



Key Cross-State Variations in CCDF Policies as of October 1, 2019

The CCDF Policies Database Book of Tables

OPRE Report 2021-07

December 2020

KEY CROSS-STATE VARIATIONS IN CCDF POLICIES AS OF OCTOBER 1, 2019: THE CCDF POLICIES
DATABASE BOOK OF TABLES

OPRE Report 2021-07

December 2020

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ABOUT THE CCDF POLICIES DATABASE

The CCDF Policies Database project is maintained by the Urban Institute under funding from the Office of Planning, Research, and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services, with funds set aside for research in the Child Care and Development Block Grant Act. This project produces a comprehensive, up-to-date database of child care subsidy policies for the 50 States, the District of Columbia, and the US territories and outlying areas. The database contains hundreds of variables designed to capture the CCDF policies across time. The data are made available for public use; for more information visit <https://ccdf.urban.org>.

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Overview

Introduction

The Child Care and Development Fund (CCDF) provides federal money to States, Territories, and Tribes to subsidize the cost of child care for low-income working families.¹ Detailed policies vary widely across jurisdictions, with States/Territories/Tribes establishing different policies for:

- Eligibility requirements for families and children
- Application, waiting list, and redetermination requirements
- Family copayment policies
- Provider requirements and reimbursement rates

Whether families are eligible for child care assistance and how much assistance they receive depends in large part on the policies set by each jurisdiction. This report describes the ways in which policies vary within the context of the federal program requirements and includes dozens of detailed tables showing each State's/Territory's policy choices.

Primary Research Questions

This report—the tenth in a series—focuses on the CCDF policies that were in place in October 2019, using data from the CCDF Policies Database. This report addresses the following:

- What are the eligibility requirements for families and children?
- What must families do to initially receive assistance and to continue receiving assistance?
- How much do families have to pay out of pocket for the child care they receive?
- What are the requirements for child care providers, and how much are they reimbursed for care?

¹ In addition to providing subsidies for working families, CCDF may also support parents in education and training programs as well as parents looking for employment.

In addition to providing detailed information about the policies in effect in 2019, the report also addresses:

- How have the policies changed over the last year?
- How have selected policies changed over the last five years?

The policies presented here are those that were in effect as of October 1, 2019. The report does not reflect more recent changes to policies, including policy changes in response to the COVID-19 pandemic. Policy changes implemented after October 1, 2019 will be captured in future years' reports.

Purpose

The CCDF Policies Database project produces a comprehensive, up-to-date database of CCDF policies for the 50 States, the District of Columbia, and five U.S. Territories and outlying areas.² The database contains hundreds of variables designed to capture 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 (OPRE) and maintained by the Urban Institute.

Highlights

Highlights from 2019 policies include:

- Almost all States/Territories consider high school and GED to be qualifying activities for teen parents (with many also approving these activities for adult parents). All but seven States/Territories include job training, and all but eleven include post-secondary education as qualifying activities in at least some cases for adult parents. Thirty-one States/Territories consider ESL classes to be a qualifying activity. Thirty-six States count adult basic education as a qualifying activity.
- Between 2018 and 2019, two States/Territories increased the number of days families have to report changes to the subsidy agency. Four States/Territories stopped requiring families to report changes in employment. Five States/Territories changed their requirements for

² The CCDF Policies Database does not include information on tribal CCDF policies.

reporting changes in income to only require families to report changes that would cause their income to exceed the State's/Territory's eligibility limit.

- A majority of the States/Territories require the parent to pay the regular copayment for days when the child care provider is closed. Five States/Territories do not require parents to pay a copayment for days the provider is closed, while three States require parents to pay the entire price of care.
- The maximum income that a family of three can have and become newly eligible for assistance ranges from \$1,423 to \$5,802 per month.
- Across the States/Territories, copayments for a single parent with two children in care and \$15,000 in annual earnings range from \$0 to \$446 per month. The median copayment for a family with those characteristics is \$31 per month.
- In 41 States/Territories, providers may receive payment on days they are closed; States/Territories may limit the number of days providers can be paid for closures or limit the policy to certain types of providers (e.g., licensed providers). In 14 States/Territories, providers are not paid for days they are closed. In 54 States/Territories, providers may be paid for days children are absent; the policies often vary based on the type of provider. In two States/Territories, payments are not approved for days the children are absent from care.

Highlights of policy changes from 2015 to 2019 include:

- Twenty-seven States/Territories made changes to their policies regarding eligibility during periods of job search, with most of the changes occurring between 2016 and 2017.
- Thirty States/Territories made changes to their redetermination periods between 2015 and 2019, with most of the changes occurring between 2015 and 2016 when several States/Territories extended their redetermination periods from 6 to 12 months.
- Twenty-four States/Territories changed the monthly copayment amounts for a family of three earning \$15,000 between 2015 and 2019. Most of these changes were reductions in the copayment amounts.

Methods

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”). The initial set of manuals coded for the database reflected policies in effect on or before October 1, 2009. Ongoing policy updates have been collected since that point 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. The tables are then reviewed by State/Territory administrators and verified for accuracy. (Because verification of this year’s tables took place in the spring of 2020, when many State/Territory administrators were focused on emergency needs in their States/Territories resulting from the COVID-19 pandemic, fewer States/Territories are considered “fully verified” than in previous years.) The final tables are included in an annual report, with the current report showing the policies in effect on October 1, 2019. The full database containing all of the variables and longitudinal details is also made available for public use at <https://ccdf.urban.org>.

Glossary

CCDBG: Child Care and Development Block Grant

CCDF: Child Care and Development Fund

CPS: Child Protective Services

TANF: Temporary Assistance for Needy Families

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I. Introduction and Overview

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 and to improve the quality of child care. In the average month of fiscal year 2018, the latest year for which data are available, 1.32 million children received care that was subsidized through CCDF.³ The Child Care and Development Block Grant (CCDBG) Act outlines requirements for the CCDF program and allows subsidies to be provided to children who are under age 13 and children under age 19 who have special needs, with parents or guardians who are working, or attending a job training or educational program, 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 program policies.⁴ Those policies determine whether a 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, in practice it is 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, 2019.⁵ Additionally, highlights of policy changes between 2018 and 2019 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 focus date of the triennial CCDF Plans (previously biennial), 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).⁶

This Book of Tables includes tables covering four general areas of policy (see the Table of Tables at the beginning of this report for more information):

- Eligibility requirements for families and children (tables 1 through 17)
- Family application, terms of authorization, and redetermination (tables 18 through 26 and C-1)

³ See “FY 2018 CCDF Data Tables (Preliminary),” Table 1, available on-line at <https://www.acf.hhs.gov/occ/resource/fy-2018-preliminary-data-table-1>

⁴ CCDF regulations (Code of Federal Regulations 45 CFR Parts 98: Child Care and Development Fund: Final Rule) may be accessed via the U.S. Government Printing Office website (<https://www.federalregister.gov/documents/2016/09/30/2016-22986/child-care-and-development-fund-ccdf-program>).

⁵ Books of Tables showing policies in effect on October 1 of each year for 2009 through 2019 are available from the project website (<https://ccdf.urban.org/resources>). Work is currently under way to collect policy changes through October 1, 2020.

⁶ Beginning with the FY 2016-2018 CCDF Plans, States and Territories submit plans every three years.

- Family payments (tables 27 through 34)
- Policies for providers, including maximum reimbursement rates (tables 35 through 42 and D-1)

Additional appendix tables provide supplemental policy information as well as selected policies over the last five years.

The policies presented here are those that were in effect as of October 1, 2019. The report does not reflect more recent changes to policies, including policy changes in response to the COVID-19 pandemic. Policy changes implemented after October 1, 2019 will be captured in future years' reports.

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 caseworkers use as they work with families and providers (often termed "caseworker manuals"). The caseworker manuals generally provide more detailed information on eligibility, family payments, and provider-related policies than is included in the CCDF Plan documents submitted by States/Territories to ACF.⁷ 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 detail.⁸

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

- In several States (Colorado, Florida, New York, Texas, and Virginia), at least some policies related to family eligibility requirements, family application, terms of authorization, or redetermination vary across geographic sub-areas within the State. Sub-state policy variation is more common for family and provider payment policies, where over two-thirds of states vary their policies by sub-state geographic area. In States with sub-state policy variation, the Book of Tables shows the information for the most populous area, and notes the area to which the information applies.

⁷ 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.

⁸ Upon final review and release of the data by ACF each year, the full database is made available for public use. The full database includes information not presented in this report, including additional policy variables and longitudinal data. For more information, documentation, and access to the full database, see <https://ccdf.urban.org/>.

- The Book of Tables focuses on CCDF-funded child care subsidies; child care funded solely with Temporary Assistance for Needy Families (TANF) funds or other non-CCDF funds and administered outside of the primary CCDF program in the State is not included.⁹
- Tribal CCDF programs are not included.
- Some important aspects of child care subsidy policies 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.¹⁰

The remainder of this introduction provides a brief overview of the 2014 CCDBG reauthorization and its effect on State and Territory policies, as well as 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. Appendix B provides more information about the eligibility thresholds, showing the thresholds as a percent of the Federal Poverty Guidelines. Appendix C provides a rotating table that describes additional policies, with this year's table focusing on additional application and waiting list policies. Appendix D provides the state-specific provider types for which the unlicensed home-based provider policies in Tables 39a-41a apply. Appendix E describes changes in selected policies from 2015 to 2019.

CCDBG Reauthorization

The Child Care and Development Fund (CCDF), authorized by the Child Care and Development Block Grant (CCDBG) Act and Section 418 of the Social Security Act, provides funding to the States, the District of Columbia, and Territories to administer child care subsidy programs for low-income families. The CCDBG Act of 2014, signed into law on November 19, 2014, is the first reauthorization of the federal block grant since 1996.¹¹ Reauthorization of the block grant established a number of new requirements for the CCDF

⁹ TANF provides work opportunities and assistance to low-income families. The program is a federally-funded, State-/Territory-administered block grant program; States/Territories determine how to use the funds to assist families in ways that meet the program's goals. Additional information about TANF can be found at the Administration for Children and Families, U.S. Department of Health and Human Services website (<https://www.acf.hhs.gov/ofa/programs/tanf>).

¹⁰ 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, and information regarding quality activities is reported in the Quality Performance Report. Information regarding licensing can be found through the National Association for Regulatory Administration (<https://www.naralicensing.org/>).

¹¹ The Child Care and Development Block Grant Act of 2014 is available at <https://www.congress.gov/113/plaws/publ186/PLAW-113publ186.pdf>.

program.¹² Additionally, the CCDF Final Rule reflecting the statutory changes was published September 30, 2016.¹³

The tables presented in this report show the policies that were in effect on October 1, 2019. While many of the new federal policies went into effect when the law was passed on November 19, 2014, some policies had later implementation dates. States/Territories also had the option to request extensions for implementing new requirements. As of October 1, 2019, background checks were the only policy area for which States/Territories could still receive an extension and only if the State/Territory had fulfilled certain milestones. Many revised policies are shown in this year's tables, and more changes will be reflected in future years' tables as they take effect. More detail regarding the timeline for States'/Territories' implementation of the new requirements can be found in the CCDF Plans that were submitted for federal fiscal years 2016-2018 and 2019-2021.¹⁴

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 partially or fully by CCDF. The names of the programs are listed in table I.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.

Table I.A. State/Territory Program Names for the Programs Represented in the CCDF Policies Database's Book of Tables for October 1, 2019

State/Territory	Program ¹
Alabama	Child Care Subsidy Program
Alaska	Child Care Assistance Program
American Samoa	Child Care Program
Arizona	Child Care Assistance
Arkansas	Child Care Assistance Program
California	California Alternative Payment Programs ²

¹² For more information about the new child care provisions and the full law, see the Office of Child Care's CCDBG reauthorization resources webpage at <https://www.acf.hhs.gov/occ/ccdf-reauthorization>.

¹³ The CCDF Final Rule can be obtained from the Federal Register at <https://www.federalregister.gov/documents/2016/09/30/2016-22986/child-care-and-development-fund-ccdf-program>.

¹⁴ The most recent CCDF Plans (FY 2019-2021) approved by the Office of Child Care under the Administration for Children and Families can be found on the Office of Child Care Website: <https://www.acf.hhs.gov/occ/resource/state-plans>.

Table I.A. State/Territory Program Names for the Programs Represented in the CCDF Policies Database's Book of Tables for October 1, 2019

State/Territory	Program ¹
Colorado	Colorado Child Care Assistance Program
Connecticut	Care 4 Kids
DC	Subsidized Child Care
Delaware	Child Care Subsidy Program
Florida	School Readiness
Georgia	Childcare and Parent Services
Guam	CCDF Program
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 Subsidy Program
Montana	Best Beginnings Child Care Scholarship Program
Nebraska	Child Care Subsidy Program
Nevada	Child Care and Development Program
New Hampshire	NH Child Care Scholarship
New Jersey	Child Care Subsidy Program
New Mexico	Child Care Assistance
New York	Child Care Subsidy Program
No. Mariana Islands	DCCA Child Care and Development Fund Program
North Carolina	Subsidized Child Care Assistance (SCCA) Program
North Dakota	Child Care Assistance Program
Ohio	Publicly Funded Child Care
Oklahoma	Child Care Subsidy Program
Oregon	Employment Related Day Care
Pennsylvania	Child Care Works Subsidized Child Care
Puerto Rico	Child Care and Development Program
Rhode Island	Child Care Assistance Program
South Carolina	SC Voucher 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
Virgin Islands	Subsidy, Resource, and Referral Program

Table I.A. State/Territory Program Names for the Programs Represented in the CCDF Policies Database's Book of Tables for October 1, 2019

State/Territory	Program ¹
Virginia	Child Care Subsidy and Services
Washington	Working Connections Child Care
West Virginia	Child Care
Wisconsin	Wisconsin Shares Child Care Subsidy Program
Wyoming	Child Care Subsidy Program

Source: CCDF Policies Database October 1, 2019 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, 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 or donated funds, and funds from other programs such as housing programs, the Supplemental Nutrition Assistance Program (SNAP), and foster care or Child Protective Services (CPS).¹⁵ Further, up to 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.¹⁶ For FY 2017, the most recent year for which data are publicly available, the pooling factors ranged from 0.162 in D.C. to 1.0 in 18 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 16.2 percent of the funds were CCDF funds. In other words, CCDF funds supported subsidies for approximately 16 percent of the children reported as being served by D.C. in the ACF-800 and 801 reports. In contrast, in the 18 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

¹⁵ The SNAP program was formerly known as the Food Stamp Program.

¹⁶ ACF Technical Bulletin #1r-v6 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 <https://www.acf.hhs.gov/occ/resource/tb01r-v6>. TANF-transfer, State Match, and State Maintenance of Effort (MOE) funds are all considered part of CCDF funds.

factor was 0.823.¹⁷ 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.¹⁸

HEAD START AND STATE/TERRITORY-FUNDED PRE-K POLICIES

Policies governing States'/Territories' Head Start programs and State/Territory-funded pre-kindergarten ("pre-k") programs are not included in the Book of Tables.¹⁹ However, these programs serve large numbers of pre-school children, and Early Head Start serves infants and toddlers. Approximately 887,000 children (mostly ages 3 and 4) were served by Head Start and Early Head Start during FY 2018, and approximately 1.63 million (mostly age 4) were in State/Territory-funded pre-kindergarten programs in the 2018-19

¹⁷ FY 2017 ACF-801 data, obtained from the Inter-University Consortium for Political and Social Research (ICPSR) website, <https://www.icpsr.umich.edu/web/ICPSR/studies/37627>. Pooling factors for more recent years will be available as those years of CCDF administrative data are publicly released.

¹⁸ For information on how data from the CCDF Policies Database can be linked with administrative data, see "Researching the CCDF Program by Linking Administrative Data with Data from the CCDF Policies Database: A How-To Guide," available at <https://www.urban.org/research/publication/researching-ccdf-program-linking-administrative-data-data-ccdf-policies-database-how-guide>.

¹⁹ Any discussion of pre-kindergarten programs in this report refers only to state-funded programs.

school year.²⁰ In contrast, about 368,000 children ages 3 and 4 were served by CCDF in FY 2018.²¹ 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.²²) 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.²³ 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.²⁴

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 funds²⁵; or
2. Spend TANF funds directly on child care (often referred to as TANF-direct) in which case States/Territories may 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

²⁰ Head Start data are available from: <https://eclkc.ohs.acf.hhs.gov/about-us/article/head-start-program-facts>. Pre-k enrollment figures are from: <http://nieer.org/yearbook>.

²¹ According to the CCDF enrollment statistics from the ACF-801 data for FY 2018, approximately 27.9 percent of children served were ages 3 and 4 and 1.32 million children were served through CCDF in the average month. See Tables 1 and 9 in the "FY 2018 CCDF Data Tables (Preliminary)", available from the Office of Child Care at: <https://www.acf.hhs.gov/occ/resource/fy-2018-ccdf-data-tables-preliminary>

²² Partnerships between Early Head Start and CCDF providers may result in greater coordination and continuity between the programs. For more information on Early Head Start-Child Care Partnerships, see: https://www.acf.hhs.gov/sites/default/files/occ/what_is_the_early_head_start_cc_partnership_final_4_508.pdf?nocache=1365689128.

²³ According to CCDF financial data for FY 2018, 14 States used pre-kindergarten expenditures to help satisfy State matching and/or MOE requirements. See table 8b from "CCDF Expenditures for FY 2018 as of 9/30/2018". <https://www.acf.hhs.gov/occ/resource/fy-2018-ccdf-state-expenditure-data>.

²⁴ See the ACF-800 reporting guide (<https://www.acf.hhs.gov/occ/resource/acf-800-reporting-guide>) for instructions on which children are counted in the administrative data as receiving child care subsidies. 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.

²⁵ When TANF funds are transferred to CCDF, they must be spent according to CCDF regulations.

- 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.

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 ACF-800 and ACF-801 data. However, if child care for TANF families is completely separate, TANF families will generally not appear in the ACF-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 or in these tables. In general, if a State’s/Territory’s ACF-801 data indicate that a very low percentage of the caseload receives TANF, the State/Territory might 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.²⁶

Sources and Verification

For Tables 1 through 42 and the appendix tables, 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.²⁷ The updated documents are obtained via the State's/Territory's website, email listservs, or contact with State/Territory staff. The CCDF Policies Database and tables capture policies that have been implemented. They do not incorporate legislative changes that States/Territories have made but have not yet implemented.

To maximize the accuracy of the information in this Book, we conducted a verification process with the States/Territories. 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 information that was not initially identified in the policy materials used for coding.²⁸ In some cases, State/Territory staff indicated that information that had not been found in a manual was not applicable for the State/Territory due to other aspects of the State's/Territory's policies. State/Territory contacts also provided additional details that augmented the notes included with each table.

Table I.B shows the extent to which each State's/Territory's data were reviewed. The verification process for this report occurred between February and June 2020. Due to the COVID-19 pandemic and the resulting emergency needs faced by State/Territory program administrators and staff, fewer States/Territories are considered "fully verified" than in previous years.

In the majority of States/Territories (48 out of 56), a State/Territory contact reviewed the materials and any issues that were raised were fully resolved (shown as "fully verified" in the table below). In five States/Territories (Arkansas, Louisiana, Maryland, Puerto Rico, and South Carolina), we were able to verify some of the information in the tables but had outstanding questions left after the verification period (shown

²⁶ We coded the Alternative Payment Programs (CAPP) and the CalWORKS Stage 2 and Stage 3 programs in the CCDF Policies 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 child care programs that serve very few families, such as a program serving migrant farmworker families, due to project resource constraints.

²⁷ 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.

²⁸ For most adjustments to initial coding, documentation was obtained in the form of an updated policy or supplemental policy document. In some cases when a particular policy was not documented in any written form, initial coding was adjusted based on discussion with the State/Territory contact.

as “partially verified”). In three cases (American Samoa, New Hampshire, and New Jersey), the State/Territory was unable to review the tables (shown as “not verified”).

Throughout the tables, some items of information are identified as “information not found in State’s/Territory’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.

Table I.B. Verification Status of the Information in the CCDF Policies Database Project’s Book of Tables for October 1, 2019	
State	Status of Verification ¹
Alabama	Fully verified
Alaska	Fully verified
Arizona	Fully verified
American Samoa	Not verified
Arkansas	Partially verified
California	Fully verified
Colorado	Fully verified
Connecticut	Fully verified
DC	Fully verified
Delaware	Fully verified
Florida	Fully verified
Georgia	Fully verified
Hawaii	Fully verified
Guam	Fully verified
Idaho	Fully verified
Illinois	Fully verified
Indiana	Fully verified
Iowa	Fully verified
Kansas	Fully verified
Kentucky	Fully verified
Louisiana	Partially verified
Maine	Fully verified
Maryland	Partially verified
Massachusetts	Fully verified
Michigan	Fully verified
Minnesota	Fully verified
Mississippi	Fully verified
Missouri	Fully verified
Montana	Fully verified
Nebraska	Fully verified
Nevada	Fully verified
New Hampshire	Not verified
New Jersey	Not verified
New Mexico	Fully verified
New York	Fully verified
Northern Mariana Islands	Fully verified
North Carolina	Fully verified
North Dakota	Fully verified

Table I.B. Verification Status of the Information in the CCDF Policies Database Project’s Book of Tables for October 1, 2019

State	Status of Verification ¹
Ohio	Fully verified
Oklahoma	Fully verified
Oregon	Fully verified
Pennsylvania	Fully verified
Puerto Rico	Partially verified
Rhode Island	Fully verified
South Carolina	Partially verified
South Dakota	Fully verified
Tennessee	Fully verified
Texas	Fully verified
Utah	Fully verified
Vermont	Fully verified
Virgin Islands	Fully verified
Virginia	Fully verified
Washington	Fully verified
West Virginia	Fully verified
Wisconsin	Fully verified
Wyoming	Fully verified

¹ “Fully verified” (48 States/Territories) means the State/Territory reviewed the draft tables, and all issues that were raised were fully resolved. “Partially verified” (five States/Territories) means we were able to verify some of the information in the tables but had outstanding questions left after the verification period. “Not verified” (three States/Territories) means that the State/Territory was not able to review the tables.

II. Eligibility Requirements for Families and Children

Federal policies establish the 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 cannot exceed 85 percent of the applicable state median income, and the family cannot have countable assets in excess of \$1,000,000. Third, the parents or guardians must be working or attending a job training or educational program.²⁹

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 the following:

- Whether to allow searching for employment as an initial qualifying activity
- 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 older children 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

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. 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

²⁹ The general requirements for income, assets, and activities may differ for families with children in need of protective services. States/Territories have discretion in how they define children in need of protective services. Under federal rules these children do not have to be formally connected to child protective services (CPS). For example, children experiencing homelessness can be considered in need of protective services even if they are not connected with CPS. In the remainder of this report, Child Protective Services refers to the State's/Territories' formal Child Protective Services programs.

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 or guardians generally must be involved in approved activities 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, if the State/Territory chooses, who are under age 19 and either under court supervision or mentally or physically incapable of caring for themselves. States/Territories determine what age 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 subsidies for the children who exceed the federal age limit.)

Table 1 shows the variation in State/Territory policies regarding age limits. Findings for 2019 include:

- For children without any special circumstances (not under court supervision and no special needs), 54 States/Territories provide subsidies through age 12 (until the child's 13th birthday), one State (Oregon) provides subsidies through age 11, and one State (Wyoming) provides subsidies through age 13. In accordance with the CCDF Final Rule, 38 States set the age limit at 12 but allow children to continue receiving assistance through the end of the eligibility period if they turn 13 while receiving subsidies. In New York, children are eligible through age 12, but children who turn 13 while receiving subsidies may continue receiving assistance through the end of the school year.
- All but five States/Territories set higher age limits for children who are mentally or physically incapacitated. Among the States/Territories that set a higher age limit, the maximum age for children with a mental or physical incapacity to be eligible for CCDF 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 their State's/Territory's Child Protective Services (CPS) program show greater variation. Four States (Illinois, Maryland, Minnesota, and North Dakota) do not provide children under 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 their 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.

Approved Activities for CCDF Eligibility (Tables 2 and 3)

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, employment and training under the SNAP program, housing search, high school, GED activities, English as a Second Language (ESL) activities, training, adult basic education, and post-secondary education.³⁰ 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.

In order to be counted as a qualifying activity for CCDF eligibility in the CCDF Policies Database, the activity must confer eligibility on its own. If the activity is only allowed if the parent is also working, the tables will show “no” for the given activity, and the note will explain the policy that employment is considered the activity that confers eligibility.

Tables 2 and 3 show the policies in each State/Territory. Findings for the policies in effect in 2019 include:

- Employment is an approved activity in all States/Territories.
- Among the 51 States/Territories that consider job search to be a qualifying activity, 32 only allow a family that was already receiving subsidies for another reason to continue to receive subsidized care during a period of job search (in other words, job search is an allowable activity only for continuing eligibility), while the other 19 consider job search 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. There is also variation in how the time limit is expressed (e.g., as maximum time during a year or maximum time per job loss). The maximum time of job search eligibility ranges from 30 days to 90 days per year in seven States/Territories, three months per six-month period in West Virginia, and from three months to six months per job loss occurrence in 38 States/Territories. The remaining States/Territories that allow CCDF eligibility for job search activities use different methods for establishing the amount of time approved. For example, in California, Michigan, and Washington, job search activities are approved through the end of the 12-month eligibility period, regardless of when employment ended.

³⁰ The activities listed are not explicitly stated in the CCDF federal guidelines. States/Territories have leeway concerning which activities they approve for care.

- Twenty-two States/Territories consider SNAP Employment and Training (E&T) activities to be a qualifying activity for subsidized child care.
- Twenty States/Territories consider search for housing to be a qualifying activity in at least some cases for families experiencing homelessness.
- Focusing specifically on families receiving TANF, almost all States/Territories consider TANF work program activities eligible activities for subsidized child care, and 38 allow for TANF activities in addition to the TANF work program.³¹
- Almost all States/Territories consider high school and GED to be qualifying activities for teen parents (with many also approving these activities for adult parents). All but seven States/Territories include job training, and all but eleven include post-secondary education as qualifying activities in at least some cases for adult parents. Thirty-one States/Territories consider ESL classes to be a qualifying activity. Thirty-six States count adult basic education as a qualifying activity.

The activity requirements are imposed within the context of the guidelines under CCDBG reauthorization, including a 12-month minimum eligibility period and a rule that prevents immediate termination of subsidies due to a change in parental activity. When an activity—such as employment—ends prior to the end of the 12-month eligibility period, States/Territories must either continue to provide a subsidy to the family for the remainder of the 12-month eligibility period or, if the State/Territory chooses to terminate the subsidy of a parent whose approved activity ends prior to the end of the 12-month eligibility period, they must continue to provide care during a job search period of at least three months.³² As shown in table 2, as of October 1, 2019, a majority of the States/Territories continue to provide care during a job search period of at least three months. As the remaining States/Territories adopt the requirements for job search activities, that information will be captured in the database and future tables.

Rules concerning allowable activities are complex, and an activity may qualify a parent or guardian 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 (see table 4). Some details of States'/Territories' policies are

³¹ TANF work program activities are broadly defined as employment or training activities that are part of the State's/Territory's TANF program. Eligible activities outside of the TANF work program vary by state; examples include education activities, rehabilitation services, treatment programs, and shelter or housing search.

³² For additional information on the job search requirements, see "Implications of Child Care and Development Block Grant Reauthorization for State Policies: Changes to Job Search Policies" available at <https://www.urban.org/research/publication/implications-child-care-and-development-block-grant-reauthorization-state-policies-changes-job-search-policies>.

listed in the tables' footnotes; more information can be found in the full detail of the CCDF Policies Database.

Minimum Work Hours Per Week Required for CCDF Eligibility (Table 4)

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. These requirements may also extend to students, who might be required to work a minimum number of hours in addition to their school activities. Table 4 outlines these policies. Highlights from 2019 include:

- Twenty-six States/Territories require that parents work a minimum number of hours per week to be eligible for subsidized care based on work. Among these programs, the minimum required hours range from 15 hours each week in three States/Territories to 30 hours each week in five States/Territories. Additionally, Montana does not use a weekly work hour requirement, instead requiring parents to meet a monthly work hour minimum.
- Almost all 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, four States modify the requirement for two-parent families. In Florida and 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.
- Utah is the only State/Territory that requires full-time high school students to work a minimum number of hours per week to receive subsidized care. Eight States/Territories require full-time post-secondary students to work a minimum number of hours per week, ranging from 5 to 20 hours per week, to receive subsidized care. Additionally, two States (Montana and Oregon) have other minimum work requirements for post-secondary students. Montana has no work hour requirement if both parents in a two-parent family are in school full time, but if one is in school full time and the other is in school part time, the parents must work a combined 40 hours per month. Oregon requires half of a post-secondary student's authorized hours to come from employment.

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 for subsidy eligibility, the number of work hours generally affects the number of hours approved for subsidized child care.³³

If Families Receiving Different Types of Benefits/Services Have Different Parent Activity Requirements (Table 5)

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 5 shows how the CCDF-funded programs treat families receiving these benefits or services. Highlights for 2019 include:

- Forty States/Territories require families using transitional child care (following TANF receipt) to meet the same requirements as other CCDF-eligible families. The other States/Territories have different requirements for these families, such as allowing them to work fewer than the minimum hours required for other families.
- Twelve States/Territories do not require families experiencing homelessness to meet any activity requirement to initially receive subsidized child care. As shown in table 3, some of the States/Territories that do impose an activity requirement on families experiencing homelessness consider their search for housing to be an eligible activity.
- Eleven States/Territories require families with CPS cases to meet the same activity requirements as other families. Families with children under CPS have no activity requirement in 12 States/Territories, are ineligible in four States because their care is provided through a different program, and are eligible with modified policies in the remaining States/Territories.
- Families with foster children must meet the same requirements as all other families in 27 States/Territories. In the remaining States/Territories, foster families are either eligible for subsidized care with no activity requirements (10 States/Territories), are not eligible because child care is provided through another program (5 States/Territories), or are eligible with modified policies (14 States/Territories).

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

³³ 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.

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.³⁴

Changes in Age and Activity Requirements from 2018 to 2019

Several States/Territories made changes to their basic eligibility requirements between 2018 and 2019, with many of the changes directly related to the requirements outlined under CCDBG reauthorization.

Two States, Delaware and Mississippi, added policies to allow most children to continue receiving subsidies if they reached the maximum age limit during the eligibility period. In these cases, the States/Territories now have policies stating that a child who is 12 when the subsidy begins, but turns 13 during the 12-month eligibility period, can continue to receive subsidies until the end of the 12-month period. Mississippi also added a policy to allow children with special needs and children under child protective services to continue receiving care through the end of the eligibility period if they reach the age limit during the eligibility period. These policy changes reflect States'/Territories' efforts to align their policies with federal guidelines concerning continuity of care.

Between 2018 and 2019, ten States/Territories made changes to their policies regarding eligible activities. Six made changes to policies for job search. The Virgin Islands newly allows for job search as an eligible activity for continuing eligibility, Nebraska now only allows job search for continuing eligibility, and Utah no longer allows job search for families who are applying for a subsidy for the first time (families that were already receiving assistance can continue to utilize job search as an eligible activity). Additionally, three States (Alabama, Mississippi, and Nevada) lengthened the job search eligibility period. In addition to the changes in job search policies across States/Territories, Kentucky added SNAP E&T, training, and post-secondary education as approved activities, Washington added ESL as an approved activity, and Massachusetts began allowing adult basic education.

Additionally, Kansas changed its work requirements between 2018 and 2019 by reducing the minimum number of hours for work from 28 hours per week to 20 hours per week. Three States/Territories also made changes to their activity requirements for different eligibility groups, with Illinois modifying its activity requirements for families experiencing homelessness to allow for families to receive two 90-day periods of subsidized care without participating in a qualifying activity, Kentucky newly allowing children in foster care to receive subsidies, and New York now requiring families with children in foster care to meet the same requirements as other families.

³⁴ 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.

Family and Income Definitions

Federal CCDF policies refer to family size and family income, requiring that a subsidized family cannot have income that exceeds 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 family is eligible for subsidies as well as 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 if they live in the same home. However, States/Territories make different decisions concerning other household members, such as siblings, step-parents, or grandparents of the subsidy-eligible child.

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 if there are additional children of the adult parents included in the 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 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 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 6)

Table 6 shows States'/Territories' policies for defining the family unit when older siblings are present in the home with the eligible child. The age at which siblings are included in the unit may vary based on whether the siblings are attending school. Table 6 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 2019 include:

- A majority of States/Territories (42) count children in the family unit through the age of 17 if they are not attending school.
- There is greater variation in policies for children attending school, with 21 States/Territories maintaining the 17-year-old age limit and 18 States/Territories counting children through age 18. The oldest age at which a child attending school is counted in the unit is 23 (Massachusetts).
- Six States count all siblings as members of the assistance unit without regard to age, as long as the children meet the State's definition of being dependent on the parents. Guam counts all siblings in the unit without regard to age, as long as they are still in high school.
- Thirty States/Territories do not count the earnings of children and siblings, while three States fully count the earnings of children and siblings who are included in the unit. In six States, earnings are counted once a child reaches a certain age, ranging from 15 years old in two States to 18 years old in four States. 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 7)

Table 7 shows States'/Territories' policies for defining the family unit when there is a young parent living with his or her own parents. Each State's/Territory's definition of teen parent is included, along with the policy for counting the earnings of teen parents. Key findings from 2019 include:

- In 24 States/Territories, a teen parent is defined as a parent age 17 or under. In 18 States/Territories, a teen parent is defined as a parent age 19 or under. The oldest age at which a parent living with his or her parents may be considered a teen parent is in Washington, where a parent age 21 or younger is considered a teen parent.
- In 35 States/Territories, the income of teen parents is fully counted. Five 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.
- Twenty-eight States/Territories always count a minor parent and his or her child as a separate family unit, even if the teen parent lives with his or her adult parents and regardless of whether the teen parent has siblings receiving CCDF subsidies. 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, Non-Parent Partners, and Temporarily Absent Parents (Table 8)

Table 8 shows the States'/Territories' policies for defining the family unit and income when step-parents or non-married, non-parent partners are present. For the purposes of the database, a caretaker's partner is defined as a person who resides in the home, is not married to the child's parent, is not a parent of the child, and has no children in common with the child's parent. Table 8 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 a parent is temporarily absent from the home. A parent might 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 2019 include:

- All States/Territories but one always include a step-parent as part of the family unit.
- Of the States/Territories that count step-parents in the family unit, all but Pennsylvania and Minnesota fully count the income of step-parents for eligibility and copayment purposes. Pennsylvania uses an income disregard for step-parents. Minnesota exempts a newly married step-parent's income for one year if the family's income before the exemption does not exceed 67 percent of state median income.
- Only North Carolina treats parents in blended families (families consisting of married parents with no children in common) as separate units.
- Six States always include a parent's cohabiting partner (not married and with no children in common) in the family size. An additional six States include partners in some situations, such as if the partner is financially contributing to the welfare of the children.
- A majority of the States/Territories count the income of a parent who is temporarily absent from the household in at least some circumstances.

Defining the Family Unit and Income: Treatment of Non-Parent Caretakers (Table 9)

In addition to having varied 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 9 shows the State/Territory policies for defining the family unit and income when caretakers are responsible for the children.

Key 2019 findings regarding the treatment of *relative* caretakers include:

- Forty-six 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 (California, Delaware, Iowa, Maine, North Carolina, and Washington) always exclude relative caretakers from family size when determining eligibility.³⁵ An additional seven States (Alabama, Arizona, Florida, Georgia, Michigan, New York, and Oklahoma) exclude relative caretakers under some circumstances, such as when the relative caretaker is a foster parent.
- Of the 50 States/Territories that always or sometimes include relative caretakers in the family unit, a majority count the income of any caretakers included in the unit, but four States (the District of Columbia, Massachusetts, New York, and South Dakota) always exclude the income of relative caretakers when determining eligibility and copayments.

Key 2019 findings regarding the treatment of *non-relative* caretakers include:

- Thirty-four 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, such as establishing legal guardianship.
- Six States (California, Delaware, Iowa, Maine, North Carolina, and Washington) always exclude non-relative caretakers from the family size when determining eligibility, and an additional seven States exclude non-relative caretakers under some circumstances.
- Of the 50 States/Territories that always or sometimes include non-relative caretakers in the family unit, three (the District of Columbia, Massachusetts, and New York) always exclude the income of non-relative caretakers when determining eligibility and copayments.

³⁵ This creates what is sometimes termed a “child-only” unit for purposes of eligibility determination and computation of the copayment. A child-only unit is treated as a unit of one person (the child), with adult caretakers excluded for purposes of determining family size and income.

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

Family units, as defined by the States/Territories for CCDF purposes, often include siblings, parents, and caretakers, but some States/Territories may also count additional adults living in the home, such as aunts, uncles, grandparents, and family friends. Policies regarding other adults living in the home may vary depending on whether the adults are relatives or non-relatives. Table 10 shows the State/Territory policies for defining the family unit and income when adults other than the parents or caretakers and their spouses or partners are living in the home. Highlights for 2019 include:

- When determining family size and income for eligibility, all but nine States/Territories never include other adult relatives living in the home. Of the nine States/Territories that sometimes include other adult relatives, all but Puerto Rico fully count their income.
- All but four States/Territories always exclude adult non-relatives living in the home when determining family size and income.

Additional detail about how States/Territories define the family unit can be found in the full detail of the CCDF Policies Database.

Treatment of Various Types of Income and Benefits When Determining Eligibility (Tables 11 and 12)

States/Territories also establish policies for what types of income are counted. How a State/Territory chooses to define countable income can greatly impact a 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. Tables 11 and 12 show how States/Territories treat different types of income. Table 11 captures the policies for the following types of income and benefits: TANF income, Supplemental Security Income (SSI), Social Security Disability Income (SSDI), net self-employment income, child support income, and the value of SNAP benefits. Table 12 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, non-recurring lump sum income, and non-recurring gifts.

Key findings from 2019 include:

- TANF income is fully counted in a little under half of the States/Territories. It is either not counted or only counted under certain circumstances in the remainder.

- SSI is fully counted in approximately half of the States/Territories, and the majority of States/Territories fully count SSDI income.
- All States/Territories fully count net income from self-employment.
- Five States/Territories (Alabama, Arkansas, Connecticut, Puerto Rico, and Texas) do not count child support income. Wisconsin counts child support income only if the household receives over \$1,250 per month. The District of Columbia and the Virgin Islands specify that child support income is counted for CCDF-eligible children only, while the remaining States/Territories count child support income for all children in the family.
- Most States/Territories do not count the value of any type of housing assistance, while six States/Territories count the value of all or some types of housing assistance, such as military housing assistance or employer-provided housing.
- Almost all of the States/Territories exclude the value of both SNAP benefits and LIHEAP.
- Among States with an EITC in their State income tax code, almost all exclude the value of State EITC refunds.
- Lump-sum and non-recurring gift income policies show greater variation, with some States/Territories counting income above a certain dollar amount, such as income that exceeds \$50 in a month. Approximately half of the States/Territories do not count lump-sum income, and more than half exclude gift income.

Note that the child support disregards described in table 11 refer to the child support *received* by the family; the treatment of the child support *paid* by the family is covered in table 13.

Income Disregards When Determining Eligibility (Table 13)

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 copayment. Table 13 shows each State's/Territory's policies for earned income disregards and disregards for child support payments.

Key findings from the 2019 policies include:

- Three States/Territories (South Dakota, Utah, and Wyoming) disregard a portion of earned income—either a monthly dollar amount (\$100 in Utah and \$200 in Wyoming) or a percentage of income (four percent in South Dakota).

- Half of the States/Territories 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 11.

Changes in Family and Income Definitions from 2018 to 2019

From 2018 to 2019, the District of Columbia changed the maximum age for teen parents from 25 to 19. Minnesota changed the policy for counting step-parents' earnings to exclude earnings in some cases. Mississippi began counting a parent's partner in the unit at the caseworker's discretion.

Additionally, from 2018 to 2019, five States made changes to their policies regarding the types of income that are counted. Alabama stopped counting non-recurring lump sum income, Mississippi started fully counting SSI and non-recurring lump sum income, Rhode Island stopped counting TANF, South Dakota now only counts non-recurring lump sum income in some cases, and Wisconsin now only counts SSI in some cases.

Financial Eligibility Tests

In almost all cases, families must have income below a certain threshold to be fully eligible for the child care subsidy. 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 during the eligibility period that is already underway or at the end of the eligibility period (at redetermination). Other States/Territories use a higher set of eligibility thresholds for other circumstances, such as for families whose children have special needs or for families transitioning off TANF. (In some States/Territories, certain children, such as children under child protective services, are automatically eligible for care without an explicit financial eligibility test.)

A second type of financial eligibility test that is sometimes used in determining eligibility for 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, but under CCDBG reauthorization, States/Territories must

now include a \$1,000,000 assets test for families applying for subsidies. States/Territories may also choose to set the asset limit for families at any amount lower than \$1,000,000.

Initial and Continuing Eligibility Thresholds (Tables 14, 15, and 16)

Every State/Territory establishes income eligibility thresholds to determine eligibility for subsidized child care. Table 14 provides the States'/Territories' initial eligibility thresholds, for one-person to five-person families.³⁶ A family newly applying for subsidies must have countable monthly income at or below the initial eligibility threshold to be eligible for subsidies.

Table 15 provides the thresholds to continue receiving subsidies during the eligibility period. By establishing higher continuing eligibility thresholds, States/Territories allow families to work toward increasing employment and income without losing their child care benefits. Under CCDBG reauthorization, States/Territories may continue to use income thresholds below 85 percent of state median income when determining initial eligibility, but once a family qualifies for assistance and begins their eligibility period, the States/Territories will have to continue to provide assistance during the entire eligibility period as long as the family's income does not exceed 85 percent of state median income and the family does not experience a permanent change in employment, education, or training status.

Table 16 provides the thresholds to continue receiving subsidies at redetermination or the end of the eligibility period. While CCDBG reauthorization outlined requirements for allowing families to remain in the program at higher incomes during the eligibility period, States/Territories may continue to use income thresholds below 85 percent of state median income when redetermining eligibility at the end of the eligibility period.³⁷ Key findings from 2019 include:

- Among the States/Territories, initial eligibility thresholds for a family of three range from \$1,423 to \$5,802 per month.³⁸ (Appendix B shows each State's initial and continuing eligibility thresholds for a three-person family as a percentage of the Federal Poverty Guidelines.)

³⁶ 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. Thresholds for larger family sizes (up to families with 10 members) can be found in the full detail of the CCDF Policies Database. Additionally, some States use different thresholds for different subgroups of families (i.e., families receiving TANF or headed by minor parents). When thresholds vary, the amounts shown in the report are for non-TANF families headed by adults; the thresholds for subgroups can be found in the full database detail.

³⁷ For additional information on the eligibility requirements, see "Implications of Child Care and Development Block Grant Reauthorization for State Policies: Changes to Requirements for Ongoing Eligibility" available at <https://www.urban.org/research/publication/implications-child-care-and-development-block-grant-reauthorization-state-policies-changes-requirements-ongoing-eligibility>.

³⁸ In three States (Colorado, Texas, and Virginia), eligibility thresholds vary geographically within the State. The table shows the thresholds that apply to the most populous area within the State.

