eligible for care. The daily rate is then multiplied by the number of eligible days in the month. The rate may vary each month, depending on the number of eligible days.
- ¹⁷ Base rates are licensed family child care home rates for Marion. Highest rates are accredited family child care home rates for Marion.
- ¹⁸ Registered Child Development Home category A and B rates.
- ¹⁹ Licensed family child care home rates for Sedgwick County.
- ²⁰ Certified family child care home rates for Central Region Urban Counties.
- ²¹ This state authorizes a maximum of 22 days per month. The multiplier for converting maximum daily rates to maximum monthly rates is 22.
- ²² Licensed family child care home rates for Cumberland County.
- ²³ Base rates are unaccredited family child care home rates for Baltimore City. Highest rates are level 4 family child care home rates for Baltimore City.
- ²⁴ Systems family child care home rates for Region 6.
- ²⁵ Base rates are licensed unaccredited family child care home rates for Hennepin County. Highest rates are licensed accredited family child care home rates for Hennepin County.
- ²⁶ Base rates are tier 2 family child care home rates. Highest rates are tier 1 family child care home rates.
- ²⁷ Base rates are licensed family home rates for St. Louis County. Highest rates are licensed accredited family home rates for St. Louis County. Rates were calculated using a multiplier of 22 days per month.
- ²⁸ Family child care home rates for the Billings Region.
- ²⁹ Base rates are licensed family child care home rates for Lancaster, Dakota, Douglas, and Sarpy Counties. Highest rate are accredited family child care home rates for the entire state.
- ³⁰ Licensed family child care home rates for Clark County.
- ³¹ Base rates are registered family child care home rates. Highest rates are accredited family child care home rates.
- ³² Base rates are licensed family child care home rates for Metro Areas. Highest rates are licensed 5-Star family child care home rates for Metro Areas. Before-and-after school care rates are paid at the full-time rate for licensed child care provided for 20 hours or more per week.

- ³³ Registered family day care rates for Group 5 counties: New York, Bronx, Kings, Queens, and Richmond.
- ³⁴ Base rates are licensed 1-Star family child care home rates for Mecklenburg County. Highest rates are licensed 5-Star family child care home rates for Mecklenburg County. The before-and-after school rate is calculated at 75 percent of the full-time rate.
- ³⁵ Certified Professional Type B home rates for Cuyahoga County.
- ³⁶ Base rates are one star family child care home rates for Enhanced Areas. Highest rates are three star family child care home rates for Enhanced Areas. Before-and-after care rates are blended rates for a traditional school year.
- ³⁷ Certified family child care home rates for Group Area A.
- ³⁸ Base rates are reimbursement rates for family child care homes with no additional rating for Philadelphia. Highest rates are star 4 family child care home rates for Philadelphia.
- ³⁹ Certified family child care home rates.
- ⁴⁰ Base rates are level CC licensed family child care home rates for urban counties. Highest rates are level BB enhanced licensed family child care home rates for urban counties. The highest reimbursement rates include a quality incentive bonus of an additional 20 dollars for full-time care and 10 dollars for part-time care. Providers who do not receive the quality incentive bonus are reimbursed at 10 to 20 dollars less per week.
- ⁴¹ Regulated family child care home rates for Minnehaha County.
- ⁴² Base rates are reimbursement rates for family child care homes with no additional rating for the Top Tier counties. Highest rates are three star family child care home rates for the Top Tier counties. Rates were calculated using a multiplier of 4.3 to convert weekly rates to monthly rates.
- ⁴³ Base rates are registered family child care home rates for the Gulf Coast Region. Highest rates are Gulf Coast Region rates for registered family homes with Texas Rising Star Certification.
- ⁴⁴ Base rates are registered family child care home rates. Highest rates are registered 5-Star family child care home rates.
- ⁴⁵ Level 2 family day home rates for Fairfax.
- ⁴⁶ Licensed family child care rates for Region 4. Rates were calculated using a multiplier of 22 days per month. School-age before-and-after care rates are authorized at 30 half day units when care is provided for five days per week.
- ⁴⁷ Base rates are tier 1 family child care home rates. Highest rates are tier 3 family child care home rates.
- ⁴⁸ Base rates are licensed 2 star family child care home rates for Milwaukee. Highest rates are licensed 5 star family child care home rates for Milwaukee. This state uses a multiplier of 4.3 to convert weekly rates to monthly rates.
- ⁴⁹ Licensed family child care home rates. The state sets a maximum reimbursement rate for all children at 675 dollars. With a quality capacity payment added to the infant rate, the calculated rate exceeded 675 dollars, and so the lower number was used.
- ⁵⁰ Territory approves a maximum of three hours of care per day for after school programs.

Table 38. Maximum Reimbursement Rates for Licensed Group Child Care Homes (Monthly Dollar Amounts), 2012 ¹

State	<u>Full-Time Care</u>						<u>Before-and-After Care</u>	
	<u>Infant (11 months)</u>		<u>Toddler (35 months)</u>		<u>Preschool (59 months)</u>		<u>School Age (84 months)</u>	
	Base Rate	Highest Rate	Base Rate	Highest Rate	Base Rate	Highest Rate	Base Rate	Highest Rate
Alabama ²	407	407	390	390	390	390	186	186
Alaska ³	850	850	800	800	650	650	375	375
Arizona ⁴	520	572	477	524	433	477	303	334
Arkansas ⁵	509	509	487	487	405	405	320	320
California ⁶	NA	NA	NA	NA	NA	NA	NA	NA
Colorado ⁶	NA	NA	NA	NA	NA	NA	NA	NA
Connecticut ⁷	976	1025	976	1025	770	808	460	483
Delaware ⁸	498	498	448	448	448	448	217	217
DC ⁶	NA	NA	NA	NA	NA	NA	NA	NA
Florida ⁹	438	608	386	515	381	484	256	328
Georgia ¹⁰	602	602	559	559	494	494	282	282
Hawaii ¹¹	675	675	675	675	675	675	155	155
Idaho ¹²	505	505	460	460	460	460	151	151
Illinois ¹³	682	682	656	656	615	615	307	307
Indiana ⁶	NA	NA	NA	NA	NA	NA	NA	NA
Iowa ¹⁴	508	508	497	497	497	497	221	221
Kansas ¹⁵	409	409	347	347	347	347	173	173
Kentucky ⁶	NA	NA	NA	NA	NA	NA	NA	NA
Louisiana ⁶	NA	NA	NA	NA	NA	NA	NA	NA
Maine ⁶	NA	NA	NA	NA	NA	NA	NA	NA
Maryland ⁶	NA	NA	NA	NA	NA	NA	NA	NA
Massachusetts ⁶	NA	NA	NA	NA	NA	NA	NA	NA
Michigan	503	503	416	416	416	416	208	208
Minnesota ⁶	NA	NA	NA	NA	NA	NA	NA	NA
Mississippi ¹⁶	339	375	326	357	312	339	183	201

Table 38. Maximum Reimbursement Rates for Licensed Group Child Care Homes (Monthly Dollar Amounts), 2012 ¹