- Once families begin receiving subsidies, 41 States use higher eligibility thresholds for families during the eligibility period. Where higher thresholds are used, the threshold for a three-person family ranges from 23 percent higher than the initial threshold in Montana and West Virginia to approximately 131 percent higher than the initial threshold in Ohio.
- Of the States that use higher thresholds during the eligibility period than they use for initial eligibility determination, 31 use those same higher thresholds at the end of the eligibility period when families are reassessed for eligibility (at redetermination), and 10 use thresholds at redetermination that are above the initial amounts used but below the amounts used during the eligibility period.

The tables capture any policy changes implemented by October 1, 2019, and future years' tables will reflect any changes implemented after this date.

Assets Test (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 of assets to count (bank accounts and other financial assets, all or part of the value of vehicles, and so on). With reauthorization of CCDGB, States/Territories must establish an assets test with a value of \$1,000,000 or less.

(States/Territories have the discretion to require documentation of assets beyond a family statement.)

Table 17 shows the State/Territory policies related to assets tests. Highlights from 2019 include:

- Fifty-four States/Territories use an assets test for determining eligibility for the CCDF-funded child care program. Almost all of the States/Territories with an assets test place the limit at \$1,000,000, but two States use a lower limit (\$10,000 in Kansas and \$25,000 in Wisconsin).
- Among the States/Territories that use an assets test, 15 States/Territories exempt the entire value of all vehicles in the household, and three States (Colorado, Kansas, and Minnesota) exempt the entire value of one vehicle. Thirty-six States/Territories count the value of all vehicles toward the asset limit.

As the remaining States/Territories adopt the requirements outlined under CCDBG reauthorization, that information will be captured in the CCDF Policies Database and future tables.

Changes in Financial Eligibility Tests from 2018 to 2019

From 2018 to 2019, 45 States/Territories made changes to their income thresholds for initial eligibility. The Virgin Islands decreased their initial eligibility thresholds between 5 and 15 percent for family sizes 2

through 5. Of the 44 States/Territories that increased their initial thresholds, the percentage change for a family of three ranged from 1.8 percent in Kentucky to 43.6 percent in Oklahoma, with a median increase of 2.7 percent.³⁹

Forty-one States used different eligibility thresholds during the eligibility period than at initial eligibility. Of these States, 37 increased their thresholds for a family of three between October 2018 and October 2019. Among the States/Territories that increased the eligibility thresholds during the eligibility period between 2018 and 2019, the percentage change for a family of three ranged from 2.4 percent in Indiana to 76.2 percent in Delaware, with a median increase of 4.3 percent. Between 2018 and 2019, California and Oklahoma stopped using higher eligibility thresholds during the eligibility period because all thresholds are now set at 85 percent of the state median income. Delaware began using higher eligibility thresholds during the eligibility period.

Between 2018 and 2019, five States/Territories began using a different set of eligibility thresholds at redetermination from the set used at initial eligibility. California and Oklahoma stopped using different sets of eligibility thresholds at redetermination and initial eligibility. Of the 42 States/Territories that used different thresholds at redetermination than at initial eligibility, 39 States/Territories increased their eligibility thresholds at redetermination for a family of three between 2018 and 2019. Among the States/Territories that increased the eligibility thresholds at redetermination, the percentage change for a family of three ranged from 2.4 percent in Indiana to 57.0 percent in Arizona, with a median increase of 4.3 percent.

In addition to the changes in eligibility thresholds, two States made changes to their policies for counting assets as of October 2019. Arkansas began using an assets test, as required under CCDBG reauthorization. New York no longer exempts the value of vehicles when calculating assets.

³⁹ Some changes in eligibility thresholds can be attributed to inflation. Between September 2018 and September 2019, the Consumer Price Index for All Urban Consumers (CPI-U) increased 1.7 percent. For additional information, see the Bureau of Labor Statistics: <https://www.bls.gov/opub/ted/2019/cpi-increased-1-point-7-percent-for-year-ending-september-2019.htm#:~:text=Consumer%20Price%20Index%20increased%201.7%20percent%20for%20year%20ending%20September%202019&text=From%20September%202018%20to%20September,months%20ending%20in%20August%202019>.

Table 1. Maximum Age Allowed for CCDF Eligibility, 2019

State/Territory*	Maximum Age for Most Children	Exceptions to the Maximum Age for Most Children ¹	Maximum Age for Children with Special Needs	Exceptions to the Maximum Age for Children with Special Needs ¹	Maximum Age for Children in Protective Services ²	Exceptions to the Maximum Age for Children in Protective Services ³
Alabama	12	Subsidy provided through the end of eligibility period if child ages out	18	No exceptions	12	Subsidy provided through the end of eligibility period if child ages out
Alaska	12	No exceptions	12	No exceptions	12	No exceptions
American Samoa	12	No exceptions	12	No exceptions	12 ⁴	No exceptions ⁴
Arizona	12	Subsidy provided through the end of eligibility period if child ages out	12	Subsidy provided through the end of eligibility period if child ages out	12	Subsidy provided through the end of eligibility period if child ages out
Arkansas	12	No exceptions	18	No exceptions	18	No exceptions
California	12	Subsidy provided through the end of eligibility period if child ages out	21	No exceptions	12	Subsidy provided through the end of eligibility period if child ages out
Colorado	12	Subsidy provided through the end of eligibility period if child ages out	18	No exceptions	12 ⁵	No exceptions ⁵
Connecticut	12	Subsidy provided through the end of eligibility period if child ages out	18	No exceptions	12	No exceptions
DC	12	Subsidy provided through the end of eligibility period if child ages out	18	No exceptions	12	No exceptions
Delaware	12	Subsidy provided through the end of eligibility period if child ages out	18	No exceptions	18	No exceptions

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State/Territory*	Maximum Age for Most Children	Exceptions to the Maximum Age for Most Children ¹	Maximum Age for Children with Special Needs	Exceptions to the Maximum Age for Children with Special Needs ¹	Maximum Age for Children in Protective Services ²	Exceptions to the Maximum Age for Children in Protective Services ³
Florida	12	Subsidy provided through the end of eligibility period if child ages out	12	Subsidy provided through the end of eligibility period if child ages out	12	Subsidy provided through the end of eligibility period if child ages out
Georgia	12	Subsidy provided through the end of eligibility period if child ages out	17	Subsidy provided through the end of eligibility period if child ages out	12 ⁶	Subsidy provided through the end of eligibility period if child ages out ⁶
Guam	12	No exceptions	19	No exceptions	18 ⁷	No exceptions ⁷
Hawaii	12	No exceptions	17	No exceptions	17	No exceptions
Idaho	12	No exceptions	18 ⁸	No exceptions	18 ⁸	No exceptions
Illinois	12	Subsidy provided through the end of eligibility period if child ages out ⁹	18	Subsidy provided through the end of eligibility period if child ages out ¹⁰	NA ¹¹	NA ¹¹
Indiana	12	Subsidy provided through the end of eligibility period if child ages out	17	Other ¹²	17	No exceptions
Iowa	12 ¹³	Subsidy provided through the end of eligibility period if child ages out	18	Subsidy provided through the end of eligibility period if child ages out	12	Subsidy provided through the end of eligibility period if child ages out ¹⁴
Kansas	12	Subsidy provided through the end of eligibility period if child ages out	18	No exceptions	12 ⁷	No exceptions ⁷
Kentucky	12	Subsidy provided through the end of eligibility period if child ages out	18	Subsidy provided through the end of eligibility period if child ages out	12	Subsidy provided through the end of eligibility period if child ages out

Table 1. Maximum Age Allowed for CCDF Eligibility, 2019

State/Territory*	Maximum Age for Most Children	Exceptions to the Maximum Age for Most Children ¹	Maximum Age for Children with Special Needs	Exceptions to the Maximum Age for Children with Special Needs ¹	Maximum Age for Children in Protective Services ²	Exceptions to the Maximum Age for Children in Protective Services ³
Louisiana	12	Subsidy provided through the end of eligibility period if child ages out	17 ¹⁵	No exceptions	12	No exceptions
Maine	12	No exceptions	18	No exceptions	12 ⁷	No exceptions ⁷
Maryland	12	No exceptions	18	No exceptions	NA ¹⁶	NA ¹⁶
Massachusetts	12	Subsidy provided through the end of eligibility period if child ages out	15	Subsidy provided through the end of eligibility period if child ages out	12	Subsidy provided through the end of eligibility period if child ages out
Michigan	12	Subsidy provided through the end of eligibility period if child ages out	17	Other ¹⁷	12	No exceptions ¹⁸
Minnesota	12	No exceptions	14	No exceptions	NA ¹⁶	NA ¹⁶
Mississippi	12	Subsidy provided through the end of eligibility period if child ages out	18	Subsidy provided through the end of eligibility period if child ages out	12	Subsidy provided through the end of eligibility period if child ages out
Missouri	12	Subsidy provided through the end of eligibility period if child ages out	17	Subsidy provided through the end of school year if child ages out	17	No exceptions
Montana	12	Subsidy provided through the end of eligibility period if child ages out	18	No exceptions	17	No exceptions
Nebraska	12	No exceptions	18	No exceptions	18	No exceptions
Nevada	12	Subsidy provided through the end of eligibility period if child ages out	18	Subsidy provided through the end of eligibility period if child ages out	12	Subsidy provided through the end of eligibility period if child ages out

Table 1. Maximum Age Allowed for CCDF Eligibility, 2019

State/Territory*	Maximum Age for Most Children	Exceptions to the Maximum Age for Most Children ¹	Maximum Age for Children with Special Needs	Exceptions to the Maximum Age for Children with Special Needs ¹	Maximum Age for Children in Protective Services ²	Exceptions to the Maximum Age for Children in Protective Services ³
New Hampshire	12	Subsidy provided through the end of eligibility period if child ages out	17	No exceptions	17	No exceptions
New Jersey	12	Subsidy provided through the end of eligibility period if child ages out	18	No exceptions	18	No exceptions
New Mexico	12	Subsidy provided through the end of eligibility period if child ages out	17	No exceptions	12	No exceptions
New York	12	Subsidy provided through the end of school year if child ages out ¹⁹	17	Other ²⁰	12 ²¹	Subsidy provided through the end of school year if child ages out ²⁰
No. Mariana Islands	12	No exceptions	12	No exceptions	12	No exceptions
North Carolina	12	Subsidy provided through the end of eligibility period if child ages out	17	No exceptions	17	No exceptions
North Dakota	12	Subsidy provided through the end of eligibility period if child ages out	18	No exceptions	NA ²²	NA ²²
Ohio	12	Subsidy provided through the end of eligibility period if child ages out	17	Subsidy provided through the end of eligibility period if child ages out	12	Subsidy provided through the end of eligibility period if child ages out

Table 1. Maximum Age Allowed for CCDF Eligibility, 2019

State/Territory*	Maximum Age for Most Children	Exceptions to the Maximum Age for Most Children ¹	Maximum Age for Children with Special Needs	Exceptions to the Maximum Age for Children with Special Needs ¹	Maximum Age for Children in Protective Services ²	Exceptions to the Maximum Age for Children in Protective Services ³
Oklahoma	12	Subsidy provided through the end of eligibility period if child ages out	18	Subsidy provided through the end of eligibility period if child ages out	12 ⁷	No exceptions ⁷
Oregon	11	No exceptions	17	No exceptions	11 ²³	No exceptions ²³
Pennsylvania	12	Subsidy provided through the end of eligibility period if child ages out	18	No exceptions	12	Subsidy provided through the end of eligibility period if child ages out
Puerto Rico	12	No exceptions	18	No exceptions	18	No exceptions
Rhode Island	12	Subsidy provided through the end of eligibility period if child ages out	18	No exceptions	12	Subsidy provided through the end of eligibility period if child ages out
South Carolina	12	Subsidy provided through the end of eligibility period if child ages out	18	No exceptions	12	No exceptions
South Dakota	12	Subsidy provided through the end of eligibility period if child ages out	17 ²⁴	Other ²⁴	17 ²⁵	No exceptions ²⁵
Tennessee	12	No exceptions	18 ²⁶	Subsidy provided through the end of school year if child ages out	12 ²⁷	No exceptions ²⁷
Texas	12	Subsidy provided through the end of eligibility period if child ages out	18 ²⁸	Other ²⁸	18 ²⁹	Other ²⁹

Table 1. Maximum Age Allowed for CCDF Eligibility, 2019						
State/Territory*	Maximum Age for Most Children	Exceptions to the Maximum Age for Most Children ¹	Maximum Age for Children with Special Needs	Exceptions to the Maximum Age for Children with Special Needs ¹	Maximum Age for Children in Protective Services ²	Exceptions to the Maximum Age for Children in Protective Services ³
Utah	12	Subsidy provided through the end of eligibility period if child ages out	17 ³⁰	No exceptions	17 ³⁰	No exceptions
Vermont	12	Subsidy provided through the end of eligibility period if child ages out	18	No exceptions	18 ³¹	No exceptions ³¹
Virgin Islands	12 ³²	No exceptions	18 ⁸	No exceptions	18 ³³	No exceptions ³³
Virginia	12	Subsidy provided through the end of eligibility period if child ages out	17	No exceptions	12 ⁶	No exceptions ⁶
Washington	12	Subsidy provided through the end of eligibility period if child ages out	18	No exceptions	12 ³⁴	No exceptions
West Virginia	12	No exceptions	17 ³⁵	No exceptions	12 ⁶	No exceptions ⁶
Wisconsin	12	Subsidy provided through the end of eligibility period if child ages out	18	No exceptions	12 ³⁶	No exceptions ³⁶
Wyoming	13	No exceptions	17	No exceptions	13	No exceptions

Source: CCDF Policies Database October 1, 2019 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2019 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ If the state continues eligibility through the end of the month in which the child exceeds the age limit (i.e., through the end of the month of the child's 19th birthday), this is not coded as an exception to the age requirement. Instead it is treated as part of a general administrative procedure (with care having been approved through the last month in which the child was age-eligible) and footnoted for the general age requirement.

- ² The policies shown here apply to children receiving protective services. Additional policies about children under court-ordered supervision are captured in notes.
- ³ The policies shown here apply to children receiving protective services. Additional policies about children under court-ordered supervision are captured in notes. If the state continues eligibility through the end of the month in which the child exceeds the age limit (i.e., through the end of the month of the child's 19th birthday), this is not coded as an exception to the age requirement. Instead it is treated as part of a general administrative procedure (with care having been approved through the last month in which the child was age-eligible) and footnoted for the general age requirement.
- ⁴ The age limit is 12 for children under court-ordered supervision.
- ⁵ Counties may opt to provide protective services child care using CCDF funds.
- ⁶ The age limit is 17 for children under court-ordered supervision.
- ⁷ The age limit is 18 for children under court-ordered supervision.
- ⁸ A child is eligible through the month of the child's 19th birthday.
- ⁹ Children who turn 13 during the eligibility period may remain eligible for the entire eligibility period unless the birthday occurs in the first month of the eligibility period.
- ¹⁰ Children with special needs who turn 19 during the eligibility period may remain eligible for the entire eligibility period unless the birthday occurs in the first month of the eligibility period.
- ¹¹ Child protective services child care is not provided under the state's primary child care subsidy program. The age limit for children under court-ordered supervision is 18, or until the end of the eligibility period if the child ages out.
- ¹² A child with special needs may participate until the Sunday following his or her 18th birthday.
- ¹³ Children age 13 up to age 16 (who do not have special needs and are not in protective services or foster care) 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.
- ¹⁴ 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.
- ¹⁵ A child is eligible through the month of the child's 18th birthday.
- ¹⁶ Child protective services child care is not provided under the state's primary child care subsidy program.
- ¹⁷ 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.
- ¹⁸ 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.
- ¹⁹ 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 who is licensed or registered.
- ²⁰ 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 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 who 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.
- ²² 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.
- ²³ Unless the state determines that the child should not be left unsupervised during the parents' work hours, the general age limit for children in protective services is through age 11.

- 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 Children are eligible until the date of their 18th birthday or the date of their high school graduation if they graduate before turning 19, whichever is later.
- ²⁷ Children can receive care through their 18th birthday or high school graduation, whichever comes first, if the child has special needs or is under court ordered supervision.
- ²⁸ Subsidies for children over the age of 12 with disabilities are at the discretion of the local agency.
- ²⁹ Services for a child receiving protective services may continue as long as the child protective services agency authorizes the care.
- ³⁰ A child is eligible through the month of the child's 18th birthday.
- ³¹ Children under court supervision or committed to the custody or guardianship of the commissioner are eligible through age 18.
- ³² A child is eligible through the month of the child's 13th birthday.
- ³³ The age of a child in protective services must be exempt by a court order within the Virgin Islands code. A child is eligible through the month of the child's 19th birthday.
- ³⁴ Children in child protective services and foster care can receive child care services through the child care program administered by the children's administration. If these families receive child care through the state's primary child care subsidy program, they must meet the same requirements as other families.
- ³⁵ For home-based self-employed applicants, the maximum age for a child who is physically or mentally incapacitated is 12.
- ³⁶ Children who are receiving child protective services and reside with the natural or biological parents receive the same services and must meet the same eligibility requirements as all other families served in the program.

Table 2. Approved Activities for CCDF Eligibility, 2019

State/Territory*	Employment	Job Search	Job Search Time Limit	SNAP Employment and Training (E&T)	Housing Search (Homeless)	TANF Work Program ¹	Other TANF Activities
Alabama	Yes	Yes, only for continuing eligibility	3 months in a year ²	No	Yes	Yes	No
Alaska	Yes	Yes, only for continuing eligibility	3 months per job loss occurrence ³	No	No	Yes	Yes
American Samoa	Yes	Yes, for initial and continuing eligibility	Other ⁴	NA ⁵	No	NA ⁶	NA ⁶
Arizona	Yes	Yes, only for continuing eligibility	3 months per job loss occurrence	No	No	Yes	Yes
Arkansas	Yes	Yes, for initial and continuing eligibility	3 months per job loss occurrence ⁷	No	Yes	Yes	No
California	Yes	Yes, for initial and continuing eligibility	Through the end of the eligibility period	NA ⁸	Yes ⁹	Yes	Yes
Colorado	Yes	Yes, for initial and continuing eligibility ¹⁰	13 weeks per job loss occurrence ¹¹	NA ⁸	Yes ¹²	Yes ¹³	Yes ¹⁴
Connecticut	Yes	Yes, only for continuing eligibility	3 months per job loss occurrence	No	No	Yes ¹⁵	Yes ¹⁵
DC	Yes	Yes, for initial and continuing eligibility	3 months per job loss occurrence	Yes	Yes	Yes	Yes
Delaware	Yes	Yes, for initial and continuing eligibility	3 months per job loss occurrence	Yes	Yes ¹⁶	Yes ¹⁷	Yes ¹⁷

Table 2. Approved Activities for CCDF Eligibility, 2019

State/Territory*	Employment	Job Search	Job Search Time Limit	SNAP Employment and Training (E&T)	Housing Search (Homeless)	TANF Work Program ¹	Other TANF Activities
Florida	Yes	Yes, only for continuing eligibility ¹⁸	3 months per job loss occurrence	NA ⁸	Yes ¹⁹	Yes	Yes
Georgia	Yes ²⁰	Yes, only for continuing eligibility ²¹	13 weeks per job loss occurrence ²²	Yes	No	Yes	Yes ²³
Guam	Yes	No ²⁴	NA	Yes	Yes ²⁴	Yes	No
Hawaii	Yes	Yes, for initial and continuing eligibility	30 days in a year ²⁵	No	No ²⁶	Yes ²⁷	Yes
Idaho	Yes	Yes, only for continuing eligibility	3 months per job loss occurrence	No	Other ²⁸	Yes	Yes ²⁹
Illinois	Yes	Yes, only for continuing eligibility ³⁰	90 days per job loss occurrence	No	No	Yes	Yes ³¹
Indiana	Yes	Yes, only for continuing eligibility	16 weeks per job loss occurrence	Yes ³²	No	Yes	No
Iowa	Yes	Yes, for initial and continuing eligibility	3 months per job loss occurrence	No	No	Yes ³³	Yes ³³
Kansas	Yes ³⁴	Yes, only for continuing eligibility ¹⁸	3 months per job loss occurrence ³⁵	Yes	No	Yes	Yes ³⁶
Kentucky	Yes	Yes, for initial and continuing eligibility	3 months per job loss occurrence	Yes	No	Yes	No
Louisiana	Yes	No	NA	No	No ³⁷	Yes ³⁸	No
Maine	Yes	Yes, only for continuing eligibility ³⁹	12 weeks per job loss occurrence	No	No	No	No

Table 2. Approved Activities for CCDF Eligibility, 2019

State/Territory*	Employment	Job Search	Job Search Time Limit	SNAP Employment and Training (E&T)	Housing Search (Homeless)	TANF Work Program ¹	Other TANF Activities
Maryland	Yes	Yes, only for continuing eligibility ¹⁸	3 months per job loss occurrence ⁴⁰	No	No	Yes	Yes
Massachusetts	Yes	Yes, for initial and continuing eligibility	12 weeks per job loss occurrence	No	Yes ⁴¹	Yes ⁴²	Yes ⁴²
Michigan	Yes	Yes, only for continuing eligibility ⁴³	Through the end of the eligibility period	Yes ⁴⁴	No	Yes	Yes
Minnesota	Yes	Yes, for initial and continuing eligibility	12 weeks in a year ⁴⁵	No	No	Yes ⁴⁶	Yes ⁴⁶
Mississippi	Yes	Yes, for initial and continuing eligibility	3 months per job loss occurrence ⁴⁷	No	Yes ⁴⁸	Yes	Yes
Missouri	Yes	Yes, only for continuing eligibility ¹⁸	90 days per job loss occurrence ⁴⁹	NA ⁸	No	Yes ⁵⁰	Yes ⁵⁰
Montana	Yes	Yes, only for continuing eligibility ⁵¹	90 days per job loss occurrence ⁵²	No	Yes ⁵³	Yes ⁵⁴	No
Nebraska	Yes	Yes, only for continuing eligibility	3 months per job loss occurrence ⁵⁵	Yes	No	Yes	Yes
Nevada	Yes	Yes, for initial and continuing eligibility ⁵⁶	90 days in a year ⁵⁷	Yes	Yes ⁵⁸	Yes	Yes
New Hampshire	Yes	Yes, for initial and continuing eligibility	92 days per job loss occurrence ⁵⁹	No	Other ⁶⁰	Yes ⁶¹	Yes ⁶¹

Table 2. Approved Activities for CCDF Eligibility, 2019

State/Territory*	Employment	Job Search	Job Search Time Limit	SNAP Employment and Training (E&T)	Housing Search (Homeless)	TANF Work Program ¹	Other TANF Activities
New Jersey	Yes	Yes, only for continuing eligibility ⁶²	3 months in a year	NA ⁸	No	Yes	Yes
New Mexico	Yes	Yes, only for continuing eligibility	3 months per job loss occurrence	No	No	Yes	Yes
New York	Yes	Yes, for initial and continuing eligibility ⁶³	6 months per job loss occurrence ⁶⁴	Yes	Yes ⁶⁵	Yes	No
No. Mariana Islands	Yes	Yes, for initial and continuing eligibility	3 months in a year	NA ⁵	No	NA ⁶	NA ⁶
North Carolina	Yes	Yes, for initial and continuing eligibility	90 days per job loss occurrence ⁶⁶	Yes	No	Yes	Yes
North Dakota	Yes	Yes, only for continuing eligibility ⁶⁷	3 months per job loss occurrence ⁶⁸	No	Yes ⁶⁹	Yes ⁷⁰	Yes ⁷⁰
Ohio	Yes	Yes, only for continuing eligibility	Other ⁷¹	Yes	No ⁷²	Yes ⁷³	Yes ⁷³
Oklahoma	Yes	No ⁷⁴	NA	Yes	Yes	Yes	No
Oregon	Yes	Yes, only for continuing eligibility	3 months per job loss occurrence ⁷⁵	No	No	Yes ⁷⁶	No
Pennsylvania	Yes	Yes, only for continuing eligibility	92 days per job loss occurrence ⁷⁷	Yes	No	Yes ⁷⁸	No
Puerto Rico	Yes	Yes, only for continuing eligibility	3 months per job loss occurrence	NA ⁵	No ⁷⁹	Yes	Yes

Table 2. Approved Activities for CCDF Eligibility, 2019

State/Territory*	Employment	Job Search	Job Search Time Limit	SNAP Employment and Training (E&T)	Housing Search (Homeless)	TANF Work Program ¹	Other TANF Activities
Rhode Island	Yes ⁸⁰	Yes, only for continuing eligibility	3 months per job loss occurrence	Yes ⁸¹	No	Yes ⁸²	Yes ⁸²
South Carolina	Yes ⁸³	Yes, only for continuing eligibility	3 months per job loss occurrence	Yes	No	Yes ⁸⁴	Yes ⁸⁴
South Dakota	Yes	Yes, only for continuing eligibility ⁸⁵	90 days per job loss occurrence ⁸⁵	No	No	Yes ⁸⁶	No
Tennessee	Yes	Yes, only for continuing eligibility ⁸⁷	3 months per job loss occurrence	No	No	Yes	Yes
Texas	Yes	Yes, only for continuing eligibility	3 months per job loss occurrence	Yes	No ⁸⁸	Yes	No
Utah	Yes	No ⁸⁹	NA	No	Yes ⁹⁰	Yes	Yes
Vermont	Yes	Yes, for initial and continuing eligibility	3 months per job loss occurrence	No	Yes	Yes	No
Virgin Islands	Yes	Yes, only for continuing eligibility ⁹¹	3 months per job loss occurrence	No	No	Yes ⁹²	Yes ⁹²
Virginia	Yes ⁹³	No ⁹⁴	NA	Yes	No	Yes	Yes
Washington	Yes	Yes, only for continuing eligibility ¹⁸	Through the end of the eligibility period ⁹⁵	Yes	Yes ⁹⁶	Yes	Yes ⁹⁷
West Virginia	Yes	Yes, for initial and continuing eligibility	3 months in 6 months ⁹⁸	No	No	Yes	No
Wisconsin	Yes	Yes, only for continuing eligibility ⁹⁹	3 months per job loss occurrence ¹⁰⁰	Yes	No	Yes	Yes ¹⁰¹

Table 2. Approved Activities for CCDF Eligibility, 2019

State/Territory*	Employment	Job Search	Job Search Time Limit	SNAP Employment and Training (E&T)	Housing Search (Homeless)	TANF Work Program ¹	Other TANF Activities
Wyoming	Yes	Yes, only for continuing eligibility	90 days in a year ¹⁰²	Yes	No	Yes	Yes ¹⁰³

Source: CCDF Policies Database October 1, 2019 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2019 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ TANF work program activities are broadly defined as employment or training activities that are part of the State's/Territory's TANF program.

² Job search activities are limited to one 3-month period within the 12-month eligibility period. If a parent experiences a non-temporary job loss during the eligibility period, the family will continue to receive care authorized at the current level so the parent can engage in job search activities.

³ If a parent experiences a non-temporary job loss during the eligibility period, the family will continue to receive care authorized at the current level for three months so the parent can engage in job search activities.

⁴ 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. For those who are initially found eligible for child care based on employment but lose their job, continuing eligibility for job search is approved until the end of the authorization period.

⁵ The nutrition assistance program does not have an employment and training program.

⁶ This territory or outlying area does not have a TANF program.

⁷ Job search activities can be accessed for up to 3 months per job loss within the 60-month lifetime limit.

⁸ Child care for SNAP E&T participants is not provided under the state's primary child care subsidy program.

⁹ The basis of need for homeless families is defined as seeking permanent housing for family stability, though there is no activity requirement for homeless families.

¹⁰ Policy coded for Denver. Counties may opt out of counting job search as an approved activity for eligibility at application.

¹¹ Policy coded for Denver. The minimum time frame for job search is 13 weeks.

¹² Homeless families are provided child care for a 60-day stabilization period.

¹³ Eligibility is determined according to the TANF work program guidelines.

¹⁴ Eligible TANF activities are determined by the TANF program, and may include job search, volunteering, education, and other activities.

¹⁵ Approved activities include education, training, job search, or any activity included in the participant's employment plan.

¹⁶ Homeless families can receive child care services for up to 90 days.

¹⁷ TANF participants must be employed, attending school, or participating in the TANF work program.

¹⁸ For TANF clients, job search is an eligible activity for initial and continuing eligibility.

- ¹⁹ If a homeless family participating in housing search activities receives a documented referral from a certified homeless shelter or domestic violence shelter, they are eligible for child care services.
- ²⁰ Each parent must participate in one or more approved activities for a minimum average of 24 hours per week. Approved activities include employment, job search, education, and training. New applicants must still meet the 24-hour requirement.
- ²¹ Each parent must participate in one or more approved activities for a minimum average of 24 hours per week. Approved activities include employment, job search, education, and training. Job search qualifies as an initial eligibility activity for clients who receive priority due to TANF, homelessness, domestic violence, or natural disaster. Clients with job search as an activity for continuing eligibility can count job search hours towards their hour requirement.
- ²² If the client does not resume participation in a state-approved activity at any level during the 13-week job search period, the case will close at the end of the 13-week job search period.
- ²³ TANF participation requirements, as outlined in the family service plan, are approved activities.
- ²⁴ Job search is an allowable activity for families experiencing homelessness.
- ²⁵ Thirty consecutive days in a 12-month period may be approved for job search activities.
- ²⁶ Families with income below 100 percent of the Federal Poverty Guidelines who are employed and homeless are given priority.
- ²⁷ Applicants may participate in a TANF work program or a treatment program.
- ²⁸ Homeless families searching for housing through a homeless agency may be approved as participating in a training activity.
- ²⁹ 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.
- ³⁰ For TANF clients participating in an approved agency program, job search is an eligible activity for initial and continuing eligibility if listed in their plan.
- ³¹ 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.
- ³² Families participating in the SNAP IMPACT program are eligible for four weeks.
- ³³ Families who receive TANF or participate in the state's TANF work program are eligible for child care assistance regardless of income.
- ³⁴ Employed adults must earn at least the federal minimum wage per hour, including tips, to qualify for child care. If a person has been self-employed for at least six full months and is not earning the equivalent of the federal minimum wage at the end of the 12-month eligibility period, child care services will be terminated.
- ³⁵ Job search is approved for three months following the month the loss of employment or cessation of job training occurs.
- ³⁶ TANF child care can also be approved for TANF families who need child care for employment, as well as TANF families who have a temporary emergency need, known as a social service need. Qualifying social service reasons include situations in which parents are in crisis, situations in which a foster child has been placed with a relative or non-related kin who is not licensed for foster care and may or may not be receiving a relative or Kinship Care payment from the foster care contractor, and situations in which a parent or caretaker has temporarily placed a child with a Safe Families for Children host family to avoid placement of the child in foster care while they work to resolve a crisis situation.
- ³⁷ Homeless families do not have a requirement for a qualifying activity.
- ³⁸ 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.

³⁹ Job search activities may be approved for a maximum of 12 weeks for current recipients who have lost work or who have completed school and are looking for work. Coverage starts on the first day of unemployment, and parents are granted up to 20 hours of care per week. Families are eligible for care during one of three breaks in eligibility (maternal/paternal leave, short-term medical leave, or job search) within a six-month period.

⁴⁰ The three-month time limit is per job loss occurrence. If the individual has difficulty finding employment, multiple job search periods may be approved.

⁴¹ If the family is referred by the state's housing authority program or child welfare agency, the family may be approved for care for housing search and other shelter activities. Families that meet the definition of homelessness under the McKinney-Vento Act may also use homelessness as a service need. The service need for a homeless family is limited to two 12-month authorization periods, unless approved by the state in writing on a case-by-case basis.

⁴² Families receiving TANF may receive child care if the family is referred by the department that administers the state's TANF program.

⁴³ For TANF work program families, job search is an eligible activity for initial and continuing eligibility if it is part of their work participation requirement.

⁴⁴ Department assigned employment preparation activities are approved.

⁴⁵ Parents may be authorized at initial application or redetermination for job search. A maximum of 20 hours per week over 12 weeks for a total of 240 hours per year is allowed. Parents can participate in job search activities for more than 12 weeks if they are approved for less than 20 hours of job search per week. TANF families are exempt from this maximum if job search activities are a part of their employment plan. Families who met other activity requirements and experience a permanent end to all activities can continue to receive 12 weeks of child care for job search under extended eligibility. There is no limit to the number of extended eligibility periods a family may use during their 12-month eligibility period.

⁴⁶ TANF recipients must either be involved in activities related to an approved employment plan 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.

⁴⁷ Job search is an eligible activity for three months from the last day of employment, provided the parent notified the agency of the loss of employment within 10 days.

⁴⁸ Eligibility is determined by the referral agency.

⁴⁹ Job search activities are allowed through the last day of the month in which the 90th day falls.

⁵⁰ The applicant must be participating in work or education activities.

⁵¹ For TANF recipients, job search activities are only approved for applicants who have job search in their employability or service plan.

⁵² Job search activities are limited to 90 days per job loss occurrence beginning on the day the job loss occurs. One grace period may be granted per job loss. There is no explicit limit on the number of times a parent may use the job loss grace period.

⁵³ A family that reports homeless status is eligible for 90 calendar days of eligibility to meet program requirements.

⁵⁴ Parents receiving TANF cash assistance must be participating in their employability or service plan.

⁵⁵ Job search is approved for three months following the loss of employment or the end of an educational activity during the eligibility period. Job search is not an approved activity for initial eligibility.

⁵⁶ Families are not eligible for job search if the eligible child is school age (between 6 and 12 years old) or has special needs (over 13 years old). If the child is not in school due to school breaks or holidays, child care is approved during job search activities.

⁵⁷ Job search activities are limited to 90 days per calendar year.

⁵⁸ Housing search is an approved activity if it is part of a homeless self-sufficiency plan.

⁵⁹ Job search is available for initial and continuing eligibility for 92 calendar-day periods. A parent may receive multiple 92 calendar-day periods during their 12-month eligibility. If the parent has not found an approved employment activity at the end of the 92nd day, the family will not be eligible for care.

⁶⁰ Participants who are seeking both employment and housing can qualify for subsidized care.

⁶¹ 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.

⁶² For TANF clients, job search is an eligible activity for initial and continuing eligibility. Non-TANF families may continue to receive child care assistance if they experience a temporary absence from work, as long as this temporary change in circumstances does not last more than three months. If the cessation in work lasts more than three months, applicants can apply for job search child care assistance for an additional three months. Families that are not engaged in work, school, or a training activity when the three-month period ends are no longer eligible for the subsidy.

⁶³ Policy coded for New York City. Job search activities are defined by each district.

⁶⁴ Policy coded for New York City. 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.

⁶⁵ If funds are available, districts must provide child care to homeless families for housing search if the child's caretaker is also seeking employment, engaged in work, or participating in an approved educational or vocational activity, or for the caretaker to access or participate in counseling services programs.

⁶⁶ Ninety days of child care eligibility are authorized for unemployment following a job loss, transition from education or training activities, the post-secondary education time limit, or any other interruption of eligible activity that does not exceed 90 days. Assistance can be extended beyond 90 days if the caseworker determines that an extension is warranted.

⁶⁷ Job search is an approved activity for initial eligibility for homeless households and for TANF and Transitional Child Care families who have job search listed on their employment plan.

⁶⁸ Job search activities are allowed for three consecutive months. The limit does not apply to TANF recipients if they have different guidelines listed in their individual employment plans. A household may be allowed more than one period of three consecutive months within the 12-month certificate period.

⁶⁹ Homeless families can be approved for care if they meet activity requirements, which can include housing search. If the family's only allowable activity is housing search, the family is eligible to receive up to 15 hours of care per week.

⁷⁰ Approved activities include participation in employment, education, training, or any approved TANF work program.

⁷¹ When an approved activity ends, child care can be continued for up to 13 weeks. These 13 weeks may not extend beyond the eligibility period.

⁷² If homeless families do not meet income and activity requirements, the requirements are waived.

⁷³ Child care is approved if it is necessary for the parent to comply with the requirements of a self-sufficiency contract.

⁷⁴ Job search activities are approved if they are part of a TANF work assignment.

⁷⁵ Job search may be approved for up to three months after a job loss occurs. For TANF clients, job search activities must be approved by agency staff.

⁷⁶ TANF recipients receive child care through the CCDF program if they are participating in the TANF work program and at least half of their work program hours are for employment.

⁷⁷ Job search activities are approved for 92 days from the date employment ended. TANF families are allowed 30 days between breaks in activities during which time they continue receiving subsidized child care.

⁷⁸ Participants in the TANF training or work support training program are eligible for child care subsidies.

⁷⁹ Homeless families do not need to comply with any approved activities to be eligible for the first 30 days of services. After 30 days, families will have to comply with approved activities. Housing search is not an approved activity.

⁸⁰ Each client must earn, per hour, an average of the greater of either the state or federal minimum wage.

⁸¹ SNAP E&T activities may be approved for income-eligible parents if the activities include an approved training, apprenticeship, internship, on-the-job training, work experience, work immersion, or other job readiness or job attachment program. SNAP E&T activities may be approved for TANF recipients if part of their employment plan.

⁸² TANF applicants may participate in employment or education as approved in their employment plan.

⁸³ 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 make at least minimum wage by the end of the first year of child care services in order to continue receiving care.

⁸⁴ 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.

⁸⁵ If a person is already receiving child care assistance and suffers a loss of employment, three months of continued assistance can be granted from the last day of employment.

⁸⁶ TANF families participating in activities approved by the TANF employment specialist are eligible for reimbursement of child care costs for those activities.

⁸⁷ Job search activities are approved for TANF recipients.

⁸⁸ Children determined to be experiencing homelessness may receive three months of care before documentation of the child's eligibility and the caretaker's participation in an eligibility activity are required. Families experiencing homelessness are not subject to the minimum participation requirements; participation in work, education, or training may be at any level.

⁸⁹ Effective May 31, 2019, child care assistance for job search activities is no longer available. Households already utilizing the previous program will remain eligible through the end of their current certification period.

⁹⁰ 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.

⁹¹ A three-month job search period is triggered if the parent or legal guardian loses his or her employment during the eligibility period. If the parent or legal guardian engages in a qualifying activity by the end of the grace period, assistance continues until the end of the 12-month eligibility period.

⁹² Any TANF parent who is working or officially enrolled or registered and actively participating in a job training or educational program is eligible.

⁹³ If the client has been self-employed for less than a year, he or she must provide proof of earnings equivalent to the minimum wage for actual hours worked at the time of the next scheduled redetermination.

⁹⁴ Job search activities are only approved if they are part of a TANF or SNAP work program.

⁹⁵ After eligibility determination, participation in an approved activity is not a factor in continuing eligibility for the entirety of a 12-month certification period. Job search periods 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.

⁹⁶ Families experiencing homelessness are eligible for a 12-month certification period, regardless of approved activity participation requirements. These families, if approved, have 4 months to provide verification of participation in an approved activity. If not provided, the eligibility will be terminated.

⁹⁷ The following additional TANF activities are automatically approved for subsidized child care: community service, disability-related vocational rehabilitation, alcohol or substance abuse treatment, resolution of homelessness, parenting or family planning classes, pursuit of disability or veteran's benefits, family violence intervention, mental health services, learning disability services, temporary physical incapacity, and medical treatment.

⁹⁸ Recipients can receive care for job search activities for up to three months in a six-month period. Job search activities are covered for eight hours a day, five days a week.

⁹⁹ Eligible parents who experience a permanent loss of employment or a permanent loss of another approved activity will be offered an opportunity to receive at least the same level of child care assistance for job search for up to three months.

¹⁰⁰ Parents are not limited to one job search period during the 12-month eligibility period, but the parent must be engaged in another approved activity between periods of job search.

¹⁰¹ Child care is approved for all TANF placement types and activities assigned on the employability plan or case management plan as long as care is needed in order to participate in the activities.

¹⁰² Job search activities may be approved for up to 90 days during the 12-month eligibility period.

¹⁰³ Child care is approved for all TANF activities assigned on the applicant's case management plan, as long as care is needed to participate in these activities.

Table 3. Approved Activities for CCDF Eligibility (continued), 2019

State/Territory*	High School ²	GED ²	ESL ²	Training ²	Adult Basic Education ³	Post-Secondary Education ²
Alabama	Yes ⁴	Yes ⁵	No	Yes ⁶	Yes	Yes ⁷
Alaska	Yes	Yes	Yes	Yes	Yes	Yes
American Samoa	Yes ⁸	Yes	Yes	Yes	--- ¹	Yes ⁸
Arizona	Yes ⁹	Yes ¹⁰	No ¹⁰	No ¹⁰	No	No ¹¹
Arkansas	Yes	Yes	No	Yes	Yes	Yes
California	Yes	Yes	Yes	Yes	--- ¹	Yes
Colorado	Yes ¹²	Yes ¹²	Yes ¹²	Yes ¹²	Yes ¹²	Yes ¹³
Connecticut	Yes ¹⁴	Yes ¹⁵	No ¹⁶	No ¹⁶	No	No ¹⁶
DC	Yes	Yes ¹⁷	Yes ¹⁷	Yes	Yes	Yes
Delaware	Yes	Yes	No	No	No	No ¹⁸
Florida	Yes ¹⁹	Yes ¹⁹	Yes ¹⁹	Yes ²⁰	Yes	Yes ²¹
Georgia	Yes	Yes ²²	Yes	Yes ²³	Yes ²⁴	Yes ²⁵
Guam	Yes	Yes	No	Yes	No ²⁶	Yes
Hawaii	Yes	Yes	No	Yes	No ²⁷	Yes
Idaho	Yes	Yes	Yes	Yes	Yes	Yes ²⁸
Illinois	Yes ²⁹	Yes ³⁰	Yes ²⁹	Yes ²⁹	Yes ³¹	Yes ³²
Indiana	Yes ³³	Yes	Yes ³³	Yes ³³	Yes	Yes ³⁴
Iowa	Yes	Yes	Yes	Yes ³⁵	Yes	Yes ³⁶
Kansas	Yes ³⁷	Yes ³⁷	No ³⁸	Yes	No ³⁹	No ⁴⁰
Kentucky	Yes	Yes	No	Yes ⁴¹	--- ¹	Yes ⁴²
Louisiana	Yes	Yes	Yes	Yes	--- ¹	Yes
Maine	Yes	Yes	No	Yes	Yes	Yes
Maryland	Yes	Yes	Yes ⁴³	Yes	--- ¹	Yes ⁴⁴
Massachusetts	Yes	Yes	Yes	Yes	Yes	Yes ⁴⁵
Michigan	Yes	Yes	Yes	Yes	Yes	Yes ⁴⁶
Minnesota	Yes	Yes	Yes	Yes	Yes	Yes ⁴⁷
Mississippi	Yes	Yes	No	Yes	Yes	Yes
Missouri	Yes	Yes	Yes	Yes	Yes ⁴⁸	Yes
Montana	Yes ⁴⁹	Yes ⁴⁹	No	Yes ⁵⁰	Yes	Yes ⁵¹
Nebraska	Yes	Yes	Yes	Yes	Yes	Yes ⁵²
Nevada	Yes ⁵³	Yes ⁵³	No	Yes ⁵⁴	Yes ⁵⁵	Yes ⁵⁶

Table 3. Approved Activities for CCDF Eligibility (continued), 2019

State/Territory*	High School ²	GED ²	ESL ²	Training ²	Adult Basic Education ³	Post-Secondary Education ²
New Hampshire	Yes	Yes	Yes	Yes ⁵⁷	Yes	Yes ⁵⁸
New Jersey	Yes	No ⁵⁹	Yes	Yes	--- ¹	Yes
New Mexico	Yes	Yes ⁶⁰	Yes	Yes	Yes	Yes
New York	Yes ⁶¹	Yes ⁶¹	Yes ⁶²	Yes ⁶³	Yes ⁶²	No ⁶⁴
No. Mariana Islands	Yes	Yes	No	Yes	Yes	Yes
North Carolina	Yes	Yes	No	Yes	Yes	Yes ⁶⁵
North Dakota	Yes	Yes	Yes	Yes ⁶⁶	Yes	Yes ⁶⁷
Ohio	Yes ⁶⁸	Yes ⁶⁸	Yes ⁶⁸	Yes	Yes ⁶⁸	Yes ⁶⁹
Oklahoma	Yes	Yes ⁷⁰	Yes ⁷⁰	Yes ⁷¹	Yes	Yes ⁷²
Oregon	No	No	No	No	No	No ⁷³
Pennsylvania	Yes	Yes ⁷⁴	No ⁷⁵	No ⁷⁶	Yes	No ⁷⁷
Puerto Rico	Yes ⁷⁸	Yes ⁷⁸	No	Yes ⁷⁹	--- ¹	Yes ⁸⁰
Rhode Island	Yes ⁸¹	Yes ⁸¹	No ⁸²	Yes ⁸³	No ⁸⁴	No
South Carolina	Yes	Yes	Yes ⁸⁵	Yes	--- ¹	Yes
South Dakota	Yes	Yes	No	Yes	No	Yes
Tennessee	Yes	No ⁸⁶	No	Yes	No ³⁹	Yes
Texas	Yes	Yes	Yes	Yes	Yes ⁸⁷	Yes
Utah	No ⁸⁸	No ⁸⁸	No ⁸⁸	No ⁸⁸	No ⁸⁸	No ⁸⁹
Vermont	Yes	Yes	Yes	Yes ⁹⁰	Yes	Yes ⁹⁰
Virgin Islands	Yes	Yes	No	Yes	Yes	Yes
Virginia	Yes	Yes	Yes	Yes	Yes	Yes
Washington	Yes ⁹¹	Yes ⁹¹	Yes ⁹²	No ⁹¹	Yes ⁹²	No ⁹¹
West Virginia	Yes	Yes	Yes	Yes	Yes	Yes ⁹³
Wisconsin	Yes ⁹⁴	Yes ⁹⁴	No ⁹⁵	Yes ⁹⁶	No ⁹⁷	No ⁹⁸
Wyoming	Yes	Yes	No	Yes	Yes	Yes ⁹⁹

Source: CCDF Policies Database October 1, 2019 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2019 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ Information not found in State's/Territory's manual.