State	<u>Full-Time Care</u>						<u>Before-and-After Care</u>	
	<u>Infant (11 months)</u>		<u>Toddler (35 months)</u>		<u>Preschool (59 months)</u>		<u>School Age (84 months)</u>	
	Base Rate	Highest Rate	Base Rate	Highest Rate	Base Rate	Highest Rate	Base Rate	Highest Rate
Missouri ¹⁷	439	527	300	360	300	360	186	224
Montana ¹⁸	628	628	563	563	563	563	442	442
Nebraska ¹⁹	563	607	542	542	542	542	303	347
Nevada ²⁰	607	607	520	520	455	455	227	227
New Hampshire ¹¹	665	665	650	650	635	635	260	260
New Jersey ⁶	NA	NA	NA	NA	NA	NA	NA	NA
New Mexico ²¹	424	556	389	521	383	515	379	511
New York ²²	862	862	802	802	758	758	498	498
North Carolina ⁶	NA	NA	NA	NA	NA	NA	NA	NA
North Dakota	480	480	470	470	460	460	240	240
Ohio ²³	713	849	652	776	570	678	253	302
Oklahoma ²⁴	314	601	265	515	265	515	152	303
Oregon ⁶	NA	NA	NA	NA	NA	NA	NA	NA
Pennsylvania ²⁵	731	785	650	704	628	682	433	458
Rhode Island ²⁶	672	672	672	672	650	650	308	308
South Carolina ²⁷	360	464	360	464	325	433	195	238
South Dakota ²⁸	650	650	650	650	572	572	260	260
Tennessee ²⁹	495	593	387	464	387	464	215	258
Texas ³⁰	485	509	415	436	402	426	239	251
Utah	500	500	493	493	462	462	389	389
Vermont ⁶	NA	NA	NA	NA	NA	NA	NA	NA
Virginia ⁶	NA	NA	NA	NA	NA	NA	NA	NA
Washington ⁶	NA	NA	NA	NA	NA	NA	NA	NA
West Virginia ³¹	500	580	400	480	400	480	180	220
Wisconsin ³²	948	1097	817	946	735	851	409	473

Table 38. Maximum Reimbursement Rates for Licensed Group Child Care Homes (Monthly Dollar Amounts), 2012 ¹

State	<u>Full-Time Care</u>						<u>Before-and-After Care</u>	
	<u>Infant (11 months)</u>		<u>Toddler (35 months)</u>		<u>Preschool (59 months)</u>		<u>School Age (84 months)</u>	
	Base Rate	Highest Rate	Base Rate	Highest Rate	Base Rate	Highest Rate	Base Rate	Highest Rate
Wyoming ³³	675	675	488	488	478	478	318	318
American Samoa	400	400	200	200	200	200	130	130
Guam	525	525	470	470	470	470	400	400
No Mariana Islands ³⁴	300	300	300	300	300	300	100	100
Puerto Rico ³⁵	217	217	217	217	219	219	58	58
Virgin Islands	300	300	300	300	300	300	150	150

Source: CCDF Policies Database October 1, 2012 Data

¹ The rates represent the maximum reimbursement rate for licensed child care providers. For states that have tiered reimbursement systems, the base rates reflect the base licensed rates and the highest rates reflect the highest tiered or accredited rates available. For states that do not have tiered reimbursement systems, the base and highest rates are identical. For states that do not specify reimbursement rates for licensed providers, the rates for registered or certified providers are used. Rates for the largest, most populous area are provided for states in which rates vary at a sub-state level. Numbers are rounded to the nearest dollar amount. Maximum rates may be higher for special needs children or for care during non-traditional hours. For the purposes of calculating the monthly rate, the following assumptions were made. The child receives full-time care in a group child care home. The child is in care for 8 hours per day, 5 days per week. For children receiving before-and-after care, the child is in care for 4 hours per day. Unless noted, when hourly, daily, or weekly rates were provided, the monthly rates were calculated using 8 hours per day, 5 days per week, and 4.333 weeks per month. When a before-and-after care or part-time school-age rate was not available, the before-and-after care rate was calculated using half of the full-time school-age rate. Some but not all states have different rates for a category of providers termed "group child care homes." These are similar to family child care homes but may serve more children or differ in some other way. When a state does not make this distinction, the state is coded as NA.

² Group day care home rates for the Birmingham Region.

³ Group child care home rates for Anchorage.

⁴ Base rates are certified group child care home rates for District 1. Highest rates are accredited group child care home rates for District 1.

⁵ Licensed child care family home rates for Pulaski County.

⁶ State, county, or territory does not have rates for group child care homes.

⁷ Base rates are licensed group child care home rates for the Southwest Region. Highest rates are licensed accredited group child care home rates for the Southwest Region. Rates were calculated using a multiplier of 4.3 to convert weekly rates to monthly rates.

⁸ Licensed group child care home rates for New Castle.

- ⁹ Base rates are licensed group child care home rates for the Miami-Dade County. Highest rates are Gold Seal group child care home rates for the Miami-Dade Coalition.
- ¹⁰ Group child care home rates for Zone 1.
- ¹¹ Licensed group child care home rates.
- ¹² Group child care home rates for Region 4.
- ¹³ Licensed group child care home rates for Group 1A. The state sets a number of days each month that families may be eligible for care. The daily rate is then multiplied by the number of eligible days in the month. The rate may vary each month, depending on the number of eligible days.
- ¹⁴ Child Development Home category C rates.
- ¹⁵ Licensed group child care home rates for Sedgwick County.
- ¹⁶ Base rates are tier 2 group child care home rates. Highest rates are tier 1 group child care home rates.
- ¹⁷ Base rates are licensed group home rates for St. Louis County. Highest rates are licensed accredited group home rates for St. Louis County. Rates are calculated using a multiplier of 22 days per month.
- ¹⁸ Group child care home rates for the Billings Region.
- ¹⁹ Base rates are licensed group child care home rates for Lancaster, Dakota, Douglas, and Sarpy Counties. Highest rates are accredited child care home rates for the entire state.
- ²⁰ Licensed group child care home rates for Clark County.
- ²¹ Base rates are licensed group child care rates for Metro Areas. Highest rates are licensed 5-Star group child care rates for Metro Areas. Before-and-after school care rates are paid at the full-time rate for licensed child care provided for 20 hours or more per week.
- ²² Group family day care rates for Group 5 counties: New York, Bronx, Kings, Queens, and Richmond.
- ²³ Base rates are licensed Type A Home rates for Cuyahoga County. Highest rates are three star Type A Home rates for Cuyahoga County.
- ²⁴ Base rates are one star child care home rates for Enhanced Areas. Highest rates are three star child care home rates for Enhanced Areas. Before-and-after care rates are blended rates for a traditional school year.
- ²⁵ Base rates are reimbursement rates for group child care homes with no additional rating for Philadelphia. Highest rates are star 4 group child care home rates for Philadelphia.
- ²⁶ Group child care home rates are the same as the rates for certified family child care homes.
- ²⁷ Base rates are level C licensed group child care home rates for urban counties. Highest rates are level BB high scoring enhanced group child care home rates for urban counties. The highest reimbursement rates include a quality incentive bonus of an additional 20 dollars for full-time care and 10 dollars for part-time care. Providers who do not receive the quality incentive bonus are reimbursed at 10 to 20 dollars less per week.
- ²⁸ Licensed group family child care rates for Minnehaha County.
- ²⁹ Base rates are reimbursement rates for group child care homes with no additional rating for the Top Tier counties. Highest rates are three star group child care home rates for the Top Tier counties. Rates were calculated using a multiplier of 4.3 to convert weekly rates to monthly rates.

³⁰ Base rates are licensed group day home rates for the Gulf Coast Region. Highest rates are Gulf Coast Region rates for licensed group day homes with Texas Rising Star Certification.

³¹ Base rates are tier 1 family child care facility rates. Highest rates are tier 3 family child care facility rates.

³² Group child care homes use the same rates as centers. Base rates are licensed 2 star center rates for Milwaukee. Highest rates are licensed 5 star center rates for Milwaukee. This state uses a multiplier of 4.3 to convert weekly rates to monthly rates.

³³ Licensed group child care home rates. The state sets a maximum reimbursement rate for all children at 675 dollars. With a quality capacity payment added to the infant rate, the calculated rate exceeded 675 dollars, and so the lower number was used.

³⁴ Territory approves a maximum of three hours of care per day for after school programs.

³⁵ Registered Group Home rates.