² This table captures whether the specified activities confer eligibility. If families are required to meet any work hour requirement to have hours approved for these activities, the activity is coded as not conferring eligibility. For information on whether care can be provided for high school or post-secondary education activities if parents meet a work hour requirement, see Table 4. If the policies are different for teen (or minor) parents, we capture the policy for teen (or minor parents) for high school and GED activities. For the other activities, we capture the policy for non-teen parents. Unless noted, care is generally not approved for graduate level education.

³ This table captures whether the specified activities confer eligibility. If families are required to meet any work hour requirement to have hours approved for these activities, the activity is coded as not conferring eligibility. The policies for adult basic education reflect whether state-defined adult basic education activities are approved. Adult basic education activities generally include programs that teach basic skills such as reading, math, GED preparation, ESL, or other skills to parents at least 16 years old without a high school diploma; however, states may define this differently. If GED activities are only approved for teen parents and not for adult parents, this is captured in the GED column, rather than under adult basic education.

⁴ In the absence of an instructor or educational institution, the timeframe for eligibility will not exceed 24 months. Home school and online school programs do not meet the requirement for an approved activity.

⁵ GED activities may be approved for eligibility for up to 24 months.

⁶ Training and educational activities are limited to academic, non-academic vocational, trade, or technical training programs lasting no more than 48 calendar months from the parent's initial enrollment into the program.

⁷ Training and educational activities are limited to academic, non-academic vocational, trade, or technical training programs lasting no more than 48 calendar months from the parent's initial enrollment into the program. In the absence of an instructor or educational institution, the timeframe for eligibility will not exceed 24 months. Home school and online school programs do not meet the requirement for an approved activity.

⁸ Participants must be taking at least two classes each semester.

⁹ Teen parents are not required to meet a minimum work requirement. All other parents in school must meet a minimum work requirement of 20 hours per week.

¹⁰ GED, ESL, and training activities qualify as eligible activities for teen parents with no added work requirement. All other parents must meet the minimum work requirement in order to have GED, ESL, and training activities approved.

¹¹ Parents in post-secondary education must meet a minimum work requirement of 20 hours per week.

¹² Child care is provided for up to 12 months if the parent is in high school, attending ESL classes, or in adult basic education. This time limit does not apply to teen parents.

¹³ Child care is provided for at least two years of the program if the parent is in post-secondary education or a workforce training program.

¹⁴ New applicants who are teen parents ages 18 and 19 who attend high school or its equivalent are not eligible. High school activities are approved for families already eligible for CCDF with parents under age 20, as well as TANF families if it is part of their employment services plan.

¹⁵ New applicants who are teen parents ages 18 and 19 who attend high school or its equivalent are not eligible. GED activities are approved for families already eligible for CCDF with parents under age 20, as well as TANF families if it is part of their employment services plan.

¹⁶ Activities are approved for TANF families if the activities are part of their employment services plan.

¹⁷ Preliminary training is basic training provided before job skills training to prepare the person for employment. Preliminary training includes English as a Second Language courses for foreign-born adults and GED classes for adults. Preliminary training may be counted as an approved activity for up to two years.

¹⁸ 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.

¹⁹ Parents' education activities must consist of at least 20 hours of combined approved activities per week.

²⁰ Parents eligible for training must participate in at least 20 hours of combined approved activities per week.

- ²¹ Parents eligible based on education or training activities must participate in at least 20 hours of combined approved activities per week. Post-secondary education is limited to technical or vocational programs, associate degree programs, and bachelor degree programs.
- ²² GED activities qualify as eligible activities for minor parents below the age of 21. Adult parents, 21 and older, must have at least 24 hours per week of their GED activity or 24 hours per week of their GED activity in combination with another approved activity to qualify.
- ²³ Each parent must participate in one or more approved activities for a minimum average of 24 hours per week. Approved activities include employment, job search, education, and training.
- ²⁴ Adult basic education activities qualify as eligible activities for minor parents below the age of 21. Adult parents, 21 and older, must have at least 24 hours per week of their GED activity or 24 hours per week of their GED activity in combination with another approved activity to qualify.
- ²⁵ Full- or part-time enrollment in associate degree programs at eligible institutions qualifies as an eligible activity.
- ²⁶ Adult basic education is only approved if it is part of a TANF work program plan or SNAP Employment and Training program plan.
- ²⁷ Adult basic education may be approved for families who are participating in a TANF work program.
- ²⁸ Child care subsidies are not approved for online classes or post-baccalaureate classes. Post-secondary education is approved for a maximum of 48 months.
- ²⁹ 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.
- ³⁰ GED activities are approved with no work requirement for the first 24 non-consecutive months. After 24 months of assistance, the parent must be working on average 20 hours per week in addition to participating in GED activities to continue to qualify for assistance.
- ³¹ Adult basic education activities provide eligibility for assistance without work requirements for the first 24 non-consecutive months. After 24 months of assistance, the parent must be working on average 20 hours per week in addition to participating in adult basic education activities to continue to qualify for assistance.
- ³² 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 or bachelor's degree and be seeking a second one.
- ³³ 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.
- ³⁴ 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.
- ³⁵ Training is not approved if the occupation has low job prospects, or if the program does not require regular attendance.
- ³⁶ Education beyond a bachelor's degree is not an approved activity for CCDF eligibility.
- ³⁷ High school and GED activities are limited to teen parents and TANF and SNAP work program participants.
- ³⁸ ESL is only authorized under the TANF and SNAP work programs.
- ³⁹ Adult basic education is only approved if part of a TANF work program plan or SNAP Employment and Training program plan.
- ⁴⁰ Post-secondary students must work a minimum of 15 hours per week and maintain a cumulative GPA of 2.0 on a 4.0 scale to remain eligible for child care assistance. Each parent is eligible for a maximum of 24 months of child care assistance for post-secondary education. In a two-parent household, only one parent may be attending post-secondary education. The other must meet another approved activity for the household to receive assistance. If self-employed, child care plans will be terminated at the end of the review period if the post-secondary student has been self-employed for at least six months and is not working a minimum of 15 hours per week and earning the equivalent of the federal minimum wage per hour.

- ⁴¹ Parents may receive child care assistance for vocational training activities to the extent that funds are available as long as they have not received assistance for more than 60 months due to enrollment in a certified trade school or accredited college or university.
- ⁴² Parents may receive child care assistance for post-secondary education to the extent that funds are available as long as they have not received assistance for more than 60 months due to enrollment in a certified trade school or accredited college or university.
- ⁴³ ESL is considered as education and training.
- ⁴⁴ The education activity must be related to a specific occupation, job, or job offer.
- ⁴⁵ Education activities must take place at an accredited college or university and lead to an associate's or bachelor's degree.
- ⁴⁶ Post-secondary education must be at the undergraduate level. Graduate level education is not a valid need reason for care.
- ⁴⁷ Post-secondary education is not approved for a second bachelor's degree or education beyond a bachelor's degree except for continuing education units, certification, and coursework required to obtain or retain employment, or if it is part of a cash-welfare approved employment plan.
- ⁴⁸ The maximum time limit authorized for child care is one year for adult basic education activities, with an extension possible on an individual basis. The program must be certified through the state in order to be considered an eligible activity.
- ⁴⁹ High school, GED, and equivalency programs are approved activities for low-income teen parents (through age 19), without a minimum work requirement.
- ⁵⁰ Single parent families must work 40 hours per month while the parent attends education or training part time. The minimum hourly work requirement, however, may be waived if it becomes a barrier to finishing school. Full-time students do not have a minimum work requirement. Two parent households where one parent is a full-time student and one parent is a part-time student must work 40 hours per month.
- ⁵¹ Single parent families must work 40 hours per month while the parent attends education or training part time. The minimum hourly work requirement, however, may be waived if it becomes a barrier to finishing school. 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. Full-time students do not have a minimum work requirement. Two-parent households where one parent is a full-time student and one parent is a part-time student must work 40 hours per month.
- ⁵² Post-secondary education is not approved for a client to earn a second bachelor's degree or for any graduate schooling.
- ⁵³ High school and GED activities are limited to minor parents or adult parents participating in a training program. 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.
- ⁵⁴ A recipient must attend 20 or more hours of training per week. Additionally, the recipient must attend a post-secondary institution that offers vocational educational programs, a program which provides for the completion of the equivalent to a secondary school diploma, or a program that offers defined and verifiable employment preparation training.
- ⁵⁵ Adult basic education is approved as a part of a training program.
- ⁵⁶ The approval of post-secondary education is subject to available funding. If funding is available, the recipient must enroll in six or more semester credit hours.
- ⁵⁷ Training is approved if it prepares the individual for employment.
- ⁵⁸ Post-secondary education is an approved activity if it leads to a degree, certificate, or license in an area of specialization; has immediate practical application toward employment; does not exceed 104 weeks in a lifetime; and does not result in a degree at the bachelor's level or higher. Prerequisite courses for post-secondary education are not an eligible activity, except for a maximum of two pre-requisite courses for nursing programs. TANF recipients who are not in the employment program must fulfill the general requirements but are allowed to pursue a bachelor's degree.
- ⁵⁹ GED activities are approved for TANF families.
- ⁶⁰ Child care benefits for clients who are preparing to get a GED are limited to one year.

⁶¹ Policy coded for New York City. Caretakers may attend high school or an equivalent program.

⁶² Policy coded for New York City. ESL and adult basic education activities may be approved by districts if they elect this option in their Child and Family Services Plan and have the available funding.

⁶³ Policy coded for New York City. Enrollment in more than one program, when care is needed, is not allowed.

⁶⁴ Policy coded for New York City. In New York City, certain post-secondary education activities are approved for two or four-year programs for parents working at least 17.5 hours per week. Two-year programs with a specific vocational goal may be approved with no work requirement. Statewide, districts may approve post-secondary education activities that include two-year programs leading to an associate's degree, that do not have a specific vocational sequence, and four-year college programs if the parent is also working at least 17.5 hours per week.

⁶⁵ Post-secondary education is limited to 20 months and cannot be approved for graduate or post-graduate studies.

⁶⁶ Allowable training activities include but are not limited to basic remedial education, training designed to achieve basic literacy, training needed to secure or retain a job, vocational training, and ESL classes.

⁶⁷ An applicant may participate in post-secondary education that leads to a certificate, associate's degree, or bachelor's degree, provided the individual has not already received a bachelor's degree. Post-graduate education activities are not eligible activities.

⁶⁸ The education program must require classroom attendance with an instructor present.

⁶⁹ 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.

⁷⁰ Care is not approved for both parents to attend GED or ESL classes at the same time.

⁷¹ 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.

⁷² 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.

⁷³ Child care for education activities is covered as long as the client is primarily an employee rather than a student. Working students can qualify for subsidies as long as at least 50 percent of their authorized hours are for employment.

⁷⁴ GED activities are approved with no work requirement for parents under the age of 18. All other parents must work a minimum of 10 hours per week.

⁷⁵ Parents enrolled in ESL must also work a minimum of 10 hours per week.

⁷⁶ Parents enrolled in training activities must also work a minimum of 10 hours per week.

⁷⁷ Post-secondary students must work a minimum of 10 hours per week.

⁷⁸ Any program from an institution that is accredited by the department of education resulting in a diploma or certificate is approved.

⁷⁹ A minimum of 20 hours of weekly training is required.

⁸⁰ 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.

- ⁸¹ 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.
- ⁸² ESL is an approved activity for TANF recipients.
- ⁸³ Income-eligible parents participating in approved training, apprenticeship, internship, on-the-job training, work experience, work immersion, or other job readiness or job attachment programs may receive subsidies. A recipient must attend 20 or more hours of training per week and the program must be no longer than one year. TANF applicants may participate in employment or education as approved in their employment plan.
- ⁸⁴ Adult basic education is an approved activity for TANF recipients.
- ⁸⁵ ESL may be authorized for TANF recipients in order to comply with a family plan.
- ⁸⁶ GED activities qualify as an eligible activity for teen parents under TANF only.
- ⁸⁷ Policy coded for Gulf Coast Region.
- ⁸⁸ Care is authorized for education or training activities only if clients meet the minimum work requirement.
- ⁸⁹ Care is authorized for education or training activities only if clients meet the minimum work requirement. Only the last two years of a four-year program may be supported. Graduate study or customers who already have a Bachelor's degree will not be supported.
- ⁹⁰ 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 and training are eligible activities. Volunteer work and post-bachelor education are not eligible activities.
- ⁹¹ Non-TANF clients over the age of 21 must work at least 20 hours per week or be in a paid federal or state work study program for at least 16 hours per week in conjunction with education and training to be eligible for care. Vocational education at a technical or community college is approved if it leads to a degree or certificate in a specific occupation.
- ⁹² Non-TANF clients over the age of 21 must work at least 20 hours per week or be in a paid federal or state work study program for at least 16 hours per week in conjunction with education and training to be eligible for care.
- ⁹³ A student must keep a 2.0 grade point average and satisfactory attendance. A student who fails to maintain the 2.0 grade point average, or whose grade report reflects withdrawals or incompletes in more than half of the semester's classes will be given an improvement period for one semester upon provision of a letter from the college confirming the student attends classes. Other students must submit statements from the educational or training facility which document that attendance and progress are satisfactory. If the student fails to meet the 2.0 requirement within the improvement period, the case will be suspended for a semester. Clients may resubmit the materials to prove they are enrolled. If they fail to maintain satisfactory progress a second time, the case is suspended for a calendar year. If they fail to maintain satisfactory progress a third or fourth time, the suspensions are for two calendar years each.
- ⁹⁴ If the parent is age 20 or older, approval for high school or GED activities is limited to 24 months and the parent must participate in at least 20 hours of employment per month. The time restriction and employment requirement does not apply to parents age 19 or younger.
- ⁹⁵ ESL activities are limited to 24 months and the parent must also participate in at least 20 hours of employment per month.
- ⁹⁶ Apprenticeships and employer-sponsored training and certification are considered allowable employment. Pre-job training will be approved if it is a part of a TANF or SNAP E&T work plan.
- ⁹⁷ Adult basic education activities are limited to 24 months. The activity must provide an employment skill that would help the individual's efforts to maintain employment. The individual must also be working at least 20 hours per month throughout the duration of the school program.
- ⁹⁸ Post-secondary education activities are limited to 24 months. The activity must provide an employment skill that would help the individual's efforts to maintain employment. Parents must work a minimum of 20 hours per month.

⁹⁹ Approval for post-secondary education is limited to one degree, unless an associate's degree was earned as part of working towards completing a bachelor's degree. The participant must also maintain at least a 2.0 cumulative grade point average each term or semester.

Table 4. Minimum Work Hours Per Week Required for CCDF Eligibility, 2019 ¹

State/Territory*	Minimum Hours of Work Required for Eligibility ²	Minimum Work Hours for a Two-Parent Household ²	Work Hour Requirement to Have School Hours Covered by the Subsidy: Full-Time High School Student	Work Hour Requirement to Have School Hours Covered by the Subsidy: Full-Time Post-Secondary Student
Alabama	15 ³	Each parent must work 15 hours ³	No minimum	No minimum
Alaska	No minimum	No minimum	No minimum	No minimum
American Samoa	20	Each parent must work 20 hours	No minimum	No minimum
Arizona	No minimum	No minimum	No minimum ⁴	20
Arkansas	30	Each parent must work 30 hours	No minimum	No minimum
California	No minimum	No minimum	No minimum	No minimum
Colorado	No minimum	No minimum	No minimum ⁵	No minimum ⁵
Connecticut	No minimum	No minimum	No minimum	NA ⁶
DC	20	Each parent must work 20 hours	No minimum	No minimum ⁷
Delaware	No minimum	No minimum	No minimum	NA ⁸
Florida	20 ⁹	Both must work a total of 40 hours	No minimum ¹⁰	No minimum ¹⁰
Georgia	24 ¹¹	Each parent must work 24 hours ¹¹	No minimum	No minimum ¹²
Guam	No minimum	No minimum ¹³	No minimum	No minimum
Hawaii	No minimum	No minimum	No minimum	No minimum
Idaho	No minimum	No minimum	No minimum	No minimum
Illinois	No minimum	No minimum	No minimum ¹⁴	No minimum ¹⁵
Indiana	No minimum	No minimum	No minimum	No minimum
Iowa	28 ¹⁶	Each parent must work 28 hours	No minimum	No minimum
Kansas	20 ¹⁷	Each parent must work 20 hours	No minimum ¹⁸	15 ¹⁹
Kentucky	20 ²⁰	Both must work a total of 40 hours ²¹	No minimum ²²	20 ²³
Louisiana	20 ²⁴	Each parent must work 20 hours ²⁴	No minimum	No minimum
Maine	No minimum ²⁵	No minimum	No minimum	No minimum

Table 4. Minimum Work Hours Per Week Required for CCDF Eligibility, 2019 ¹

State/Territory*	Minimum Hours of Work Required for Eligibility ²	Minimum Work Hours for a Two-Parent Household ²	Work Hour Requirement to Have School Hours Covered by the Subsidy: Full-Time High School Student	Work Hour Requirement to Have School Hours Covered by the Subsidy: Full-Time Post-Secondary Student
Maryland	No minimum	No minimum	No minimum	No minimum
Massachusetts	20	Each parent must work 20 hours ²⁶	No minimum	No minimum
Michigan	No minimum	No minimum	No minimum	No minimum
Minnesota	20	Each parent must work 20 hours	No minimum ²⁷	No minimum ²⁷
Mississippi	25	Each parent must work 25 hours ²⁸	No minimum	No minimum ²⁸
Missouri	No minimum	No minimum	No minimum	No minimum
Montana	Other ²⁹	Other ³⁰	No minimum ³¹	Other ³²
Nebraska	No minimum	No minimum	No minimum	No minimum
Nevada	No minimum	No minimum	No minimum	No minimum
New Hampshire	No minimum	No minimum	No minimum	No minimum
New Jersey	30 ³³	Each parent must work 30 hours ³³	No minimum ³³	No minimum ³³
New Mexico	No minimum	No minimum	No minimum	No minimum
New York	20	Each parent must work 20 hours	No minimum	17.5 ³⁴
No. Mariana Islands	30	Each parent must work 30 hours	No minimum	No minimum
North Carolina	No minimum ³⁵	No minimum ³⁵	No minimum	No minimum
North Dakota	No minimum	No minimum	No minimum	No minimum
Ohio	No minimum ³⁶	No minimum ³⁶	No minimum ³⁶	No minimum ³⁶
Oklahoma	No minimum ³⁷	No minimum ³⁷	No minimum	No minimum
Oregon	No minimum	No minimum	NA ³⁸	Other ³⁹
Pennsylvania	20 ⁴⁰	Each parent must work 20 hours	No minimum	10
Puerto Rico	20 ⁴¹	Each parent must work 20 hours	No minimum	No minimum
Rhode Island	20 ⁴²	Each parent must work 20 hours ⁴²	No minimum ⁴³	NA ⁴⁴

Table 4. Minimum Work Hours Per Week Required for CCDF Eligibility, 2019 ¹

State/Territory*	Minimum Hours of Work Required for Eligibility ²	Minimum Work Hours for a Two-Parent Household ²	Work Hour Requirement to Have School Hours Covered by the Subsidy: Full-Time High School Student	Work Hour Requirement to Have School Hours Covered by the Subsidy: Full-Time Post-Secondary Student
South Carolina	15 ⁴⁵	Each parent must work 15 hours ⁴⁶	No minimum	No minimum
South Dakota	20 ⁴⁷	Each parent must work 20 hours	No minimum	No minimum ⁴⁸
Tennessee	30	Each parent must work 30 hours	No minimum	No minimum
Texas	25 ⁴⁹	Both must work a total of 50 hours	No minimum ⁵⁰	No minimum ⁵¹
Utah	15	One parent must work 30 hours and the other must work 15 hours	15 ⁵²	15 ⁵²
Vermont	No minimum	No minimum	No minimum	No minimum
Virgin Islands	30 ³³	Each parent must work 30 hours	No minimum	No minimum
Virginia	No minimum	No minimum	No minimum	No minimum
Washington	No minimum ⁵³	No minimum	No minimum ⁵⁴	20 ⁵⁴
West Virginia	20	Each parent must work 20 hours	No minimum	No minimum
Wisconsin	No minimum	No minimum	No minimum ⁵⁵	5 ⁵⁶
Wyoming	No minimum	No minimum	No minimum	No minimum

Source: CCDF Policies Database October 1, 2019 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2019 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ 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. This table captures work requirement differences for two-parent families, full-time high school students, and full-time post-secondary students. Work exemptions for parents with special needs are captured in the full database. The minimum work hour requirement to qualify for any amount of child care assistance is shown here. This table is not intended to capture the states' definitions of full-time and part-time care or full-time student status.

- ² These columns capture the minimum number of work hours required for parents qualifying based on employment. The requirement does not apply to parents qualifying for subsidies based on education or training activities or based on job search.
- ³ Each parent must participate in one or more approved activities for a minimum average of 15 hours per week. Approved activities include employment, education, and training.
- ⁴ Teen parents are not required to meet a minimum work requirement. All other parents in school must meet a minimum work requirement of 20 hours per week.
- ⁵ Counties have the option of including training or education as an eligible activity for subsidies. If a county elects to provide child care assistance to parents in training or education, the county cannot impose additional criteria or target certain types of training.
- ⁶ Post-secondary education is only approved if the applicant receives TANF and post-secondary education is part of his or her employment services plan.
- ⁷ The student must participate in at least 20 hours of combined approved activities, which include education, training, and employment. This may include taking classes in an online program at an institution approved by the Higher Education Licensure Commission.
- ⁸ 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.
- ⁹ If individuals are employed and also in school or an approved training program, they can work less than 20 hours, as long as their combined participation in approved activities is at least 20 hours per week.
- ¹⁰ The student must participate in at least 20 hours of combined approved activities, which include education, training, and employment.
- ¹¹ Each parent must participate in one or more approved activities for a minimum average of 24 hours per week. Approved activities include employment, job search, education, and training. New applicants must still meet the 24-hour requirement.
- ¹² The student must participate in at least 24 hours of combined approved activities, which include education, training, and employment.
- ¹³ To receive full-time child care assistance each parent must work 30 hours per week.
- ¹⁴ There is no work requirement for the first 24 non-consecutive months the client participates. From the 25th month on, the client must work at least 20 hours per week.
- ¹⁵ There is no work requirement for the first 48 non-consecutive months the client participates. From the 49th month on, the client must work at least 20 hours per week.
- ¹⁶ TANF recipients do not need to meet the minimum work hours requirement. For participants who are working and in school or in a training program, a minimum of 28 hours of school and work combined confers eligibility.
- ¹⁷ TANF recipients do not need to meet the minimum work hours requirement. TANF recipients who gain employment, and therefore lose their cash assistance, are not required to meet the work hours requirement for the rest of their 12-month eligibility period. If a new application is made within two months of losing TANF eligibility, the family is also exempt from meeting the minimum work hours requirement.
- ¹⁸ There is no work requirement for teen parents in high school or GED activities. All other parents must work 15 hours per week while participating in educational activities.
- ¹⁹ Participation in the federal work study program counts towards this minimum. If the student participates in an unpaid internship for more than 15 hours per week for course credit, this may be applied to the employment requirement.
- ²⁰ A single parent must work an average of 20 hours per week.
- ²¹ The minimum requirement for one parent in a two-parent household is five hours per week. A two-parent household must work a combined average of forty hours per week.

- ²² Teen parents in school are not required to meet an additional work requirement.
- ²³ Unpaid work, such as a practicum, internship, or work study, can be counted.
- ²⁴ The employment and training requirements for families of children with special needs may be reduced to 15 hours per week.
- ²⁵ Applicants who are self-employed must participate in a self-employment activity a minimum average of 20 hours per week.
- ²⁶ Part-time care may be authorized if one or both parents are working fewer than 30 hours, but at least 20 hours.
- ²⁷ Work is not a required activity for students. However, if a full-time student has employment and wishes to receive subsidized child care during hours worked, he or she must work a minimum of 10 hours per week. Part-time students must work 20 hours if they wish to receive subsidized child care for employment hours.
- ²⁸ Each parent must work at least 25 hours per week, or one parent must work at least 25 hours per week and the other parent must be enrolled in an approved full-time educational or training program.
- ²⁹ 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 part time are required to work 40 hours per month. The recipient must earn at least the current applicable minimum wage to be eligible for assistance.
- ³⁰ The work requirement is monthly. Two-parent households must work 120 hours per month. Single parents must work 60 hours per month. The recipient must earn at least the current applicable minimum wage to be eligible for assistance.
- ³¹ High school, HiSET, and equivalency programs are approved activities for low-income teen parents (through age 19), without a minimum work requirement.
- ³² Single-parent families have no work requirement while the parent attends education or training full time. Single-parent families must work 40 hours per month while the parent attends education or training part time. Two-parent families have no work requirement while both parents attend education or training full time. Two-parent families must work 40 hours per month while one parent attends education or training part time and the other parent attends education or training full time.
- ³³ A parent or applicant is considered to be working full time if work and education or training activities combine to equal 30 hours per week.
- ³⁴ Policy coded for New York City. Participants in a two-year program with no specific occupation goal or in a four-year degree program must work at least 17.5 hours per week in a job that pays at least minimum wage. The work requirement does not apply to two-year programs with a specific vocational goal.
- ³⁵ In general, there is no minimum number of hours a recipient must work to receive a subsidy. In order to receive full-time care though, a recipient must work an average of 30 hours or more per week. Part-time care is approved for any number of hours less than full time.
- ³⁶ Both parents must be engaged in an activity and have a need for care.
- ³⁷ Foster families must work a minimum of 20 hours per week.
- ³⁸ High school education is not an approved activity for eligibility.
- ³⁹ Working students can qualify for subsidies as long as at least 50 percent of their authorized hours are for employment.
- ⁴⁰ Ten hours of training may be substituted for 10 hours of the 20-hour work requirement.
- ⁴¹ Parents must participate in work or another eligible activity for a minimum of 20 hours per week.
- ⁴² Income eligible parents must work an average of at least 20 hours per week in a month.
- ⁴³ Parents must engage in 20 hours of approved activities per week. If the parent is in school for 20 hours per week, this fully satisfies the 20-hour requirement and additional employment or work hours are not required.
- ⁴⁴ Post-secondary education is not an approved activity for eligibility.
- ⁴⁵ TANF applicants must meet the participation requirements outlined in their TANF family plan. A parent who receives SSI may be eligible for assistance if he or she is either employed at least part time or participating in an activity that will enable him or her to become employed.
- ⁴⁶ If one or both parents work part time, only part-time care will be authorized. The parents must each work 15 hours in order to qualify for part-time care.

⁴⁷ 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. Applicants must work a minimum of 80 hours per month. Applicants must also receive a salary equivalent to the federal minimum wage.

⁴⁸ Associate's or bachelor's degree students meet the activity requirements if they attend 80 school hours per month, their combined school and employment hours equal 80 or more hours per month, or they are enrolled in 12 semester credit hours. Master's and doctoral students are not exempt from the 80-hour per month work requirement.

⁴⁹ Policy coded for the Gulf Coast Region. The student must participate in at least 25 hours of combined approved activities, which include education, training, and employment. Teen parents must work or attend school in the summer with the intention of returning to high school or GED classes in the fall.

⁵⁰ Policy coded for the Gulf Coast Region. The student must participate in at least 25 hours of combined approved activities, which include education, training, and employment.

⁵¹ Policy coded for the Gulf Coast Region. The student must participate in at least 25 hours of combined approved activities, which include education, training, and employment. One credit hour of post-secondary courses counts for three work hours.

⁵² Clients in training or education must also be employed an average of 15 hours or more a week.

⁵³ 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.

⁵⁴ Non-TANF clients over the age of 21 must work at least 20 hours per week or be in a paid federal or state work study program for at least 16 hours per week in conjunction with education and training to be eligible for care.

⁵⁵ Individuals under age 20 enrolled in high school or participating in an approved high school equivalency program are not required to work in addition to attending school. Individuals age 20 or older enrolled in high school or participating in an approved high school equivalency program must participate in at least 20 hours of employment per month.

⁵⁶ Individuals in technical college or a course of study that leads to employment, must participate in at least 20 hours of employment per month.

Table 5. If Families Receiving Different Types of Benefits/Services Have Different Parent Activity Requirements, 2019 ¹

State/Territory*	Transitional Child Care	Homeless	Child Protective Services	Foster Children
Alabama	Same as other families ²	Other ³	Other ⁴	Other ⁵
Alaska	Same as other families	Same as other families	Other ⁶	Same as other families
American Samoa	NA ⁷	Other ⁸	No activity requirement ⁹	No activity requirement ¹⁰
Arizona	Other ¹¹	Other ¹²	Other ¹³	Other ¹⁴
Arkansas	Same as other families	No activity requirement	Other ¹⁵	Other ¹⁵
California	Other ¹⁶	No activity requirement	No activity requirement ¹⁷	Same as other families ¹⁸
Colorado	Other ¹⁹	No activity requirement ²⁰	No activity requirement ²¹	Other ²²
Connecticut	Same as other families ²³	Same as other families	Same as other families	Same as other families
DC	Same as other families	No activity requirement	No activity requirement ²⁴	Same as other families ²⁵
Delaware	Same as other families	No activity requirement	No activity requirement ²⁶	Same as other families
Florida	Same as other families	No activity requirement ²⁷	Other ²⁸	Other ²⁸
Georgia	Other ²⁹	Other ³⁰	Varies depending on if child left in home ³¹	No activity requirement
Guam	Same as other families	Same as other families	Other ³²	Other ³³
Hawaii	Same as other families	Same as other families	Other ³⁴	Same as other families ³⁵
Idaho	Same as other families	Other ³⁶	Same as other families	Same as other families
Illinois	Same as other families	Other ³⁷	Not eligible ³⁸	Not eligible ³⁹
Indiana	Same as other families	Same as other families	Varies depending on if child left in home ⁴⁰	Same as other families ⁴¹
Iowa	Same as other families ⁴²	Same as other families	Other ¹³	Same as other families ⁴³
Kansas	Other ⁴⁴	Same as other families	Other ⁴⁵	Other ⁴⁶
Kentucky	Same as other families	Other ⁴⁷	Other ⁴⁸	Same as other families
Louisiana	TCC-specific requirements not specified in child care manual ⁴⁹	No activity requirement ⁵⁰	Other ⁵¹	No activity requirement ⁵²

Table 5. If Families Receiving Different Types of Benefits/Services Have Different Parent Activity Requirements, 2019 ¹

State/Territory*	Transitional Child Care	Homeless	Child Protective Services	Foster Children
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 ⁵³	Other ⁵⁴	Same as other families ⁵⁵
Michigan	Same as other families ⁵⁶	Same as other families	Other ⁵⁷	Same as other families ⁵⁸
Minnesota	Same as other families	Same as other families	Not eligible	Not eligible
Mississippi	Other ⁵⁹	No activity requirement ⁵⁹	No activity requirement ⁵⁹	No activity requirement ⁵⁹
Missouri	Same as other families	Other ⁶⁰	No activity requirement	No activity requirement
Montana	Same as other families	Other ⁶¹	Other ⁶²	Other ⁶³
Nebraska	Same as other families	Same as other families	Same as other families ⁶⁴	Same as other families ³⁵
Nevada	Same as other families	Other ⁶⁵	Other ⁶⁶	Other ⁶⁷
New Hampshire	Same as other families	Other ⁶⁸	Varies depending on if child left in home ⁶⁹	Same as other families
New Jersey	Other ⁷⁰	Same as other families	No activity requirement	No activity requirement ⁷¹
New Mexico	Same as other families	Same as other families	Other ⁷²	Other ⁷²
New York	TCC-specific requirements not specified in child care manual ⁷³	Other ⁷⁴	No activity requirement ⁷⁵	Same as other families
No. Mariana Islands	NA ⁷	Same as other families	Same as other families	Same as other families
North Carolina	Other ⁷⁶	Same as other families ⁷⁷	Varies depending on if child left in home ⁷⁸	No activity requirement ⁷⁹
North Dakota	Same as other families	Same as other families	Not eligible	Not eligible
Ohio	Other ⁸⁰	No activity requirement	Varies depending on if child left in home ⁸¹	Same as other families
Oklahoma	Same as other families	Other ⁸²	Other ⁸³	Same as other families
Oregon	Same as other families	Same as other families	Same as other families	Same as other families

Table 5. If Families Receiving Different Types of Benefits/Services Have Different Parent Activity Requirements, 2019 ¹

State/Territory*	Transitional Child Care	Homeless	Child Protective Services	Foster Children
Pennsylvania	Other ⁸⁴	Other ⁸⁵	Same as other families	Same as other families ⁸⁶
Puerto Rico	Same as other families	No activity requirement ⁸⁷	No activity requirement	No activity requirement
Rhode Island	Same as other families	Same as other families	Same as other families	Other ⁸⁸
South Carolina	Same as other families ⁸⁹	Same as other families	Other ⁹⁰	Same as other families ⁹¹
South Dakota	Same as other families	Same as other families	Other ⁹²	Other ⁹²
Tennessee	Same as other families	Same as other families	No activity requirement	No activity requirement
Texas	Same as other families	No activity requirement ⁹³	Other ⁹⁴	Other ⁹⁴
Utah	Same as other families ⁹⁵	Other ⁹⁶	Same as other families	Not eligible ⁹⁷
Vermont	Same as other families	Other ⁹⁸	Other ⁹⁹	Other ¹⁰⁰
Virgin Islands	Same as other families	Same as other families	Other ¹⁰¹	No activity requirement ¹⁰²
Virginia	Other ¹⁰³	Same as other families	Other ¹⁰⁴	Same as other families ¹⁰⁵
Washington	NA ¹⁰⁶	No activity requirement ¹⁰⁷	No activity requirement ¹⁰⁸	Same as other families ¹⁰⁹
West Virginia	Same as other families	Same as other families	Other ⁷²	Same as other families ¹¹⁰
Wisconsin	Same as other families	Same as other families	Same as other families ¹¹¹	Same as other families ¹¹²
Wyoming	Same as other families	Same as other families	Same as other families	Same as other families

Source: CCDF Policies Database October 1, 2019 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2019 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ 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.

² Families must apply within six months of the date their TANF benefits were terminated in order to be eligible for transitional child care.

³ For the first 90 days of eligibility, documentation of initial eligibility requirements is not required. After 90 days, the family must document that they meet all eligibility criteria, including activity requirements.

⁴ Any child for whom the department submits a written referral requesting services for a reason of protective services is eligible for care.

⁵ 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 child is eligible for care.

⁶ Eligibility is determined by the office of children's services.

⁷ This territory or outlying area does not have transitional child care.

⁸ 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.

⁹ Children referred by child protective services receive immediate placement.

¹⁰ The foster parent is not required to participate in employment, education, or training activities.

¹¹ Families receiving transitional child care must be employed.

¹² In addition to other eligible activities, a client living in a homeless or domestic violence shelter may be eligible for care based on participation in structured shelter activities as verified by the shelter.

¹³ 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.

¹⁴ Foster care families do not have to meet the same income requirements as other families. The department may pay for child protective services 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.

¹⁵ 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, and the parents may request a waiver exempting them from activity requirements.

¹⁶ 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.

¹⁷ If eligibility and need are based on child protective services, families do not have to meet income requirements. The written referral must include a statement certifying that child care services are necessary.

¹⁸ For income eligibility and family fee purposes, only the foster child and related siblings are included in the family size, and only their income is counted.

¹⁹ Families transitioning off of TANF must be in either a job or job training activity.

²⁰ Homeless families are provided child care for a 60-day stabilization period, during which they are not required to participate in an eligible activity.

²¹ Policy coded for Denver. Counties may opt to provide protective services child care using CCDF funds. There is no activity requirement for protective services child care.

²² Counties may opt to provide care for foster children using CCDF funds.

²³ New applicants who have received TANF must apply within five years of the date cash assistance benefits were discontinued.

²⁴ 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.

²⁵ The foster parent must participate in a qualifying activity for a minimum of 20 hours per week, or be receiving some form of verifiable income. The child may reside with a foster parent or guardian outside the District of Columbia.

²⁶ Families referred by and active with the division of family services do not have to meet income requirements.

²⁷ Families with a documented referral from a certified homeless shelter or domestic violence shelter do not have to meet activity or income requirements.

²⁸ Eligibility is not dependent on family income or work requirements but rather on a documented referral from the child protective services department.

²⁹ Transitional child care recipients must participate in one or more state-approved activities for a minimum of 24 hours per week for each responsible adult, unless the parents were determined ineligible for TANF based on not meeting the 24-hour activity requirement. In this case, parents must maintain the number of hours that resulted in their ineligibility for TANF.

³⁰ Homeless families may be authorized for job search activities for the entire 12-month eligibility period.

³¹ 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.

³² 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.

³³ 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, while the foster parent requires time to implement the case plan, or when the foster parent requires time away from the child.

³⁴ 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.

³⁵ Foster care families do not have to meet the same income requirements as other families.

³⁶ Homeless families searching for housing through a homeless agency may be approved as participating in a training activity.

³⁷ Homeless families that are not participating in an eligible activity can receive up to two periods of child care assistance lasting 90 days each within a 12-month period to allow them an opportunity to address their basic needs.

³⁸ The state's child welfare and protection agency pays for child care provided for child protective services and foster care. To ensure continuity of care, families with CPS cases that are transitioning out of the state system are eligible to receive an additional six months of child care through the Child Care Assistance Program.

³⁹ The state's child welfare and protection agency pays for child care provided for child protective services and foster care.

⁴⁰ 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.

⁴¹ 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.

⁴² Families who receive TANF or participate in the state's TANF work program are eligible for child care assistance regardless of income.

⁴³ 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 the CCDF program.

⁴⁴ TANF recipients who gain employment and therefore lose their cash assistance remain eligible for child care subsidies for the remainder of their eligibility period and do not have to meet the 20-hour per week minimum work requirement. If a new application is submitted within the first two months following the loss of TANF eligibility, meeting the minimum work hours requirement is not necessary for approval. At the time of the next review, however, recipients must meet the work requirement or be participating in a different eligible activity.

⁴⁵ 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 12 months.

⁴⁶ Care may be approved for juvenile offenders when the foster parent is employed and needs child care.

⁴⁷ Families experiencing homelessness are eligible for expedited services. They are entitled to immediate approval and enrollment with a child care provider. Families experiencing homelessness have up to three calendar months from the date of application to return all other verification.

⁴⁸ 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.

⁴⁹ Families leaving TANF are required to participate in the Strategies to Empower People Program (STEP) for six months. Participants in the STEP program will receive subsidies for 12 months.

- ⁵⁰ A participant who is included in a homeless household and is normally required to be employed or attend a job or educational training program, can be exempt from employment and training requirements if the participant is in a transitional living program or the participant is seeking employment by registering with the state workforce commission.
- ⁵¹ A child in protective services is 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. There is no work requirement for eligibility for families in child protective services.
- ⁵² Foster children are categorically 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.
- ⁵³ If the family is referred by the state's housing authority program, the family may participate in approved homeless activities, including but not limited to: staying in an emergency shelter, domestic violence shelter, or family substance abuse treatment shelter; living temporarily in a hotel or motel; or participating in homeless stabilization or diversion programs.
- ⁵⁴ 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.
- ⁵⁵ The family is required to meet the activity requirement but is exempt from the income requirement.
- ⁵⁶ Families are exempt from income determination.
- ⁵⁷ Families are automatically eligible if child care is required by an active protective services plan. Families are exempt from income determination.
- ⁵⁸ When the child needing care has been placed with a licensed foster care parent, the child is eligible for care without income determination.
- ⁵⁹ Eligibility is determined by the referral agency.
- ⁶⁰ Homeless families participating in a community based program designed to eliminate homelessness are eligible to receive child care assistance. If a homeless family is not participating in a community based program, they need to meet the same requirements as non-homeless families.
- ⁶¹ A family that reports homeless status is eligible for 90 days of eligibility to meet all non-TANF requirements.
- ⁶² Eligibility is determined by the Child and Family Services Division.
- ⁶³ 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.
- ⁶⁴ 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.
- ⁶⁵ Families experiencing homelessness may qualify under a self-sufficiency plan, which may include housing search and other activities that are not available to other families.
- ⁶⁶ 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 during the initial 12-month eligibility period.
- ⁶⁷ Approved activities for foster parents must be verified by a caseworker.
- ⁶⁸ Applicants can qualify for child care assistance if they are participating in a combination of job and housing search activities.
- ⁶⁹ If the children remain in the parent's 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 in an employment related activity.
- ⁷⁰ Families receiving transitional child care must be employed, but they do not have to meet the full-time employment requirement.
- ⁷¹ Foster children in out-of-home settings are considered to be under child protective services and therefore automatically eligible.
- ⁷² Eligibility is determined by the child protective services worker.