Table 39. Maximum Reimbursement Rates for In-Home Child Care (Monthly Dollar Amounts), 2012 ²

State	<u>Full-Time Care</u>						<u>Before-and-After Care</u>	
	<u>Infant (11 months)</u>		<u>Toddler (35 months)</u>		<u>Preschool (59 months)</u>		<u>School Age (84 months)</u>	
	Base Rate	Highest Rate	Base Rate	Highest Rate	Base Rate	Highest Rate	Base Rate	Highest Rate
Alabama	152	152	152	152	152	152	76	76
Alaska ³	518	518	492	492	440	440	258	258
Arizona ⁴	227	477	227	477	227	429	130	286
Arkansas ⁵	509	509	487	487	405	405	320	320
California ⁶	452	452	410	410	410	410	175	175
Colorado ⁷	213	260	193	237	193	237	106	130
Connecticut ⁸	383	383	383	383	383	383	228	228
Delaware ⁹	498	498	448	448	448	448	217	217
DC	214	214	188	188	188	188	98	98
Florida ¹⁰	217	217	182	182	191	191	130	130
Georgia ¹¹	390	390	368	368	325	325	217	217
Hawaii ¹²	400	400	350	350	350	350	60	60
Idaho ¹³	489	489	460	460	460	460	151	151
Illinois ¹⁴	327	327	327	327	327	327	163	163
Indiana ¹⁵	1257	1257	1257	1257	1257	1257	628	628
Iowa ¹⁶	1571	1571	1571	1571	1571	1571	785	785
Kansas	298	298	298	298	298	298	149	149
Kentucky ¹⁷	282	282	282	282	260	260	130	130
Louisiana ¹⁸	341	341	341	341	319	319	160	160
Maine ¹⁹	455	455	455	455	425	425	197	197
Maryland ²⁰	292	292	232	232	232	232	154	154
Massachusetts	325	325	325	325	325	325	173	173
Michigan ²¹	234	381	234	321	234	321	117	160
Minnesota ²²	385	442	335	385	335	385	155	179
Mississippi ²³	196	272	187	259	179	245	89	125
Missouri ²⁴	330	330	286	286	286	286	176	176

Table 39. Maximum Reimbursement Rates for In-Home Child Care (Monthly Dollar Amounts), 2012 ²

State	Full-Time Care						Before-and-After Care	
	Infant (11 months)		Toddler (35 months)		Preschool (59 months)		School Age (84 months)	
	Base Rate	Highest Rate	Base Rate	Highest Rate	Base Rate	Highest Rate	Base Rate	Highest Rate
Montana ²⁵	440	440	407	407	407	407	329	329
Nebraska ²⁶	1257	1257	1257	1257	1257	1257	628	628
Nevada ²⁷	498	498	433	433	412	412	325	325
New Hampshire ²⁸	466	466	455	455	444	444	182	182
New Jersey ²⁹	394	394	307	307	307	307	154	154
New Mexico ³⁰	279	279	264	264	242	242	182	182
New York ³¹	451	485	451	485	425	455	282	303
North Carolina ³²	223	223	212	212	202	202	152	152
North Dakota ³³	300	370	280	340	272	332	156	192
Ohio ³⁴	1387	1387	1387	1387	1387	1387	693	693
Oklahoma	283	283	239	239	239	239	117	117
Oregon ³⁵	493	560	466	530	440	500	227	371
Pennsylvania ³⁶	1257	1257	1257	1257	1257	1257	628	628
Rhode Island ³⁷	321	321	321	321	217	217	104	104
South Carolina ³⁸	195	195	195	195	182	182	95	95
South Dakota ³⁹	277	277	277	277	277	277	139	139
Tennessee ⁴⁰	301	301	258	258	258	258	151	151
Texas ⁴¹	329	329	286	286	245	245	143	143
Utah ⁴²	340	340	274	274	213	213	176	176
Vermont ⁴³	347	347	347	347	290	290	170	170
Virginia ⁴⁴	663	663	628	628	628	628	386	386
Washington ⁴⁵	378	378	378	378	378	378	194	194
West Virginia	360	360	320	320	320	320	160	160
Wisconsin ⁴⁶	1247	1247	1247	1247	1247	1247	624	624
Wyoming ⁴⁷	298	298	298	298	298	298	149	149
American Samoa	400	400	200	200	200	200	130	130

Table 39. Maximum Reimbursement Rates for In-Home Child Care (Monthly Dollar Amounts), 2012 ²

State	<u>Full-Time Care</u>						<u>Before-and-After Care</u>	
	<u>Infant (11 months)</u>		<u>Toddler (35 months)</u>		<u>Preschool (59 months)</u>		<u>School Age (84 months)</u>	
	Base Rate	Highest Rate	Base Rate	Highest Rate	Base Rate	Highest Rate	Base Rate	Highest Rate
Guam	525	525	470	470	470	470	400	400
No Mariana Islands ⁴⁸	300	300	300	300	300	300	100	100
Puerto Rico	--- ¹	--- ¹	--- ¹	--- ¹	--- ¹	--- ¹	--- ¹	--- ¹
Virgin Islands	300	300	300	300	300	300	150	150

Source: CCDF Policies Database October 1, 2012 Data

¹ Information not found in state's manual.

² The rates represent the maximum reimbursement rate for in-home providers. For states that have tiered reimbursement systems, the base rates reflect the base in-home rates and the highest rates reflect the highest tiered or accredited rates available. For states that do not have tiered reimbursement systems, the base and highest rates are identical. Rates for the largest, most populous area are provided for states in which rates vary at a sub-state level. Numbers are rounded to the nearest dollar amount. Maximum rates may be higher for special needs children or for care during non-traditional hours. For the purposes of calculating the monthly rate, the following assumptions were made. The child receives full-time in-home child care. If rates vary for types of in-home care, the rates for care provided in the home of the child were used. The child is in care for 8 hours per day, 5 days per week. For children receiving before-and-after care, the child is in care for 4 hours per day. Unless noted, the monthly rates were calculated using 8 hours per day, 5 days per week, and 4.333 weeks per month. When a before-and-after care or part-time school-age rate was not available, the before-and-after care rate was calculated using half of the full-time school-age rate.

³ Unlicensed in-home child care rates for Anchorage.

⁴ Base rates are in-home rates for non-certified relative providers. Highest rates are accredited in-home child care rates for District 1.

⁵ Registered child care family home rates for Pulaski County.

⁶ In-home rates for Los Angeles.

⁷ Base rates are exempt family child care home rates for providers with no additional rating for Denver. Highest rates are exempt family child care home rates for tier 1 providers for Denver.

⁸ Unlicensed in-home child care rates. Rates were calculated using a multiplier of 4.3 to convert weekly rates to monthly rates.

⁹ In-home child care rates for New Castle.

¹⁰ Rates for informal providers for Miami-Dade County.

¹¹ In-home child care rates for Zone 1.

- ¹² License-exempt in-home child care rates.
- ¹³ In-home child care rates for Region 4.
- ¹⁴ License-exempt in-home child care rates. The state sets a number of days each month that families may be eligible for care. The daily rate is then multiplied by the number of eligible days in the month. The rate will vary each month, depending on the number of eligible days.
- ¹⁵ In-home child care rates for Marion. The rate reflects the federal minimum wage and is divided by the number of children in care. Nanny care is approved for a minimum of 3 children.
- ¹⁶ The in-home rate is not per child; it is the maximum amount paid for all children in the family receiving in-home care. In-home care is paid at the minimum wage amount.
- ¹⁷ Registered in-home child care rates for Central Region Urban Counties.
- ¹⁸ This state authorizes a maximum of 22 days per month. The multiplier for converting maximum daily rates to maximum monthly rates is 22.
- ¹⁹ Unlicensed in-home child care rates for Cumberland County.
- ²⁰ In-home provider rates for Baltimore City.
- ²¹ Base rates are tier 1 in-home child care rates. Highest rates are tier 2 in-home child care rates.
- ²² Base rates are unaccredited in-home child care rates for Hennepin County. Highest rates are accredited in-home child care rates for Hennepin County. Child care assistance in the child's home may only be authorized if the parents have authorized activities outside of the home and the authorized activity occurs when out-of-home care is not available, the family lives in an area where out-of-home care is not available, or the child has a verified illness or disability that creates a risk or hardship.
- ²³ Base rates are tier 3 in-home child care rates. Highest rates are tier 1 in-home child care rates.
- ²⁴ Registered family home rates for St. Louis County. Rates calculated using a multiplier of 22 days per month.
- ²⁵ In-home child care rates for the Billings Region.
- ²⁶ In-home providers must be paid at least the federal minimum wage. The minimum wage rate is generally provided for the first three children in care. The provider may be reimbursed at a different rate for any additional children in care. As a guide, the caseworker may use the hourly rate for a license-exempt family child care home.
- ²⁷ Unlicensed child care rates for Clark County.
- ²⁸ Rates for license-exempt child care providers.
- ²⁹ In-home child care rates for informal or relative care.
- ³⁰ Registered in-home child care rates for Metro Areas. The before-and-after care rate is 75 percent of the full-time rate for care provided for 20 hours per week.
- ³¹ Base rates are legally-exempt in-home child care rates for Group 5 counties: New York, Bronx, Kings, Queens, and Richmond. Highest rates are legally-exempt, enhanced in-home child care rates for Group 5 counties.
- ³² Relative provider reimbursement rates for Mecklenburg County. The before-and-after school rate is calculated at 75 percent of the full-time rate.
- ³³ Base rates are in-home child care rates for informal and relative care. Highest rates are registered in-home child care rates.