- ⁷³ 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. To receive transitional child care the child's parent or caretaker must be engaged in work.
- ⁷⁴ Policy coded for New York City. If funds are available, families may be approved for child care to seek housing if the child's caretaker is also seeking employment, engaged in work, participating in an approved educational or vocational activity, or for the caretaker to access or participate in counseling services programs.
- ⁷⁵ Policy coded for New York City. Children must be referred by the administration for children's services or a contracted preventive services agency. If one child is authorized for child care due to preventive or protective services, all other children in the household may receive care. Protective services cases pay no copayment. Preventive services cases are assigned a copayment.
- ⁷⁶ Families that reach the end of their TANF eligibility can continue to receive transitional child care for 90 days if they are not participating in an eligible activity, such as work or education. If they are participating in an eligible activity, they will receive services through the end of the eligibility period.
- ⁷⁷ Families experiencing homelessness are eligible at the time of application based on information reported by the recipient. If the reported information meets all eligibility criteria, the application is approved, and child care services can begin immediately. The recipient will then have 30 days to provide all needed documentation to support their eligibility. If it is determined that the recipient is not eligible once all required documentation has been submitted, the case is terminated with a 10-day notice.
- ⁷⁸ 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 and must apply under another need category.
- ⁷⁹ 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.
- ⁸⁰ 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 for initial eligibility and 300 percent of the Federal Poverty Guidelines for ongoing eligibility, and the family must meet all requirements of the application and redetermination process.
- ⁸¹ 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. Caretakers approved for protective child care are determined eligible without regard to income or assets.
- ⁸² Homeless families may be approved for subsidized care to help stabilize the family situation when not meeting an employment or education-related need factor.
- ⁸³ Child care may be approved in critical situations to prevent neglect, abuse, or exploitation.
- ⁸⁴ 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.
- ⁸⁵ At application or redetermination, a parent or caretaker in a family that is experiencing homelessness may substitute job search activities to meet the work requirement.
- ⁸⁶ Foster children are eligible for care as long as the foster parents meet the non-financial eligibility requirements.
- ⁸⁷ Children with families who are homeless are not required to meet eligibility requirements.
- ⁸⁸ Foster parents must be working, or the developmental needs of the foster child must require that the child attend day care.
- ⁸⁹ Participants must fall into one of four program categories. The first transitional child care category applies to applicants whose TANF case closed due to 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 whose TANF case closed due to reaching the TANF two-year time limit. The fourth category is for families who become employed or increased earnings during a full-family sanction in TANF and become ineligible for TANF. Applicants in all categories must meet income and work requirements.

- ⁹⁰ 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.
- ⁹¹ Only the child's income is used to determine eligibility, but foster parents must be participating in eligible employment or an eligible education or training activity. Foster parents with a verified disability may be exempt from activity requirements. Other exceptions to the activity requirements may be made on a case-by-case basis. Children placed in South Carolina from another state are not eligible for child care services through the state's primary child care program.
- ⁹² 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.
- ⁹³ Families experiencing homelessness are not subject to the minimum participation requirements; participation in work, education, or training may be at any level.
- ⁹⁴ The child protective services agency has the responsibility for determining child care eligibility for children in the agency's protective care, including foster care.
- ⁹⁵ Though an application is not required of transitional child care families during the six-month transitional period, the families must undergo a child care review at the end of the six-month transitional period in order to be eligible for non-transitional child care.
- ⁹⁶ 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.
- ⁹⁷ 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.
- ⁹⁸ Homeless families can apply for family support child care, a prevention and early intervention service designed to reduce stress for families and their children and promote positive child development. Families qualifying under family support child care do not have to meet activity requirements.
- ⁹⁹ 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.
- ¹⁰⁰ 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.
- ¹⁰¹ 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. The parents/legal guardians' incomes are not required to determine eligibility.
- ¹⁰² Foster care parents are not required to work or participate in education or training activities.
- ¹⁰³ Families receiving transitional child care must be employed, in an approved transitional employment and training activity, or enrolled in an accredited higher education program that leads to a post-secondary credential, showing satisfactory progress.
- ¹⁰⁴ 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.
- ¹⁰⁵ Child care for foster children is not provided under the state's primary child care subsidy program. A foster child may receive CCDF funding if a local department maintains custody of the child, but the child is in the physical custody of his or her parents and the parents need child care in order to maintain employment or to attend an approved education or training program.
- ¹⁰⁶ This state does not have transitional child care.
- ¹⁰⁷ Homeless families are eligible for four months of care with no activity requirements. After this period, they must verify participation in an approved activity.

¹⁰⁸ Families with child protective services cases are eligible for full-time care regardless of income or participation in approved activities. The child must receive child care from a licensed center or licensed family home provider. The family is not required to show the child is legally living in the U.S.

¹⁰⁹ Foster children can receive child care services through the child care program administered by the children's administration. If these families receive child care through the state's primary child care subsidy program, they must meet the same activity requirements as other families.

¹¹⁰ 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.

¹¹¹ Children who are receiving child protective services and reside with the natural or biological parents receive the same services and must meet the same eligibility requirements as all other families served in the program.

¹¹² Foster parents must meet the activity requirement. Income is based on the natural or adoptive parents' income. The eligibility threshold is set at 200 percent of the Federal Poverty Guidelines, rather than the 185 percent used for other families. If the natural or adoptive parent's income exceeds 200 percent of the Federal Poverty Guidelines, the financial eligibility test is then based on the foster parent's income at 185 percent of the Federal Poverty Guidelines.

Table 6. Defining the Family Unit and Income: Treatment of Children and Siblings, 2019 ²

State/Territory*	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	17	Not counted ³
American Samoa	--- ¹	--- ¹	Not counted
Arizona	17	17	Varies/partially counted ⁴
Arkansas	NA ⁵	NA ⁵	Counted at age 18 and older
California	17	18	Not counted
Colorado	17 ⁶	18 ⁷	Not counted
Connecticut	17	17	Not counted
DC	17	21	Not counted
Delaware	17	17	Fully counted
Florida	NA ⁸	NA ⁸	Counted at age 18 and older ⁹
Georgia	17	17	Not counted
Guam	17 ¹⁰	NA ¹¹	Varies/partially counted ¹²
Hawaii	17	17	Varies/partially counted ¹³
Idaho	NA ¹⁴	NA ¹⁴	Counted at age 18 and older
Illinois	20 ¹⁵	20 ¹⁵	Not counted ¹⁶
Indiana	17	17	Not counted
Iowa	17	17	Counted at age 15 and older ¹⁷
Kansas	17	18 ¹⁸	Not counted ¹⁹
Kentucky	18	18	Not counted
Louisiana	18	18	Not counted
Maine	17	17	Varies/partially counted ²⁰
Maryland	17	21	Counted at age 15 and older ²¹
Massachusetts	17	23	Not counted
Michigan	17	17	Varies/partially counted ²²
Minnesota	17	17 ²³	Varies/partially counted ²⁴
Mississippi	17 ²⁵	20 ²⁵	Not counted
Missouri	17	17	Varies/partially counted ⁴
Montana	17 ²⁶	17 ²⁶	Varies/partially counted ²⁷
Nebraska	18	18	Varies/partially counted ²⁸
Nevada	17	18	Varies/partially counted ²⁹
New Hampshire	17	19	Varies/partially counted ³⁰
New Jersey	NA ⁵	NA ⁵	Fully counted
New Mexico	17	18	Not counted
New York	17 ³¹	17 ³¹	Not counted ³²
No. Mariana Islands	17	17	Varies/partially counted ³³
North Carolina	17	18 ³⁴	Not counted
North Dakota	18 ³⁵	18 ³⁵	Not counted ³⁶
Ohio	17	17	Varies/partially counted ³⁷
Oklahoma	17	17	Varies/partially counted ³⁸
Oregon	17	18	Not counted ³⁹
Pennsylvania	17	21	Not counted
Puerto Rico	20	20	Not counted
Rhode Island	17 ⁴⁰	17 ⁴⁰	Not counted

Table 6. Defining the Family Unit and Income: Treatment of Children and Siblings, 2019 ²

State/Territory*	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)
South Carolina	17	20	Counted at age 18 and older ⁴¹
South Dakota	17	18	Not counted
Tennessee	17	18	Varies/partially counted ⁴²
Texas	NA ⁴³	NA ⁴³	Varies/partially counted ⁴⁴
Utah	17	18	Not counted
Vermont	NA ⁴⁵	NA ⁴⁵	Not counted
Virgin Islands	17	18	Not counted
Virginia	17	17	Not counted
Washington	18	18 ⁴⁶	Varies/partially counted ⁴⁷
West Virginia	17	17	Not counted
Wisconsin	17	18	Not counted ⁴⁸
Wyoming	17	18	Not counted

Source: CCDF Policies Database October 1, 2019 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2019 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ Information not found in State's/Territory's manual.

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

³ Only unearned income is counted for children in the home.

⁴ If a child is attending school, his or her income is not counted.

⁵ Children and siblings are counted in the unit as long as they are dependent on the parent or applicant, regardless of age.

⁶ 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 under 18 years old.

⁷ Children of the primary applicant continue to be counted as part of the family unit as long as they are the responsibility of the primary applicant, are under 19 years old, and are still in high school.

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 24 is excluded if they are full-time students in a post-secondary school or its equivalent. Income is based on the child's income only for child-only TANF cases.

¹⁰ 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.

¹¹ A sibling who is still in high school is counted regardless of age.

¹² If a child is under age 18 or attending high school, his or her income is not counted.

¹³ If the child is a student at least half time, his or her earnings are not counted.

¹⁴ Children who are claimed as dependents for tax purposes are included in the unit.

¹⁵ Children under age 21 may be included in the unit if including these individuals would be beneficial for the family, they are dependent on the family for more than 50 percent of their support, and they are full-time students away at school. In order to be counted in the unit, they cannot establish residency outside of the family household.

¹⁶ The earnings of a child under the age of 21 are exempt, unless that child is the applicant.

¹⁷ 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.

- ¹⁸ A child in high school is included through the month of the child's 19th birthday.
- ¹⁹ 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.
- ²⁰ Earned income is not counted if the child is 19 or younger, attending elementary or secondary school, and living with the applicant.
- ²¹ Earnings of a child under age 15 or a child under age 18 who is attending public school are not counted.
- ²² If a child is attending school, including GED completion, his or her earned income is not counted as long as the child is living with someone who provides care or supervision.
- ²³ 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, step-parents, 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.
- ²⁴ The earned income of a full-time student under age 19 is not counted if he or she has not yet earned a high school diploma or GED. The earned income of any child not in school full time between the ages of 6 and 17 is counted. Earned income of children under 6 is not counted.
- ²⁵ A child younger than 21 years old in the home, attending school or with a disability, is considered a dependent and should be counted as a household member.
- ²⁶ Adult siblings, age 18 and over, have the option of being counted as household members.
- ²⁷ The earned income of a dependent child who is attending elementary or high school, regardless of age, is excluded.
- 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 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.
- ³⁰ 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.
- ³¹ Children under age 18 must be included in the unit. Districts 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.
- ³² Districts may elect to include 18, 19, or 20-year-old siblings in the same family unit. The income of siblings aged 18 and over and included in the unit is fully counted.
- ³³ Earnings of minor children who are students at least half time are excluded, even during semester and vacation breaks.
- ³⁴ A sibling is counted if he or she is still in high school and scheduled to graduate before his or her 19th birthday.
- ³⁵ A child is considered 18 through the month of the child's 19th birthday.
- ³⁶ Children's and sibling's unearned income is counted.
- ³⁷ Earnings of a minor child are not counted as long as the child is a full-time student.
- ³⁸ 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.
- ³⁹ Children's and sibling's unearned income is counted.
- ⁴⁰ 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.
- ⁴¹ 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.
- ⁴² Summer or part-time income is not counted if the child or sibling is 24 or younger and in school or training.
- ⁴³ 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.
- ⁴⁴ Income from children in the household who are between the ages of 14 and 19 and attending school is not counted.

⁴⁵ Siblings are counted in the unit as long as a caretaker in the household is legally responsible for them, regardless of age.

⁴⁶ Siblings up to 21 years of age may be included if they are participating in a special education program.

⁴⁷ A child's income is counted if he or she is under legal guardianship.

⁴⁸ Earned income is not counted for dependent minors, defined as children under age 18, or dependent 18-year-olds.

Table 7. Defining the Family Unit and Income: Treatment of Teen Parents, 2019

State/Territory*	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 ¹	Fully counted	Teen, child, parent, and siblings form one unit	Parents/caretakers and minor siblings of the teen parent included
Alaska	17	Fully counted	Varies ²	Only teen parent and child(ren) included
American Samoa	17	Varies/partially counted ³	Varies ⁴	Varies ⁴
Arizona	19 ⁵	Fully counted	Teen, child, parent, and siblings form one unit ⁶	Varies ⁷
Arkansas	20 ⁸	Varies/partially counted ⁹	Teen and child form one unit, and parent and siblings form another ¹⁰	Only teen parent and child(ren) included ¹⁰
California	18 ¹¹	Fully counted	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included
Colorado	20 ¹²	Fully counted	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included
Connecticut	19 ¹³	Fully counted	Varies ¹⁴	Varies ¹⁴
DC	19 ¹⁵	Not counted	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included
Delaware	17	Not counted	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included
Florida	17 ¹⁶	Fully counted	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included
Georgia	20	Varies/partially counted ¹⁷	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included
Guam	18 ¹⁸	Varies/partially counted ¹⁹	Teen, child, parent, and siblings form one unit	Only teen parent and child(ren) included
Hawaii	17 ²⁰	Varies/partially counted ²¹	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
Indiana	17	Fully counted	Teen and child form one unit, and parent and siblings form another	Varies ²²

Table 7. Defining the Family Unit and Income: Treatment of Teen Parents, 2019

State/Territory*	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
Iowa	17	Fully counted	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included
Kansas	19	Fully counted	Teen, child, parent, and siblings form one unit	Varies ²³
Kentucky	19 ²⁴	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 ²⁵	Fully counted	Varies ²⁶	Only teen parent and child(ren) included
Maryland	17	Varies/partially counted ²⁷	Varies ²⁸	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 ²⁹	Varies/partially counted ³⁰	Teen, child, parent, and siblings form one unit	Only teen parent and child(ren) included
Minnesota	18 ³¹	Varies/partially counted ³²	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included
Mississippi	17	Not counted	Varies ³³	Varies ³³
Missouri	17	Varies/partially counted ³	Varies ²	Varies ²
Montana	19	Fully counted	Teen, child, parent, and siblings form one unit	Only teen parent and child(ren) included
Nebraska	18	Fully counted	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included
Nevada	17	Varies/partially counted ³⁴	Teen, child, parent, and siblings form one unit	Parents/caretakers and minor siblings of the teen parent included
New Hampshire	19 ³⁵	Varies/partially counted ³⁶	Teen and child form one unit, and parent and siblings form another ³⁷	Only teen parent and child(ren) included ³⁷
New Jersey	18	Fully counted	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included
New Mexico	19	Fully counted	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included

Table 7. Defining the Family Unit and Income: Treatment of Teen Parents, 2019

State/Territory*	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 York	20	Fully counted	Teen and child form one unit, and parent and siblings form another ³⁸	Only teen parent and child(ren) included ³⁸
No. Mariana Islands	18 ³⁹	Varies/partially counted ⁴⁰	Teen, child, parent, and siblings form one unit	Parents/caretakers and minor siblings of the teen parent included
North Carolina	17	Fully counted	Varies ⁴¹	Only teen parent and child(ren) included
North Dakota	20 ⁴²	Varies/partially counted ⁴²	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 ⁴³	Parents/caretakers of the teen parent included ⁴³
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 ⁴⁴	Varies ⁴⁴	Varies ⁴⁴
Pennsylvania	17	Varies/partially counted ²¹	Varies ²	Only teen parent and child(ren) included
Puerto Rico	20	Not counted	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included
Rhode Island	19	Fully counted	Varies ⁴⁵	Varies ⁴⁵
South Carolina	19 ⁴⁶	Fully counted	Varies ⁴⁷	Varies ⁴⁷
South Dakota	19	Fully counted	Teen and child form one unit, and parent and siblings form another	Only teen parent and child(ren) included
Tennessee	19	Fully counted	Varies ⁴⁸	Varies ⁴⁸
Texas	19 ⁴⁹	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
Virgin Islands	19	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, child, parent, and siblings form one unit	Parents/caretakers of the teen parent included ⁵⁰

Table 7. Defining the Family Unit and Income: Treatment of Teen Parents, 2019

State/Territory*	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
Washington	21 ⁵¹	Fully counted	Teen and child form one unit, and parent and siblings form another ⁵²	Only teen parent and child(ren) included ⁵²
West Virginia	17	Fully counted	Teen and child form one unit, and parent and siblings form another ⁵³	Only teen parent and child(ren) included ⁵³
Wisconsin	19 ⁵⁴	Varies/partially counted ⁵⁵	Teen, child, parent, and siblings form one unit	Parents/caretakers and minor siblings of the teen parent included
Wyoming	17	Fully counted	Varies ⁵⁶	Varies ⁵⁶

Source: CCDF Policies Database October 1, 2019 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2019 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ The maximum age is 18 if the parent remains in high school or its equivalent.

² A minor parent has the option of being considered a separate family unit.

³ If the teen parent is in school, his or her income is not counted.

⁴ The parents of the teen parent may include the teen parent's children in the unit if they have legally adopted the children or if they provide more than 50 percent of the care for the children.

⁵ A minor parent is a parent under age 18. A teen parent is a parent age 13 through 19.

⁶ The policy applies to minor parents who have never been married. When the minor parent is married, separated, or divorced and the siblings of a minor parent receive subsidized child care, the minor parent, spouse, and child form one unit, and the adult parent and siblings form another.

⁷ 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.

⁸ Teen parents must be under age 21 and enrolled in high school or a GED program. Emancipated minors not attending high school or a GED program are treated the same as adult applicants.

⁹ 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.

¹⁰ The policy applies to emancipated minors, who are considered and treated like adult applicants.

¹¹ The maximum age is 17 if the teen parent is not enrolled in high school.

¹² Parents under the age of 21 who enroll in a postsecondary education program are not considered teen parents.

¹³ A minor parent is a parent under age 18. A teen parent is under age 20.

¹⁴ Policies for minor and teen parents vary. Minor parents and their children are included in the same assistance unit as their siblings and adult parents. Teen parents form their own assistance unit.

¹⁵ A teen parent that is 19 years old or younger must either be enrolled and attend a middle school, high school, an equivalent secondary program (e.g. GED program), or college; or enrolled in a verified job search, job training, or work readiness program.

¹⁶ The maximum age applies unless the parent is married or emancipated.

- ¹⁷ Earnings are not counted if the teen parent is under age 18.
- ¹⁸ 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.
- ¹⁹ A teen parent's income is excluded if the teen parent and child reside with the teen's parents, an adult relative, or legal guardian, and the teen parent is attending school.
- ²⁰ 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.
- ²¹ Income is counted if the teen parent is an emancipated minor.
- ²² 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 family unit of their mutual caregiver.
- ²³ 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, but his or her income is not counted. The teen parent's siblings are not included.
- ²⁴ A teen parent is defined as being age 19 or younger and actively seeking a high school diploma or GED.
- ²⁵ The teen parent must reside with his or her child and attend a secondary school or GED equivalency program.
- ²⁶ The family unit composition is decided on a case-by-case basis.
- ²⁷ A disregard of \$5,000 of a family's annual gross income per child is allowed if the minor parent is attending public school full time.
- ²⁸ 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.
- ²⁹ The subsidy recipient must be unmarried and living with his or her adult parents to be considered a minor parent. The adult parent or guardian must be the applicant for the subsidy, not the minor parent. A valid need reason is only required for the minor parent, not the applicant.
- ³⁰ Earnings are not counted if the teen parent is under age 18, attending school, and living with someone who provides care or supervision.
- ³¹ The maximum age is 17 if the parent is not a full-time student in school or training.
- ³² The earned income of a student parent age 19 and under and in school at least half time is not counted.
- ³³ Any teen parent enrolled full time in high school or in a GED program must make an application in his or her own name, as a family unit separate from his or her parent.
- ³⁴ 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.
- ³⁵ 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.
- ³⁶ Income is counted unless the individual is under age 20 and attending high school or its equivalent full time.
- ³⁷ The parents of the minor parent are not included in the unit when the minor parent has legal responsibility for the child.
- ³⁸ Any individuals in the household with legal responsibility for the child are included in the unit with the teenage parent and child.
- ³⁹ The applicant must be unmarried, attending high school or a GED program, and be living with a parent, adult relative, or legal guardian.
- ⁴⁰ Earnings of minor children who are students at least half time are excluded, even during semester and vacation breaks.
- ⁴¹ The teen parent is counted in the adult parent's unit, but the teen parent's child is not.
- ⁴² In order to be eligible for income-excluded child care through age 20, the parent must be enrolled in the Crossroads program, a program to assist with child care costs for parents through age 20 who have primary responsibility for the care of their children and who are in high school or working on their GED. Other teen parents do not receive preferential treatment.

⁴³ 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.

⁴⁴ 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.

⁴⁵ 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.

⁴⁶ 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 or have a notarized emancipation statement from his or her parents 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 age 18 receiving TANF do not have to be emancipated in order to receive child care.

⁴⁷ If the minor is legally emancipated or has a notarized emancipation statement from his or her parents, he or she is counted as a separate unit. If the minor is not emancipated, the minor and parents are counted as one unit.

⁴⁸ The parents of the minor parent are included in the unit but not the siblings. A minor parent under age 18 may be considered a separate household if he or she is legally emancipated.

⁴⁹ A person can be considered a teen parent through age 19 if he or she is attending high school or its equivalent.

⁵⁰ The parent or caretaker of the minor parent is counted as the head of household. Both the adult and the minor parent must participate in an approved activity.

⁵¹ Teen parents in high school or a GED program do not have to meet work requirements through age 21.

⁵² Minor parents without legal custody of their children who live with the legal guardian are not included in the assistance unit.

⁵³ The minor and child form a separate unit as long as the minor parent has legal custody of the child.

⁵⁴ A teen parent is defined as a parent under age 19, or under age 20 if they are enrolled in a high school or GED program.

⁵⁵ All earned income of dependent minors, including teen parents living in the household, is excluded from the financial eligibility test. Teen parents living in a supervised independent living situation and enrolled in high school or an equivalent program and married teen parents who have their own case have their income counted in the financial eligibility test.

⁵⁶ 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.

Table 8. Defining the Family Unit and Income: Treatment of Step-Parents, Non-Parent Partners, and Temporarily Absent Parents, 2019

State/Territory*	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	If the Parent or Caretaker's Partner is Included when Defining the Family Size ³	If a Temporarily Absent Parent is Included when Defining the Family Size	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	Never included ⁴	Always included	Fully counted
Alaska	Always included	Fully counted	The parents and children form one unit	Never included	Varies ⁵	Fully counted
American Samoa	Always included	Fully counted	The parents and children form one unit	--- ¹	--- ¹	--- ¹
Arizona	Always included	Fully counted	The parents and children form one unit	Never included	Varies ⁶	Fully counted
Arkansas	Always included	Fully counted	The parents and children form one unit	Never included	Always included	Fully counted
California	Always included	Fully counted	The parents and children form one unit	Varies ⁷	Varies ⁸	Fully counted
Colorado	Always included	Fully counted	The parents and children form one unit	Varies ⁹	Varies ¹⁰	Fully counted
Connecticut	Always included	Fully counted	The parents and children form one unit	Varies ¹¹	Always included	Fully counted
DC	Always included	Fully counted	The parents and children form one unit	Never included	Never included	NA
Delaware	Always included	Fully counted	The parents and children form one unit	Never included	Varies ¹²	Fully counted
Florida	Always included	Fully counted	The parents and children form one unit	Always included	Varies ¹³	Fully counted
Georgia	Always included	Fully counted	The parents and children form one unit	Never included	Always included	Fully counted ¹⁴
Guam	Always included	Fully counted	The parents and children form one unit	Never included	Never included	NA

Table 8. Defining the Family Unit and Income: Treatment of Step-Parents, Non-Parent Partners, and Temporarily Absent Parents, 2019

State/Territory*	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	If the Parent or Caretaker's Partner is Included when Defining the Family Size ³	If a Temporarily Absent Parent is Included when Defining the Family Size	Treatment of a Temporarily Absent Parent's Earnings (When Included in Family Size)
Hawaii	Always included	Fully counted	The parents and children form one unit	Never included	Varies ¹⁵	Fully counted ¹⁵
Idaho	Always included	Fully counted	The parents and children form one unit	Never included	Always included	Fully counted
Illinois	Always included	Fully counted	The parents and children form one unit	Never included	Varies ¹⁶	Not counted ¹⁶
Indiana	Always included	Fully counted	The parents and children form one unit	Never included	Varies ¹⁷	Fully counted
Iowa	Always included	Fully counted	The parents and children form one unit	Never included	Always included	Fully counted
Kansas	Always included	Fully counted	The parents and children form one unit	Always included	Always included	Fully counted
Kentucky	Always included	Fully counted	The parents and children form one unit	Never included	Varies ¹⁸	Fully counted ¹⁹
Louisiana	Always included	Fully counted	The parents and children form one unit	Always included	Varies ²⁰	Fully counted
Maine	Always included	Fully counted	The parents and children form one unit	Never included	Always included	Fully counted
Maryland	Always included	Fully counted	The parents and children form one unit	Never included	Varies ²¹	Fully counted
Massachusetts	Always included	Fully counted	The parents and children form one unit	Never included	Varies ²²	Fully counted
Michigan	Always included	Fully counted	The parents and children form one unit	Never included	Always included	Fully counted
Minnesota	Always included	Varies/partially counted ²³	The parents and children form one unit	Never included	Always included	Fully counted

Table 8. Defining the Family Unit and Income: Treatment of Step-Parents, Non-Parent Partners, and Temporarily Absent Parents, 2019

State/Territory*	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	If the Parent or Caretaker's Partner is Included when Defining the Family Size ³	If a Temporarily Absent Parent is Included when Defining the Family Size	Treatment of a Temporarily Absent Parent's Earnings (When Included in Family Size)
Mississippi	Always included	Fully counted	The parents and children form one unit	Varies ²⁴	Varies ²⁵	Fully counted
Missouri	Always included	Fully counted	The parents and children form one unit	Never included	Never included	NA ²⁶
Montana	Always included	Fully counted	The parents and children form one unit	Varies ²⁷	Always included ²⁸	Fully counted
Nebraska	Always included	Fully counted	The parents and children form one unit	Never included	Always included	Fully counted
Nevada	Always included	Fully counted	The parents and children form one unit	Always included	Varies ²⁹	Fully counted
New Hampshire	Always included	Fully counted	The parents and children form one unit	Never included	Always included	Fully counted
New Jersey	Varies ³⁰	Fully counted	The parents and children form one unit	Varies ³¹	Always included ³²	Fully counted
New Mexico	Always included	Fully counted	The parents and children form one unit	Never included	Always included ³³	Fully counted ³³
New York	Always included	Fully counted	The parents and children form one unit	Never included	Varies ³⁴	Varies/partially counted ³⁵
No. Mariana Islands	Always included	Fully counted	The parents and children form one unit	Never included	Never included	NA
North Carolina	Always included	Fully counted	Each parent forms one unit with their children	Never included	Always included	Fully counted
North Dakota	Always included	Fully counted	The parents and children form one unit	Never included	Always included	Fully counted
Ohio	Always included	Fully counted	The parents and children form one unit	Never included	Always included	Fully counted

Table 8. Defining the Family Unit and Income: Treatment of Step-Parents, Non-Parent Partners, and Temporarily Absent Parents, 2019

State/Territory*	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	If the Parent or Caretaker's Partner is Included when Defining the Family Size ³	If a Temporarily Absent Parent is Included when Defining the Family Size	Treatment of a Temporarily Absent Parent's Earnings (When Included in Family Size)
Oklahoma	Always included	Fully counted	The parents and children form one unit	Always included ³⁶	Always included	Fully counted
Oregon	Always included	Fully counted	The parents and children form one unit	Never included	Always included	Fully counted
Pennsylvania	Always included	Varies/partially counted ³⁷	The parents and children form one unit	Never included	Varies ³⁸	Fully counted
Puerto Rico	Always included	Fully counted ³⁹	The parents and children form one unit	Never included	Always included	Fully counted
Rhode Island	Always included	Fully counted	The parents and children form one unit	Never included	Always included	Fully counted
South Carolina	Always included	Fully counted	The parents and children form one unit	Never included	Always included	Fully counted
South Dakota	Always included	Fully counted	The parents and children form one unit	Never included	Always included	Varies/partially counted ⁴⁰
Tennessee	Always included	Fully counted	The parents and children form one unit	Never included	Varies ⁴¹	Fully counted
Texas	Always included	Fully counted	The parents and children form one unit	Never included	Varies ³⁸	Fully counted
Utah	Always included	Fully counted	The parents and children form one unit	Never included ⁴	Always included	Fully counted
Vermont	Always included	Fully counted	The parents and children form one unit	Never included	Always included ⁴²	Fully counted
Virgin Islands	Always included	Fully counted	The parents and children form one unit	Never included	Never included	NA
Virginia	Always included	Fully counted	The parents and children form one unit	Always included ⁴³	Always included	Fully counted

Table 8. Defining the Family Unit and Income: Treatment of Step-Parents, Non-Parent Partners, and Temporarily Absent Parents, 2019

State/Territory*	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	If the Parent or Caretaker's Partner is Included when Defining the Family Size ³	If a Temporarily Absent Parent is Included when Defining the Family Size	Treatment of a Temporarily Absent Parent's Earnings (When Included in Family Size)
Washington	Always included	Fully counted	The parents and children form one unit	Never included	Always included ⁴⁴	Fully counted
West Virginia	Always included	Fully counted	The parents and children form one unit	Never included	Always included	Fully counted
Wisconsin	Always included	Fully counted	The parents and children form one unit	Never included	Varies ⁴⁵	Fully counted
Wyoming	Always included	Fully counted	The parents and children form one unit	Never included	Varies ⁴⁶	Fully counted

Source: CCDF Policies Database October 1, 2019 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2019 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ Information not found in State's/Territory'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 For the purposes of the CCDF Policies Database, a parent or caretaker's partner is defined as a person who resides in the household, is not married to the child's parent, is not a parent of the child, and has no children in common with the child's parent. Policies regarding other adults residing in the household, who are not the parent's partner, are captured in Table 10.

⁴ The partner is only included if he or she is a common law spouse.

⁵ A temporarily absent parent who intends to return to the home, is married to the applicant, and is considered a part of the household by the applicant is considered when determining family size. If the temporarily absent parent is incarcerated or the parent will not return home, the absent parent is not considered when determining family size.

⁶ A parent legally married to the applicant and temporarily living outside of the household with the intention of remaining a family must be engaged in an eligible activity in order to be included as a member of the family unit.

⁷ The partner is included in the unit if he or she resides in the home and is responsible for the care and welfare of the child.

⁸ The applicant may choose to include the temporarily absent parent when applying for child care. If the temporarily absent parent is included on the application, he or she must meet work requirements and his or her income is counted.

- ⁹ The significant other is always included if he or she financially contributes to the welfare of the children.
- ¹⁰ Parents who are temporarily absent from the home are included in the unit if they are participating in an eligible activity. If the parent is involuntarily removed from the home, he or she is not counted in the unit.
- ¹¹ The partner is included if the parent or caretaker identifies the partner as a spouse, life partner, or the co-parent of the child.
- ¹² The temporarily absent parent is included in the family size if his or her needs and income are considered together with the household when determining eligibility.
- ¹³ If one parent is temporarily living outside of the home for employment, but the primary residence is with the family receiving services, then that parent is considered part of the family unit.
- ¹⁴ Income is counted for parents absent from the home due to military or work assignments.
- ¹⁵ Parents living temporarily outside the home are included in the unit if they continue to maintain responsibility for the care, education, and financial support of the child.
- ¹⁶ If the parent is absent from the household for 30 days or more due to military service, incarceration, education, or other reasons at the time of eligibility determination, the parent is not included in the assistance unit and his or her earnings are not counted.
- ¹⁷ A parent in the military who is stationed away from the home is considered part of the unit if he or she is married to the parent residing in the home. A parent stationed away from the home is not included in the unit if he or she is not married to the parent residing in the home.
- ¹⁸ A parent that is temporarily absent from the household for 30 days or more due to incarceration or hospitalization is not included in the family unit.
- ¹⁹ 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.
- ²⁰ Parents living temporarily outside the home are included in the unit if they continue to maintain responsibility for the care, education, and financial support of the child. Parents, spouses, and non-legal spouses are not considered temporarily living outside of the home if they establish permanent residence elsewhere.
- ²¹ Parents who are temporarily absent due to military deployment are included in the family unit.
- ²² If the person is considered a member of the household, he or she is included in the family size.
- ²³ The income of a new spouse, in a family receiving child care from the state's TANF program (Minnesota Family Investment Program), does not count towards the family's income for 26 consecutive biweekly periods if the family's income prior to the exemption does not exceed 67 percent of state median income. This exemption begins the second biweekly period after the marriage date.
- ²⁴ Any person living in the household who is financially or legally responsible for the care of the children who need child care is included in the unit.
- ²⁵ Temporarily absent parents are included in the family unit on a case-by-case basis at the caseworker's discretion depending on the reason for their absence.
- ²⁶ 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.
- ²⁷ The parent's significant other has the option of being counted as a household member.
- ²⁸ The temporarily absent parent must be considered part of an intact family (for example, an incarcerated parent).
- ²⁹ A temporarily absent parent is included as a member of the family unit unless the parent is single or incarcerated. If the parent's absence is solely due to being on active duty in a uniformed service, then the parent is included as a member of the family unit.
- ³⁰ If the step-parent is legally responsible for the child, he or she is included in the assistance unit.
- ³¹ The partner is included if he or she is legally responsible for the children.

³² Parents are included in the unit if they are legally responsible for the child.

³³ A temporarily absent parent is included as long as the parent plans to return to the home. Temporary absences may include, but are not limited to, attending school, working, training, or military service.

³⁴ Individuals who are temporarily absent from the home are counted as part of the unit if they are contributing to or are required to contribute to the needs of the household.

³⁵ Income is counted if the individual is contributing or required to contribute to the needs of the household.

³⁶ Non-relative adults living in the home with the natural or adoptive parent are included in the unit when they act in the role of a spouse.

³⁷ 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.

³⁸ Parents who are temporarily absent due to military service are included in the family unit.

³⁹ A step-parent's income is included except in cases where there is a pre-nuptial agreement.

⁴⁰ 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.

⁴¹ A parent that is temporarily absent from the household due to military deployment, either foreign or domestic, is included as a member of the family unit.

⁴² Temporarily absent family members are included in the unit if the family claims financial responsibility for them for tax purposes.

⁴³ The couple must be cohabiting, or living together in an emotional or intimate relationship on a long-term or permanent basis.

⁴⁴ An applicant who is the only parent in the household and is expected to be out of the house for 30 consecutive days is not eligible for care.

⁴⁵ A parent who is incarcerated for 30 days or less is included in the unit. A parent who is incarcerated for 30 days or more is excluded from the unit.

⁴⁶ If a couple is maintaining a residence together, and one parent works out of town part of the week or month, the absent parent is still counted in the household.

Table 9. Defining the Family Unit and Income: Treatment of Non-Parent Caretakers, 2019 ¹

State/Territory*	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 ²	Varies ³	Fully counted	Yes, only legal guardians ²	Varies ⁴	Fully counted
Alaska	Yes, all relative caretakers ⁵	Always included	Fully counted	Yes, all non-relative caretakers ⁵	Always included	Fully counted
American Samoa	Other ⁶	Always included	Varies/partially counted ⁷	Other ⁸	Always included	Varies/partially counted ⁷
Arizona	Yes, all relative caretakers	Varies ⁹	Fully counted ¹⁰	Yes, only legal guardians	Varies ¹¹	Fully counted ¹²
Arkansas	Yes, all relative caretakers ¹³	Always included ¹⁴	Fully counted ¹⁴	Yes, all non-relative caretakers ¹³	Always included ¹⁴	Fully counted ¹⁴
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	Yes, all relative caretakers ¹⁵	Always included	Fully counted	Yes, all non-relative caretakers ¹⁵	Always included	Fully counted
DC	Yes, only legal guardians	Always included ¹⁶	Not counted	Yes, only legal guardians	Always included ¹⁶	Not counted
Delaware	Yes, all relative caretakers ¹⁷	Never included	NA	Yes, only legal guardians	Never included	NA
Florida	Yes, all relative caretakers	Varies ¹⁸	Fully counted ¹⁸	Yes, all non-relative caretakers ¹⁹	Varies ¹⁸	Fully counted ¹⁸
Georgia	Yes, all relative caretakers	Varies ²⁰	Fully counted	Yes, all non-relative caretakers	Varies ²⁰	Fully counted ²⁰
Guam	Yes, all relative caretakers	Always included	Varies/partially counted ²¹	Yes, all non-relative caretakers	Always included	Varies/partially counted ²¹

Table 9. Defining the Family Unit and Income: Treatment of Non-Parent Caretakers, 2019 ¹

State/Territory*	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)
Hawaii	Yes, all relative caretakers	Always included	Varies/partially counted ²²	Yes, all non-relative caretakers	Always included	Varies/partially counted ²²
Idaho	Yes, all relative caretakers ²³	Always included	Fully counted	Yes, all non-relative caretakers ²³	Always included	Varies/partially counted ²⁴
Illinois	Yes, all relative caretakers ²⁵	Always included	Varies/partially counted ²⁶	Yes, only legal guardians	Always included	Fully counted
Indiana	Yes, all relative caretakers	Always included	Fully counted	Yes, all non-relative caretakers	Always included	Varies/partially counted ²⁷
Iowa	Other ²⁸	Never included	NA	Other ²⁸	Never included	NA
Kansas	Yes, all relative caretakers ²⁹	Always included	Varies/partially counted ³⁰	Yes, all non-relative caretakers ²⁹	Always included	Varies/partially counted ³⁰
Kentucky	Yes, all relative caretakers ³¹	Always included	Fully counted	Yes, all non-relative caretakers ³²	Always included	Fully counted
Louisiana	Yes, all relative caretakers ³³	Always included	Fully counted	Yes, all non-relative caretakers ³³	Always included	Fully counted
Maine	Yes, all relative caretakers ²³	Never included ³⁴	NA	Yes, all non-relative caretakers ²³	Never included ³⁴	NA
Maryland	Yes, all relative caretakers	Always included	Varies/partially counted ³⁵	Yes, all non-relative caretakers	Always included	Varies/partially counted ³⁵
Massachusetts	Yes, only legal guardians ³⁶	Always included	Not counted	Yes, only legal guardians ³⁶	Always included	Not counted
Michigan	Yes, all relative caretakers	Varies ³⁷	Fully counted	Other ³⁸	Varies ³⁷	Fully counted
Minnesota	Other ³⁹	Always included	Fully counted ⁴⁰	Yes, only legal guardians	Always included	Fully counted
Mississippi	Yes, all relative caretakers ⁴¹	Always included	Fully counted	Yes, all non-relative caretakers ⁴¹	Always included	Fully counted

Table 9. Defining the Family Unit and Income: Treatment of Non-Parent Caretakers, 2019 ¹

State/Territory*	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)
Missouri	Yes, all relative caretakers	Always included	Fully counted	Yes, only legal guardians	Always included	Fully counted
Montana	Yes, all relative caretakers	Always included ⁴²	Fully counted	Yes, all non-relative caretakers	Always included ⁴²	Fully counted
Nebraska	Yes, all relative caretakers	Always included	Fully counted	Yes, only legal guardians	Always included	Fully counted
Nevada	Other ⁴³	Always included ⁴⁴	Fully counted	Other ⁴³	Always included ⁴⁵	Fully counted
New Hampshire	Yes, all relative caretakers	Always included	Varies/partially counted ⁴⁶	Yes, only legal guardians	Always included	Varies/partially counted ⁴⁶
New Jersey	Yes, only legal guardians	Always included	Fully counted	Yes, only legal guardians	Always included	Fully counted
New Mexico	Other ⁴⁷	Always included	Fully counted	Yes, only legal guardians ⁴⁷	Always included	Fully counted
New York	Yes, all relative caretakers	Varies ⁴⁸	Not counted ⁴⁹	Yes, all non-relative caretakers	Varies ⁴⁸	Not counted ⁴⁹
No. Mariana Islands	Yes, all relative caretakers	Always included ⁴²	Fully counted	Yes, all non-relative caretakers	Always included ⁴²	Fully counted
North Carolina	Yes, all relative caretakers ⁵⁰	Never included	NA	Yes, all non-relative caretakers	Never included	NA
North Dakota	Yes, all relative caretakers	Always included	Fully counted	Yes, all non-relative caretakers ⁵¹	Always included	Fully counted
Ohio	Yes, all relative caretakers ⁵²	Always included	Fully counted	Yes, all non-relative caretakers ⁵²	Always included	Fully counted
Oklahoma	Yes, all relative caretakers	Varies ⁵³	Fully counted	Yes, all non-relative caretakers	Varies ⁵³	Fully counted
Oregon	Yes, all relative caretakers	Always included	Fully counted	Yes, all non-relative caretakers	Always included	Fully counted

Table 9. Defining the Family Unit and Income: Treatment of Non-Parent Caretakers, 2019 ¹

State/Territory*	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)
Pennsylvania	Yes, all relative caretakers	Always included	Fully counted	Yes, all non-relative caretakers	Always included	Fully counted
Puerto Rico	Yes, all relative caretakers ⁵⁴	Always included ⁵⁵	Fully counted	Yes, all non-relative caretakers ⁵⁴	Always included ⁵⁵	Fully counted
Rhode Island	Yes, all relative caretakers ⁵⁶	Always included	Fully counted	Yes, only legal guardians	Always included	Fully counted
South Carolina	Yes, all relative caretakers	Always included ⁵⁷	Fully counted	Yes, all non-relative caretakers	Always included ⁵⁷	Fully counted
South Dakota	Other ⁵⁸	Always included	Not counted	Other ⁵⁸	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 ⁵⁹	Always included ⁵⁹	Fully counted	Yes, all non-relative caretakers ⁵⁹	Always included ⁵⁹	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 ⁶⁰	Varies/partially counted ⁶¹	Yes, all non-relative caretakers	Always included ⁶⁰	Varies/partially counted ⁶¹
Virgin Islands	Yes, only legal guardians	Always included	Fully counted	Yes, only legal guardians	Always included	Fully counted
Virginia	Yes, all relative caretakers ⁶²	Always included	Fully counted	Yes, all non-relative caretakers ⁶²	Always included	Fully counted
Washington	Yes, all relative caretakers	Never included	NA	Other ⁶³	Never included	NA
West Virginia	Yes, all relative caretakers ⁶⁴	Always included ⁶⁵	Fully counted	Yes, all non-relative caretakers ⁶⁴	Always included ⁶⁵	Fully counted

Table 9. Defining the Family Unit and Income: Treatment of Non-Parent Caretakers, 2019 ¹						
State/Territory*	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)
Wisconsin	Yes, all relative caretakers ⁶⁶	Always included	Varies/partially counted ⁶⁷	Yes, all non-relative caretakers ⁶⁶	Always included	Varies/partially counted ⁶⁷
Wyoming	Yes, all relative caretakers	Always included ⁶⁸	Fully counted	Yes, only legal guardians ⁶⁹	Always included ⁶⁸	Fully counted

Source: CCDF Policies Database October 1, 2019 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2019 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

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 The assistance unit consists of a household of minor unmarried children and their parents by blood, marriage, adoption; legal guardians; or adult relatives without legal custody who are standing in loco parentis. Foster parents are not included in the assistance unit, although they are allowed to apply.

³ 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 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.

⁵ Any adult who can demonstrate that he or she effectively has physical custody and financial responsibility for a child needing care can apply. The relationship does not have to be legally established or a blood relationship.

⁶ A non-parent, relative 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.

⁷ The income of a non-parent caretaker is not included if only a foster child or a child in protective services needs care, but it is included if any of the caretaker's own children need care.

⁸ A non-parent, non-relative 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.

- ⁹ 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.
- ¹⁰ If the relative caretaker applies for child care assistance for his or her own children in addition to the related children, his or her income is included.
- ¹¹ 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.
- ¹² 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.
- ¹³ The caretaker must be at least 18 years of age or be emancipated and have full-time physical custody of the child.
- ¹⁴ If a child is in the full-time physical custody of someone other than the parent or guardian due to the parent or guardian being activated for military duty, the adult with power of attorney over the child serves as an authorized representative for the household, and his or her income is disregarded.
- ¹⁵ A non-parent caretaker is allowed to apply when acting in loco parentis. In loco parentis is defined as a person with whom the child lives who is responsible for the day-to-day care and custody of the child.
- ¹⁶ A non-parent caretaker is included in the unit only if guardianship is documented.
- ¹⁷ A relative caretaker is an adult who is by marriage, blood relationship, or court decree the grandparent, great-grandparent, sibling, aunt, or uncle of the child receiving care.
- ¹⁸ Foster parents and caretakers who fall under the relative caregiver category of care are not included in the unit and their income is not counted. Legal guardians and individuals acting in loco parentis are included in the unit and their income is counted.
- ¹⁹ Individuals who are acting in loco parentis may apply, as well as parents by blood, marriage, or adoption.
- ²⁰ Foster parents are not counted in the family size and their income is not counted.
- ²¹ The income of a non-parent caretaker is not counted if the child is receiving child protective services.
- ²² The income of foster parents is not counted.
- ²³ Adults acting in loco parentis are allowed to apply for child care subsidies.
- ²⁴ A foster parent's income is excluded when determining eligibility for a foster child.
- ²⁵ All relative caretakers within the fifth degree of kinship are allowed to apply for child care subsidies. Relatives outside of the first five degrees must have legal guardianship.
- ²⁶ The income of a caretaker relative who is not a parent or step-parent, is employed, is cooperating with child support, 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.
- ²⁷ The income of licensed foster parents is not included.
- ²⁸ 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.
- ²⁹ In cases not involving legal guardianship or custody, if a biological or adoptive parent of a child for whom assistance is requested also resides in the home, that parent must be included in the assistance unit regardless of who claims to be the child's caretaker, unless that parent is not physically or mentally capable of caring for the child (as verified by a qualified professional), or is legally prohibited from caring for the child.
- ³⁰ If the child in need of care receives TANF benefits or SSI, and no other children in the household need child care, the income of the caretaker is not counted.
- ³¹ A parent can be a person acting in loco parentis.

- ³² A non-relative caretaker must show verification of pursuit of legal custody within one year of application.
- ³³ Any adult in the household with primary responsibility for the child's financial support and care is allowed to apply for child care subsidies.
- ³⁴ The child is considered a family of one.
- ³⁵ A disregard of \$5,000 of a family's annual gross income per child is allowed if an adult with physical custody of the child is not the child's parent.
- ³⁶ 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.
- ³⁷ Relative and non-relative caretakers, foster parents, and 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.
- ³⁸ An unrelated adult who is at least age 21 and whose petition for legal guardianship of the child is pending or with whom the department of human services has placed a child, subsequent to a court order identifying the department as responsible for the child's care, may apply for subsidies.
- ³⁹ Relative caretakers who are non-TANF recipients are only eligible for subsidies if they are the child's legal guardian. Relative caretakers who are receiving TANF or are the caregiver for a child receiving a TANF grant are eligible for subsidies.
- ⁴⁰ Relative caretakers who are the caregiver for a child receiving a TANF grant or who are a TANF participant and the caregiver of a child are eligible for subsidies. Relative caretakers who are not the caregiver for a child receiving a TANF grant or a TANF participant and the caregiver of a child are not eligible for subsidies unless they are the child's legal guardian.
- ⁴¹ A parent is defined as a mother or father by blood, marriage, or adoption, a legal guardian, or other person standing in loco parentis.
- ⁴² A person acting in loco parentis is always counted as a household member.
- ⁴³ Any adult with court-ordered custody of the child is allowed to apply for child care subsidies.
- ⁴⁴ An adult with court-ordered custody of the child who is related to the child by blood or marriage is counted in the assistance unit, with the exception of foster parents.
- ⁴⁵ A non-relative adult with court-ordered custody of the child is counted in the assistance unit, with the exception of foster parents and child protective services parents or caregivers.
- ⁴⁶ 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.
- ⁴⁷ Legal guardians and grandparents, in addition to biological or step-parents, are allowed to apply for child care assistance. Grandparents have to be the legal guardians and determined to be providing for the grandchild's physical and emotional needs.
- ⁴⁸ 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.
- ⁴⁹ If the caretaker is receiving either TANF cash assistance or New York State-only cash assistance, then the child is automatically eligible for a child care subsidy and exempt from the copayment regardless of the caretaker's earnings.
- ⁵⁰ The spouse of a non-parent, relative caretaker is included in the family unit.
- ⁵¹ A non-parent, non-relative caretaker is allowed to apply for subsidies if he or she is the child's legal guardian or acting in loco parentis. An individual is considered to be acting in loco parentis when he or she has assumed parental responsibilities and is physically caring for the child in the person's home on a 24-hour-a-day basis and the duration is expected to last over 30 uninterrupted days.
- ⁵² Adults who are standing in loco parentis are permitted to apply for subsidized child care and are included in the assistance unit.
- ⁵³ The caretaker is included if he or she is court-ordered to be legally and financially responsible for the child.

- ⁵⁴ Evidence of temporary or permanent custody must be presented to the family court.
- ⁵⁵ Any person that functions as a parent is considered part of the unit.
- ⁵⁶ Relative caretakers acting in loco parentis are allowed to apply for child care subsidies.
- ⁵⁷ If the caretaker has legal responsibility or has assumed full physical responsibility for the child, he or she is counted in the unit.
- ⁵⁸ 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 and counted in the unit. The caretaker must open and maintain an active child support enforcement case within six months of initial eligibility.
- ⁵⁹ A non-parent caretaker is included in the unit if he or she is responsible for the care and supervision of the children.
- ⁶⁰ Persons who live with, supervise, and care for a child or children whose parents do not live in the home are always included.
- ⁶¹ 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.
- ⁶² Adults acting in loco parentis are allowed to apply for child care subsidies.
- ⁶³ The non-parent, non-relative caretaker must have a written, signed agreement from the parent giving the caretaker custodial responsibility for the child, or the caretaker must receive a TANF grant on behalf of the child in his or her care, in order to apply for child care subsidies.
- ⁶⁴ The non-parent caretaker is allowed to apply for child care subsidies if he or she has been given custody or guardianship of the child by a court or has taken full physical custody and responsibility for the child.
- ⁶⁵ The non-parent caretaker is counted in the unit if he or she has been given custody or guardianship of the child by a court or taken full physical custody and responsibility for the child.
- ⁶⁶ The non-parent caretaker is allowed to apply for child care subsidies if the child is living with the caretaker and the parents are absent from the home.
- ⁶⁷ The financial eligibility test for foster care, subsidized guardianship, interim caretakers, and relatives with court-ordered placement who receive a Kinship Care payment is based on the child's biological or adoptive parent's income tested at 200 percent of the Federal Poverty Guidelines at the time the child was removed from the home. If the biological or adoptive parent's income exceeds 200 percent of the Federal Poverty Guidelines, the financial eligibility test is then based on the caregiver's household income and is tested at 185 percent of the Federal Poverty Guidelines. If the Child Protective Services worker is unable to provide the biological or adoptive parents' income and household size, the child will be considered financially eligible.
- ⁶⁸ The caretaker's spouse is always included in the assistance unit.
- ⁶⁹ A non-relative caretaker must have a court order giving legal responsibility or guardianship.

Table 10. Defining the Family Unit and Income: Treatment of Non-Parent, Non-Caretaker Adults, 2019 ¹

State/Territory*	Treatment of an Adult Relative's		Treatment of an Adult Non-	
	If a Relative Adult Who is Not a Parent or Caretaker is Included when Defining the Family Size	Earnings if the Adult is Not a Parent or Caretaker (When Included in Family Size)	If a Non-Relative Adult Who is Not a Parent or Caretaker is Included when Defining the Family Size	Relative's Earnings if the Adult is Not a Parent or Caretaker (When Included in Family Size)
Alabama	Never included	NA	Never included	NA
Alaska	Never included	NA	Never included	NA
American Samoa	Never included	NA	Never included	NA
Arizona	Varies ²	Fully counted	Never included	NA
Arkansas	Varies ³	Fully counted	Never included	NA
California	Never included ⁴	NA ⁵	Never included ⁴	NA ⁵
Colorado	Never included	NA	Never included	NA
Connecticut	Never included	NA	Never included	NA
DC	Never included	NA	Never included	NA
Delaware	Never included	NA	Never included	NA
Florida	Varies ⁶	Fully counted	Varies ⁷	Fully counted
Georgia	Never included	NA	Never included	NA
Guam	Never included	NA	Never included	NA
Hawaii	Never included	NA	Never included	NA
Idaho	Never included	NA	Never included	NA
Illinois	Varies ⁸	Fully counted ⁸	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 ⁹	Fully counted	Never included	NA
Michigan	Never included	NA	Never included	NA
Minnesota	Never included	NA	Never included	NA

Table 10. Defining the Family Unit and Income: Treatment of Non-Parent, Non-Caretaker Adults, 2019 ¹

State/Territory*	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 Parent or Caretaker is Included when Defining the Family Size	Treatment of an Adult Non-Relative's Earnings if the Adult is Not a Parent or Caretaker (When Included in Family Size)
Mississippi	Never included ¹⁰	NA	Never included ¹⁰	NA
Missouri	Never included	NA	Never included	NA
Montana	Varies ¹¹	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 ¹²	Fully counted	Varies ¹²	Fully counted
New Mexico	Never included	NA	Never included	NA
New York	Never included	NA	Never included	NA
No. Mariana Islands	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 ¹³	NA	Never included ¹³	NA
Oklahoma	Never included	NA	Never included	NA
Oregon	Never included	NA	Never included	NA
Pennsylvania	Never included	NA	Never included	NA
Puerto Rico	Varies ¹⁴	Not counted	Never included	NA
Rhode Island	Never included	NA	Never included	NA
South Carolina	Never included	NA	Varies ¹⁵	Fully counted
South Dakota	Never included	NA	Never included	NA
Tennessee	Never included	NA	Never included	NA
Texas	Varies ¹⁶	Fully counted	Varies ¹⁶	Fully counted
Utah	Never included	NA	Never included	NA
Vermont	Never included	NA	Never included	NA
Virgin Islands	Never included	NA	Never included	NA
Virginia	Never included	NA	Never included	NA

Table 10. Defining the Family Unit and Income: Treatment of Non-Parent, Non-Caretaker Adults, 2019 ¹				
State/Territory*	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 Parent or Caretaker is Included when Defining the Family Size	Treatment of an Adult Non-Relative's Earnings if the Adult is Not a Parent or Caretaker (When Included in Family Size)
Washington	Never included	NA	Never included	NA ¹⁷
West Virginia	Never included	NA	Never included	NA
Wisconsin	Never included	NA	Never included	NA
Wyoming	Never included	NA	Never included	NA

Source: CCDF Policies Database October 1, 2019 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2019 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ 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. Information regarding the parent's partner is not captured here (see Table 8).

² If the adult relative intends to claim a member of the eligible family as a dependent on his or her income tax return, the entire household is counted as one unit.

³ If the adult is a dependent of the parent, he or she may be included in the unit.

⁴ A non-parent, non-caretaker adult is generally not included in the unit. A non-parent, non-caretaker adult is included in the unit if the child resides with a biological or adoptive parent and the non-parent adult, and the non-parent adult has responsibility for the care and welfare of the child (even if not in a formal arrangement).

⁵ If the relative or non-relative adult is included in the unit, his or her earnings are fully counted.

⁶ A family unit includes any additional related adults who reside in the household, who are financially supported by the family, and who are considered part of the family.

⁷ Adult non-relatives may be included in the unit if financially supported by the family, residing in the household, and considered part of the family.

⁸ 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.

⁹ Dependent relatives who reside in the same household may be included in the unit.

¹⁰ A non-parent, non-caretaker adult is generally not included in the unit. The adult may be included in the unit if they are financially or legally responsible for the care of the children who need child care.

¹¹ Adult siblings, age 18 and over, aunts, uncles, grandparents, and great grandparents have the option of being counted as household members.

¹² If the adult is a dependent of the parent, he or she is included in the unit.

¹³ Adults who are standing in loco parentis are permitted to apply for subsidized child care and are included in the assistance unit.

¹⁴ Adults aged 62 and older who live in the home 24 hours per day and adults under 62 years old with disabilities are included.

¹⁵ 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.

¹⁶ If an adult is considered a dependent for income tax purposes, he or she is included in the unit and his or her income is counted.

¹⁷ A TANF grant that a non-relative caretaker receives on behalf of the child in his or her care is considered to be the income of the child and is countable.

Table 11. Treatment of Various Types of Income and Benefits When Determining Eligibility, 2019

State/Territory*	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	Not counted	Not counted
Alaska	Fully counted	Fully counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted
American Samoa	NA ³	NA ⁴	Not counted	Fully counted	Counted for all children in the unit	Not counted ⁵
Arizona	Fully counted	Fully counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted
Arkansas	Varies/partially counted ⁶	Varies/partially counted ⁷	Varies/partially counted ⁸	Fully counted	Not counted	Not counted
California	Fully counted	Not counted	Fully counted	Fully counted	Counted for all children in the unit ⁹	Not counted ¹⁰
Colorado	Not counted	Not counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted ¹⁰
Connecticut	Not counted	Fully counted	Fully counted	Fully counted	Not counted	Not counted
DC	Not counted	Not counted	Not counted	Fully counted	Counted only for CCDF- eligible children	Not counted
Delaware	Not counted	Fully counted	Fully counted	Fully counted ¹¹	Counted for all children in the unit	Not counted
Florida	Fully counted	Varies/partially counted ⁷	Varies/partially counted ⁸	Fully counted	Counted for all children in the unit	NA ¹²
Georgia	Not counted	Not counted	Not counted	Fully counted	Counted for all children in the unit	Not counted
Guam	Fully counted	Fully counted ¹³	Fully 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	Not counted	Fully counted	Fully counted	Fully counted ¹⁴	Counted for all children in the unit ¹⁵	Not counted
Illinois	Fully counted	Fully counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted

Table 11. Treatment of Various Types of Income and Benefits When Determining Eligibility, 2019

State/Territory*	TANF	SSI	SSDI	Net Self-Employment Income	Child Support	Value of SNAP Benefits
Indiana	Fully counted	Fully counted ¹⁶	Fully counted	Fully counted	Counted for all children in the unit	Not counted
Iowa	Fully counted ¹⁷	Fully counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted
Kansas	Not counted	Not counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted
Kentucky	Varies/partially counted ¹⁸	Varies/partially counted ⁷	Fully counted	Fully counted	Counted for all children in the unit	Not counted
Louisiana	Not counted	Fully counted	Fully counted	Fully counted ¹⁹	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	Not counted
Maryland	Not counted	Not counted	Fully counted	Fully counted ²⁰	Counted for all children in the unit ²¹	Not counted
Massachusetts	Varies/partially counted ²²	Fully counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted
Michigan	Not counted	Varies/partially counted ²³	Fully counted	Fully counted	Counted for all children in the unit ²⁴	Not counted
Minnesota	Fully counted ²⁵	Not counted	Fully counted	Fully counted	Counted for all children in the unit ²⁶	Not counted
Mississippi	NA ²⁷	Fully counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted
Missouri	Fully counted	Not counted	Fully counted	Fully counted ²⁸	Counted for all children in the unit	Not counted ¹⁰
Montana	Varies/partially counted ²⁹	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

Table 11. Treatment of Various Types of Income and Benefits When Determining Eligibility, 2019

State/Territory*	TANF	SSI	SSDI	Net Self-Employment Income	Child Support	Value of SNAP Benefits
New Jersey	Fully counted	Fully counted	Fully counted	Fully counted ³⁰	Counted for all children in the unit	Not counted ¹⁰
New Mexico	Fully counted	Fully counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted
New York	Fully counted	Fully counted	Fully counted	Fully counted	Counted for all children in the unit ³¹	Not counted
No. Mariana Islands	NA ³	Not counted	Not counted	Fully counted	Counted for all children in the unit	Not counted ⁵
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 ³²	Counted for all children in the unit	Not counted ³³
Ohio	Fully counted ³⁴	Not counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted
Oklahoma	Not counted ³⁵	Varies/partially counted ³⁶	Fully counted	Fully counted ³⁷	Counted for all children in the unit	Not counted
Oregon	Fully counted ³⁸	Fully counted	Fully counted	Fully counted ³⁹	Counted for all children in the unit	Not counted
Pennsylvania	NA ²⁷	Fully counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted
Puerto Rico	Not counted	Not counted ⁴⁰	Not counted	Fully counted	Not counted	Not counted ⁵
Rhode Island	Not 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	Not counted	Not counted	Fully counted	Fully counted	Not counted	Not counted

Table 11. Treatment of Various Types of Income and Benefits When Determining Eligibility, 2019						
State/Territory*	TANF	SSI	SSDI	Net Self-Employment Income	Child Support	Value of SNAP Benefits
Utah	Not counted	Not counted ⁴¹	Fully counted	Fully counted ⁴²	Counted for all children in the unit ⁴³	Not counted
Vermont	Not counted	Not counted	Not counted	Fully counted	Counted for all children in the unit	Not counted
Virgin Islands	Not counted	Not counted ⁴⁰	Not counted	Fully counted	Counted only for CCDF-eligible children	Not counted
Virginia	Not counted	Not counted	Fully counted	Fully counted	Counted for all children in the unit ⁴⁴	Not counted
Washington	Varies/partially counted ⁴⁵	Fully counted	Fully counted	Fully counted ⁴⁶	Counted for all children in the unit	Not counted
West Virginia	Fully counted	Fully counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted
Wisconsin	Not counted	Varies/partially counted ⁴⁷	Fully counted	Fully counted ⁴⁸	Other ⁴⁹	Not counted
Wyoming	Fully counted	Not counted	Fully counted	Fully counted	Counted for all children in the unit	Not counted

Source: CCDF Policies Database October 1, 2019 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2019 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

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.

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

³ The territory or outlying area does not have a TANF program.

⁴ The territory or outlying area does not have SSI or a similar program.

⁵ The value of nutrition assistance program benefits is not counted.

⁶ 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. If the person is receiving extended support services, income is counted after the first year of receiving extended support services.

⁷ SSI of adults in the household is counted. SSI income of children is not counted.

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

⁹ If financial assistance is provided by the absent parent for housing or car expenses, that income is also counted.

- ¹⁰ Child care for SNAP E&T participants is not provided under the state's primary child care subsidy program.
- ¹¹ 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.
- ¹² Child care for SNAP participants is not provided under the state's primary child care subsidy program.
- ¹³ Income from Old-Age Assistance, Aid to the Blind, and Aid to the Permanently and Totally Disabled is fully counted.
- ¹⁴ A standard deduction is determined by subtracting 50 percent of the gross monthly self-employment income.
- ¹⁵ Child support payments are counted as income. Court-ordered child support payments made by a parent who receives child care benefits are deducted from income when determining eligibility.
- ¹⁶ Lump sum SSI payments are not counted.
- ¹⁷ Families who receive TANF or participate in the state's TANF work program are eligible for child care assistance regardless of income.
- ¹⁸ TANF child-only payments are excluded.
- ¹⁹ Personal, work-related expenses and depreciation are non-allowable deductions from self-employment income.
- ²⁰ For income eligibility determination purposes, a flat 30 percent is subtracted from the annual gross taxable self-employment income amount for business-related expenses.
- ²¹ The first \$2,500 of child support lump sum payments or arrearages are disregarded.
- ²² 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.
- ²³ 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. If the parent applying is receiving SSI, an income determination is not required for any of that parent's children.
- ²⁴ Child support that goes directly to pay a creditor or service supplier, or that is retained by the department, is excluded.
- ²⁵ TANF-funded housing assistance grants are also counted.
- ²⁶ The amount of child support assigned to the state is excluded from the family's income when determining eligibility.
- ²⁷ Eligibility for child care service for TANF parents is determined by the TANF case manager.
- ²⁸ In order to calculate net income, the state deducts allowable business expenses. Allowable expenses vary based on the nature of the self-employment.
- ²⁹ Only TANF cash assistance benefits, not including work support payments, and Tribal TANF benefits are counted.
- ³⁰ Self-employment income is defined as earned income, received directly from one's own business, trade or profession. Self-employment income must be reported to the IRS to be counted. Income and wages are calculated for applicants with self-employment income using a formula based on the gross income reported on the applicant's IRS Form 1040.
- ³¹ Lump sum child support arrears are not counted as income.
- ³² Self-employment income is counted, minus allowable costs of producing the income. The sale of capital items may be considered earned and unearned income. When the total business profit is calculated as a loss, the self-employment income is counted as zero. A loss from self-employment business cannot be used to offset or reduce income from other self-employment or sources such as earned income.
- ³³ Tribal food coupons are also excluded.
- ³⁴ Cash assistance from TANF is counted as income. TANF payments for support services are excluded.

³⁵ Recipients of TANF are predetermined eligible and assigned no copayment.

³⁶ 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.

³⁷ 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.

³⁸ Pre-TANF and post-TANF program payments are excluded.

³⁹ 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.

⁴⁰ Income from Old-Age Assistance, Aid to the Blind, and Aid to the Permanently and Totally Disabled is not counted.

⁴¹ Earned or unearned income of a household member receiving SSI is counted with the exception of the SSI income.

⁴² 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.

⁴³ Child support income for a child in the household and child support arrears for the parent are counted. The first \$50 of child support received by the household is deducted.

⁴⁴ Lump sum child support income is not counted.

⁴⁵ When a TANF client starts a new job, TANF income may be exempted for three months.

⁴⁶ A client may verify itemized deductions or take a standard \$100 monthly deduction.

⁴⁷ SSI payments for adults in the household are included for eligibility and copay purposes, but SSI payments of minor dependents are excluded for eligibility and copay purposes.

⁴⁸ Net earnings are defined as the sum of net earnings reported to the IRS plus depreciation expenses, personal business and entertainment expenses, personal transportation costs, purchases of capital equipment, and payments on the principal of loans.

⁴⁹ Child support is disregarded if the household receives \$1,250 or less per month. If the household receives over \$1,250 per month in child support, the entire amount is counted as income.

Table 12. Treatment of Various Types of Income and Benefits When Determining Eligibility (continued), 2019

State/Territory*	General Assistance ¹	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	NA ²	Not counted	Not counted
Alaska	Varies/partially counted ³	Varies/partially counted ⁴	Not counted	Fully counted ⁵	NA ²	Counted if above \$500	Counted if above \$500
American Samoa	Fully counted	Fully counted	Fully counted	Not counted	NA ²	Fully counted ⁶	Fully counted ⁶
Arizona	Fully counted	Not counted	Not counted	Not counted	NA ²	Varies/partially counted ⁷	Not counted
Arkansas	Fully counted	Not counted	Not counted	Not counted	NA ²	Not counted	Not counted
California	Fully counted	Fully counted	Not counted	Fully counted	Not counted	Varies/partially counted ⁸	Not counted
Colorado	Not counted	Not counted	Not counted	Not counted	Not counted	Fully counted ⁹	Fully counted ⁹
Connecticut	Fully counted	Not counted	Not counted	Not counted ¹⁰	Not counted	Counted if above \$600 yearly	Counted if above \$1,200 yearly
DC	Not counted	Not counted	Not counted	Not counted	Not counted	Not counted	Not counted
Delaware	Fully counted	Not counted	Not counted	Not counted	Not counted	Not counted ¹¹	Not counted
Florida	Fully counted	Not counted	Not counted	Not counted	NA ²	Not counted	Not counted ¹²
Georgia	Not counted	Not counted	Not counted	Not counted	NA ²	Varies/partially counted ¹³	Not counted
Guam	Fully counted	Not counted	Not counted	Not counted	Not counted	Not counted	Fully counted
Hawaii	Fully counted	Not counted	Not counted	Not counted	Not counted	Not counted	Not counted
Idaho	Not counted	Not counted	Not counted	Not counted	NA ²	Not counted	Fully counted
Illinois	Fully counted	Not counted	Not counted	Not counted	Not counted	Varies/partially counted ¹⁴	Varies/partially counted ¹⁵
Indiana	Fully counted	Not counted	Not counted	Not counted	Not counted	Fully counted ¹⁶	Not counted ¹⁷
Iowa	Fully counted	Not counted	Not counted	Fully counted ¹⁸	Not counted	Not counted	Not counted
Kansas	Not counted	Not counted	Not counted	Not counted	Not counted	Not counted ¹⁹	Counted if above \$50 monthly
Kentucky	Fully counted	Not counted	Not counted	Not counted	NA ²	Not counted	Not counted
Louisiana	NA ²⁰	Not counted	Not counted	Not counted	Not counted	Not counted	Not counted
Maine	Fully counted	Not counted	Not counted	Not counted	Fully counted ²¹	Not counted	Not counted
Maryland	Not counted	Not counted	Not counted	Not counted	Not counted	Varies/partially counted ²²	Not counted

Table 12. Treatment of Various Types of Income and Benefits When Determining Eligibility (continued), 2019

State/Territory*	General Assistance ¹	Value of Housing Assistance	LIHEAP	Foster Care Income	State EITC Refunds	Non-Recurring Lump Sum Income	Non-Recurring Gifts
Massachusetts	NA ²⁰	Not counted	Not counted	Not counted	Not counted	Varies/partially counted ²²	Not counted
Michigan	Not counted	Not counted	Not counted	Not counted	Not counted ²³	Fully counted ²⁴	Counted if above \$30 quarterly
Minnesota	Fully counted	Not counted	Not counted	Not counted	Not counted	Varies/partially counted ²⁵	Varies/partially counted ²⁶
Mississippi	Not counted	Not counted	Not counted	Not counted	NA ²	Fully counted ²⁷	Not counted
Missouri	Fully counted	Not counted	Not counted	Not counted	NA ²	Not counted	Varies/partially counted ²⁸
Montana	Varies/partially counted ²⁹	Not counted	Not counted	Not counted	Not counted	Fully counted	Counted if above \$50
Nebraska	Not counted	Not counted	Not counted	Varies/partially counted ³⁰	Not counted	Varies/partially counted ¹⁴	Not counted
Nevada	Fully counted	Not counted	Not counted	Not counted	NA ²	Counted if above \$5,000 ³¹	Varies/partially counted ³²
New Hampshire	Fully counted	Not counted	Not counted	Not counted	NA ²	Not counted	Not counted
New Jersey	Fully counted	Not counted	Not counted	Not counted	Not counted	Varies/partially counted ³³	Not counted
New Mexico	Fully 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
No. Mariana Islands	Fully counted	Not counted	Not counted	Not counted	NA ²	Not counted	Not counted
North Carolina	Not counted	Varies/partially counted ³⁴	Not counted	Not counted	NA ²	Not counted	Not counted
North Dakota	Not counted	Not counted	Not counted	Not counted	NA ²	Not counted ³⁵	Not counted
Ohio	Not counted	Not counted	Not counted	Not counted	Not counted	Not counted ³⁶	Not counted
Oklahoma	Not counted ³⁷	Not counted	Not counted	Not counted	Not counted	Not counted	Counted if above \$30 quarterly ³⁸
Oregon	NA ³⁹	Not counted	Not counted	Not counted	Not counted	Not counted	Not counted
Pennsylvania	Fully counted	Not counted	Not counted	Not counted	NA ²	Counted if above \$100	Counted if above \$100 yearly
Puerto Rico	Not counted	Not counted	Not counted	Not counted	NA ²	Not counted	Not counted
Rhode Island	Fully counted	Not counted	Not counted	Fully counted ⁵	Not counted	Not counted	Not counted

Table 12. Treatment of Various Types of Income and Benefits When Determining Eligibility (continued), 2019							
State/Territory*	General Assistance ¹	Value of Housing Assistance	LIHEAP	Foster Care Income	State EITC Refunds	Non-Recurring Lump Sum Income	Non-Recurring Gifts
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	NA ²	Varies/partially counted ⁴⁰	Not counted
Tennessee	NA ²⁰	Not counted	Not counted	Fully counted	NA ²	Not counted	Not counted
Texas	Not counted	Not counted	Not counted	Not counted	NA ²	Varies/partially counted ⁴¹	Not counted
Utah	Not counted	Varies/partially counted ⁴²	Not counted	Not counted	NA ²	Varies/partially counted ⁴³	Varies/partially counted ⁴⁴
Vermont	Not counted	Not counted	Not counted	Not counted	Not counted	Not counted	Not counted
Virgin Islands	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	NA ²	Varies/partially counted ¹⁴	Not counted ⁵⁰
Wisconsin	Not counted	Not counted	Not counted	Not counted	Not counted	Fully counted ⁵¹	Not counted
Wyoming	Fully counted	Not counted	Not counted	Not counted	NA ²	Fully counted	Counted if above \$50 quarterly

Source: CCDF Policies Database October 1, 2019 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2019 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ General assistance programs are state or locally funded cash assistance programs for low-income families.

² This state, territory, or outlying area does not have a state EITC.

³ When a Native Family Assistance Program (NFAP) benefit is paid directly to a family it is included in the family's monthly countable income as unearned income. If a NFAP benefit is paid to the family's provider it is not counted as income.

⁴ Federal non-cash benefits are excluded. Housing allowances or the fair market value of employer-provided housing are counted.

⁵ Foster care payments are included when the child is included in the assistance unit.

⁶ Money from friends or relatives as well as grants, scholarships, and loans are counted as long as they are not restricted or intended for educational purposes.

⁷ Money received through lottery or gambling is counted.

⁸ The following types of non-recurring lump sum income are not counted in income: loans; 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 types of non-recurring lump sum income 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.

⁹ Income can either be counted in the month it is received or divided over a 12-month period.

¹⁰ Foster children are a separate family unit of one. Their income does not count for the rest of the family.

¹¹ If earned or unearned income differs in the current month, the income from the previous month or the average of the last three months is used, whichever is less.

¹² Cash gifts received regularly are counted as unearned income.

¹³ Cash bonuses and lump sum lottery payments are counted.

¹⁴ Lump sum inheritances or insurance payments are not counted. Other one-time lump sum payments may be counted.

¹⁵ Voluntary contributions from a spouse, other relatives, or non-relatives may be counted if the information is shown in and verified through the state databases used to verify applicants' income.

¹⁶ 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.

¹⁷ Gifts are defined as contributions or money received from a source outside of the family with no intent to repay.

¹⁸ Only relative, non-licensed foster families receive child care through the CCDF program. If a licensed foster parent applies for child care assistance for his or her own children, the parent's foster care income is counted.

¹⁹ Lump sum payments are defined as non-recurring one-time payments and are excluded from income. Income sources such as royalties, trust fund income, or gambling winnings are considered recurring income and are counted.

²⁰ The state does not have general assistance.

²¹ State and local EITC payments are not excluded from income.

²² Lump sum inheritances or insurance payments are not counted. Other lump sum payments are counted.

²³ Advanced payments of the earned income tax credit are also excluded.

²⁴ 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's portion is counted as income.

²⁵ The first \$60 of non-recurring income per quarter is not counted. Non-recurring lump sum income that is earmarked and used for the specific purpose it is intended is not counted. All other lump sum income is counted.

²⁶ The first \$60 of non-recurring income per quarter is not counted. The gift, if cash, 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 cash gifts are counted.

²⁷ Lump sum payments and cash bonuses are considered for income calculation.

²⁸ Gifts and casual income that exceed the state's TANF thresholds for basic needs are included as income.

²⁹ Assistance payments from other states are counted; however, supportive services which are specified in a public assistance program are excluded.

³⁰ If foster parents are applying for child care assistance for their own children and the children in foster care, they may choose to have all of the children placed in one case and assistance unit, and the income of the foster parents and any stipend they receive for the foster children are counted. If they are applying for subsidies only for the foster children or if they choose not to include the foster children in the same case as their own children, their income and any stipend they receive for the foster children are not counted.

³¹ Lump sum payments of \$5,000 or less received from a single source in a month are disregarded. Any portion in excess of \$5,000 is counted as income.

³² Cash gifts are not counted if they are given voluntarily without payment in return and are received too irregularly to be reasonably anticipated. A cash contribution that is given to the household from someone not living in the home is counted unless the contribution is payment to the family's child care provider. The cash contribution is not counted if it is made for common household expenses by an individual living in the home who is not in the family unit.

³³ The income is averaged over the same time period used to calculate income. For lump sum payments of past due child support, there is a 30 percent disregard for the first child and a 20 percent disregard for the second child.

³⁴ 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.

³⁵ Lump sum income is defined as non-recurring lump sum unearned payments including, but not limited to, retroactive lump sum social security, SSI or pension benefits; retroactive unemployment benefits; retroactive TANF; retroactive veteran's benefits; retroactive workforce safety and insurance; insurance settlements; and severance pay.

³⁶ 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, retention, and contingency payments not defined as cash assistance.

³⁷ Recipients of public assistance payments are predetermined eligible and assigned no copayment.

³⁸ Income received irregularly but in excess of \$30 per quarter is considered income unless it is from an excluded income source.

³⁹ The state does not currently fund general assistance. When general assistance is funded, the payments are counted as unearned income.

⁴⁰ Non-recurring lump sum payments are considered unearned income sources. This income is divided over the number of months since the date of receipt, up to 12 months, to determine the total countable income of the sum. Lump sums that were received more than 12 months prior to the time of application are not considered toward eligibility.

⁴¹ One time cash payments, insurance payments, gifts, and lump sum inheritances are excluded. Other lump sum earnings such as a bonus are considered if there is any expectation of future repetition.

⁴² If a veteran is a student and receives a monthly housing allowance, this is counted as income.

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. Funds released from crowd funding accounts are counted in the month they are received.

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 13. Income Disregards When Determining Eligibility, 2019

State/Territory*	Amount of Monthly Earned Income Disregard	Amount of Child Support Paid Outside of Household that is Deducted
Alabama	\$0	None
Alaska	\$0	All ¹
American Samoa	\$0	None
Arizona	\$0	All
Arkansas	\$0	None
California	\$0	All
Colorado	\$0	All ²
Connecticut	\$0	All
DC	\$0	All
Delaware	\$0	None
Florida	\$0	All ³
Georgia	\$0	None
Guam	\$0	None
Hawaii	\$0	None
Idaho	\$0	All
Illinois	\$0	All
Indiana	\$0	None
Iowa	\$0	None
Kansas	\$0	None
Kentucky	\$0	All ⁴
Louisiana	\$0	None
Maine	\$0	All
Maryland	\$0 ⁵	All
Massachusetts	\$0	All
Michigan	\$0	None
Minnesota	\$0	All
Mississippi	\$0	None
Missouri	\$0 ⁶	None
Montana	\$0	All
Nebraska	\$0 ⁷	None
Nevada	\$0	All
New Hampshire	\$0	None
New Jersey	\$0	None
New Mexico	\$0	None
New York	\$0	None
No. Mariana Islands	\$0	None
North Carolina	\$0	All
North Dakota	\$0 ⁸	All ⁹
Ohio	\$0	All
Oklahoma	\$0	All ¹⁰
Oregon	\$0	None

Table 13. Income Disregards When Determining Eligibility, 2019

State/Territory*	Amount of Monthly Earned Income Disregard	Amount of Child Support Paid Outside of Household that is Deducted
Pennsylvania	\$0	All
Puerto Rico	\$0 ¹¹	None
Rhode Island	\$0	None
South Carolina	\$0	None
South Dakota	4% ¹²	All
Tennessee	\$0	All
Texas	\$0	None
Utah	\$100 ¹³	All
Vermont	\$0	All
Virgin Islands	\$0 ¹⁴	None
Virginia	\$0 ¹⁵	All
Washington	\$0	All
West Virginia	\$0	None
Wisconsin	\$0	None
Wyoming	\$200 ¹⁶	All ¹⁷

Source: CCDF Policies Database October 1, 2019 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2019 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ Legally obligated child support payments are deducted from income. In order for the payments to be deducted, the family must verify the legal obligation and that the payments are being made.

² The child support deducted from income must not be arrears payments.

³ 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.

⁴ Only legally obligated child support paid out is deductible and only up to the maximum amount ordered.

⁵ A disregard of \$5,000 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.

⁶ Any monthly medical insurance premium for physician, vision, dental, or cancer insurance, medical supplement policies, or nursing care is deducted from income.

⁷ Ten percent of earned income is disregarded for families who have been receiving subsidies for at least a year.

⁸ All income earned as a temporary employee of the U.S. Census Bureau is disregarded.

⁹ Child support and spousal support paid to someone outside the household is deducted.

¹⁰ The child support deducted must be court ordered.

¹¹ There is a \$150 monthly discount for residents of Vieques and Culebra Municipalities.

¹² Gross income is adjusted with a four 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.

¹³ If both parents in the household are working, the family receives an additional \$100 income disregard for the second working parent and potentially qualifies for lower copayment amounts. Families also automatically receive an additional \$100 disregard for medical expenses.

¹⁴ 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.

¹⁵ Earnings of less than \$25 per month are disregarded.

¹⁶ There is a \$200 income disregard for each working adult whose income is used in determining eligibility.

¹⁷ The parent must have official documentation for child support paid in the state of Wyoming for the deduction to apply.

Table 14. Maximum Monthly Countable Income to Initially Qualify for CCDF Subsidies, 2019 ¹

State/Territory*	Threshold for Family Size 1	Threshold for Family Size 2	Threshold for Family Size 3	Threshold for Family Size 4	Threshold for Family Size 5
Alabama	NA	1,832	2,311	2,790	3,268
Alaska	NA	4,205	5,156	6,107	7,058
American Samoa	2,431	3,179	3,927	4,675	5,423
Arizona	1,718	2,327	2,934	3,541	4,150
Arkansas	NA	2,955	3,650	4,346	5,041
California	5,343	5,343	5,802	6,719	7,794
Colorado ²	NA	3,171	3,999	4,828	5,657
Connecticut	2,511	3,284	4,057	4,830	5,603
DC	2,602	3,523	4,444	5,365	6,285
Delaware	1,926	2,609	3,289	3,970	4,653
Florida	1,561	2,114	2,666	3,219	3,771
Georgia	1,586	2,074	2,562	3,050	3,538
Guam	1,741	2,277	2,812	3,348	3,884
Hawaii	2,431	3,179	3,927	4,675	5,423
Idaho	1,354	1,832	2,311	2,790	3,269
Illinois	NA	2,819	3,555	4,292	5,029
Indiana	1,322	1,790	2,257	2,725	3,193
Iowa ³	1,510	2,044	2,578	3,112	3,646
Kansas	NA	2,607	3,289	3,970	4,651
Kentucky	NA	2,195	2,771	3,347	3,923
Louisiana	NA	2,403	2,884	3,433	3,983
Maine	2,992	3,913	4,833	5,754	6,675
Maryland	NA	4,053	5,007	5,960	6,914
Massachusetts ⁴	NA	3,393	4,191	4,989	5,788
Michigan	1,307	1,759	2,213	2,665	3,117
Minnesota	NA	2,662	3,288	3,914	4,540
Mississippi	NA	2,947	3,640	4,334	5,027
Missouri	1,437	1,944	2,454	2,961	3,469
Montana	NA	2,114	2,666	3,219	3,771
Nebraska	NA	1,832	2,311	2,790	3,268
Nevada	1,486	1,978	2,471	2,964	3,456
New Hampshire	2,290	3,101	3,911	4,721	5,532
New Jersey	2,082	2,818	3,555	4,292	5,028
New Mexico	NA	2,818	3,555	4,292	5,028
New York	2,082	2,818	3,555	4,292	5,028
No. Mariana Islands	1,884	1,884	2,192	3,224	3,798
North Carolina ⁵	2,082	2,818	3,555	4,292	5,028
North Dakota	2,529	3,307	4,085	4,863	5,641
Ohio	NA	1,832	2,311	2,790	3,269
Oklahoma	2,560	3,400	4,200	4,999	5,799
Oregon	NA	2,607	3,288	3,970	4,651
Pennsylvania	2,082	2,818	3,555	4,292	5,028

Table 14. Maximum Monthly Countable Income to Initially Qualify for CCDF Subsidies, 2019 ¹

State/Territory*	Threshold for Family Size 1	Threshold for Family Size 2	Threshold for Family Size 3	Threshold for Family Size 4	Threshold for Family Size 5
Puerto Rico	834	1,128	1,423	1,718	2,012
Rhode Island	NA	2,537	3,200	3,863	4,526
South Carolina	1,749	2,288	2,826	3,364	3,902
South Dakota	NA	2,945	3,716	4,485	5,254
Tennessee ⁶	NA	2,368	2,926	3,483	4,040
Texas ⁷	NA	2,818	3,555	4,292	5,028
Utah ⁸	NA	2,620	3,236	3,853	4,469
Vermont	5,333	5,333	5,333	6,438	7,543
Virgin Islands	NA	2,406	2,506	2,606	2,707
Virginia ⁹	1,926	2,607	3,289	3,970	4,652
Washington	2,082	2,818	3,556	4,292	5,028
West Virginia	1,561	2,114	2,666	3,219	3,771
Wisconsin ¹⁰	NA	2,607	3,288	3,970	4,651
Wyoming	1,821	2,466	3,111	3,755	4,400

Source: CCDF Policies Database October 1, 2019 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2019 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

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. The thresholds shown here apply to families who do not have additional special circumstances (they do not receive TANF or transitional child care and do not have children with special needs); this table does not capture eligibility threshold differences between various eligibility groups, but this additional detail can be found in the full CCDF Policies Database. Amounts are rounded to the nearest whole dollar.

² Policy coded for Denver. The initial income eligibility threshold is set by the state department for each county and cannot be set below 185 percent of the Federal Poverty Guidelines.

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 Families requiring care for children with special needs use a different set of eligibility thresholds.