- ³⁴ In-home child care aide rates for Cuyahoga County.
- ³⁵ Base rates are standard in-home child care rates for Group Area A. Highest rates are registered in-home child care rates for Group Area A. The state uses a multiplier of 4.3 to convert weekly rates to monthly rates.
- ³⁶ In-home child care rates for Philadelphia. The parent is required to pay the provider minimum wage.
- ³⁷ Non-certified in-home child care rates.
- ³⁸ In-home child care rates for urban counties.
- ³⁹ Unregulated child care rates.
- ⁴⁰ Unregulated child care rates for the top tier counties. Care provided in the child's home is not allowed unless the provider also lives in the home and proof is submitted that the home belongs to the provider. Rates were calculated using a multiplier of 4.3 to convert weekly rates to monthly rates.
- ⁴¹ Unregulated relative care provider rates for the Gulf Coast Region.
- ⁴² License-exempt in-home child care rates for relative or neighbor providers.
- ⁴³ Legally-exempt provider rates.
- ⁴⁴ In-home child care rates for Fairfax.
- ⁴⁵ Rates for in-home providers are calculated using a multiplier of 4.3 weeks per month. Part-time rates for in-home providers are calculated using a multiplier of 20.5 hours per week.
- ⁴⁶ Certified in-home child care rates. When in-home care is provided for 15 or more hours per week, the minimum wage must be paid, regardless of the number of children in care. This state uses a multiplier of 4.3 to convert weekly rates to monthly rates.
- ⁴⁷ License-exempt in-home child care rates.
- ⁴⁸ Territory approves a maximum of three hours of care per day for after school programs.

Table 40. Unregulated Provider Background Check Requirements, 2012

State	If There is a Criminal History Background Check Requirement	Level of Background Check Required	If a Child Protective Services Background Check is Required	If an Adult Protective Services Background Check is Required
Alabama	Yes, for provider and others	State, FBI	No	No
Alaska	Yes, for provider and others	State, FBI, Sex Offender Registry ²	Yes, for provider and others	Yes, for provider and others
Arizona	Yes, for the provider only	State, FBI	Yes, for the provider only	No
Arkansas	No	NA	No	No
California	Yes, for the provider only ³	State, FBI, Sex Offender Registry	Yes, for the provider only	No
Colorado	Yes, for provider and others	State, FBI ⁴	Yes, for provider and others	No
Connecticut	Yes, for the provider only	State, FBI	Yes, for the provider only	No
Delaware	Yes, for provider and others	State, FBI, Sex Offender Registry	Yes, for provider and others	No
DC	Yes, for provider and others	State, FBI	No	No
Florida	Yes, for provider and others	State, FBI ⁵	Yes, for provider and others	Yes, for provider and others
Georgia	Yes, for the provider only ⁶	State, FBI	Yes, for the provider only	No
Hawaii	Yes, for provider and others ⁷	State, FBI ⁸	Yes, for provider and others ⁷	No
Idaho	Yes, for provider and others	State, FBI, Sex Offender Registry	Yes, for provider and others	Yes, for provider and others
Illinois	Yes, for provider and others ⁹	State, FBI, Sex Offender Registry ¹⁰	Yes, for provider and others	No
Indiana	Yes, for provider and others	State	Yes, for provider and others	No
Iowa	Yes, for provider and others	State, Sex Offender Registry	Yes, for provider and others	Yes, for provider and others
Kansas	Yes, for provider and others ¹¹	State	Yes, for provider and others	No
Kentucky	Yes, for provider and others	State	Yes, for provider and others	No
Louisiana	Yes, for provider and others	State	No	No
Maine	Yes, for provider and others	State	Yes, for provider and others	No
Maryland	No	NA	Yes, for provider and others	No
Massachusetts	Yes, for the provider only ¹²	State	Yes, for the provider only ¹²	No

Table 40. Unregulated Provider Background Check Requirements, 2012

State	If There is a Criminal History Background Check Requirement	Level of Background Check Required	If a Child Protective Services Background Check is Required	If an Adult Protective Services Background Check is Required
Michigan	Yes, for provider and others	State, Sex Offender Registry	Yes, for provider and others	No
Minnesota	Yes, for provider and others ¹³	State	Yes, for provider and others ¹³	Yes, for provider and others ¹⁴
Mississippi	No ¹⁵	NA	Yes, for provider and others ¹⁶	No
Missouri	Yes, for provider and others	State	Yes, for provider and others	No
Montana	Yes, for provider and others ¹⁷	State, FBI, Sex Offender Registry ¹⁸	Yes, for provider and others	Yes, for provider and others
Nebraska	Yes, for provider and others ¹⁹	State, Sex Offender Registry	Yes, for provider and others ¹⁹	Yes, for provider and others ¹⁹
Nevada	No	NA	No	No
New Hampshire	Yes, for provider and others	State, FBI	Yes, for provider and others	No
New Jersey	No	NA	Yes, for provider and others	No
New Mexico	Yes, for provider and others	State, FBI	Yes, for provider and others	No
New York	Yes, for provider and others ²⁰	Sex Offender Registry ²⁰	Yes, for the provider only	No
North Carolina	Yes, for provider and others	Local, State, FBI ²¹	Yes, for provider and others ²²	Yes, for provider and others ²²
North Dakota	Yes, for provider and others	State, Sex Offender Registry	No	No
Ohio	No	NA	No	No
Oklahoma	Yes, for the provider only	State, Sex Offender Registry	Yes, for the provider only	No
Oregon	Yes, for provider and others	State, FBI, Sex Offender Registry ²³	Yes, for provider and others	No
Pennsylvania	Yes, for the provider only	State, FBI	Yes, for the provider only	No
Rhode Island	Yes, for provider and others	State	--- ¹	No
South Carolina	No	NA	Yes, for provider and others	No
South Dakota	No	NA	Yes, for the provider only	No
Tennessee	No ²⁴	NA	No	No
Texas	Yes, for provider and others	State, Sex Offender Registry	Yes, for provider and others ²⁵	No
Utah	Yes, for provider and others	Local, State, FBI ²⁶	Yes, for provider and others	No

State	If There is a Criminal History Background Check Requirement	Level of Background Check Required	If a Child Protective Services Background Check is Required	If an Adult Protective Services Background Check is Required
Vermont	Yes, for provider and others	State	Yes, for provider and others	Yes, for provider and others
Virginia	Yes, for provider and others	State, Sex Offender Registry	Yes, for provider and others	No
Washington	Yes, for provider and others	Local, State	No ²⁷	No ²⁷
West Virginia	Yes, for provider and others	State	Yes, for provider and others	Yes, for provider and others
Wisconsin	Yes, for the provider only	State, FBI, Sex Offender Registry ²⁸	Yes, for the provider only	Yes, for the provider only
Wyoming	Yes, for provider and others	State	Yes, for provider and others	Yes, for provider and others
American Samoa	Yes, for provider and others	--- ¹	Yes, for provider and others	No
Guam	Yes, for provider and others	Local, State	Yes, for provider and others	Yes, for provider and others
No Mariana Islands	Yes, for provider and others ²⁹	State, Sex Offender Registry	Yes, for the provider only	No
Puerto Rico	Yes, for the provider only	--- ¹	--- ¹	--- ¹
Virgin Islands	Yes, for provider and others	State, FBI	No	No

Source: CCDF Policies Database October 1, 2012 Data

¹ Information not found in state's manual.