⁵ Families requiring care for children with special needs use a different set of eligibility thresholds. The initial eligibility thresholds for non-school-age children (children through age five) and children of all ages with special needs are set at 200 percent of the Federal Poverty Guidelines.

⁶ Income thresholds are set at 60 percent of state median income. However, applicants who are working or in post-secondary education and have children who are six weeks through five years of age may qualify for the state's Smart Steps Child Care program with income up to 85 percent of state median income.

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

⁸ The thresholds used at initial eligibility are higher for children with special needs.

⁹ Group III includes the following localities: Alexandria, Arlington, Clarke, Culpepper, Fairfax, Fauquier, Fredericksburg, King George, Loudon, Manassas, Prince William, Spotsylvania, Stafford, and Warren. Across Virginia, eligibility thresholds range from 150 to 250 percent of the Federal Poverty Guidelines. Group III's eligibility thresholds are set at 185 percent of the Federal Poverty Guidelines, except for families residing in Fairfax and Alexandria, who are eligible at up to 250 percent of the Federal Poverty Guidelines. If the subsidy applicant is an individual who is not financially responsible for the child under Virginia law, income eligibility is determined by measuring the family unit's countable gross monthly income and family size against 250 percent of the Federal Poverty Guidelines.

¹⁰ Family income cannot exceed 185 percent of the Federal Poverty Guidelines, unless the family is providing foster care, subsidized guardianship, or court-ordered kinship care while receiving the kinship benefit, in which case the natural or adoptive family's gross family income cannot exceed 200 percent of the Federal Poverty Guidelines at the time of the child's placement.

Table 15. Maximum Monthly Countable Income to Continue Receiving CCDF Subsidies During the Eligibility Period, 2019 ¹

State/Territory*	If Thresholds Vary from Those Used for Initial Eligibility	If Thresholds Vary from Those Used at Redetermination	Threshold for Family Size 1	Threshold for Family Size 2	Threshold for Family Size 3	Threshold for Family Size 4	Threshold for Family Size 5
Alabama	Yes	No	NA	3,536	4,368	5,200	6,032
Alaska	No	No	NA	4,205	5,156	6,107	7,058
American Samoa	No	No	2,431	3,179	3,927	4,675	5,423
Arizona	Yes	No	2,777	3,632	4,486	5,339	6,194
Arkansas	No	No	NA	2,955	3,650	4,346	5,041
California	No	No	5,343	5,343	5,802	6,719	7,794
Colorado ²	Yes	No	NA	4,602	5,685	6,768	7,851
Connecticut	Yes	Yes	4,270	5,584	6,897	8,211	9,525
DC ³	Yes	No	3,874	5,066	6,258	7,450	8,642
Delaware	Yes	Yes	3,496	4,572	5,647	6,723	7,779
Florida	Yes	No	2,582	3,376	4,171	4,965	5,759
Georgia	Yes	No	2,696	3,526	4,356	5,185	6,015
Guam	No	No	1,741	2,277	2,812	3,348	3,884
Hawaii	No	No	2,431	3,179	3,927	4,675	5,423
Idaho	Yes	No	2,537	3,387	4,184	4,981	5,778
Illinois	Yes	Yes	NA	4,307	5,320	6,333	7,346
Indiana	Yes	No	2,802	3,664	4,526	5,388	6,250
Iowa ⁴	Yes	No	3,089	4,039	4,989	5,940	6,890
Kansas	Yes	No	NA	3,896	4,812	5,729	6,645
Kentucky	Yes	Yes	NA	4,294	4,808	6,072	6,772
Louisiana	Yes	No	NA	3,608	4,457	5,306	6,155
Maine	No	No	2,992	3,913	4,833	5,754	6,675
Maryland	Yes	No	NA	5,300	6,547	7,794	9,041
Massachusetts ⁵	Yes	No	NA	5,768	7,125	8,482	9,839
Michigan	Yes	No	2,913	3,809	4,705	5,601	6,497
Minnesota	Yes	Yes	NA	4,814	5,946	7,079	8,211
Mississippi	No	No	NA	2,947	3,640	4,334	5,027
Missouri	Yes	No	2,238	3,029	3,823	4,614	5,405
Montana	Yes	No	NA	2,607	3,288	3,970	4,651

Table 15. Maximum Monthly Countable Income to Continue Receiving CCDF Subsidies During the Eligibility Period, 2019 ¹

State/Territory*	If Thresholds Vary from Those Used for Initial Eligibility	If Thresholds Vary from Those Used at Redetermination	Threshold for Family Size 1	Threshold for Family Size 2	Threshold for Family Size 3	Threshold for Family Size 4	Threshold for Family Size 5
Nebraska ⁶	Yes	Yes	NA	4,146	5,122	6,097	7,073
Nevada	Yes	No	2,813	3,678	4,544	5,409	6,275
New Hampshire	Yes	Yes	3,891	5,088	6,286	7,483	8,680
New Jersey	Yes	No	4,726	5,688	7,166	8,675	9,270
New Mexico	Yes	No	NA	3,523	4,444	5,365	6,285
New York	No	No	2,082	2,818	3,555	4,292	5,028
No. Mariana Islands	No	No	1,884	1,884	2,192	3,224	3,798
North Carolina	Yes	No	2,826	3,695	4,565	5,435	6,304
North Dakota	Yes	No	3,583	4,685	5,787	6,889	7,992
Ohio	Yes	No	NA	4,228	5,333	6,438	7,543
Oklahoma	No	No	2,560	3,400	4,200	4,999	5,799
Oregon	Yes	No	NA	3,924	4,847	5,770	6,693
Pennsylvania	Yes	Yes	3,263	4,267	5,271	6,275	7,279
Puerto Rico	No	No	834	1,128	1,423	1,718	2,012
Rhode Island	Yes	No	NA	3,171	3,999	4,828	5,657
South Carolina	Yes	No	2,704	3,535	4,367	5,199	6,031
South Dakota	Yes	No	NA	4,005	4,947	5,889	6,832
Tennessee	No	No	NA	2,368	2,926	3,483	4,040
Texas ⁷	Yes	No	NA	3,775	4,663	5,552	6,440
Utah	Yes	Yes	NA	3,712	4,585	5,458	6,332
Vermont ⁸	No	Yes	5,333	5,333	5,333	6,438	7,543
Virgin Islands	No	No	NA	2,406	2,506	2,606	2,707
Virginia ⁹	Yes	No	3,701	4,839	5,978	7,117	8,255
Washington	Yes	Yes	3,380	4,420	5,460	6,500	7,540
West Virginia	Yes	No	1,926	2,607	3,288	3,970	4,651
Wisconsin	Yes	No	NA	4,242	5,241	6,239	7,237
Wyoming	Yes	No	2,342	3,171	3,999	4,828	5,657

Source: CCDF Policies Database October 1, 2019 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2019 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

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. The thresholds shown here apply to families who do not have additional special circumstances (they do not receive TANF or transitional child care and do not have children with special needs); this table does not capture eligibility threshold differences between various eligibility groups, but this additional detail can be found in the full CCDF Policies Database. Amounts are rounded to the nearest whole dollar.

² Policy coded for Denver.

³ Continuing eligibility thresholds are set at 85 percent of the state median income. At redetermination, if the family's income exceeds 85 percent of the state median income, the family will receive a graduated phase-out period of three months. If the family's income is less than 85 percent of the state median income at the end of the three-month graduated phase-out period then they will continue to receive assistance until their next scheduled redetermination.

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 Families requiring care for children with special needs use a different set of eligibility thresholds.

⁶ Once a family is determined eligible and child care is authorized, they will remain eligible for care through the remainder of the eligibility period as long as their income is below 85 percent of state median income. At redetermination, if the family's income does not exceed 185 percent of the Federal Poverty Guidelines, the family will receive a graduated phase-out period of 12 months.

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

⁸ The threshold for family size three is greater at redetermination than at initial eligibility or during the eligibility period.

⁹ Group III includes the following localities: Alexandria, Arlington, Clarke, Culpepper, Fairfax, Fauquier, Fredericksburg, King George, Loudon, Manassas, Prince William, Spotsylvania, Stafford, and Warren.

Table 16. Maximum Monthly Countable Income to Continue Receiving CCDF Subsidies at Redetermination, 2019 ¹

State/Territory*	If Thresholds Vary from Those Used for Initial Eligibility	If Thresholds Vary from Those Used During Eligibility Period	Threshold for Family Size 1	Threshold for Family Size 2	Threshold for Family Size 3	Threshold for Family Size 4	Threshold for Family Size 5
Alabama ²	Yes	No	NA	3,536	4,368	5,200	6,032
Alaska	No	No	NA	4,205	5,156	6,107	7,058
American Samoa	No	No	2,431	3,179	3,927	4,675	5,423
Arizona	Yes	No	2,777	3,632	4,486	5,339	6,194
Arkansas	No	No	NA	2,955	3,650	4,346	5,041
California	No	No	5,343	5,343	5,802	6,719	7,794
Colorado ³	Yes	No	NA	4,602	5,685	6,768	7,851
Connecticut	Yes	Yes	3,265	4,270	5,274	6,279	7,284
DC ⁴	Yes	No	3,874	5,066	6,258	7,450	8,642
Delaware	Yes	Yes	2,082	2,820	3,556	4,292	5,030
Florida	Yes	No	2,582	3,376	4,171	4,965	5,759
Georgia	Yes	No	2,696	3,526	4,356	5,185	6,015
Guam	No	No	1,741	2,277	2,812	3,348	3,884
Hawaii	No	No	2,431	3,179	3,927	4,675	5,423
Idaho ⁵	Yes	No	2,537	3,387	4,184	4,981	5,778
Illinois ⁶	Yes	Yes	NA	3,171	4,000	4,829	5,657
Indiana	Yes	No	2,802	3,664	4,526	5,388	6,250
Iowa ⁷	Yes	No	3,089	4,039	4,989	5,940	6,890
Kansas	Yes	No	NA	3,896	4,812	5,729	6,645
Kentucky	Yes	Yes	NA	2,743	3,463	4,183	4,903
Louisiana ⁸	Yes	No	NA	3,608	4,457	5,306	6,155
Maine	No	No	2,992	3,913	4,833	5,754	6,675
Maryland	Yes	No	NA	5,300	6,547	7,794	9,041
Massachusetts ⁹	Yes	No	NA	5,768	7,125	8,482	9,839
Michigan	Yes	No	2,913	3,809	4,705	5,601	6,497
Minnesota	Yes	Yes	NA	3,794	4,687	5,580	6,473
Mississippi	No	No	NA	2,947	3,640	4,334	5,027
Missouri	Yes	No	2,238	3,029	3,823	4,614	5,405
Montana ¹⁰	Yes	No	NA	2,607	3,288	3,970	4,651

Table 16. Maximum Monthly Countable Income to Continue Receiving CCDF Subsidies at Redetermination, 2019 ¹

State/Territory*	If Thresholds Vary from Those Used for Initial Eligibility	If Thresholds Vary from Those Used During Eligibility Period	Threshold for Family Size 1	Threshold for Family Size 2	Threshold for Family Size 3	Threshold for Family Size 4	Threshold for Family Size 5
Nebraska ¹¹	Yes	Yes	NA	2,607	3,288	3,970	4,651
Nevada	Yes	No	2,813	3,678	4,544	5,409	6,275
New Hampshire	Yes	Yes	2,603	3,523	4,444	5,365	6,286
New Jersey ¹²	Yes	No	4,726	5,688	7,166	8,675	9,270
New Mexico	Yes	No	NA	3,523	4,444	5,365	6,285
New York	No	No	2,082	2,818	3,555	4,292	5,028
No. Mariana Islands	No	No	1,884	1,884	2,192	3,224	3,798
North Carolina ¹³	Yes	No	2,826	3,695	4,565	5,435	6,304
North Dakota	Yes	No	3,583	4,685	5,787	6,889	7,992
Ohio	Yes	No	NA	4,228	5,333	6,438	7,543
Oklahoma	No	No	2,560	3,400	4,200	4,999	5,799
Oregon	Yes	No	NA	3,924	4,847	5,770	6,693
Pennsylvania	Yes	Yes	2,446	3,312	4,177	5,043	5,908
Puerto Rico ¹⁴	No	No	834	1,128	1,423	1,718	2,012
Rhode Island	Yes	No	NA	3,171	3,999	4,828	5,657
South Carolina	Yes	No	2,704	3,535	4,367	5,199	6,031
South Dakota	Yes	No	NA	4,005	4,947	5,889	6,832
Tennessee	No	No	NA	2,368	2,926	3,483	4,040
Texas ¹⁵	Yes	No	NA	3,775	4,663	5,552	6,440
Utah ¹⁶	Yes	Yes	NA	3,275	4,045	4,816	5,587
Vermont ¹⁷	Yes	Yes	5,333	5,333	5,401	6,438	7,543
Virgin Islands	No	No	NA	2,406	2,506	2,606	2,707
Virginia ¹⁸	Yes	No	3,701	4,839	5,978	7,117	8,255
Washington ¹⁹	Yes	Yes	2,289	3,099	3,911	4,720	5,530
West Virginia	Yes	No	1,926	2,607	3,288	3,970	4,651
Wisconsin	Yes	No	NA	4,242	5,241	6,239	7,237
Wyoming	Yes	No	2,342	3,171	3,999	4,828	5,657

Source: CCDF Policies Database October 1, 2019 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2019 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

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. The thresholds shown here apply to families who do not have additional special circumstances (they do not receive TANF or transitional child care and do not have children with special needs); this table does not capture eligibility threshold differences between various eligibility groups, but this additional detail can be found in the full CCDF Policies Database. Amounts are rounded to the nearest whole dollar.

² Eligibility thresholds at redetermination are set at 85 percent of the state median income. At redetermination, if a family's income is above 85 percent of the state median income, they can receive three months of services at the maximum copay as a graduated phase out.

³ Policy coded for Denver.

⁴ Continuing eligibility thresholds are set at 85 percent of the state median income. At redetermination, if the family's income exceeds 85 percent of the state median income, the family will receive a graduated phase-out period of three months. If the family's income is less than 85 percent of the state median income at the end of the three-month graduated phase-out period then they will continue to receive assistance until their next scheduled redetermination.

⁵ If at the time of redetermination, a family's income exceeds 150 percent of the Federal Poverty Guidelines but is below 85 percent of the state median income, the family will continue to receive benefits for 12 months.

⁶ Eligibility thresholds at redetermination are set at 225 percent of the Federal Poverty Guidelines. Families with incomes above 225 percent of the Federal Poverty Guidelines and below 85 percent of the state median income will receive graduated phase-out period of three months.

⁷ 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.

⁸ At redetermination, if the family's income exceeds 55 percent of the state median income, but is below 85 percent of the state median income, the family will receive a graduated phase-out period of 12 months.

⁹ Families requiring care for children with special needs use a different set of eligibility thresholds.

¹⁰ Families with income between 150 and 185 percent of the Federal Poverty Guidelines are eligible for a twelve-month eligibility period.

¹¹ Once a family is determined eligible and child care is authorized, they will remain eligible for care through the remainder of the eligibility period as long as their income is below 85 percent of state median income. At redetermination, if the family's income does not exceed 185 percent of the Federal Poverty Guidelines, the family will receive a graduated phase-out period of 12 months.

¹² Families with income exceeding 250 percent of the Federal Poverty Guidelines but less than 85 percent of state median income at redetermination can qualify for one additional year of graduated phase-out assistance. This period of assistance can only be granted once.

¹³ If the family's income is above 200 percent of the Federal Poverty Guidelines but below 85 percent of the state median income, the family will be given a graduated phase-out period of 12 months at redetermination.

¹⁴ At redetermination, families may be eligible for three additional months if their income exceeds 85 percent of the state median income.

¹⁵ Policy coded for the Gulf Coast Region. Local boards have the authority to establish eligibility thresholds as a percent of either the Federal Poverty Guidelines or the state median income, but not to exceed 85 percent of state median income.

¹⁶ The thresholds used at redetermination are higher for children with special needs.

¹⁷ The threshold for family size three is greater at redetermination than at initial eligibility or during the eligibility period.

¹⁸ Group III includes the following localities: Alexandria, Arlington, Clarke, Culpepper, Fairfax, Fauquier, Fredericksburg, King George, Loudon, Manassas, Prince William, Spotsylvania, Stafford, and Warren. Across Virginia, eligibility thresholds range from 150 to 250 percent of the Federal Poverty Guidelines.

¹⁹ At redetermination, if the family's income exceeds 200 percent of the Federal Poverty Guidelines, but is below 220 percent of the Federal Poverty Guidelines, the family will receive a graduated phase-out period of 12 months.

Table 17. Assets Test, 2019 ¹

State/Territory*	Maximum Countable Assets	Exempted Value of a Vehicle
Alabama	\$1,000,000	Entire value of all vehicles
Alaska	\$1,000,000	No exemption
American Samoa	No limit	NA
Arizona	\$1,000,000	No exemption
Arkansas	\$1,000,000	No exemption
California	\$1,000,000	No exemption
Colorado	\$1,000,000 ²	Entire value of one vehicle ³
Connecticut	\$1,000,000	No exemption
DC	\$1,000,000	No exemption
Delaware	\$1,000,000	No exemption
Florida	\$1,000,000	No exemption
Georgia	\$1,000,000	No exemption
Guam	\$1,000,000	No exemption
Hawaii	\$1,000,000	No exemption
Idaho	\$1,000,000	No exemption
Illinois	\$1,000,000	Entire value of all vehicles
Indiana	\$1,000,000 ⁴	No exemption
Iowa	\$1,000,000	No exemption
Kansas	\$10,000 ⁵	Entire value of one vehicle ⁶
Kentucky	\$1,000,000	No exemption
Louisiana	\$1,000,000	Entire value of all vehicles
Maine	\$1,000,000	No exemption
Maryland	\$1,000,000	Entire value of all vehicles
Massachusetts	\$1,000,000	No exemption
Michigan	\$1,000,000	No exemption
Minnesota	\$1,000,000	Entire value of one vehicle ⁷
Mississippi	\$1,000,000	No exemption
Missouri	\$1,000,000	No exemption
Montana	\$1,000,000	No exemption
Nebraska	\$1,000,000	No exemption
Nevada	\$1,000,000	No exemption
New Hampshire	\$1,000,000	No exemption
New Jersey	\$1,000,000	No exemption
New Mexico	\$1,000,000	Entire value of all vehicles
New York	\$1,000,000	No exemption
No. Mariana Islands	\$1,000,000	Entire value of all vehicles
North Carolina	\$1,000,000	No exemption
North Dakota	\$1,000,000	Entire value of all vehicles
Ohio	\$1,000,000 ⁸	No exemption
Oklahoma	\$1,000,000	Entire value of all vehicles
Oregon	\$1,000,000	Entire value of all vehicles
Pennsylvania	\$1,000,000	Entire value of all vehicles
Puerto Rico	\$1,000,000	No exemption

Table 17. Assets Test, 2019 ¹		
State/Territory*	Maximum Countable Assets	Exempted Value of a Vehicle
Rhode Island	\$1,000,000	Entire value of all vehicles ⁹
South Carolina	\$1,000,000	Entire value of all vehicles
South Dakota	\$1,000,000	Entire value of all vehicles
Tennessee	\$1,000,000	No exemption ¹⁰
Texas	\$1,000,000	No exemption
Utah	\$1,000,000 ¹¹	No exemption
Vermont	\$1,000,000 ¹¹	No exemption
Virgin Islands	No limit	NA
Virginia	\$1,000,000	No exemption
Washington	\$1,000,000	No exemption
West Virginia	\$1,000,000	No exemption
Wisconsin	\$25,000 ¹²	Entire value of all vehicles ¹²
Wyoming	\$1,000,000	Entire value of all vehicles

Source: CCDF Policies Database October 1, 2019 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2019 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ 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.

² Applicants must self-declare that their liquid and non-liquid assets do not exceed one million dollars.

³ The primary home and automobile of the primary caretakers are excluded.

⁴ The state considers a family's assets to be the value of all of the family's cash, retirement, investments, and real property.

⁵ The assets limit does not apply to cases in which the only children receiving child care assistance are also receiving TANF or SSI or the family is receiving child care for foster care, kinship care, or a family crisis.

⁶ The entire value of one vehicle per adult in the household is exempt.

⁷ The value of one vehicle per family member age 16 and over is exempt.

⁸ Families applying for child care subsidies cannot have more than one million dollars in cash, checking, or savings accounts.

⁹ Only liquid assets are counted for the assets test.

¹⁰ TANF families can exempt \$4,600 market value of one vehicle.

¹¹ The family's assets are self-declared by the applicant and verification is not required.

¹² Foster parents, subsidized guardians, interim caretakers, and relatives who have both a court order for placement of a child and who receive a state Kinship Care payment are not subject to the asset test.

III. Application, Waiting Lists, Redetermination, Terms of Authorization, and Priority Groups

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 the program can provide.

Application, Waiting Lists, 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. The application process may include providing documents that verify certain items of information. When funds are limited, some States/Territories place eligible families on a waiting list.

Once a family is found eligible, the program establishes “terms of authorization” based on the parents’ activities. The terms of authorization may 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 by limiting the amount of time allowed for travel 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.

Application and Waiting List Procedures (Table 18)

Table 18 captures three aspects of each program’s application and waiting list process: the methods by which a family may apply for a child care subsidy, the timeframe within which an applicant is notified of his or her eligibility status and subsidy level, and whether a State/Territory has written waiting list policies for use when full funding is not available. Findings from 2019 include:

- Almost all States/Territories give potential clients the option of applying for child care subsidies in person, and four States/Territories require that all applications be processed in person.

Applications can be submitted via e-mail or through an internet-based system in 46 States/Territories.

- States/Territories vary widely in how quickly they require applications to be processed, with Indiana, Puerto Rico, the Virgin Islands, and West Virginia notifying clients at the time of the application interview, and Mississippi allowing up to 60 days. Many States/Territories commit to notifying applicants within 30 days.
- Roughly two-thirds of the States/Territories have established waiting list policies.

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.

The full database also covers other aspects of programs' waiting list procedures, including how the waiting list is maintained, whether the waiting list is maintained at a sub-state or local level, when the waiting list must be reviewed to determine which families are still in need of care or are still eligible for care, and whether agency staff are required to periodically notify families of their status on the waiting list. Appendix C provides additional application and waiting list policies that were verified in 2019.

Waiting list policies are also closely connected to priority policies (tables 25 and 26) in that groups who are guaranteed subsidies receive child care benefits regardless of funding constraints 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.

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 applicants. 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 he or she provided is complete. For purposes of the CCDF Policies Database, "verification" is defined as a requirement for an item of documentation beyond a form signed by the applicant.

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 needing care, the employment status of the applicant, the applicant's household income, and the immunization records of the child needing care. Findings for 2019 include:

- Every State/Territory requires applicants to provide proof of income and verification of employment. Some States/Territories do not require verification of income or employment 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 child in need of care.
- Half of the States/Territories require verification of household composition.
- A majority of States/Territories do not require verification of child immunization records at application because this information is often collected by child care providers.

The full CCDF Policies 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 CCDF Policies Database does not attempt to capture all 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.

Child Support Enforcement Requirements for Families (Table 20)

States/Territories may mandate that applicants comply with child support requirements when one parent is absent from the home. Table 20 displays if applicants must comply with child support enforcement requirements and whether States/Territories allow exemptions in some cases. States/Territories sometimes allow exemptions in cases where there is reasonable fear of harm to the child, reasonable fear of harm to the caregiver, the child was conceived as a result of rape or incest, the applicant is involved in pending legal proceedings, the parent is being counseled about adoption, the child was conceived through the use of a donor, or other reasons the State/Territory deems necessary. Findings from 2019 include:

- Sixteen States/Territories require families to comply with child support enforcement requirements. Additionally, in Colorado, counties have the option to require compliance with child support enforcement.
- Of the States/Territories that require families to comply with child support enforcement, most exempt families from the requirement when there is reasonable fear of harm to the child or caregiver, the child was conceived as a result of incest or rape, there are pending legal proceedings, or the parent is being counseled about adoption.

Redetermination Requirements (Table 21)

Recipients of child care subsidies receive assistance for a set period of time, often called a redetermination period, 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.

Table 21 displays four key redetermination requirement policies: the length of the redetermination (eligibility) period, if new documentation is required at redetermination (even if nothing has changed), 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, and the minimum number of days of notification that must be provided to the family before subsidies are terminated. Findings from 2019 include:

- Fifty-three States/Territories use a redetermination (eligibility) period of 12 months for most families. Two States/Territories have a redetermination period of six months, and Nebraska has an 18-month redetermination period.
- All programs require some sort of new documentation during the redetermination process.
- There is wide variation across programs concerning the length of time prior to a decrease in benefits (referred to as an "adverse change") that a family must be notified of the change, from 1 day in Utah to 30 days in Vermont and the Virgin Islands.
- There is also wide variation across programs concerning how much advance notice a family must be given before their subsidy is terminated, from 5 days in Louisiana and Maryland to 90 days in Alabama, South Carolina, and Washington. In Oklahoma the termination is effective on the date of notification. Other States have notification requirements based on other factors. For example, in Wyoming the subsidy is retroactively terminated to the date of the change in eligibility.

Under CCDBG reauthorization, all States/Territories are required to use a minimum 12-month redetermination period, meaning a family's CCDF eligibility will last for at least a year before it must be recertified. As the remaining States/Territories implement the requirement, the policies will be captured in the CCDF Policies Database and future tables.

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.⁴⁰ 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.

Additionally, 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. Additional detail on groups that are exempt from redetermination requirements can be found in the full detail of the CCDF Policies Database.

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 State/Territory CCDF programs require participants to report certain changes, such as changes in hours of work or hourly wage, as they occur.⁴¹ 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 agency. The table also shows the requirements for reporting specific types of changes, including changes in employment, income, and household composition. Findings for 2019 include:

- Most States/Territories require families to report key changes within 10 days.
- All but 11 States/Territories require changes in employment to be reported.
- Similarly, all but two States/Territories (New Mexico and West Virginia) require families to report changes in income in at least some circumstances. Fifteen States/Territories require all changes in income to be reported, while some States/Territories only require changes over a certain amount to be reported. Thirty-two States/Territories require families to report changes in income only if income exceeds the eligibility limit. This aligns with the federal mandate that families may continue to receive assistance during the eligibility period as long as the family's income does not exceed 85 percent of state median income.
- All but nine States/Territories require families to report changes in household composition.

⁴⁰ The CCDF Final Rule published in September 2016 prohibits States/Territories from raising the copayment during the 12-month eligibility period. State/Territory policy changes resulting from this requirement will be reflected in future years' tables.

⁴¹ The 2016 final federal rule does not define specific reporting requirements, but States/Territories may establish their own reporting requirements.

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.

While the CCDBG legislation does not require interim reporting, it does outline requirements for States/Territories to describe in their CCDF Plans their policies for simplifying the redetermination process and explain how they will ensure parents' employment and other activities are not disrupted as a result of the process.⁴²

Maximum Hours Approved for Child Care Subsidies (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 number of hours of care that can be subsidized 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 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 2019 include:

- Twenty-three States/Territories have policies for the 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 two States (Arizona and Massachusetts) have a different policy for part-time workers.
- Fifty-one States/Territories allow care to be authorized for travel time. Of these, about 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.
- Forty-three States/Territories allow care for rest hours in at least some circumstances. Twenty-two specify a maximum number of hours, ranging from four to nine hours daily, nineteen allow the caseworker to determine the number of rest hours to authorize, and the remaining two have policies that vary depending on need and the amount of care authorized for non-rest hours.

⁴² The CCDF Final Rule published in September 2016 does address reducing reporting requirements. State/Territory policy changes that result from the Final Rule will be reflected in future years' tables.

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 leave.⁴³

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 leave. Key findings from 2019 include:

- Fifty-four States/Territories allow care to be continued during school breaks for parents who are students. Among the States/Territories that approve care during school breaks, some approve care for a specified amount of time, and others vary the policy according to certain circumstances.
- Fifty-two States/Territories allow care to be continued during maternity leave, usually for a certain length of time ranging from six weeks to sixteen weeks. Nineteen States/Territories allow care to continue through the end of the eligibility period. Among the States/Territories that provide subsidized care during maternity leave, six have policies specifying that the parent's job must be available upon return in order to authorize care during the leave.

Under CCDBG reauthorization, States/Territories must continue to provide assistance during the minimum 12-month eligibility period for families who experience temporary changes in work, training, or education activities. As the remaining States/Territories implement the requirements, the policy changes will be reflected in the CCDF Policies Database and future tables.

The full CCDF Policies 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 2.

⁴³ The CCDF Final Rule, published September 30, 2016, provides additional requirements for care during breaks in activities. Under the CCDF Final Rule, "temporary" changes are defined "to include, at a minimum: (1) Any time-limited absence from work for employed parents due to reasons such as need to care for a family member or an illness; (2) any interruption in work for a seasonal worker who is not working between regular industry work seasons; (3) any student holiday or break for a parent participating in training or education; (4) any reduction in work, training or education hours, as long as the parent is still working or attending training or education; and (5) any cessation of work or attendance at a training or education program that does not exceed three months or a longer period of time established by the Lead Agency." As State/Territory policies are changed to reflect this definition, changes will be captured in the full CCDF Policies Database and future years' tables. The Final Rule is available from the Federal Register at <https://www.federalregister.gov/documents/2016/09/30/2016-22986/child-care-and-development-fund-ccdf-program>.

Changes in Application, Verification, and Authorization Policies from 2018 to 2019

Between 2018 and 2019, three States made changes to the allowable methods for submitting applications. Alabama added options for email and fax, and Tennessee added an online option to their existing methods. Arkansas no longer allows applicants to submit applications online. Mississippi changed their requirement for notifying applicants of an eligibility status decision from 30 days to 60 days following submission of the application. New Mexico no longer uses a waiting list when funds are limited.

Two States made changes to their verification requirements. Arizona stopped requiring applicants to verify the applicant's relationship to the child, and New York now requires all applicants to verify the child's immunization record.

Georgia changed the minimum number of days of advance notice regarding a subsidy change or termination from 12 to 14. Three States/Territories increased the number of days of advance notice required before terminating the subsidy.

Additionally, Massachusetts and North Carolina increased the number of days families have to report changes to the subsidy agency. Four States/Territories (Alaska, Utah, Virgin Islands, and Washington) stopped requiring families to report changes in employment. Five States/Territories (Delaware, Iowa, Kansas, North Carolina, and the Virgin Islands) changed their requirements for reporting changes in income to only require families to report changes that would cause their income to exceed the State's/Territory's eligibility limit.⁴⁴ This change also aligns with guidelines under CCDBG reauthorization, as States/Territories must continue providing subsidies during the 12-month eligibility period to families whose income exceeds the initial income limit as long as income remains below 85 percent of state median income. Alaska, Kansas, and North Carolina stopped requiring families to report changes to household composition.

Mississippi no longer has a maximum number of hours of care paid for by the subsidy and no longer allows for travel hours to be paid for by the subsidy. Three States made changes to policies regarding child care during school breaks and maternity leave. Care can now be provided through the end of the eligibility period for parents who are students in Arkansas and Mississippi and for maternity leave in Mississippi. Massachusetts changed how it classifies temporary changes when determining the eligibility period for both groups. As with several previously discussed policy changes, these policies are consistent with requirements under CCDBG reauthorization. The policy changes were either to allow for continued care for three months

⁴⁴ The CCDF Final Rule outlines income reporting requirements, only requiring families to report changes that would cause their income to exceed 85 percent of the state median income. As State/Territory policies are updated to reflect the requirements, this information will be captured in the full CCDF Policies Database and future years' tables.

or through the end of the eligibility period. This aligns with federal requirements to allow families whose activity temporarily changes to receive care through the end of the eligibility period.

Priority Groups

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, as described above, 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 CPS. 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, families experiencing homelessness, families with teen parents not in school, 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 2019 include:

- Five States guarantee subsidies for children with special needs, with an additional 29 States/Territories giving these families priority over some other families or priority in certain circumstances.
- Twenty-three States/Territories guarantee subsidies for all families enrolled in TANF under their CCDF-funded program. Additional States guarantee subsidies for TANF families if they are participating in the State's TANF work program. (As mentioned earlier, 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.

- Only Guam guarantees subsidies for families at risk of becoming dependent on TANF, but seven States/Territories give priority to these families in at least some circumstances.
- Twelve States/Territories guarantee subsidies for children in foster care, and thirteen States/Territories prioritize care in at least some cases for children in foster care.
- Only four States (Colorado, Oregon, Pennsylvania, and South Carolina) give priority to children in Head Start in at least some circumstances. Three States (Colorado, Georgia, and Pennsylvania) give priority to children in pre-kindergarten in at least some circumstances.
- Twelve States/Territories guarantee subsidies for families experiencing homelessness. Twenty-six States/Territories give priority to these families in at least some circumstances.
- Four States (Alaska, Delaware, the District of Columbia, and Illinois) guarantee subsidies for all teen parents in school; only the District of Columbia guarantees subsidies for teen parents not in school.

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

Changes in Priority Policies from 2018 to 2019

From 2018 to 2019 three States made changes to their priority policies. Kentucky now allows for families with a child in foster care to receive subsidies with the same priority as other CCDF-eligible children. Previously, children in foster care were not served under the State's CCDF program. Mississippi now gives priority to the children of teen parents who are in school, but does not guarantee them a subsidy. They were previously only prioritized if they had very low income. The Virgin Islands now guarantees a subsidy for children in foster care and families experiencing homelessness. These groups were previously not given priority.

Table 18. Application and Waiting List Procedures, 2019 ¹

Within How Many Days Applicant Must Be Notified of Eligibility After Submitting the				If the State Uses a Waiting List When Needed ²
State/Territory*	Method for Submitting Application	Application		
Alabama	In-person, mail, fax, email, phone ³	20		Yes
Alaska	In-person, mail, fax, email	15		Yes ⁴
American Samoa	In-person, online	10 ⁵		Yes
Arizona	In-person, mail, fax, email ⁶	30		Yes
Arkansas	In-person, mail, fax, email	10 ⁷		Yes
California	In-person ⁸	30 ⁹		Yes ¹⁰
Colorado	In-person, mail, fax, email, online	15		Yes ¹¹
Connecticut	In-person, mail, fax ¹²	30		Yes
DC	In-person	30		Yes
Delaware	In-person, mail, fax, online	30		Yes ¹³
Florida	Online ¹⁴	20		Yes
Georgia	In-person, mail, fax, email, online	30 ¹⁵		No
Guam	In-person	10 ¹⁶		Yes
Hawaii	In-person, mail, fax ¹⁷	30 ¹⁸		No
Idaho	In-person, mail, fax, email	30		No
Illinois	In-person, mail, fax, online	30 ¹⁹		No
Indiana	In-person, mail, fax	Other ²⁰		Yes
Iowa	In-person, mail, fax, online	30 ²¹		Yes
Kansas	In-person, mail, fax, online	30 ²²		Yes
Kentucky	In-person, online, phone ²³	30		No
Louisiana	In-person, mail, fax, email, online	30		Yes
Maine	In-person, mail, fax, email, phone	30		Yes
Maryland	In-person, mail, fax, online	30		Yes
Massachusetts	In-person, mail, fax, email, phone	Other ²⁴		Yes
Michigan	In-person, mail, fax, online	30 ²⁵		No
Minnesota	In-person, mail, fax, online	30 ²⁶		Yes
Mississippi	Online ²⁷	60		Yes
Missouri	In-person, mail, fax, online	15		Yes
Montana	In-person, mail, fax, online	30		Yes ²⁸
Nebraska	In-person, mail, fax, email, online, phone	30 ²⁹		No
Nevada	In-person, mail, fax, email, online	30		Yes
New Hampshire	In-person, mail, fax, email, online, phone	30 ³⁰		Yes
New Jersey	In-person, mail, email	45		Yes
New Mexico	In-person, mail, fax, email	14 ³¹		No
New York	In-person, mail	45 ³²		Yes ³³
No. Mariana Islands	In-person	15		Yes
North Carolina	In-person, mail	30		Yes
North Dakota	In-person, mail, fax, email, online	30 ³⁴		No
Ohio	In-person, mail, fax, email, online ³⁵	30		No

Table 18. Application and Waiting List Procedures, 2019 ¹

Within How Many Days Applicant Must Be Notified of Eligibility After Submitting the				If the State Uses a Waiting List When Needed ²
State/Territory*	Method for Submitting Application	Application		
Oklahoma	In-person, mail, fax, email, online	Other ³⁶		No
Oregon	In-person, mail, fax, email, online ³⁷	45		Yes
Pennsylvania	In-person, mail, fax, online	30		Yes
Puerto Rico	In-person, phone	Other ³⁸		Yes
Rhode Island	In-person, mail, online	Other ³⁹		No
South Carolina	In-person, mail, fax, email	5 ⁴⁰		No
South Dakota	In-person, mail, fax, email, online	10 ⁴¹		Yes
Tennessee	In-person, mail, fax, online	15 ⁴²		No
Texas	In-person, mail, fax, email, online	20		Yes
Utah	In-person, mail, fax, online	30		No
Vermont	In-person, mail, fax, online	30		No
Virgin Islands	In-person, mail, fax, email, phone ⁴³	Other ⁴⁴		Yes
Virginia	In-person, mail, fax, online	30 ⁴⁵		Yes
Washington	In-person, mail, fax, online, phone ⁴⁶	30		Yes
West Virginia	In-person, online	Other ⁴⁷		No
Wisconsin	In-person, mail, fax, online, phone	30 ⁴⁸		No
Wyoming	In-person, mail, fax, email	30		No

Source: CCDF Policies Database October 1, 2019 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2019 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

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

² Written policies for whether or not States/Territories use a waiting list when funds are not available to serve all families are captured. A State/Territory may appear on this list as having waiting list policies, even if no family is currently on the waiting list. Exemptions to the waiting list requirements are not shown in this table.

³ Applications can be made during face-to-face interviews. 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.

⁴ 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.

⁵ Eligibility determination must be made within 10 days and the applicant must be given notice, either hand delivered or mailed.

⁶ No face-to-face interview is required if the information needed for verifying identity and citizenship or legal residency status is already on file with the department or if the required information can be obtained through another method.

⁷ Once all required information has been received, the state has 10 business days to deny the application, approve the family for benefits, or place the application on the waiting list.

⁸ Policy coded for Non-CalWORKs Alternative Payment Program. Families may use digital applications to apply for child care and development services.

⁹ Policy coded for Non-CalWORKs Alternative Payment Program.

¹⁰ Policy coded for Non-CalWORKs Alternative Payment Program. 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.

¹¹ 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. Counties also have the option to freeze enrollment.

¹² Applicants can submit their applications in person to a drop box.

¹³ 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.

¹⁴ Applications may be submitted in person if assistance is required.

¹⁵ The caseworker has 30 calendar days to determine eligibility, beginning the next business day after receipt of the application.

¹⁶ Eligibility is determined within 10 work days.

¹⁷ The initial application must be submitted in writing.

¹⁸ 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.

¹⁹ Applicants are generally notified of eligibility within 30 days. When the eligibility determination requires additional clarifying information, applicants are notified of eligibility within 45 days from the date the initial application was received.

²⁰ The applicant is notified at the time of the appointment.

²¹ 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.

²² Families participating in the Kansas Early Head Start/Child Care Partnerships must have their applications processed within seven calendar days of the application date.

²³ Applications are taken in county offices, by toll-free phone, or online.

²⁴ Applicants must be notified within 14 calendar days if the application is denied, but there is no requirement for when applicants must be notified if the application is approved.

²⁵ Families experiencing homelessness or with children in foster care must be notified of eligibility within seven days under expedited service. All other families must be notified within 30 days.

²⁶ The response time can be extended to 45 days with the applicant's consent.

²⁷ All required documentation can be returned by mail or email.

²⁸ A statewide waiting list is maintained for non-TANF families when the demand for non-TANF subsidies exceeds the resources.

²⁹ The caseworker 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.

³⁰ Applicants experiencing homelessness are eligible to receive an expedited child care scholarship within seven days of application. Final eligibility for the applicant will be determined within 30 days.

³¹ 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.

³² 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.

³³ Districts may maintain waiting lists when funds are not available for all eligible families.

³⁴ The application must be acted upon within 30 days unless there are extenuating circumstances, such as an applicant waiting for a provider to become licensed. If there are extenuating circumstances, the agency may respond within 45 days.

³⁵ Applicants may apply at locations, other than the department office, that are convenient and accessible for families.

³⁶ The worker must determine eligibility within two working days of completing an interview and receiving all verification.

³⁷ If the family is applying for SNAP and employment-related day care together, the online SNAP application may be used.

³⁸ Applicants will be notified of their eligibility during the in-person application process if they have provided all of the requested information.

³⁹ Applicants receive timely notice, and the application must be completed within 30 days. An application that remains incomplete on the last day of the application period will be denied unless the agency is responsible for the delay in processing the application.

⁴⁰ Applicants in the state's STARS workforce development program are notified within one to two days. All other applicants are notified in three to five business days.

⁴¹ Eligibility is determined within 10 days and then a written notice is sent to the family.

⁴² Child care for TANF families is approved during the TANF application processing period, which is limited to 45 days.

⁴³ Applicants are required to have an appointment with a subsidy counselor at the agency.

⁴⁴ Applicants make an appointment to submit paperwork and complete the application process. Applicants are notified of their eligibility during that appointment.

⁴⁵ This 30-day processing period covers the day following the date of receipt to the date eligibility is determined. When the 30th calendar day following receipt of the application falls on a weekend or holiday, an eligibility decision must be provided on the last working day prior to the 30th day.

⁴⁶ Applicants may apply by telephone through the state's call center.

⁴⁷ Applicants receive an eligibility decision during the in-person application if they have provided all requested information. If additional information is needed, it must be provided to the caseworker and eligibility must be determined within 13 days.

⁴⁸ The agency must determine eligibility when the individual's verification requirements are complete. If the applicant requests more time to provide verification, the agency may extend the verification due date to not more than 30 calendar days from the application filing date.

Table 19. Information That Must Be Verified with Documentation When Applying for CCDF Subsidies, 2019 ¹

State/Territory*	Applicant Identity	Household Composition	Applicant's Relationship to Child	Employment ²	Income	Child's Immunization Record ³
Alabama	Yes	Yes	Yes	Yes	Yes	No
Alaska	Yes	No ⁴	No ⁵	Yes	Yes	No
American Samoa	Yes	Yes	Yes	Yes	Yes	Yes
Arizona	Yes ⁶	No	Varies ⁷	Yes	Yes ⁸	No
Arkansas	Yes	Yes ⁹	No	Yes	Yes ¹⁰	No
California	No ¹¹	Yes	Yes	Yes ¹¹	Yes ¹²	Yes ¹¹
Colorado	Yes	No	Varies ¹³	Yes	Yes ¹⁴	Varies ¹⁵
Connecticut	Yes	No ¹⁶	No	Yes	Yes	No ¹⁷
DC	Yes	Yes	Yes	Yes ¹⁸	Yes	Yes ¹⁹
Delaware	No	No	No	Yes	Yes	No
Florida	Yes ²⁰	No ²¹	Yes ²⁰	Yes ²⁰	Yes ²⁰	No
Georgia	Yes	No	No	Yes ²²	Yes ²²	Varies ²³
Guam	Yes	Yes	Yes	Yes	Yes	Yes
Hawaii	Yes	Yes	Yes	Yes	Yes	No
Idaho	No	No	No	Yes	Yes ²⁴	Varies ²⁵
Illinois	Yes	No ²⁶	Yes	Yes	Yes	No
Indiana	Yes	Yes ²⁷	No ²⁸	Yes	Yes	No
Iowa	No ²⁹	No ²⁹	No ²⁹	Yes	Yes ³⁰	No
Kansas	Yes	Yes ³¹	No	Yes	Yes	No
Kentucky	Yes	Yes	Yes	Yes	Yes	Yes ³²
Louisiana	Yes	Yes	No	Yes	Yes	Yes ³³
Maine	Yes	Yes	Yes	Yes	Yes	No
Maryland	Yes	Yes	Yes	Yes	Yes	Yes ³⁴
Massachusetts	Yes	Yes	Yes	Yes	Yes	No
Michigan	Yes	No ³⁵	No ³⁵	Yes	Yes ³⁶	No
Minnesota	Yes	No ³⁷	Yes	Yes	Yes	No
Mississippi	Yes	No	Yes	Yes	Yes	No
Missouri	No	Yes	Yes ³⁸	Yes	Yes	No
Montana	Yes	Yes	Yes	Yes	Yes	No
Nebraska	No ³⁹	No ³⁹	No ³⁹	Yes	Yes ⁴⁰	No
Nevada	Yes	No ⁴¹	Yes	Yes	Yes ⁴²	No
New Hampshire	Yes	Yes	Yes	Yes	Yes	No

Table 19. Information That Must Be Verified with Documentation When Applying for CCDF Subsidies, 2019 ¹

State/Territory*	Applicant Identity	Household Composition	Applicant's Relationship to Child	Employment ²	Income	Child's Immunization Record ³
New Jersey	Yes	Yes	Yes	Yes	Yes	No
New Mexico	Yes	Yes	Yes	Yes	Yes	No
New York	Yes	Yes	Yes	Yes	Yes	Yes ⁴³
No. Mariana Islands	Yes	Yes	Yes	Yes	Yes	No
North Carolina	No ⁴⁴	No ⁴⁴	No ⁴⁴	Yes	Yes	No ⁴⁴
North Dakota	Yes	Yes	Yes	Yes	Yes	No
Ohio	No	No	No	Yes	Yes	No
Oklahoma	Yes	No ⁴⁵	No	Yes	Yes ⁴⁶	No
Oregon	No ⁴⁷	No ⁴⁷	No ⁴⁷	Yes	Yes	No ⁴⁸
Pennsylvania	Yes	Yes	Yes	Yes	Yes	No
Puerto Rico	Yes	Yes	Yes	Yes	Yes	Yes
Rhode Island	No	No	Yes	Yes	Yes	No
South Carolina	No	No	No	Yes	Yes	No
South Dakota	Yes	No	Yes	Yes	Yes	No
Tennessee	Yes	Yes	Yes	Yes	Yes	Varies ⁴⁹
Texas	Yes	No ⁵⁰	Yes	Yes	Yes ⁵¹	No
Utah	Yes	No ⁵²	No ⁵²	Yes	Yes	No
Vermont	No	No	Varies ⁵³	Yes	Yes	No
Virgin Islands	Yes	Yes	Yes	Yes	Yes	Yes ⁵⁴
Virginia	Yes	No	No	Yes	Yes ⁵⁵	Varies ⁵⁶
Washington	Yes	Yes ⁵⁷	Yes	Yes	Yes	No
West Virginia	Yes	No ⁵⁸	No	Yes	Yes	Yes
Wisconsin	Yes	Yes	Yes	Yes	Yes	No ⁵⁹
Wyoming	Yes	No	Yes	Yes	Yes	No

Source: CCDF Policies Database October 1, 2019 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2019 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ When the applicant is required to submit documentation, it is counted as verification. If the applicant is only required to make a verbal or written statement, it is not counted as verification for the purposes of the CCDF Policies Database. Information about the types of documentation required is not included here, but additional details may be available in the full CCDF Policies Database.

- ² This variable captures whether the family must verify employment, and may include documentation of the parent's work schedule or hours of employment.
- ³ 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.
- ⁴ The agency may require verification if the caseworker has reason to believe the client provided incorrect information, or to verify information about a parent's spouse if the parent indicates they are married but does not list his or her spouse.
- ⁵ The agency may require verification if the caseworker has reason to believe the client provided incorrect information.
- ⁶ Applicants with current or prior cash assistance cases or SNAP cases are exempt from identification verification since their information is already in the system.
- ⁷ Verification is not required for natural, step, or adoptive parents.
- ⁸ 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.
- ⁹ While not required for eligibility, the agency attempts to verify a valid Social Security Number for every household member for identification purposes.
- ¹⁰ If the family has an open TANF or SNAP case, the state has the option of re-verifying income information or using income information available from the state information system, unless it is over 45 days old.
- ¹¹ Policy coded for Non-CalWORKs Alternative Payment Program.
- ¹² Policy coded for Non-CalWORKs Alternative Payment Program. Income is not verified for cases where eligibility is not based on income.
- ¹³ Relationship verification is only required when the caretaker is not related to the child.
- ¹⁴ A verbal or written statement by a person outside the household, who is knowledgeable about the household's circumstances, is sufficient to verify income.
- ¹⁵ Applicants are only required to submit immunization records if the child is receiving care from a qualified exempt provider who is unrelated to the child and providing care outside of the child's home.
- ¹⁶ The agency may require verification if the caseworker has reason to believe the client provided incorrect information.
- ¹⁷ The agency may require verification if the child is in unregulated care and the caseworker has reason to believe the client provided incorrect information.
- ¹⁸ As long as families meet the minimum hours of work required for eligibility, families are eligible for full-time traditional care. Families are not required to verify that the timeframe that child care is requested matches the timeframe during which the parent is working. Non-traditional child care still requires verification of the parent or guardian's schedule.
- ¹⁹ Families experiencing homelessness are granted a 60-day grace period.
- ²⁰ Applicants experiencing homelessness, as verified by a Department of Children and Families certified homeless shelter may be permitted to enroll even if they are unable to provide the required documentation of eligibility.
- ²¹ Each applicant must self-certify that household size is true and correct. If the state suspects fraud the applicant may be required to provide additional documentation.
- ²² Families experiencing domestic violence, homelessness, or natural disaster are granted a 90-day grace period.
- ²³ Documentation is not required if the child attends a regulated child care program, attends public school, or receives TANF benefits. Documentation is required for non-school-age children in informal child care settings.
- ²⁴ Foster parents do not have to verify their income when applying for a subsidy for their foster child.
- ²⁵ Immunization does not have to be verified for children attending school.

- ²⁶ The agency uses information available in the state systems to verify household composition. If a child's identity is not found in the system, the agency may request documentation from the parent.
- ²⁷ Documentation to verify the identity of other children and adult members in the unit is required.
- ²⁸ The relationship to the child does not have to be verified, except for foster parents applying for care for a foster child.
- ²⁹ The agency may require verification if the caseworker has reason to believe the client provided incorrect information.
- ³⁰ Applicants receiving protective child care services, participating in the TANF work program, or receiving TANF are not required to verify income.
- ³¹ Documentation is required to verify the identity of all adults in the household.
- ³² Proof of current immunization is required unless the child is enrolled in another entity that requires an immunization record.
- ³³ Verification of an immunization record can be postponed for three full months when an applicant is homeless. Verifying immunity of a homeless applicant can only be postponed once in a lifetime. In addition, the immunization requirement does not apply if the applicant submits a written statement objecting to immunization based on religious grounds, or a written statement is received from a physician stating that the immunization procedure is inadvisable or contraindicated for medical reasons.
- ³⁴ Immunization records do not have to be verified if the child has a medical condition that contraindicates immunization, or the parent has an objection to immunization based on religious grounds. Parents that object to immunization or medical examination, or both, on religious grounds must provide a written health history of the child and sign a statement indicating that the child is in good health and free from any communicable diseases to the best of their knowledge and belief.
- ³⁵ The agency may require verification if the caseworker has reason to believe the client provided incorrect information.
- ³⁶ Verification of income is not required for protective services families.
- ³⁷ With the exception of parental relationship, household composition does not need to be verified unless questionable.
- ³⁸ Parents must complete a specific form to verify their relationship to the child and provide documentation (birth certificates, marriage licenses, etc.) upon request.
- ³⁹ The agency may require verification if the caseworker has reason to believe the client provided incorrect information.
- ⁴⁰ A declaration from the client is acceptable regarding unearned income, unless the client has a history of program abuse.
- ⁴¹ The agency may require verification if the caseworker has reason to believe the client provided incorrect information.
- ⁴² TANF cash assistance case referrals from the department do not have to verify income. The income statement on the referral form is accepted.
- ⁴³ With the exception of school-age children, the child's immunization must be verified in order for child care to be approved. A provider may provide care to a child not yet immunized if the immunizations are in process and the caretaker can give specific appointment dates for receiving the immunizations. In some cases, a medical exemption may be issued by a physician on an annual basis.
- ⁴⁴ When documentation is not available, a client statement may be used as verification.
- ⁴⁵ The agency may require verification if the caseworker has reason to believe the client provided incorrect information.
- ⁴⁶ 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, and the child is age five or younger.
- ⁴⁷ Anything questionable that affects eligibility or benefit level must be verified.
- ⁴⁸ Anything questionable that affects eligibility or benefit level must be verified. Parents who have not immunized their child or are not up to date on their child's immunizations will need to show proof that they have started the process or obtained an exemption.
- ⁴⁹ Documentation is not required for children placed in licensed care. License-exempt providers must have verification of current immunization status and recent physical examination for each child unless a verifiable exclusion is on file.

⁵⁰ The agency may require verification if the caseworker has reason to believe the client provided incorrect information.

⁵¹ Families who qualify as homeless are considered to be income eligible without verification of actual income.

⁵² The agency may require verification if the caseworker has reason to believe the client provided incorrect information. Verification is required for specified relatives and legal guardian caretakers.

⁵³ 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.

⁵⁴ Children in foster care, protective services, and homeless children are granted a three month grace period to acquire all mandated immunizations.

⁵⁵ 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.

⁵⁶ If the child is already enrolled in another program that requires immunization records, the documentation does not have to be verified. If the family is homeless, the child may be conditionally approved for care for up to 90 days.

⁵⁷ Families must provide the name and address of both parents except when they have an open child support case, when providing this information may result in serious physical or emotional harm to anyone in the household, when one parent provides a statement under penalty of perjury that the other parent's information is unknown, or when the information can be verified through current available systems.

⁵⁸ The agency may require verification if the caseworker has reason to believe the client provided incorrect information.

⁵⁹ In addition to the required verification, caseworkers may require verification if the applicant submits questionable or contradictory information.

Table 20. Child Support Enforcement Requirements for Families, 2019 ²

State/Territory*	If Families Must Comply with Child Support Enforcement Requirements	Exemption for: Reasonable Fear of Harm to Child	Exemption for: Reasonable Fear of Harm to Caregiver	Exemption for: Child Conceived as Result of Rape or Incest	Exemption for: Pending Legal Proceedings	Exemption for: Parent being Counseled on Adoption	Exemption for: Child Conceived through Use of Donor	Exemption for: Other Reason
Alabama	No	NA	NA	NA	NA	NA	NA	NA
Alaska	No	NA	NA	NA	NA	NA	NA	NA
American Samoa	Yes ³	--- ¹	--- ¹	--- ¹	--- ¹	--- ¹	--- ¹	--- ¹
Arizona	No	NA	NA	NA	NA	NA	NA	NA
Arkansas	No ⁴	NA	NA	NA	NA	NA	NA	NA
California	No	NA	NA	NA	NA	NA	NA	NA
Colorado	Other ⁵	Yes ⁶	Yes ⁶	Yes ⁶	Yes ⁶	Yes ⁶	Yes ⁷	Yes ⁸
Connecticut	No	NA	NA	NA	NA	NA	NA	NA
DC	No	NA	NA	NA	NA	NA	NA	NA
Delaware	No	NA	NA	NA	NA	NA	NA	NA
Florida	No	NA	NA	NA	NA	NA	NA	NA
Georgia	No	NA	NA	NA	NA	NA	NA	NA
Guam	No	NA	NA	NA	NA	NA	NA	NA
Hawaii	No	NA	NA	NA	NA	NA	NA	NA
Idaho	Yes	Yes	Yes	Yes	No	No	No	Yes ⁹
Illinois	No ¹⁰	NA	NA	NA	NA	NA	NA	NA
Indiana	No	NA	NA	NA	NA	NA	NA	NA
Iowa	No	NA	NA	NA	NA	NA	NA	NA
Kansas	Yes	Yes	Yes	Yes	Yes	Yes	No	No
Kentucky	No	NA	NA	NA	NA	NA	NA	NA
Louisiana	No	NA	NA	NA	NA	NA	NA	NA
Maine	No	NA	NA	NA	NA	NA	NA	NA
Maryland	Yes	Yes	Yes	Yes	Yes	Yes	No	No
Massachusetts	No	NA	NA	NA	NA	NA	NA	NA
Michigan	Yes	Yes	Yes	Yes	Yes	Yes ¹¹	Yes	Yes ¹²
Minnesota	Yes ¹³	Yes	Yes	Yes	Yes ¹⁴	Yes ¹⁵	No	No
Mississippi	Yes	Yes	Yes	Yes	Yes	Yes	No	No
Missouri	No	NA	NA	NA	NA	NA	NA	NA
Montana	Yes	Yes	Yes	Yes	Yes ¹⁶	Yes ¹⁷	No	Yes ¹⁸
Nebraska	Yes ¹⁹	Yes ²⁰	Yes ²⁰	Yes ²¹	Yes ²¹	Yes ²¹	Yes ²¹	Yes ²¹
Nevada	No	NA	NA	NA	NA	NA	NA	NA

Table 20. Child Support Enforcement Requirements for Families, 2019 ²

State/Territory*	If Families Must Comply with Child Support Enforcement Requirements	Exemption for: Reasonable Fear of Harm to Child	Exemption for: Reasonable Fear of Harm to Caregiver	Exemption for: Child Conceived as Result of Rape or Incest	Exemption for: Pending Legal Proceedings	Exemption for: Parent being Counseled on Adoption	Exemption for: Child Conceived through Use of Donor	Exemption for: Other Reason
New Hampshire	No	NA	NA	NA	NA	NA	NA	NA
New Jersey	No	NA	NA	NA	NA	NA	NA	NA
New Mexico	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes ²²
New York	No	NA	NA	NA	NA	NA	NA	NA
No. Mariana Islands	No	NA	NA	NA	NA	NA	NA	NA
North Carolina	No	NA	NA	NA	NA	NA	NA	NA
North Dakota	No	NA	NA	NA	NA	NA	NA	NA
Ohio	No	NA	NA	NA	NA	NA	NA	NA
Oklahoma	Yes ²³	Yes	Yes	Yes	No	Yes	No	No
Oregon	No	NA	NA	NA	NA	NA	NA	NA
Pennsylvania	No	NA	NA	NA	NA	NA	NA	NA
Puerto Rico	No	NA	NA	NA	NA	NA	NA	NA
Rhode Island	Yes	Yes	Yes	Yes	Yes	Yes	No	No
South Carolina	No	NA	NA	NA	NA	NA	NA	NA
South Dakota	Yes	Yes	Yes	Yes	Yes ²⁴	Yes	Yes	Yes
Tennessee	No	NA	NA	NA	NA	NA	NA	NA
Texas	No	NA	NA	NA	NA	NA	NA	NA
Utah	No	NA	NA	NA	NA	NA	NA	NA
Vermont	Yes	Yes ²⁵	Yes ²⁵	Yes	Yes	Yes	Yes	Yes ²⁵
Virgin Islands	--- ¹	--- ¹	--- ¹	--- ¹	--- ¹	--- ¹	--- ¹	--- ¹
Virginia	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes ²⁶
Washington	No	NA	NA	NA	NA	NA	NA	NA
West Virginia	No	NA	NA	NA	NA	NA	NA	NA
Wisconsin	Yes ²⁷	Yes	Yes	Yes	No	Yes ²⁸	No	Yes ²⁹
Wyoming	No	NA	NA	NA	NA	NA	NA	NA

Source: CCDF Policies Database October 1, 2019 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2019 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ Information not found in State's/Territory's manual.

- ² Information about the types of documentation required is not included here, but additional details may be available in the full CCDF Policies Database.
- ³ A child support statement is required at application.
- ⁴ Families in the TANF program are required to comply with child support enforcement requirements.
- ⁵ Counties have the option to require cooperation with child support enforcement at application or redetermination.
- ⁶ An exemption exists if the county requires cooperation with child support enforcement.
- ⁷ Counties that choose to require cooperation with child support enforcement may designate conception through use of a donor as a reason for exemption.
- ⁸ Counties that choose to require cooperation with child support enforcement can define other reasons for exemption.
- ⁹ Exemptions may be provided if there is substantial and credible proof indicating the custodial parent cannot provide the minimum information regarding the non-custodial parent.
- ¹⁰ Employed non-parent caretaker relatives who receive a child-only TANF benefit for children needing care are required to cooperate with child support.
- ¹¹ An exemption is allowed as long as the counseling has not gone on for more than three months.
- ¹² Teen or minor parents acting as the adult case member are not subject to child support enforcement requirements.
- ¹³ If the client is found to not be in compliance with child support enforcement requirements during the 12-month continuous eligibility period, the client can continue to receive child care assistance. The client must be cooperating with child support at redetermination.
- ¹⁴ An exemption is provided if legal proceedings for the adoption of the child are pending before a court of competent jurisdiction.
- ¹⁵ An exemption is provided if the parent is currently being assisted by a public or licensed private social service agency to resolve the issues of whether to keep the child or place the child for adoption.
- ¹⁶ An exemption may be provided if legal proceedings for the adoption of the child are pending before a court of competent jurisdiction.
- ¹⁷ An exemption is provided if the parent is planning to relinquish or has relinquished the child to a public or licensed social agency for the purpose of adoption.
- ¹⁸ An exemption may be provided if the parental rights to the child have been terminated by a court of competent jurisdiction, any situation that makes cooperation with child support requirements detrimental to the child, or if the parent who is applying for child care assistance is under the age of 18.
- ¹⁹ No child support sanctions for failure to cooperate will be imposed on participants in the state's TANF work program so that they may continue to participate in the work program.
- ²⁰ The client may be exempt from child support enforcement requirements if cooperation could cause a serious risk of harm from the noncustodial parent.
- ²¹ The state child support enforcement unit can choose to provide an exemption for this reason.
- ²² Clients are exempt from complying with child support enforcement if they are receiving TANF, they are already receiving child support or financial support from the non-resident parent, there is a joint custody agreement where neither parent is ordered to pay support, parental rights have been terminated, the parent is a foster parent or an adoptive parent and provides proof of a single parent adoption, a parent is temporarily absent from the household, or the client is a teen parent, grandparent, or guardian.
- ²³ Teen parents are not required to cooperate with Child Support Services until they turn 18 year of age. When the teen turns 18 during an eligibility period, he or she is not required to cooperate with Child Support Services until the next child care renewal.
- ²⁴ Exemptions for pending legal proceedings are decided on a case-by-case basis by supervisory staff.
- ²⁵ If a client is escaping an abusive situation and does not want to pursue child support, a waiver may be granted.
- ²⁶ Exemptions are provided for TANF cases in which all included children are on the TANF grant.

²⁷ Parents must cooperate with child support with regards to the child's biological parents regardless of subsequent marriages to a different partner.

²⁸ A petition for the adoption of the child must have been filed with a court. This does not apply as a good cause exemption for responsibility to make payments under an existing court order. Parents who are considering whether to terminate parental rights and have sought the assistance of a licensed private social services agency within the last three months are exempt.

²⁹ Foster parents, subsidized guardians for foster children, and court ordered kinship care relatives are exempt from cooperating with child support for a child who is not their biological or adoptive child. However, foster parents, subsidized guardians, and court-ordered kinship care relatives must still cooperate with child support for their own biological or adoptive children. Parents with an unborn child or child younger than 60 days are also exempt for that particular child.

Table 21. Redetermination Requirements, 2019

State/Territory*	Redetermination Period (in months) ²	If New Documentation is Required During Redetermination	Minimum Number of Days of Advance Notice Regarding an Adverse Subsidy Change ³	Minimum Number of Days of Advance Notice Regarding a Subsidy Termination
Alabama	12 ⁴	Yes	10 ⁵	90 ⁶
Alaska	12	Yes	10 ⁷	Other ⁸
American Samoa	6	Yes ⁹	NA ¹⁰	--- ¹
Arizona	12	Yes	NA ¹¹	10
Arkansas	12	Yes	10	10 ¹²
California	12	Yes	14 ¹³	14 ¹³
Colorado	12 ¹⁴	Yes ¹⁵	15	15
Connecticut	12	Yes	10	10 ¹⁶
DC	12	Yes	15	15
Delaware	12 ¹⁷	Yes	10	Other ¹⁸
Florida	12 ¹⁹	Yes	10 ²⁰	Other ²¹
Georgia	12	Yes	14	14
Guam	12	Yes ²²	15	15
Hawaii	6	Yes	10 ²³	10 ²⁴
Idaho	12	Yes	Other ²⁵	Other ²⁶
Illinois	12	Yes	10 ²⁷	10 ²⁷
Indiana	12 ²⁸	Yes	10 ²⁹	10 ²⁹
Iowa	12 ³⁰	Yes	10	10
Kansas	12	Yes	10 ³¹	10 ³²
Kentucky	12	Yes	10 ³³	Other ³⁴
Louisiana	12 ³⁵	Yes	5 ³⁶	5 ³⁷
Maine	12 ³⁸	Yes	12	12
Maryland	12	Yes	5 ³⁹	5 ³⁹
Massachusetts	12	Yes	14	14 ⁴⁰
Michigan	12	Yes ⁴¹	11 ⁴²	11 ⁴³
Minnesota	12 ⁴⁴	Yes	15 ⁴⁵	15
Mississippi	12	Yes	14	14 ⁴⁶
Missouri	12	Yes	Other ⁴⁷	10
Montana	12	Yes ⁴⁸	15 ⁴⁹	Other ⁵⁰
Nebraska	18 ⁵¹	Yes ⁵²	10 ⁵³	10 ⁵³
Nevada	12	Yes	10 ⁵⁴	10
New Hampshire	12	Yes	10 ⁵⁵	Other ⁵⁶
New Jersey	12	Yes	10	10
New Mexico	12	Yes	14	14
New York	12	Yes	10 ⁵⁷	10
No. Mariana Islands	12	Yes	10	10
North Carolina	12	Yes ⁵⁸	10	Other ⁵⁹
North Dakota	12	Yes	NA ⁶⁰	Other ⁶¹
Ohio	12 ⁶²	Yes	15 ⁶³	15 ⁶³
Oklahoma	12	Yes	10 ⁶⁴	Effective on the date of notification

Table 21. Redetermination Requirements, 2019

State/Territory*	Redetermination Period (in months) ²	If New Documentation is Required During Redetermination	Minimum Number of Days of Advance Notice Regarding an Adverse Subsidy Change ³	Minimum Number of Days of Advance Notice Regarding a Subsidy Termination
Oregon	12	Yes	10	10
Pennsylvania	12	Yes	10	10
Puerto Rico	12	Yes ⁶⁵	NA ⁶⁶	NA ⁶⁶
Rhode Island	12 ⁶⁷	Yes	10 ⁶⁸	10 ⁶⁸
South Carolina	12	Yes	10	90 ⁶⁹
South Dakota	12	Yes	10	10
Tennessee	12	Yes	10	Other ⁷⁰
Texas	12	Yes	15	15
Utah	12	Yes	1 ⁷¹	Other ⁷²
Vermont	12	Yes ⁷³	30	30 ⁷⁴
Virgin Islands	12	Yes	30 ⁷⁵	Other ⁷⁶
Virginia	12	Yes ⁷⁷	10	10
Washington	12	Yes	10	90 ⁷⁸
West Virginia	12	Yes	13 ⁷⁹	13 ⁸⁰
Wisconsin	12 ⁸¹	Yes ⁸²	Other ⁸³	Other ⁸⁴
Wyoming	12	Yes	Other ⁸⁵	Retroactive to date of change in eligibility status

Source: CCDF Policies Database October 1, 2019 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2019 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ Information not found in State's/Territory's manual.

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

³ An adverse subsidy change is a reduction that does not result in a loss of the family's subsidy.

⁴ The redetermination period may be shorter than 12 months if the parent's authorized activity will last fewer than 12 months or if the parent fails to comply with program requirements.

⁵ 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.

⁶ At redetermination, if a family's income is above 85 percent of the state median income, they can receive three months of services before becoming ineligible. Families who become ineligible for other reasons have a 10-day grace period before termination of services.

⁷ The agency must give a written notice to a family at least 10 days before taking any action that would adversely affect their benefit during their certification period.

⁸ The agency must give a written notice to a family at least 10 days before taking any action that would adversely affect their benefit.

⁹ Participants must provide documentation to verify income, identity, and household composition during redetermination.

¹⁰ There is no requirement for notification.

- ¹¹ The benefit cannot be reduced during the 12-month eligibility period. Changes take place at the beginning of each 12-month eligibility period. Copayment increases or unit decreases resulting from redetermination are not considered negative actions and do not require a 10-day advance notice.
- ¹² A family found ineligible to continue receiving services during redetermination will be given a 10-day advance notice that assistance will be discontinued at the end of the 10-day period. If a family is found to have income over 85 percent of state median income, child care will be discontinued on the day of discovery.
- ¹³ If notification is mailed, the number of days is extended to 19 days.
- ¹⁴ If children receiving care are also enrolled in a Head Start or Early Head Start program, their redetermination period will be aligned with the Head Start or Early Head Start program year. This may result in a redetermination period that is longer than 12 months, though the redetermination period cannot be shorter than 12 months.
- ¹⁵ Verification of employment, income, household composition, immunization, participation in a training program, the parent's schedule if requesting non-traditional hour care, and residency if the family has moved, are required at redetermination.
- ¹⁶ Eligibility ends on the last day of the month in which the notice of adverse action expires.
- ¹⁷ Parents must complete an interim form every six months. Redetermination may be set for a shorter period if the client provides a written statement verifying the length of time requested for care. The statement may be from the parent or caretaker, a medical professional verifying care required for a special need, or the state verifying the length of time required to prevent child abuse or neglect.
- ¹⁸ At redetermination, if a family's income is above 185 percent but below 200 percent of the Federal Poverty Guidelines, they can receive 12 months of services before becoming ineligible. Families remain eligible for the full 12 months, even if the family's income exceeds 200 percent of the Federal Poverty Guidelines, but remains below 85 percent of the state median income.
- ¹⁹ Redetermination for families in TANF must be completed every six months.
- ²⁰ Individuals are given 10 days notice prior to a decrease in benefits or other adverse action. If a family is removed from the program due to lack of funds, a notice is sent at least two weeks prior to disenrollment.
- ²¹ The grace period is 10 working days from the date the client receives the notice. If the family's income exceeds 85 percent of state median income, services will be discontinued two weeks (14 calendar days) from the date of the notice, as long as the two-week period does not extend beyond the family's authorized eligibility period.
- ²² Verification of employment, child support statements, school schedule, and immunization records must be submitted for redetermination as applicable.
- ²³ 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.
- ²⁴ Families are given timely notice of 10 days prior to an adverse action.
- ²⁵ Families must be notified if they are in a phase-out period and notified of the amount of assistance they will receive in the phase-out period.
- ²⁶ Families who are no longer eligible for assistance and who have an income between 130-150 percent the Federal Poverty Guidelines qualify for a phase-out period. Families in the phase-out period receive 12 months of continued benefits and qualify for 75 percent the standard child care assistance payment. Families in the phase-out period pay the full copayment plus the additional 25 percent remaining from the assistance payment.
- ²⁷ Individuals are given 10 calendar days notice when benefits are cancelled. Changes to copayments are implemented on the first of the month following notification of the change.
- ²⁸ Redetermination is required at least every 53 weeks. At redetermination, if a family's income exceeds the eligibility threshold due to a temporary fluctuation in income that is expected to last for 8 weeks or less, the family will be allowed an additional 13 weeks to update their income.
- ²⁹ The rule applies to adverse actions, including a denial or termination of services, increased fees, or reduction of services.

³⁰ Families are certified for a period of 12 months, except when the applicant meets one of two criteria at the time of application. If the child who will be receiving care will turn 13 within 6 months after the end of a 12-month certification period, then the family is certified for a period of up to 18 months. For families attending post-secondary education, if the 24-month funding limit will be reached within 6 months after the end of a 12-month period, then the family is certified for a period of up to 18 months.

³¹ Notification of a reduction in benefits must be mailed at least 10 days before the effective date of the action. Notices must be mailed no later than the 21st of the month in 31-day months or the 20th of the month in 30-day months as these actions take effect on the first day of a month.

³² Notification of termination of benefits must be mailed at least 10 days before the effective date of the action. Closure notices must be mailed no later than the 20th of the month in 31-day months or the 19th of the month in 30-day months to be considered timely since the effective date of action for closures is always the last day of the month.

³³ Changes that increase benefits do not require advance notice. Changes that decrease benefits require 10 days notice.

³⁴ A 90-day phase out period from the end of services is required to end subsidies in all cases except when income exceeds 85 percent of the state median income.

³⁵ Households with children between the ages of three and four are certified for 24 months.

³⁶ Notification is required within five work days.

³⁷ A grace period of five working days is given.

³⁸ Full redetermination is done at 12 months. At six months, the family must indicate that the information on file is still correct.

³⁹ The family is entitled to five working-days notice, which does not include state holidays.

⁴⁰ The last date of service will be the proposed end date listed on the notification. If the family's subsidy is being terminated for failure to pay fees, excessive absences, or failure to submit documentation for redetermination, the action will take effect 14 days after the notice is given to the parent.

⁴¹ For income eligible families, income must be verified at redetermination. For TANF recipients participating in a One Stop Service Center activity, the state employment information system must be checked for approved hours of participation at redetermination.

⁴² 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.

⁴³ A timely notice is mailed at least 11 days before an intended negative action takes effect.

⁴⁴ Redetermination of eligibility for some high school students under the age of 21 may be deferred beyond 12 months, not to exceed 24 months, to the end of the student's school year.

⁴⁵ Adverse changes go into effect 15 days after notification. Families receive notification of non-adverse changes as well, but these go into effect as soon as possible.

⁴⁶ A two-week notice is provided if the family becomes income-ineligible or fails to submit required materials.

⁴⁷ An increase in the copayment takes effect the month after notice is sent. A decrease in the copayment takes effect in the month notice is sent.

⁴⁸ Parents must verify their employment 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 a work verification form, completed and signed by each employer. If a family member cannot obtain work verification, the family member may submit the last two months of consecutive wage stubs. Verification of child support must also be included.

⁴⁹ Parents who are subject to an adverse action (denial, suspension, reduction, or termination of the subsidy, or a repayment demand from the state) are entitled to mailed written notification 15 calendar days prior to the adverse action. Non-TANF families with income above 150 percent and below 185 percent of the Federal Poverty Guidelines will become eligible for graduated eligibility. If parents experience a job loss or cessation of school or training, they are given a grace period for 90 calendar days if they report the change to the agency within 10 calendar days.

⁵⁰ Parents who are subject to an adverse action (denial, suspension, reduction, or termination of the subsidy, or a repayment demand from the state) are entitled to mailed written notification 15 calendar days prior to the adverse action.

⁵¹ Redetermination must be conducted at least once every 18 months, but not more than once every 12 months.

- ⁵² The parent must complete a new application reflecting his or her current situation.
- ⁵³ 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.
- ⁵⁴ The 10-day grace period is not required if the only eligible child leaves the household, the household moves out of state, or the household requests a reduction or termination.
- ⁵⁵ 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.
- ⁵⁶ If during redetermination, it is determined that the client is no longer eligible for the subsidy, the action will take effect 10 calendar days after the notice of the decision. If the client's eligibility period ended, the termination will take effect immediately. If the client's income is greater than 220 percent but less than or equal to 250 percent of the Federal Poverty Guidelines at redetermination, the client will receive a 12-month graduated phase-out period.
- ⁵⁷ 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. Local districts must provide written notice 30 days in advance if changes in funding to reduce district caseloads result in adverse action for families.
- ⁵⁸ Participants in the SNAP program do not have to provide new income documentation at redetermination.
- ⁵⁹ Notice must be provided at least 10 working days prior to the effective date of the termination of services when services end during the 12-month eligibility period. If there are less than 10 days left in the eligibility period, the notice is only until the end of the current eligibility period. If, at redetermination, the family's income is below 85 percent of the state median income but above the redetermination income threshold, services will continue for an additional 90 days. Services may also continue for 90 days if there is a temporary change in a family's need for child care.
- ⁶⁰ There is no requirement for notification.
- ⁶¹ At redetermination, if a family's income exceeds 60 percent of the state median income but is under 85 percent of the state median income and they are otherwise eligible, they can receive benefits for a 12-month phase-out period.
- ⁶² The eligibility period extends to the Saturday after the last day of the 12th month of eligibility.
- ⁶³ 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.
- ⁶⁴ 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.
- ⁶⁵ Participants must provide updated documentation on activities, income, and identity.
- ⁶⁶ There is no requirement for notification.
- ⁶⁷ The eligibility period cannot be less than 12 months. Benefits must be redetermined through the recertification process prior to the end of the 12-month period.
- ⁶⁸ 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.
- ⁶⁹ The change will take effect the first Monday following the 90th day after the change occurred. If the participant obtains employment or begins school or training during the 90-day period, he or she must submit documentation in order for eligibility to be redetermined. If the participant is eligible, the termination will be overturned and the participant will be authorized for the child care services for which the family was originally authorized.
- ⁷⁰ At redetermination, if a family is ineligible due to a child-only TANF grant ending, income above eligibility thresholds, or a failure to meet work or education requirements, their eligibility will end after a 90-day phase-out period. If eligibility ends due to a guardian failing to cooperate with redetermination or if the only child receiving assistance leaves the household or ages out, services will be terminated after 10 days.
- ⁷¹ The department must provide at least one day advance notice on most negative actions.
- ⁷² If there is adequate time to take action on a reported change and provide adequate notice, the change will become effective on the first day of the month following the change. If there is not adequate time, the change will become effective on the first day of the second month following the change.

- ⁷³ 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.
- ⁷⁴ Families must be notified no later than one month before eligibility ends.
- ⁷⁵ If adjustments are made to the amount paid to the provider, both the parent and provider are notified at least one month in advance.
- ⁷⁶ All enrolled applicants who are found to be ineligible are notified by mail with a letter of warning, a second letter of suspension, and a third and final letter of discharge.
- ⁷⁷ Redetermination is conducted in the same manner as initial determination, except the parent does not have to submit new documentation to verify a child's citizenship.
- ⁷⁸ At redetermination, if a family's income is above 200 percent but below 220 percent of the Federal Poverty Guidelines, they can receive three months of services before becoming ineligible. Families who become ineligible for other reasons have a 10-day grace period before termination of services.
- ⁷⁹ 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.
- ⁸⁰ Most negative actions cannot take place until 13 days after the client has been notified.
- ⁸¹ The recipient may complete an early renewal after the start of the 11th month and prior to the end of the 12-month eligibility period if he or she has stated his or her consent to complete an early renewal in order to align the child care subsidy eligibility period with the eligibility period of another income assistance program.
- ⁸² Documentation verifying approved activities and income for all parents and guardians in the household and school schedules is required for redetermination.
- ⁸³ Subsidy changes will take effect on the first of the following month in which the change was reported.
- ⁸⁴ Subsidy changes will take effect at the end of the month in which the change was reported.
- ⁸⁵ 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.

Table 22. Reporting Changes in Income, Employment, or Family Circumstances, 2019

State/Territory*	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	No ¹	Yes, if income exceeds eligibility limit ²	No ³
American Samoa	10	Yes	Yes, changes of \$25 or more	Yes
Arizona	5	Yes	Yes, all changes	Yes
Arkansas	10	Yes ⁴	Yes, if income exceeds eligibility limit ²	Yes ⁵
California	30	No	Yes, if income exceeds eligibility limit ⁶	No
Colorado	Other ⁷	Yes ⁸	Yes, if income exceeds eligibility limit ²	No ⁹
Connecticut	10	Yes ¹⁰	Yes, if income exceeds eligibility limit	Yes ¹¹
DC	10	Yes	Yes, if income exceeds eligibility limit ²	Yes
Delaware	10	Yes	Yes, if income exceeds eligibility limit ²	Yes
Florida	10	Yes	Yes, if income exceeds eligibility limit	Yes
Georgia	10	Yes	Yes, if income exceeds eligibility limit ²	Yes
Guam	10	Yes ¹²	Yes, changes of \$25 or more	Yes
Hawaii	10	No	Yes, if income exceeds eligibility limit ¹³	Yes
Idaho	Other ¹⁴	Yes	Other ¹⁵	Yes
Illinois	10 ¹⁶	Yes	Yes, all changes	Yes
Indiana	10	Yes ¹⁷	Yes, if income exceeds eligibility limit ¹⁸	Yes ¹⁹
Iowa	10	Yes ²⁰	Yes, if income exceeds eligibility limit ²¹	Yes ²²
Kansas	10	No	Yes, if income exceeds eligibility limit ²¹	No
Kentucky	10	Yes	Yes, all changes	Yes
Louisiana	10	Yes	Yes, if income exceeds eligibility limit ²	Yes
Maine	10	Yes	Yes, changes of \$100 or more monthly	Yes
Maryland	10	Yes	Yes, all changes	Yes

Table 22. Reporting Changes in Income, Employment, or Family Circumstances, 2019

State/Territory*	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
Massachusetts	30	Yes	Yes, changes over a certain amount ²¹	Yes
Michigan	10	No	Yes, if income exceeds eligibility limit ²³	Yes
Minnesota	10	Yes ²⁴	Yes, changes over a certain amount ²	Yes
Mississippi	10	Yes	Yes, all changes	Yes
Missouri	10	Yes	Yes, if income exceeds eligibility limit ²¹	Yes
Montana	10 ²⁵	Yes ²⁶	Yes, if income exceeds eligibility limit ²¹	No
Nebraska	10	Yes	Yes, all changes	Yes
Nevada	10	Yes	Yes, all changes	Yes
New Hampshire	10	Yes	Yes, if income exceeds eligibility limit	No
New Jersey	10	Yes	Yes, if income exceeds eligibility limit ²	Yes
New Mexico	5	Yes ²⁷	No	Yes
New York	Other ²⁸	Yes	Yes, all changes	Yes
No. Mariana Islands	10	Yes	Yes, all changes	Yes
North Carolina	10 ²⁹	Yes ³⁰	Yes, if income exceeds eligibility limit ²	No
North Dakota	10	Yes ³¹	Yes, if income exceeds eligibility limit ³²	Yes ³³
Ohio	10	Yes ³⁴	Yes, if income exceeds eligibility limit ³⁴	Yes ³⁴
Oklahoma	10	No	Yes, if income exceeds eligibility limit	No
Oregon	10	Yes ³⁵	Yes, if income exceeds eligibility limit ³⁶	Yes
Pennsylvania	10	No	Yes, if income exceeds eligibility limit ²	No
Puerto Rico	10	Yes	Yes, all changes	Yes
Rhode Island	10	Yes	Yes, if income exceeds eligibility limit ³⁷	Yes
South Carolina	10	Yes	Yes, all changes	Yes
South Dakota	10	Yes ³⁸	Yes, if income exceeds eligibility limit	Yes ³⁹
Tennessee	10 ⁴⁰	Yes ⁴⁰	Yes, all changes ⁴⁰	Yes ⁴⁰

Table 22. Reporting Changes in Income, Employment, or Family Circumstances, 2019

State/Territory*	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
Texas	14	Yes ⁴¹	Yes, if income exceeds eligibility limit ⁴²	Yes
Utah	10	No	Yes, if income exceeds eligibility limit ²¹	Yes ⁴³
Vermont	10	Yes	Yes, all changes	Yes
Virgin Islands	10 ⁴⁴	No ⁴⁵	Yes, if income exceeds eligibility limit ⁴⁶	Yes
Virginia	10	No ⁴⁷	Yes, if income exceeds eligibility limit ⁴⁸	Yes
Washington	10 ⁴⁹	No ⁵⁰	Yes, if income exceeds eligibility limit	Yes ⁵¹
West Virginia	5	Yes	No ⁵²	Yes
Wisconsin	10	Yes	Other ⁵³	Yes
Wyoming	10	Yes	Yes, all changes	Yes

Source: CCDF Policies Database October 1, 2019 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2019 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ A family only has to report a non-temporary job loss if a new job is not obtained within a period of three months.

² Changes in income must be reported if the change causes the family's monthly income to exceed 85 percent of the state median income.

³ A family only has to report a change in household composition when a parent moves into the family home if it causes the family's income to exceed 85 percent of the state median income or if a child is added to the family and care is needed for the child.

⁴ Families must report non-temporary changes in an approved work, education, or training activity within 10 calendar days.

⁵ The client must report any change that may affect eligibility.

⁶ Participants who are certified for assistance based on income eligibility must report and verify changes in income that exceed 85 percent of the state median income within 30 days of the change. Families with parents receiving CalWORKs cash aid at the time of a transfer from CalWORKs Stage 1 to CalWORKs Stage 2 continue to be categorically eligible for services based on their cash aid and are not obligated to report if their income exceeds 85 percent of state median income during the 12-month eligibility period, as the basis for eligibility is not income.

⁷ 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.

⁸ 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.

⁹ A change in household composition that would result in an increase in income above 85 percent of the state median income must be reported.

¹⁰ Families must report non-temporary changes in an approved work, education, or training activity.

¹¹ The family must report if a child receiving a subsidy is removed from the household.

- ¹² Clients must report a change in their source of income.
- ¹³ 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.
- ¹⁴ Parents must report changes by the 10th day of the month following the month in which the change occurred.
- ¹⁵ Changes in income must be reported when the household's total gross income exceeds either 130 percent of the Federal Poverty Guidelines, 85 percent of state median income, or the graduated phase-out income limit as defined in the child care state plan.
- ¹⁶ Clients must report changes that may effect eligibility within 10 days of the change. Clients must report a job loss or a break in activity within 30 days to maintain eligibility through grace period provisions.
- ¹⁷ Only loss of employment must be reported.
- ¹⁸ Changes in income have to be reported when income exceeds 85 percent of the state median income. When adding a household member with income, proof of current income for all CCDF household members must be provided.
- ¹⁹ 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.
- ²⁰ Changes in employment must be reported when employment ends, and the applicant is not starting a new job.
- ²¹ Changes in income must be reported only if the family's gross monthly income exceeds 85 percent of the state median income.
- ²² Applicants must report if no child eligible for child care assistance remains in the home.
- ²³ Increases in income must be reported if the change will result in income exceeding 85 percent of the state median income. Changes in income may be reported if the change would positively affect the department payment or authorized hours.
- ²⁴ Most families do not need to report changes in their activity schedule, unless they stop their activity permanently. Families that request care with more than one provider per child, families that request care from a legal non-licensed (LNL) provider, and families with a parent employed by a licensed child care center must continue reporting all changes in their activity schedule.
- ²⁵ Parents must report a change in provider within one business day.
- ²⁶ Families must report a loss of employment, end of school, or end of training activity.
- ²⁷ Clients must notify the department of changes that affect the need for care, which include but are not limited to any non-temporary change in activity.
- ²⁸ The client must report changes immediately.
- ²⁹ Recipients must report changes to the state within 10 business days from the date of the change.
- ³⁰ Only non-temporary changes in the status of a child's parent as working or attending a job training or educational program must be reported.
- ³¹ Families must report a non-temporary loss of allowable activities.
- ³² Families must report a change in income if it causes the household's monthly gross income, minus court-ordered child and spousal support paid, to exceed the highest income level for the household size.
- ³³ Households are not required to report changes in household size except when there is no longer an eligible child in the household. Changes to household composition which are reported timely will only cause the household's benefits to increase or remain the same. Benefits will not be decreased due to a change in household size during the eligibility period unless the change involves the exit of an eligible child.
- ³⁴ Changes must be reported if they affect eligibility.
- ³⁵ Participants must report a loss of employment and the return to employment during a period of job search.
- ³⁶ Increases in income above the continuing eligibility threshold must be reported.
- ³⁷ Increases in income must be reported if the change will result in income exceeding 85 percent of the state median income. In addition to reporting changes in income, changes in the family's resources must be reported if the family's resources exceed \$1,000,000.
- ³⁸ Only permanent changes in employment must be reported.