² Unregulated providers who are unrelated to the children in care are fingerprinted for FBI and state background checks. Relative providers are not required to provide fingerprints, but a state and sex offender registry background check must be completed.

³ Individual providers exempt from licensure must be registered on Trustline, with the exception of grandparents, aunts, and uncles.

⁴ FBI background checks are conducted for unlicensed providers and only when the adult has been living in the state for less than two years.

⁵ The state-level background check includes local criminal history information.

⁶ A background check is required for all providers except those providing short term child care for up to six weeks.

⁷ Only the provider is required to have a background check for in-home care.

⁸ Great-grandparents, grandparents, aunts, uncles, and adult siblings are exempt from fingerprint requirements.

⁹ If the child care facility operates in a family home, the provider and all household members age 13 and over are subject to background checks.

¹⁰ Persons age 17 and over are subject to a criminal history check with the FBI.

¹¹ A provider whose name appears in the child abuse and neglect registry or the state's adult supervised population repository is not eligible for CCDF payments.

¹² Background checks, including criminal history and child welfare checks, are only conducted on non-relative in-home providers. If the in-home provider is a relative of the child, no background check is required.

¹³ A non-licensed in-home child care provider who has a household member with a criminal, child protective services or adult protective services record may still be authorized to provide childcare in the child's home, but not in the provider's home.

¹⁴ A non-licensed in-home child care provider who has a household member with a criminal, child protective services or adult protective services record may still be authorized to provide childcare in the child's home, but not in the provider's home. The background check is required for the provider and all household members age 13 and older.

¹⁵ Providers must sign a form certifying that they have not been convicted of a felony or had their name placed on the child abuse or sex offender registry.

¹⁶ All individuals over 18 years old residing or providing care in the home must clear a state child abuse and neglect central registry check to be eligible. If found to have a prior conviction of child abuse or neglect, they will be suspended and the funds will be recouped.

¹⁷ Background checks are required for the applicant and all adults living in the provider's household. Background checks must be based upon the individual's place of residence since the time he or she was 18 years old.

¹⁸ For providers who recently lived out of state, a completed FBI fingerprint check is required.

¹⁹ Background checks are required for license-exempt providers. In-home providers, upon request, must provide written permission for a background check. Background checks include checking a register for child abuse and neglect and adult protective services.

²⁰ Legally-exempt providers must give a sworn statement about whether they have been convicted of a misdemeanor or felony. Some counties conduct a local criminal background check for legally-exempt providers, their employees, volunteers, and in some cases household members age 18 and older.

²¹ Persons who have lived in the state less than five years are subject to an FBI check. The background check includes a fingerprint check through the state.

²² The requirement for background checks applies to non-licensed home providers.

²³ Criminal history background checks are conducted using a state law enforcement data system, which includes sex offender registry information. In addition to a criminal history check through the state law enforcement data system, the agency may also request a national criminal history check if information indicates there may be an out-of-state criminal history.

²⁴ The department does not routinely perform a background check on unregulated providers, though local agencies may elect to do so.

²⁵ Child protective services requires a background check for any person required to have a name-based background check that has lived outside of Texas within the past five years or any person with a criminal history in another state.

²⁶ An FBI fingerprint check is required if a provider or household member has resided in the state less than five years or in a questionable situation. In addition to the Local, State, and FBI checks, juvenile records are also checked.

²⁷ A child protective services check and an adult protective services check may be part of the background check.

²⁸ FBI background checks are conducted only if the provider has lived out of state in last three years.

²⁹ All household members age 18 and older must be checked against the state's sex offender registry.

Table 41. Unregulated Provider Training Requirements, 2012

State	If CPR Training is Required	If First Aid Training is Required
Alabama	No	No
Alaska	Yes, for the provider	Yes, for the provider
Arizona	No	No
Arkansas	No	No
California	No	No
Colorado	No	No
Connecticut	No	No
Delaware	Yes, for the provider	Yes, for the provider
DC	No	No
Florida	Yes, for the provider	Yes, for the provider
Georgia	Yes, for the provider	No
Hawaii	Yes, for at least one person on site	Yes, for at least one person on site
Idaho	Yes, for at least one person on site	Yes, for at least one person on site
Illinois	No	No
Indiana	Yes, for the provider	Yes, for the provider
Iowa	Yes, for the provider	Yes, for the provider
Kansas	No	No
Kentucky	No	Yes, for the provider
Louisiana	Yes, for the provider	Yes, for the provider
Maine	No	No
Maryland	No	No
Massachusetts	No ¹	No ¹
Michigan	Yes, for the provider	Yes, for the provider
Minnesota	Yes, for the provider	Yes, for the provider
Mississippi	No	No
Missouri	No	No
Montana	No	No
Nebraska	No	No
Nevada	No	No
New Hampshire	No	No
New Jersey	No	No
New Mexico	No	Yes, for the provider
New York	No	No
North Carolina	No	Yes, for the provider
North Dakota	No	No
Ohio	No	No
Oklahoma	No ²	No ²
Oregon	No ³	No ³
Pennsylvania	No	No
Rhode Island	No	No
South Carolina	No	No
South Dakota	No	No
Tennessee	No	No
Texas	No	No
Utah	No	No
Vermont	No	No

Table 41. Unregulated Provider Training Requirements, 2012

State	If CPR Training is Required	If First Aid Training is Required
Virginia	Yes, for at least one person on site	Yes, for at least one person on site
Washington	No	No
West Virginia	Yes, for at least one person on site ⁴	Yes, for at least one person on site ⁴
Wisconsin	No	No
Wyoming	Yes, for the provider	Yes, for the provider
American Samoa	Yes, for at least one person on site ⁵	Yes, for at least one person on site ⁵
Guam	Yes, for at least one person on site	Yes, for at least one person on site
No Mariana Islands	Yes, for the provider	Yes, for the provider
Puerto Rico	Yes, for the provider	Yes, for the provider
Virgin Islands	Yes, for the provider	Yes, for the provider

Source: CCDF Policies Database October 1, 2012 Data

¹ Non-relative in-home providers must complete an orientation that includes First Aid and CPR training.

² There is no requirement unless the child in care has special needs.

³ Providers who are registered-exempt or certified-exempt are not required to be First Aid or CPR certified; however, First Aid and CPR certification are required if they want to qualify for the enhanced rate. Registered and certified providers must have First Aid and CPR certifications.

⁴ Requirements apply to unlicensed school age child care providers. At least one person on duty must be certified in First Aid that includes rescue breathing and choke saving.

⁵ At least one person on site must be certified in CPR, and at least one person on site must have current First Aid training. Providers must complete 12 additional hours of CPR and First Aid training within the first six months of providing care.

Table 42. Provider Policies: Who May Provide Care, 2012²

State	Minimum Provider Age	If a Relative Living in the Home and Part of the Unit can Provide Care	If a Relative Living in the Home and Not Part of the Unit can Provide Care	If a Relative Living Outside of the Home can Provide Care	If a Non-Relative Living in the Home and Part of the Unit can Provide Care	If a Non-Relative Living in the Home and Not Part of the Unit can Provide Care
Alabama	19	NA ³	No	Yes	NA ³	No
Alaska	18	NA ³	Yes	Yes	NA ³	Yes
Arizona	18	No	Yes ⁴	Yes	NA ⁵	Yes
Arkansas	18	No	No	Yes	NA ⁵	No
California	18	No	Yes	Yes	NA ⁵	Yes
Colorado	18	Yes ⁶	Yes ⁶	Yes	NA ⁵	Yes ⁶
Connecticut	18	No	Yes ⁷	Yes	No	Yes ⁷
Delaware	18	NA ³	Yes	Yes	NA ³	Yes
DC	18	No	Yes	Yes	NA ⁵	Yes
Florida	18 ⁸	Yes	Yes	Yes	NA ⁵	Yes
Georgia	21 ⁹	No	Yes	Yes	NA ⁵	Yes
Hawaii	18	NA ³	Yes	Yes	NA ³	Yes
Idaho	18	No	No	Yes	NA ⁵	No
Illinois	18	No	Yes	Yes	NA ⁵	Yes ¹⁰
Indiana	18	NA ³	Yes	Yes	NA ³	No
Iowa	18	NA ³	Yes	Yes	NA ³	Yes
Kansas	18	No	No	Yes	NA ⁵	No
Kentucky	18	No	No	Yes	NA ⁵	No
Louisiana	18	No	No	Yes ¹¹	NA ⁵	No
Maine	18	NA ³	No	Yes	NA ³	No
Maryland	18	No	Yes	Yes	NA ⁵	Yes
Massachusetts	18	No	Yes	Yes	NA ⁵	No
Michigan	18	NA ³	Yes	Yes	NA ³	Yes
Minnesota	18	No	No	Yes	NA ⁵	No
Mississippi	18	No	No	Yes	NA ⁵	No

Table 42. Provider Policies: Who May Provide Care, 2012²

State	Minimum Provider Age	If a Relative Living in the Home and Part of the Unit can Provide Care	If a Relative Living in the Home and Not Part of the Unit can Provide Care	If a Relative Living Outside of the Home can Provide Care	If a Non-Relative Living in the Home and Part of the Unit can Provide Care	If a Non-Relative Living in the Home and Not Part of the Unit can Provide Care
Missouri	18	NA ³	Yes ⁴	Yes	NA ³	Yes
Montana	18	No	Yes	Yes	NA ⁵	Yes
Nebraska	19 ¹²	No ¹³	No ¹³	Yes	NA ⁵	No ¹³
Nevada	18	No	No	Yes	NA ⁵	No
New Hampshire	16	No	No	Yes	NA ⁵	No
New Jersey	18	Yes ¹⁴	Yes	Yes	Yes	Yes
New Mexico	18	No	Yes	Yes	NA ⁵	Yes
New York	18 ¹⁵	No ¹⁶	Yes	Yes	NA ⁵	Yes
North Carolina	18	NA ³	Yes	Yes	NA ³	Yes
North Dakota	18	NA ³	Yes ¹⁷	Yes	NA ³	Yes
Ohio	18	NA ³	No	Yes	NA ³	No
Oklahoma	18	NA ³	No	Yes	NA ³	No
Oregon	18	No	Yes	Yes	NA ⁵	Yes
Pennsylvania	18	No	No	Yes	NA ⁵	No
Rhode Island	21	NA ³	No	Yes	NA ³	No
South Carolina	21	NA ¹⁸	No	Yes	No ¹⁸	No
South Dakota	18	NA ³	Yes	Yes	NA ³	No
Tennessee	18 ¹⁹	No	No	Yes	NA ⁵	No
Texas	18	Yes ²⁰	Yes ²⁰	Yes	No	No
Utah	18	No ²¹	No ²¹	Yes	NA ⁵	No ²¹
Vermont	18 ²²	NA ³	Yes ²³	Yes	NA ³	Yes ²³
Virginia	18	NA ³	Yes	Yes	NA ³	Yes
Washington	18	No	Yes	Yes	NA ⁵	Yes
West Virginia	18	NA ³	Yes	Yes	NA ³	Yes
Wisconsin	18	No ²⁴	No ²⁴	Yes	NA ⁵	No ²⁴

Table 42. Provider Policies: Who May Provide Care, 2012²

State	Minimum Provider Age	If a Relative Living in the Home and Part of the Unit can Provide Care	If a Relative Living in the Home and Not Part of the Unit can Provide Care	If a Relative Living Outside of the Home can Provide Care	If a Non-Relative Living in the Home and Part of the Unit can Provide Care	If a Non-Relative Living in the Home and Not Part of the Unit can Provide Care
Wyoming	18	No	Yes	Yes	NA ⁵	Yes
American Samoa	--- ¹	--- ¹	--- ¹	--- ¹	--- ¹	--- ¹
Guam	18	NA ³	Yes	Yes	NA ³	No
No Mariana Islands	18	NA ³	No	Yes	NA ³	Yes
Puerto Rico	18	--- ¹	--- ¹	--- ¹	--- ¹	--- ¹
Virgin Islands	18	Yes	Yes	Yes	NA ⁵	Yes

Source: CCDF Policies Database October 1, 2012 Data

¹ Information not found in state's manual.

² The unit refers to the group of people included in the family size for purposes of determining eligibility and copayments.

³ Adult non-parent relatives and non-relatives are not considered part of the assistance unit.

⁴ Siblings must be living outside of the household in order to provide care.

⁵ Adult non-parent, non-relatives are not considered part of the assistance unit.

⁶ The provider cannot be a parent, a step-parent, a significant other who is taking the place of a parent, or a person in a common-law marriage with the biological parent.

⁷ An adult living in the same household, regardless of his or her relationship to the child, cannot be authorized to provide care between 11 pm and 7 am, unless the child is under three years old or has special needs.

⁸ The operator of a child care facility must be 21 years of age or older. A child care facility can not employ a person under the age of 16 unless the person is under direct supervision and is not counted when computing the staff to child ratio.

⁹ This age minimum applies to informal providers only.

¹⁰ A non-relative must not be a parent of the child's sibling or have a child in common with the applicant.

¹¹ A relative is not authorized to care for a child if it is a TANF case.

¹² Providers must be 19 years of age, or providers age 16, 17, or 18 may provide care if it will not cause them to be absent from a school or training program, they will not be absent from regular employment without employer permission, they are acceptable to the client, and they are supervised by a parent or guardian.

¹³ Individuals living in the home can only provide care if the child has special needs.

- ¹⁴ Siblings must be over 18 years of age and live outside the home in order to provide care.
- ¹⁵ The provider must be 18 years of age or meet the state requirements for employment of minors. Providers must be at least 14 years of age to comply with labor laws.
- ¹⁶ Siblings are allowed to provide subsidized care. All other members of the unit are not eligible to provide subsidized care.
- ¹⁷ A sibling who is living in the home and is 18 or older can provide care only if the sibling is a licensed, registered, or self-certified provider. The sibling cannot provide care under the approved relative status.
- ¹⁸ Adult non-parent relatives are not considered part of the assistance unit. Adult non-parent, non-relatives living in the home are not considered part of the assistance unit, unless they are counted in the TANF or SNAP budget.
- ¹⁹ Unregulated providers must be age 21.
- ²⁰ Relatives living in the home may only provide care if the eligible child is the child of a teen parent, an infant, a child with disabilities, or if the department determines that other arrangements are not reasonably available. Siblings of the eligible child that are over 18 may only provide care if they are not living in the household.
- ²¹ Exceptions for who may provide care may be granted when no other eligible provider is available, to accommodate children with special needs, and under unusual or extraordinary circumstances approved by the department or state program specialist.
- ²² License-exempt child care providers may be eligible at age 16 if the provision of care is limited to hours which do not conflict or interfere with school attendance and does not exceed 20 hours per week except during school holidays.
- ²³ This applies to license-exempt child care providers only.
- ²⁴ A person living in the home cannot be authorized to provide care unless the county determines it is necessary due to a special health condition of the child.

APPENDIX A

CONTENT OF THE CCDF POLICIES DATABASE

Variable Category/Subcategory	Description of Variables
Basic Criteria for Eligibility*	
<i>Children's Age Eligibility Requirements</i>	The age requirements for different groups of children under CCDF, including special needs children, foster children, and children under protective services.
<i>Parent/Guardian Activities that Confer Eligibility</i>	The range of activities that confer eligibility under CCDF. Activities include employment, school, training, job search, housing search, and more. Time limits for job search activities and school and work hour requirements for students are also captured.
<i>Other Eligibility Criteria</i>	Special requirements for parents, including elderly exemptions and special needs exemptions.
<i>Groups Qualifying with Different Eligibility Criteria</i>	Eligibility requirements for different groups, including TANF recipients, families transitioning off of TANF, SNAP E&T participants, CPS cases, foster care cases, and homeless families. Time limits for homeless families and children under protective services are also included.
<i>Ineligibility</i>	Whether families sanctioned in TANF or SNAP are ineligible for CCDF. The variables also capture how the States/Territories handle cases of applicant fraud.
Definition of Family*	
<i>Definition of Family</i>	How the family unit is defined, including the age when members are included in the unit, which family members are included based on their relationship to the recipient, when siblings are included in the unit, and treatment of adult relatives and non-relatives, step-parents, partners of the parent, relative caretakers, and multi-family households.
Income Definition*	
<i>Treatment of Various Types of Income</i>	How different types of income are treated for eligibility and copayment purposes. Types of income include TANF, SSI/SDI, self-employment, child support, SNAP benefits, foster care payments, housing assistance, lump sum income, gifts, and more.
<i>Treatment of Various Members of the Unit</i>	Whether income is counted for different members of the family unit, including children, teen parents, step-parents, non-parent adults, and parents temporarily living outside of the home.
<i>Disregards</i>	The value of earned income disregards, the amount of the disregards, limitations on the application of the disregards, and whether child support paid by a household member (for a child not living in the home) can be deducted from income.
Eligibility Thresholds*	
<i>Initial Eligibility Thresholds by Family Size</i>	Initial eligibility thresholds a family must pass in order to be eligible for CCDF. Initial thresholds are captured by family size, up to a family size of 10.
<i>Continuing Eligibility Thresholds by Family Size</i>	Continuing eligibility thresholds a family must pass in order to remain eligible for CCDF. Continuing eligibility thresholds are captured by family size, up to a family size of 10.

Variable Category/Subcategory	Description of Variables
Assets Tests*	
<i>Assets Tests</i>	The types of tests imposed on assets, including the limit on assets that are not counted against eligibility and policies for vehicle exemptions.
Copayment Exemptions*	
<i>Families Categorically Exempt from Copayments</i>	When families may be exempt from copayments. Exemptions for families living below poverty, exemptions for TANF, SSI, and SNAP recipients, and exemptions for children in foster care or child protective services are captured.
Copayment Adjustments*	
<i>Basic Copayment Calculation Method</i>	The methods for establishing the copayment, based on family size and income category, and the time increment associated with the copayment method.
<i>Families with More than One Child Receiving CCDF-Subsidized Care</i>	How copayments are calculated for families with multiple children, including the methods used to calculate the copayments, the amount of the copayments, and whether any families are exempt from additional copayments for subsequent children.
<i>Adjustments for Part-time Care</i>	How copayments are adjusted for part-time care, including a part-time care definition and a before-and-after care definition. The method for calculating the copayments and the amount of the copayments are also captured.
<i>Other Adjustments</i>	Other copayment adjustments for families with children with special needs and adjustments for other groups as defined by the States/Territories. The variables also capture whether there is a statutory minimum copayment and whether income is treated differently for eligibility and copayment purposes.
Copayment Administration*	
<i>Copayment Administration</i>	How copayments are collected, whether families are required to pay all outstanding copayments before they may change providers, whether families are required to pay the difference when providers charge more than the maximum rate, and payment requirements for days when the child is absent from care due to illness, vacation, or provider closings.
Copayment Income Thresholds*	
<i>Income Thresholds</i>	The income cutoffs defining the different copayment income categories for each family size, up to family size 10.
Copayment Amount*	
<i>Copayment Amount (Dollar Amount or Percentage)</i>	The copayment amount (a dollar amount or percentage) for each income category by family size, up to family size 10.
Basic Application Criteria*	
<i>Application Process</i>	Methods for submitting an application, whether the family has the option to apply through the provider rather than the lead agency, exemptions for submitting an application, interview requirements, when coverage can begin after an application is submitted, notification requirements for eligibility, and the type of assistance families are provided when looking for a provider.
Verification*	
<i>Verification Required</i>	Verification required during the application process, including verification of identity, income, child's age, qualifying activity, absence of a parent, immunization, and the special needs of the child or parent.

Variable Category/Subcategory	Description of Variables
<i>Child Support Enforcement Requirements</i>	The policies for complying with Child Support Enforcement Requirements, including whether verification is required and exemptions for compliance with Child Support Enforcement Requirements.
Redetermination*	
<i>Redetermination Guidelines</i>	Redetermination practices, including how often redetermination is required, redetermination for interim changes, notification requirements for redetermination, notification requirements for subsidy changes, and exemptions for redetermination.
<i>Documentation Required for Redetermination</i>	If a new application and new documentation are required for the redetermination process and how the information may be submitted to the agency.
Requirements for Reporting Changes*	
<i>Requirements for Reporting Changes</i>	When changes must be reported and what changes must be reported. This includes changes in income, address, marital status, qualifying activities, and child care providers.
Appeals*	
<i>Appeals Procedures</i>	The procedures for appealing decisions made by the lead agency. This includes the method for appeal, the agency where appeals are filed, how many appeals a person can make, and how the hearing is conducted.
<i>Service During Appeal</i>	Whether child care subsidy recipients can continue to receive care during the appeals process, if they will receive retroactive care for an appeal they win, and if they must repay the cost of care if they lose the appeal.
Terms of Authorization*	
<i>Activities Authorized for Child Care Subsidy</i>	The types of activities that may be authorized for additional hours of care, including study hours and other school activities, travel hours, rest hours, maternal/paternal leave, other absences from employment, National Guard Activities, and interim changes in eligibility. The number of hours that may be authorized for the different activities is also captured.
<i>General Maximum Hours of Coverage</i>	The maximum hours of care that can be provided under the child care subsidy.
<i>Maximum Hours of Coverage for Subgroups</i>	The maximum hours of care under the child care subsidy for different groups of recipients, including part-time workers, part-time and full-time students, teen parents, and caretakers over age 65.
Priority Policies*	
<i>Priority Policies</i>	Priority policies when there are more children eligible for child care than can be served. Information includes which groups receive priority, the level of priority they receive, and if there is a time limit on their priority status.
Waiting List Policies*	
<i>Waiting List Policies</i>	Waiting list policies when there are more children eligible for child care than can be served. Information includes whether a waiting list is maintained, when eligibility is determined for placement on the list, policies for reviewing the waiting list, notification of a family's status on the waiting list, and more.
Reimbursement Rate Policies*	
<i>Definitions for Amount of Care</i>	Definitions for different amounts of care and which rate is used when families fall into more than one category for amount of care used. The definitions are used in determining reimbursement rates.

Variable Category/Subcategory	Description of Variables
<i>Definitions for Non-School-Age Groups</i>	Definitions for different age groups when determining reimbursement rates.
Reimbursement Rates*	
<i>Reimbursement Rates</i>	Reimbursement rates based on amount of care and age group.
<i>Reimbursement Rates for Before-and-After Care</i>	Reimbursement rates for different amounts of before-and-after care.
<i>Other Reimbursement Rates</i>	Reimbursement rates for special needs care and school closings. Whether the State/Territory uses any other reimbursement rates is also captured.
Unregulated Provider Policies*	
<i>Basic Eligibility</i>	Basic eligibility requirements for unlicensed providers, documentation of child immunizations, orientation requirements, standards for corporal punishment, and other provider information.
<i>Background Checks</i>	Criminal background check requirements, including whether the background check is required at the State/Territory or local level, exemptions, who pays for the background check, and how often background checks are required. Information also includes Child and Adult Protective Services background check requirement.
<i>Training</i>	CPR, First Aid, and other training requirements, including who must complete the training, what exemptions are allowed, and how often the certification must be renewed.
<i>Tuberculosis Prevention Requirements</i>	TB testing requirements for providers and their household members, exemptions from TB testing, and required frequency of testing.
<i>Health and Safety Checklist Requirements</i>	Health and safety checklist requirements, including who must complete the checklist, if the items on the list are required, and how often the list must be recompleted.
Other Provider Policies*	
<i>Provider Requirements for Entering Subsidy Program</i>	Provider eligibility policies, including age requirements, required orientations, interviews, and provider agreements.
<i>On-site Visits</i>	Requirements for on-site visits for both licensed and unlicensed providers.
<i>Documentation</i>	The documentation providers must maintain related to attendance records. Information also includes whether States/Territories use EBT cards.
<i>Overpayments and Fraud</i>	Policies related to provider overpayments and fraud, including repayment of overpayments, appeals, and actions taken as a result of provider fraud.
<i>Provider Payments and Closings</i>	How the provider is paid, collection of copayments, how often the provider can be closed, and whether the provider is paid for days the children are not in care.
<i>Parents and Providers</i>	Whether parents employed by the provider may receive subsidized care, how much notice providers must be given before a child is removed from care, and how often parents may change providers.
<i>Provider Termination</i>	Different reasons a provider may be removed from the child care subsidy program and if providers can be reinstated once removed from the program.
Other Provider Policies: Who Is Authorized to Provide Care*	
<i>Other Provider Policies: Who Is Authorized to Provide Care</i>	Who may provide care for a child, including relatives and non-relatives living in the home and not part of the assistance unit, living in the home and part of the assistance unit, and living outside of the home.

Variable Category/Subcategory	Description of Variables
Quality** (From October 2005 through October 2009 CCDF Plans only)	
<i>Activities that Improve Quality and Availability of Care</i>	Whether activities are provided or will be provided, including consumer education, compliance monitoring, salary improvements, and more.
Early Learning Guidelines** (From October 2005 through October 2009 CCDF Plans only)	
<i>Early Learning Guidelines</i>	The status of early learning guidelines, as reported in the CCDF Plans.
<i>Implementation of Early Learning Guidelines</i>	Implementation of early learning guidelines, including dissemination of materials, development of training curricula, partnerships with other agencies, and more.
Professional Development** (From October 2005 through October 2009 CCDF Plans only)	
<i>Professional Development</i>	Status of the States'/Territories' professional development activities. This includes what is included in the States'/Territories' plans for professional development, goals, training, and links to early learning guidelines.
<i>Availability of Professional Development Opportunities</i>	Whether professional development opportunities are available State/Territory-wide and for different types of providers.
<i>Other Professional Development Policies</i>	Whether incentives are offered to encourage training, if States/Territories assess their plans, and if States/Territories assess the effectiveness of the policies.
Administration** (From October 2005 through October 2009 CCDF Plans only)	
<i>Administration</i>	Administrative information, including the name of the lead agency responsible for overseeing the child care subsidy program and the State/Territory website for child care information. Information also includes policies regarding the transfer of federal TANF funds, the use of direct federal TANF funds, whether private or pre-k funds will be used to meet the CCDF matching fund requirement, and strategies for reducing improper payments.
<i>Market Rate Survey</i>	Date of the market rate survey and whether the State/Territory uses the current survey to set reimbursement rates.
<i>Child Care Services</i>	Whether the lead agency uses grants or contracts for child care slots and whether there are any limits on the use of in-home child care.
Program Development** (From October 2005 through October 2009 CCDF Plans only)	
<i>Consultation and Coordination</i>	Plans for the States'/Territories' consultation and coordination with other agencies, including public health officials, TANF officials, Tribal organizations, and public education officials.

* Information coded primarily from caseworker materials.

** Information coded primarily from CCDF Plan.

APPENDIX B

ELIGIBILITY THRESHOLDS AS A PERCENT OF POVERTY GUIDELINES

State	Initial Eligibility Threshold	Initial Threshold As Percent of Poverty Guidelines	Continuing Eligibility Threshold	Continuing Threshold As Percent of Poverty Guidelines
Alabama	2,007	126%	2,316	146%
Alaska	4,524	227%	4,524	227%
Arizona	2,626	165%	2,626	165%
Arkansas	2,480	156%	2,480	156%
California	3,518	221%	3,518	221%
Colorado ²	2,625	165%	2,625	165%
Connecticut	3,569	224%	5,354	337%
Delaware	3,088	194%	3,088	194%
DC	3,815	240%	4,258	268%
Florida	2,386	150%	3,182	200%
Georgia	2,347	148%	2,347	148%
Hawaii	3,927	215%	3,927	215%
Idaho	2,069	130%	2,069	130%
Illinois	2,944	185%	2,944	185%
Indiana	2,020	127%	2,704	170%
Iowa	2,307	145%	2,307	145%
Kansas	2,943	185%	2,943	185%
Kentucky	2,317	146%	2,549	160%
Louisiana	2,545	160%	2,545	160%
Maine	3,860	243%	3,860	243%
Maryland	2,499	157%	2,499	157%
Massachusetts	3,508	221%	5,964	375%
Michigan	1,990	125%	1,990	125%
Minnesota	2,816	177%	4,014	252%
Mississippi	2,917	183%	2,917	183%
Missouri	1,960	123%	2,145	135%
Montana	2,289	144%	2,289	144%
Nebraska	1,854	117%	1,854	117%
Nevada	3,740	235%	3,740	235%
New Hampshire	3,978	250%	3,978	250%
New Jersey	3,088	194%	3,860	243%
New Mexico	3,182	200%	3,182	200%

Appendix B-Table 1. Initial and Continuing Eligibility Thresholds for a Three-Person Family, As a Percent of the 2012 Federal Poverty Guidelines¹

State	Initial Eligibility Threshold	Initial Threshold As Percent of Poverty Guidelines	Continuing Eligibility Threshold	Continuing Threshold As Percent of Poverty Guidelines
New York	3,182	200%	3,182	200%
North Carolina	3,568	224%	3,568	224%
North Dakota	2,548	160%	2,548	160%
Ohio	1,931	121%	3,090	194%
Oklahoma	2,925	184%	2,925	184%
Oregon	2,944	185%	2,944	185%
Pennsylvania	3,182	200%	3,739	235%
Rhode Island	2,864	180%	2,864	180%
South Carolina	2,386	150%	2,784	175%
South Dakota	2,784	175%	2,784	175%
Tennessee	2,641	166%	2,641	166%
Texas ³	3,182	200%	3,933	247%
Utah	2,668	168%	3,335	210%
Vermont	3,050	192%	3,050	192%
Virginia ⁴	2,823	177%	2,823	177%
Washington	3,182	200%	3,182	200%
West Virginia	2,386	150%	2,943	185%
Wisconsin	2,943	185%	3,182	200%
Wyoming	3,580	225%	3,580	225%

Source: Eligibility Thresholds are from the CCDF Policies Database October 1, 2012 data. Federal Poverty Guidelines are from the Department of Health and Human Services (<http://aspe.hhs.gov/poverty/12poverty.shtml>).

¹ All numbers are rounded to whole numbers. The 2012 Federal Poverty Guidelines for a three-person family are \$19,090 annually (\$1,590.83 monthly) for the 48 contiguous States, \$23,870 annually (\$1,989.17 monthly) for Alaska, and \$21,960 annually (\$1,830.00 monthly) for Hawaii.

² Policies coded for Denver County. Counties may establish initial eligibility thresholds between 130 and 225 percent of the Federal Poverty Guidelines.

³ Policies coded for the Gulf Coast Region. Local boards have the authority to establish eligibility thresholds as either a percent of the Federal Poverty Guidelines or state median income, but not to exceed 85 percent of state median income.

⁴ Policies coded for areas in Group III. Across Virginia, eligibility thresholds range from 150 to 185 percent of the Federal Poverty Guidelines. Group III's eligibility thresholds are set at 185 percent of the Federal Poverty Guidelines.