- ³⁹ Household composition changes must be reported if a parent not previously included in the family unit returns to the home.
- ⁴⁰ At risk child-only, Transitional Child Care, and Smart Steps families are not required to report changes during the eligibility period. All other families have to report changes within 10 days.
- ⁴¹ Employment changes that are non-temporary must be reported.
- ⁴² Non-temporary changes in income that cause the family's income to exceed 85 percent of the state median income must be reported.
- ⁴³ A change must be reported when a child receiving care moves out of the home.
- ⁴⁴ The parent must notify the department of any change in family circumstances immediately but not later than 10 days from the occurrence.
- ⁴⁵ Families are encouraged to report changes that increase the amount of care authorized, such as an increase in work hours. They may also report changes that decrease the copayment, such as job loss.
- ⁴⁶ Families are encouraged to voluntarily report changes in income, but will not receive a decrease in subsidy if their income does not exceed 85 percent of the state median income.
- ⁴⁷ Changes in employment including schedule, employer, and income may be voluntarily reported. Changes in employment must be reported only if it would cause the family's gross monthly income to exceed 85 percent of state median income.
- ⁴⁸ Changes to the family's gross monthly income that cause the total amount to exceed 85 percent of the state median income must be reported within 10 calendar days. Families must also report if they no longer have income.
- ⁴⁹ A change in providers must be reported within five days.
- ⁵⁰ Changes in employment must be reported only if the new income exceeds the eligibility limit, or if the change increases the number of hours of authorized care.
- ⁵¹ Families must report changes in household composition if the household size increases.
- ⁵² 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.
- ⁵³ Families with monthly income at or below 185 percent of the Federal Poverty Guidelines must report monthly income increases of more than \$250. Families with monthly income above 185 percent of the Federal Poverty Guidelines must report increases that will increase their income by 5 percent.

Table 23. Maximum Hours Approved for Child Care Subsidies, 2019 ²

State/Territory*	Maximum Hours of Care Paid for By Subsidy	If Maximum Hours of Care Policy Differs for Part-Time Workers ³	If Travel Hours are Paid By the Subsidy	If Rest Hours are Paid By the Subsidy ⁴
Alabama	No maximum	NA	Yes, 8 hours weekly ⁵	No
Alaska	345 per month	No difference	Yes, 2 hours daily ⁶	Yes, 8 hours daily ⁷
American Samoa	No maximum	NA	No	--- ¹
Arizona	Varies ⁸	137 per month ⁹	Yes, no explicit maximum/at caseworker's discretion	Yes, no explicit maximum/at caseworker's discretion
Arkansas	No maximum	NA	Yes, 2 hours daily	Yes, no explicit maximum/at caseworker's discretion
California	No maximum	NA	Yes, 4 hours daily ¹⁰	Yes, 8 hours daily ¹¹
Colorado	No maximum	NA	Yes, no explicit maximum/at caseworker's discretion ¹²	Yes, no explicit maximum/at caseworker's discretion ¹³
Connecticut	280 per month ¹⁴	No difference	Yes, 1 hour daily ¹⁵	Yes, 4 hours daily ¹⁶
DC	No maximum	NA	Yes, 3 hours daily ¹⁷	Yes, 8 hours daily
Delaware	No maximum	NA	Yes, no explicit maximum/at caseworker's discretion ¹⁸	Yes, 8 hours daily, if the subsidy is not needed during work hours
Florida	No maximum	NA	Yes, no explicit maximum/at caseworker's discretion	Yes, no explicit maximum/at caseworker's discretion
Georgia	No maximum	NA	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
Guam	No maximum	NA	Yes, 1 hour daily	No
Hawaii	No maximum	NA	Yes, other amount ¹⁹	Yes, no explicit maximum/at caseworker's discretion ²⁰
Idaho	No maximum	NA	Yes, 12 hours monthly ²¹	No

Table 23. Maximum Hours Approved for Child Care Subsidies, 2019 ²

State/Territory*	Maximum Hours of Care Paid for By Subsidy	If Maximum Hours of Care Policy Differs for Part-Time Workers ³	If Travel Hours are Paid By the Subsidy	If Rest Hours are Paid By the Subsidy ⁴
Illinois	No maximum	NA	Yes, no explicit maximum/at caseworker's discretion ²²	Yes, 8 hours daily ²³
Indiana	No maximum	NA	Yes, 10 hours weekly ²⁴	Yes, no explicit maximum/at caseworker's discretion, if the subsidy is not needed during work hours ²⁵
Iowa	Varies ²⁶	No difference	Yes, no explicit maximum/at caseworker's discretion ²⁷	Yes, other amount ²⁸
Kansas	240 per month ²⁹	No difference	Yes, 1 hour daily ³⁰	Yes, 6 hours daily ³¹
Kentucky	18 per day	No difference	Yes, no explicit maximum/at caseworker's discretion ³²	Yes, no explicit maximum/at caseworker's discretion, if the subsidy is not needed during work hours ³³
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 ³⁴
Maine	50 per week ³⁵	No difference	Yes, no explicit maximum/at caseworker's discretion	Yes, 8 hours daily ³⁶
Maryland	No maximum	NA	Yes, 1 hour daily ³⁷	Yes, no explicit maximum/at caseworker's discretion
Massachusetts	50 per week ³⁸	30 per week	Yes, 5 hours weekly ³⁹	Yes, other amount ⁴⁰
Michigan	45 per week ⁴¹	No difference ⁴²	Yes, 5 hours weekly ⁴³	Yes, 8 hours daily
Minnesota	60 per week ⁴⁴	No difference	Yes, 2 hours daily	Yes, no explicit maximum/at caseworker's discretion ⁴⁵
Mississippi	No maximum	NA	No	No
Missouri	No maximum	NA	Yes, 2 hours daily ⁴⁶	Yes, 8 hours daily ⁴⁷
Montana	20 per day ⁴⁸	No difference	Yes, no explicit maximum/at caseworker's discretion ¹⁸	No

Table 23. Maximum Hours Approved for Child Care Subsidies, 2019 ²

State/Territory*	Maximum Hours of Care Paid for By Subsidy	If Maximum Hours of Care Policy Differs for Part-Time Workers ³	If Travel Hours are Paid By the Subsidy	If Rest Hours are Paid By the Subsidy ⁴
Nebraska	60 per week ⁴⁹	No difference	Yes, no explicit maximum/at caseworker's discretion ¹⁸	Yes, 8 hours daily
Nevada	14 per day ⁵⁰	No difference	Yes, 2 hours daily	Yes, 8 hours daily ⁵¹
New Hampshire	No maximum	NA	Yes, 1 hour daily ⁵²	Yes, no explicit maximum/at caseworker's discretion ⁵³
New Jersey	No maximum	NA	No ⁵⁴	Yes, no explicit maximum/at caseworker's discretion ⁵⁵
New Mexico	No maximum	NA	Yes, no explicit maximum/at caseworker's discretion ⁵⁶	No
New York	No maximum	NA	Yes, 1.25 hours daily ⁵⁷	No ⁵⁸
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
North Carolina	23 per day	No difference	Yes, no explicit maximum/at caseworker's discretion ⁵⁹	Yes, no explicit maximum/at caseworker's discretion ⁶⁰
North Dakota	No maximum	NA	Yes, other amount ⁶¹	Yes, 6 hours daily
Ohio	No maximum	NA	Yes, 4 hours daily ⁶²	Yes, 8 hours daily
Oklahoma	No maximum	NA	Yes, no explicit maximum/at caseworker's discretion ⁶³	Yes, 8 hours daily, if the subsidy is not needed during work hours ⁶⁴
Oregon	323 per month	No difference	Yes, other amount ⁶⁵	Yes, 5 hours daily ⁶⁶
Pennsylvania	No maximum	NA	Yes, no explicit maximum/at caseworker's discretion	Yes, no explicit maximum/at caseworker's discretion ⁶⁷
Puerto Rico	No maximum	NA	Yes, no explicit maximum/at caseworker's discretion	No
Rhode Island	No maximum	NA	Yes, 1 hour daily ⁶⁸	No

Table 23. Maximum Hours Approved for Child Care Subsidies, 2019 ²

State/Territory*	Maximum Hours of Care Paid for By Subsidy	If Maximum Hours of Care Policy Differs for Part-Time Workers ³	If Travel Hours are Paid By the Subsidy	If Rest Hours are Paid By the Subsidy ⁴
South Carolina	No maximum	NA	Yes, 1 hour daily ⁶⁸	Yes, no explicit maximum/at caseworker's discretion ⁶⁹
South Dakota	210 per month	No difference	Yes, no explicit maximum/at caseworker's discretion ⁷⁰	Yes, 8 hours daily ⁷¹
Tennessee	No maximum	NA	Yes, no explicit maximum/at caseworker's discretion	Yes, 8 hours daily
Texas	18 per day	No difference	Yes, no explicit maximum/at caseworker's discretion	No ⁷²
Utah	172 per month	No difference	No	Yes, no explicit maximum/at caseworker's discretion, if the subsidy is not needed during work hours ⁷³
Vermont	No maximum	NA	Yes, 2 hours daily	Yes, 8 hours daily
Virgin Islands	No maximum	NA	No	No
Virginia	60 per week ⁷⁴	No difference	Yes, no explicit maximum/at caseworker's discretion	Yes, no explicit maximum/at caseworker's discretion ⁷⁵
Washington	16 per day	No difference	Yes, 1 hour daily ⁷⁶	Yes, 8 hours daily
West Virginia	No maximum	NA	Yes, no explicit maximum/at caseworker's discretion ⁷⁷	Yes, 8 hours daily ⁷⁸
Wisconsin	75 per week ⁷⁹	No difference	Yes, no explicit maximum/at caseworker's discretion	Yes, no explicit maximum/at caseworker's discretion ⁸⁰
Wyoming	16 per day ⁸¹	No difference	Yes, 1 hour daily	No

Source: CCDF Policies Database October 1, 2019 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2019 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ Information not found in State's/Territory's manual.

² This table captures policies for the maximum amount of care that may be approved, and states may approve families at lower amounts of time.

- ³ 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.
- ⁴ 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.
- ⁵ Reasonable travel time cannot exceed eight hours per week or the applicant's actual travel time.
- ⁶ Travel time is allowed for up to an hour before and an 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 and a half hours before and one and a half hours after the activity.
- ⁷ 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 8 pm and 6 am.
- ⁸ Families are authorized for a maximum of 23 full-day units of care per month.
- ⁹ If a parent is participating in fewer than 20 hours of authorized activities per week, he or she can be authorized for a maximum of 11 full-day or 23 part-day units of care per month. A part-day unit is defined as less than six hours per day.
- ¹⁰ For services based on employment, travel hours cannot exceed half of the daily hours authorized for approved activities, up to a maximum of four hours per day. For services based on training towards a vocational goal, travel cannot exceed half of the weekly hours authorized for training, up to a maximum of four hours per day.
- ¹¹ 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.
- ¹² Child care for eligible activities includes reasonable transportation time to and from the child care location and the eligible activity. Authorization for care is based on the child's verified need, not on the parent's activity schedule.
- ¹³ Authorization for care is based on the child's verified need, not on the parent's activity schedule.
- ¹⁴ There is also a maximum of 12 hours per day and of 65 hours per week.
- ¹⁵ Travel time is limited to a maximum of one hour per day unless the parent verifies that additional time is needed.
- ¹⁶ Care is not authorized between 11 pm and 7 am if the child care provider is a person who resides in the same home as the child, unless the child is younger than 3 or has special needs.
- ¹⁷ Travel time may be approved for 1.5 hours each way.
- ¹⁸ The amount of time approved for travel varies on a case-by-case basis.
- ¹⁹ Travel time is authorized in accordance with the amount of care or child care rate payments the family qualifies for: full-time, two-thirds care, one-third care, or casual care.
- ²⁰ Rest hours are approved on a case-by-case basis.
- ²¹ Care is authorized for 12 hours per month, or 3 hours per week.
- ²² The amount of travel time must be reasonable based on the parent's situation and is determined on a case-by-case basis.
- ²³ If a parent works five hours or more during the third shift (defined as the hours from 11 pm to 7 am), care may be authorized during daytime hours in order for the parent to sleep if all other income and eligibility requirements are met and if 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.
- ²⁴ Care is paid for as needed to cover actual travel time to and from an activity that confers need for child care. Authorized travel time per week may not exceed 10 hours for full-time care and 5 hours for part-time care.
- ²⁵ The amount of rest hours authorized must correspond with the family's documented service need.
- ²⁶ 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.
- ²⁷ 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.
- ²⁸ Care for sleep during daytime hours may be authorized if the parent works at least six hours between 8 pm and 6 am 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.

- ²⁹ A maximum of 240 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.
- ³⁰ Child care authorization must accommodate commuting time. The state suggests a maximum of 30 minutes of travel time each way. More time may be approved on a case-by-case basis.
- ³¹ Sleep time may be approved when the majority of hours are worked between 9 pm and 7 am. The state recommends a maximum of six hours of sleep time per day be approved.
- ³² Child care authorization must accommodate commuting time.
- ³³ 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 eight hours per day.
- ³⁴ If the parent works nights and does not receive child care paid for by the subsidy program while working, payments can be made for sleep time.
- ³⁵ Exceptions can be approved on a case-by-case basis by the department supervisor.
- ³⁶ Children cannot remain in care longer than 18 hours within a 24-hour period.
- ³⁷ More time can be allowed if the client produces documentation of need for more travel time.
- ³⁸ Applicants who participate in approved activities for at least 30 hours each week are eligible to receive up to 50 hours of care each week at any one placement.
- ³⁹ 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.
- ⁴⁰ Parents working at least 30 hours per week will be authorized for full-time care and parents working between 20 and 30 hours per week will be authorized for part-time care. Care for rest hours can count towards the amount of authorized care.
- ⁴¹ The maximum number of hours of care that can be authorized is 90 hours biweekly per child. A child may be authorized for any of the following increments: 20, 40, 60, 80, or 90 hours of care biweekly.
- ⁴² The maximum number of hours of care that can be authorized is 90 hours biweekly per child. At eligibility determination, verified valid need hours are added to travel hours and rounded up to either 20, 40, 60, 80 or 90 hours of authorized care per biweekly period.
- ⁴³ Ten hours are approved per biweekly pay period for each approved activity. Clients who require over ten hours per pay period for each approved activity must provide documentation supporting the need and the local office must approve the additional hours.
- ⁴⁴ 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 or license exempt center is the maximum weekly rate.
- ⁴⁵ 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.
- ⁴⁶ Travel time is authorized based on the reasonable need of the parent, but cannot exceed one hour each way, from the child care provider to work, job training, or other activity, and from work, job training, or other activity to the child care provider. More than two hours may be approved for parents traveling to more than one eligible activity in a day.
- ⁴⁷ Care may be authorized if the parent works any part of a shift that is between 10 pm and 6 am.
- ⁴⁸ When care is provided for more than 12 but less than 18 hours per day, the full-day rate multiplied by 1.25 will be paid. When the authorization and corresponding authorization plan specify service exceeding 18 but less than 20 hours of care during a calendar day, the full-day rate multiplied by 1.5 will be paid.
- ⁴⁹ 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.
- ⁵⁰ A child in care for more than 14 hours in a 24-hour period may be referred to child protective services.
- ⁵¹ 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.

- ⁵² One hour of standard commute time is available per each unique day that a parent is participating in an approved activity. The highest number of days is used when the participant has a regular fluctuating schedule. The number of days of approved travel does not change when the parent works an occasional extra day or days.
- ⁵³ Rest hours (not to exceed the number of hours worked) 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.
- ⁵⁴ Travel time to and from the provider is covered for TANF recipients, up to 90 minutes each way between the provider and the parent's work activity.
- ⁵⁵ Full-time care is approved for families that meet the minimum work hour requirement. The amount of care approved may be used to cover work activities and sleep time as needed.
- ⁵⁶ Clients and caseworkers should negotiate a reasonable amount of study and travel time during the application or recertification process.
- ⁵⁷ Policy coded for New York City. 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.
- ⁵⁸ Policy coded for New York City. Districts have the option to authorize up to eight hours of child care to enable a parent or caretaker who works a second or third shift to sleep.
- ⁵⁹ Travel time is factored in when determining hours of care needed. The amount of travel time approved is determined on a case-by-case basis.
- ⁶⁰ If a parent who works third shifts needs to sleep during the day, care may be approved during the day to help support the family.
- ⁶¹ For all activities except searching for a job, an additional 25 percent can be added to the caretaker's allowable weekly activity hours to allow for travel and break time.
- ⁶² Travel time is paid for up to four hours round trip.
- ⁶³ The amount of travel time that is authorized depends on what is reasonable for the client.
- ⁶⁴ 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 reasonable travel time.
- ⁶⁵ The system adds 25 percent to work hours to account for travel and meal time.
- ⁶⁶ 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. Sleep hours cannot be authorized for two-parent households.
- ⁶⁷ Care is authorized for sleep time upon completion of an overnight shift. 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.
- ⁶⁸ Additional travel time may be authorized if there is a documented need.
- ⁶⁹ The state may approve up to full-time care if needed.
- ⁷⁰ Supplemental hours are generally calculated at 25 percent of the time spent working or in school (an additional 10 supplemental hours are added for time between classes for parents who are students). For school-age children, supplemental hours are calculated at 30 percent. Supplemental hours include travel time. When needed, more or less travel time may be approved depending on the location of the provider and the applicant's place of employment.
- ⁷¹ 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.
- ⁷² Policy coded for the Gulf Coast Region. The rest hours policy is determined by each local area.
- ⁷³ Care is authorized for non-work hours as long as the amount of child care assistance does not exceed the amount of actual work hours.
- ⁷⁴ 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.
- ⁷⁵ 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.

⁷⁶ Thirty minutes each way is authorized by default. Caseworkers may approve more time on a case-by-case basis.

⁷⁷ The amount of time approved for travel varies on a case-by-case basis.

⁷⁸ 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.

⁷⁹ Parents authorized for self-employment may not exceed 50 hours per week for related self-employment work. Travel time cannot be added on top of the 50 hours, but can be included as long as the authorization does not exceed 50 hours. Child care assistance is authorized for the number of hours the parent is involved in self-employment activities for the first 12 months of self-employment. Following the first 12 months of self-employment, the number of hours authorized for self-employment is calculated by the weekly self-employment income divided by the state minimum wage. Foster Care, court-order kinship care, and subsidize guardianship families are exempt from the limits on self-employment authorization. Instead they must submit an activity schedule to determine the authorized hours for self-employment activities.

⁸⁰ Parents who work third shift may request an authorization for child care for sleep time based on the parent's need to sleep in order to remain employed. The local agency will determine a reasonable number of authorized hours based on the parent's request. The same family may also request child care for the hours of employment. The maximum hours approved for child care subsidies cannot exceed 75 hours per week.

⁸¹ 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, 2019

State/Territory*	If Care May be Approved for School Breaks for	
	Parents who are Students ²	If Care May be Approved for Maternity Leave ³
Alabama	Yes, 90 days	Yes, 90 days
Alaska	Yes, through the end of the eligibility period ⁴	Yes, 3 months ⁵
American Samoa	--- ¹	--- ¹
Arizona	Yes, 3 months	Yes, 3 months
Arkansas	Yes, through the end of the eligibility period ⁶	Yes, 6 weeks
California	Yes, through the end of the eligibility period ⁷	Yes, through the end of the eligibility period ⁷
Colorado	Yes, 3 months	Yes, 12 weeks
Connecticut	Yes, 3 months	Yes, through the end of the eligibility period
DC	Yes, through the end of the eligibility period	Yes, through the end of the eligibility period
Delaware	Yes, through the end of the eligibility period	Yes, through the end of the eligibility period
Florida	Yes, 3 months	Yes, 3 months
Georgia	Yes, through the end of the eligibility period ⁸	Yes, through the end of the eligibility period ⁸
Guam	Yes, 90 days	Yes, 90 days
Hawaii	Varies ⁹	Yes, 6 weeks, if job will be available upon return
Idaho	Yes, 3 months	Yes, 3 months
Illinois	Yes, 90 days ¹⁰	Yes, 90 days
Indiana	Yes, 16 weeks ¹¹	Yes, 16 weeks
Iowa	Yes, through the end of the eligibility period	Yes, through the end of the eligibility period
Kansas	Yes, 3 months ¹²	Yes, 3 months
Kentucky	Yes, 3 months ¹³	Yes, 3 months
Louisiana	Yes, through the end of the eligibility period ¹⁴	Yes, through the end of the eligibility period ¹⁴
Maine	Yes, paid for entire break ¹⁵	Yes, no explicit maximum/at caseworker's discretion, if job will be available upon return
Maryland	Yes, 90 days	Yes, 90 days
Massachusetts	Yes, 12 weeks ¹⁶	Yes, 12 weeks ¹⁶
Michigan	Yes, through the end of the eligibility period ¹⁷	Yes, through the end of the eligibility period ¹⁷
Minnesota	Varies ¹⁸	Varies ¹⁹
Mississippi	Yes, through the end of the eligibility period	Yes, through the end of the eligibility period
Missouri	Yes, paid for entire break ²⁰	Yes, no explicit maximum/at caseworker's discretion, if job will be available upon return ²¹
Montana	Yes, through the end of the eligibility period ²²	Yes, 3 months ²³
Nebraska	Yes, 3 months	Yes, 3 months
Nevada	No	No
New Hampshire	Yes, through the end of the eligibility period	Yes, through the end of the eligibility period
New Jersey	Varies ²⁴	Yes, 3 months ²⁵
New Mexico	Yes, 3 months	Yes, 3 months
New York	Yes, 4 weeks ²⁶	No ²⁷

Table 24. Care During Breaks in Activities, 2019

State/Territory*	If Care May be Approved for School Breaks for	
	Parents who are Students ²	If Care May be Approved for Maternity Leave ³
No. Mariana Islands	Yes, 90 days	Yes, 90 days
North Carolina	Yes, 90 days ²⁸	Yes, 90 days ²⁹
North Dakota	Yes, paid for entire break ³⁰	Yes, 3 months
Ohio	Yes, paid for entire break ³¹	Yes, no explicit maximum/at caseworker's discretion, if job will be available upon return ³²
Oklahoma	Yes, through the end of the eligibility period	Yes, through the end of the eligibility period
Oregon	Yes, paid for entire break, if child will lose slot in child care program	Yes, 3 months ³³
Pennsylvania	Yes, through the end of the eligibility period ³⁴	Yes, through the end of the eligibility period ³⁴
Puerto Rico	Yes, 2 months	Yes, 3 months ³⁵
Rhode Island	Yes, paid for entire break	Yes, 3 months, if job will be available upon return ³⁶
South Carolina	Yes, through the end of the eligibility period	Yes, through the end of the eligibility period
South Dakota	Yes, through the end of the eligibility period	Yes, through the end of the eligibility period
Tennessee	Yes, 90 days ³⁷	Yes, 90 days
Texas	Yes, through the end of the eligibility period	Yes, through the end of the eligibility period
Utah	Yes, through the end of the eligibility period ³⁸	Yes, through the end of the eligibility period
Vermont	Yes, 3 months	Yes, 12 weeks ³⁹
Virgin Islands	Yes, 60 days	Yes, 60 days
Virginia	Yes, through the end of the eligibility period	Yes, through the end of the eligibility period
Washington	Yes, 14 days	Yes, through the end of the eligibility period
West Virginia	Yes, 15 days ⁴⁰	No ⁴¹
Wisconsin	Yes, through the end of the eligibility period ⁴²	Yes, 3 months, if job will be available upon return
Wyoming	Yes, through the end of the eligibility period	Yes, through the end of the eligibility period

Source: CCDF Policies Database October 1, 2019 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2019 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ Information not found in State's/Territory'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. This variable also does not capture grace periods when a family is determined no longer eligible for a subsidy (see Table 21).

³ Maternity leave applies to working parents or guardians who are temporarily not working due to the birth of a child. This table does not capture policies for parents who are physically incapacitated (see the full database for more detail). This variable also does not capture grace periods when a family is determined no longer eligible for a subsidy (see Table 21).

⁴ For temporary breaks in school, care is approved until the end of the eligibility period.

⁵ For temporary breaks due to maternity leave, care is approved for up to three months.

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

⁷ Policy coded for Non-CalWORKs Alternative Payment Program.

⁸ Parents are not required to report a change in activity requirement that is temporary. Parents also have the option to request that care be suspended for up to 12 weeks per eligibility period during school breaks or maternity leave.

⁹ 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).

¹⁰ Child care eligibility may also be extended up to 30 calendar days from the date of graduation so the parent may seek employment.

¹¹ Care may be approved during breaks in school for up to 16 weeks, provided the applicant plans to return to school at the end of the break.

¹² Care is authorized for school breaks as long as the parent remains enrolled and is expected to return at the end of the break.

¹³ Care may be approved during school breaks for teen parents. Care may be approved for school breaks up to three months or until the end of the eligibility period.

¹⁴ For temporary breaks in eligible activities, care is approved until the end of the eligibility period.

¹⁵ A student must be enrolled for benefits to continue. During summer breaks, teen parents may continue to receive benefits if they are taking summer classes or are engaged in an approved employment activity.

¹⁶ Care is authorized for up to 12 weeks due to any temporary change including: any time-limited absence from an approved activity due to an illness or need to care for a family member; any interruption in work for a seasonal worker who is not working between regular work seasons; any semester or holiday work for student parents; any reduction in work, training, or education hours, as long as the parent is still participating in the approved activity; any other cessation of an approved activity that does not exceed 12 weeks; and any change in residency within the state.

¹⁷ Care may continue through school breaks or maternity leave if it occurs during the 12-month eligibility period.

¹⁸ Care is approved during temporary school breaks during the 12-month eligibility period. For families that request care with more than one provider per child, from a legal non-licensed (LNL) provider, or where a parent in the family is employed by a licensed child care center, if the break is expected to last 15 calendar days or less, care continues to be approved during the break period. In these cases, if education is the only authorized activity, then care will be suspended for breaks lasting longer than 15 days. If the break lasts longer than 15 days and there is another authorized activity, the number of hours authorized for care will be reduced.

¹⁹ Care is approved during temporary breaks, including maternity or paternity leave, during the 12-month eligibility period. For families that request care with more than one provider per child, from a legal non-licensed (LNL) provider, or where a parent in the family is employed by a licensed child care center, the family's authorized care may be suspended following a 15-day notice when the parents have a temporary break in their work or school activity.

²⁰ Care may be authorized as long as the break is temporary and the parent plans to return to school.

²¹ Thirty-day child care extensions during breaks in eligible activities are limited to two per calendar year.

²² For temporary breaks in eligible school activities, care is approved until the end of the eligibility period.

²³ For temporary breaks in eligible activities, care is approved for up to three months for maternity leave.

²⁴ Care is authorized for up to three months for any temporary cessations in education or training activity, including student holidays or school breaks. Only one temporary cessation is allowed per 12-month eligibility period, allowing for only one school break per eligibility period.

²⁵ Care will be authorized for up to three months for a time-limited absence from work for family or medical leave. Care will only be authorized for one three-month period of leave per 12-month eligibility period.

²⁶ Policy coded for New York City. Districts have the option to provide child care services during a break in approved activities for a period not to exceed two weeks, or one month if child care arrangements would otherwise be lost. For TANF families, this policy is not optional. There is no maximum number of breaks per year.

²⁷ 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.

- ²⁸ Students can receive 90 days of continued service during breaks from school or holidays. Continuation of services may be extended beyond 90 days if the agency determines such an extension is warranted.
- ²⁹ Child care services are continued for medical and maternity leave lasting up to 90 days. Continuation of services may be extended beyond 90 days if the agency determines such an extension is warranted.
- ³⁰ Care is paid for a caretaker who has a non-temporary school break if the provider charges for time during the break.
- ³¹ If the caretaker plans to return to school following the break, a scheduled school break is considered an approved activity. If the caretaker does not plan to return, child care can be authorized for up to 13 weeks. These 13 weeks may not extend beyond the eligibility period.
- ³² If employment is available upon return, maternity leave is considered an approved activity, and the length of time approved for leave is determined by the employer. If employment is not available upon return, child care can be authorized for up to 13 weeks. These 13 weeks may not extend beyond the eligibility period.
- ³³ Medical verification is required to extend maternity leave beyond three months.
- ³⁴ Parents are not required to report a change in activity during the eligibility period but have the option to request that care be suspended during a break in activity. At redetermination, if a parent has an activity to return to within 92 days of the redetermination date, presumptive eligibility may be granted.
- ³⁵ Care is authorized for maternity leave that is in accordance with the employer's policies, for a maximum of three months.
- ³⁶ Care may be authorized during approved leave from work for a maximum of three months. Absences beyond three months must be reported and may affect eligibility.
- ³⁷ Parents may receive 90 days of coverage to bridge gaps in eligible activities. Additionally, for teen parents, care continues during all official school breaks with no work requirements.
- ³⁸ While on a break from education, parents may choose not to use their months against the 24-month training limit.
- 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 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.
- ⁴¹ Care is not authorized for maternity or paternity leave, but it can be authorized for physician-ordered bed rest.
- ⁴² In order to qualify for subsidies, the parent must work 20 hours per month in addition to school. If the parent does not continue to work during the school break, care will be authorized for three months.

Table 25. Priority Policies for Different Groups, 2019 ¹

State/Territory*	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	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	Priority over other children, subsidy not 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	Subsidy guaranteed	Subsidy guaranteed ⁴	Same priority as other CCDF-eligible children	Subsidy guaranteed
American Samoa	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed ⁵	Income at or below 50 percent of the state median income	NA ⁶	NA ⁶	NA ⁶	Priority over other children, subsidy not guaranteed
Arizona	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed ⁷	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	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
California	Varies ⁸	Priority over other children, subsidy not guaranteed ⁸	Income ranked in order among eligible applicants ⁸	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 ⁹
Colorado	Priority over other children, subsidy not guaranteed	Varies ¹⁰	Income below 130 percent of the Federal Poverty Guidelines	Varies ¹⁰	Varies ¹⁰	Varies ¹⁰	Varies ¹¹
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 ¹²	Priority over other children, subsidy not guaranteed ¹³	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children

Table 25. Priority Policies for Different Groups, 2019 ¹

State/Territory*	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
DC	Subsidy guaranteed	Subsidy guaranteed	Income at or below 130 percent of the Federal Poverty Guidelines	Subsidy guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Subsidy guaranteed
Delaware	Subsidy guaranteed	Subsidy guaranteed	Income below 40 percent of the Federal Poverty Guidelines prior to or after allowable deductions ¹⁴	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 ¹⁵	Same priority as other CCDF-eligible children	NA	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed ¹⁶	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed ¹⁷
Georgia	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	Total gross income below 50 percent of the current Federal Poverty Guidelines	Varies ¹⁸	Priority over other children, subsidy not guaranteed	Varies ¹⁹	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	Subsidy guaranteed	Subsidy guaranteed	Subsidy guaranteed	Priority over other children, subsidy not guaranteed
Hawaii	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed ²⁰	Income below 100 percent of the Federal Poverty Guidelines	Varies ²¹	Priority over other children, subsidy not guaranteed ²⁰	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed ²⁰
Idaho	NA ²²	NA ²²	NA ²²	NA ²²	NA ²²	NA ²²	NA ²²

Table 25. Priority Policies for Different Groups, 2019 ¹

State/Territory*	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
Illinois	Subsidy guaranteed	Subsidy guaranteed	Working families whose monthly incomes are at or below 185 percent of the most current Federal Poverty Guidelines	Subsidy guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	NA ²³
Indiana	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	NA	Varies ²⁴	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed
Iowa	Varies ²⁵	Priority over other children, subsidy not guaranteed	Income at or below 100 percent of the Federal Poverty Guidelines ²⁶	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 ²⁷	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 ²⁸	Priority over other children, subsidy not guaranteed	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 ²⁹	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Subsidy guaranteed ³⁰
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, 2019 ¹

State/Territory*	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 ³¹	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 ³²
Massachusetts	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	NA	Subsidy guaranteed ³³	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	Subsidy guaranteed ³⁴
Michigan	NA ²²	NA ²²	NA ²²	NA ²²	NA ²²	NA ²²	NA ²²
Minnesota	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	NA	Subsidy guaranteed ³⁵	Subsidy guaranteed	Same priority as other CCDF-eligible children	NA ³²
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	Subsidy 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	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	Lower income, relative to family size	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed ³⁶	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children
Nebraska	NA ²²	NA ²²	NA ²²	NA ²²	NA ²²	NA ²²	NA ²²

Table 25. Priority Policies for Different Groups, 2019 ¹

State/Territory*	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	Subsidy guaranteed
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 ³⁷	Same priority as other CCDF-eligible children	Subsidy guaranteed ³⁸
New Jersey	Priority over other children, subsidy not guaranteed ³⁹	Priority over other children, subsidy not guaranteed ³⁹	Income at or below 150 percent of the Federal Poverty Guidelines	Subsidy guaranteed	Subsidy guaranteed	Priority over other children, subsidy not guaranteed ³⁹	Subsidy guaranteed
New Mexico	Priority over other children, subsidy not guaranteed ⁴⁰	Priority over other children, subsidy not guaranteed	Income at or below 100 percent of the Federal Poverty Guidelines	Subsidy guaranteed	Subsidy guaranteed ⁴¹	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	Established by districts, set at or below 200 percent of the state income standard which defines the upper income level for families with very low income	Subsidy guaranteed ⁴²	Subsidy guaranteed ⁴²	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed ⁴³
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	NA ⁶	NA ⁶	NA ⁶	Same priority as other CCDF-eligible children

Table 25. Priority Policies for Different Groups, 2019 ¹

State/Territory*	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	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
North Dakota	NA ²²	NA ²²	NA ²²	NA ²²	NA ²²	NA ²²	NA ³²
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 ²²	NA ²²	NA ²²	NA ²²	NA ²²	NA ²²	NA ²²
Oregon	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	NA	Same priority as other CCDF-eligible children	Subsidy guaranteed ⁴⁴	Same priority as other CCDF-eligible children	Subsidy guaranteed ⁴⁵
Pennsylvania	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	NA	Varies ⁴⁶	Subsidy guaranteed ⁴⁷	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children
Puerto Rico	Priority over other children, subsidy not guaranteed ⁴⁸	Same priority as other CCDF-eligible children	NA	Priority over other children, subsidy not guaranteed ⁴⁹	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed
Rhode Island	NA ²²	NA ²²	NA ²²	NA ²²	NA ²²	NA ²²	NA ²²
South Carolina	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed	Income below 55 percent of the state median income	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	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed ⁵⁰
Tennessee	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	Subsidy guaranteed

Table 25. Priority Policies for Different Groups, 2019 ¹

State/Territory*	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
Texas	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	NA	Subsidy guaranteed ⁵¹	Subsidy guaranteed ⁵²	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed
Utah	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	NA	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children
Vermont	NA ²²	NA ²²	NA ²²	NA ²²	NA ²²	NA ²²	NA ²²
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	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed
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 ⁵³
Washington	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	NA	Priority over other children, subsidy not guaranteed ⁵⁴	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed
West Virginia	NA ²²	NA ²²	NA ²²	NA ²²	NA ²²	NA ²²	NA ²²
Wisconsin	NA ²²	NA ²²	NA ²²	NA ²²	NA ²²	NA ²²	NA ²²
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	Same priority as other CCDF-eligible children

Source: CCDF Policies Database October 1, 2019 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2019 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

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 caseworker.

³ Parents who are working or attending school (if subsidies have been paid for full-time student status for less than five years) receive first priority and parents who are looking for work or attending school (if subsidies have been paid for full-time student status for five years or more) receive second priority. Within the priority groups, families are admitted to the program based on income ranking, with priority going in order from the lowest ranking to the highest ranking.

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

⁵ Within the very low-income priority group, single-parent households are given first priority and two-parent households are given second priority.

⁶ This territory or outlying area does not have a TANF program.

⁷ There are varying priority levels depending on income.

⁸ Policy coded for Non-CalWORKs Alternative Payment Program. Among families who are eligible for child care subsidies based on income, families are admitted to the program according to income ranking, with priority going in order from the lowest ranking to the highest ranking. If two or more families have the same income rank, families with children with exceptional needs are admitted first.

⁹ First priority is given to children receiving child protective services and then to children at risk of abuse, neglect, or exploitation.

¹⁰ 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 very low-income applicants with income below 130 percent of the Federal Poverty Guidelines, homeless families, and children of teen parents. The county may assign additional priority groups.

¹¹ Counties have the option of prioritizing children in foster care.

¹² The policy applies to parents receiving TANF who are employed or in an approved activity.

¹³ Families with working parents whose cash assistance benefits were discontinued in the past five years receive second priority.

¹⁴ Deductions include housing-related expenses such as rent, mortgage, insurance, property taxes, monthly utility expenses, telephone expenses, and unreimbursed medical costs.

¹⁵ A child who has special needs, has been determined eligible as a student with a disability, has a current individual education plan with a school district, and is not younger than three years of age but not yet eligible for admission to kindergarten is given priority.

¹⁶ This priority is given to children who have not yet started kindergarten and are not enrolled concurrently in Pre-K and Head Start.

¹⁷ This priority is given to children under the age of nine who are not enrolled concurrently in Pre-K and Head Start.

¹⁸ Applicants participating in TANF job search or work activities are given priority.

¹⁹ Families are considered at risk of becoming dependent on TANF if they have completed TANF orientation, been determined income-eligible for TANF, and have been referred for employment services.

²⁰ Families with the least amount of monthly income are given first priority within the priority group.

²¹ 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.

²² All CCDF-eligible children receive the same priority.

²³ The state's child welfare and protection agency pays for child care provided for child protective services and foster care. To ensure continuity of care, families with CPS cases that are transitioning out of the state system are eligible to receive an additional six months of child care through the Child Care Assistance Program. Families receive six months of child care services regardless of participation in eligible activities.

²⁴ 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.

²⁵ Children with special needs are given priority if the family's income is below 200 percent of the Federal Poverty Guidelines and the parents are working at least 28 hours per week.

²⁶ Priority for families with very low-income is limited to parents who are working or participating in an education or training program in aggregate of 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.

²⁷ 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.

²⁸ Applicants are given priority if they are working or participating in work preparation activities.

²⁹ Families receiving TANF and participating in the TANF work program are given priority.

³⁰ Children are guaranteed subsidized child care if it is part of the approved family services plan.

³¹ Primary consideration within each priority group is given to children with special needs or those displaying evidence of homelessness.

³² Child protective services child care is not provided under the state's primary child care subsidy program.

³³ If families have a referral with the department that administers TANF, they are given immediate access to child care without having to be placed on a waiting list.

³⁴ 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.

³⁵ In addition to TANF cash assistance, families in the four-month TANF diversionary work program can receive care for those four months.

³⁶ 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.

³⁷ Children are given priority if TANF assistance ended within the past 92 calendar days.

³⁸ Children whose preventive or protective child care service has closed within the past 92 calendar days are given priority.

³⁹ 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.

- ⁴⁰ Children with special needs are prioritized within the very low income priority group and the income group above 100 and at or below 200 percent of the Federal Poverty Guidelines priority group, but do not make up their own priority group.
- ⁴¹ Families must have received TANF benefits for at least one month in the last 12 months and have their TANF cases closed at least in part due to increased earnings or a loss of earned income disregards.
- ⁴² 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 who are engaged in work.
- ⁴³ Policy coded for New York City. Eligibility and priority are determined at the district level.
- ⁴⁴ Families must have received TANF benefits for at least one month within the last three months.
- ⁴⁵ Families working with a protective services caseworker may be eligible for child care assistance if it prevents the child from being removed from his or her home, allows the child to be returned home, or allows the child to be placed with a relative or adult with whom the child or family has an established relationship.
- ⁴⁶ Families participating in TANF employment and training activities are guaranteed subsidies.
- ⁴⁷ The subsidy is guaranteed if the family is applying within 183 days of transitioning off of TANF.
- ⁴⁸ Children with special needs as certified by the health department or department of education are given priority regardless of whether they meet the income requirements.
- ⁴⁹ The policy applies to parents receiving TANF who are employed.
- ⁵⁰ The child must be under court supervision.
- ⁵¹ Subsidies are guaranteed for families enrolled in the TANF work program and other TANF applicants eligible for child care assistance.
- ⁵² Assistance is guaranteed for families eligible for at-risk child care if they received child care through the TANF employment and training program and their TANF was denied or voluntarily ended within the last 12 months due to employment or an earnings increase.
- ⁵³ The priority for children in protective services also includes children in foster care prevention.
- ⁵⁴ Families applying for or receiving TANF are given first priority. Families receiving TANF and working to cure a sanction are given second priority.

Table 26. Priority Policies for Different Groups (continued), 2019 ¹

State/Territory*	Children in Foster Care	Children in Head Start	Children in Pre-K	Homeless Families	Teen Parents Not in School	Teen Parents in School	Military Families
Alabama	Priority over other children, subsidy not guaranteed ²	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Subsidy guaranteed	Same priority as other CCDF-eligible children	Priority over other children, subsidy not 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	Subsidy guaranteed	Same priority as other CCDF-eligible children	Subsidy guaranteed	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 ³	Priority over other children, subsidy not guaranteed ⁴	Priority over other children, subsidy not guaranteed ⁴	Priority over other children, subsidy not guaranteed ⁵
Arizona	Subsidy guaranteed	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	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	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
Colorado	Varies ⁷	Varies ⁸	Varies ⁸	Varies ⁸	Varies ⁸	Varies ⁸	Varies ⁸
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 ⁹	Same priority as other CCDF-eligible children

Table 26. Priority Policies for Different Groups (continued), 2019 ¹

State/Territory*	Children in Foster Care	Children in Head Start	Children in Pre-K	Homeless Families	Teen Parents Not in School	Teen Parents in School	Military Families
DC	Subsidy guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Subsidy guaranteed	Subsidy guaranteed	Subsidy guaranteed ¹⁰	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 ¹¹	Same priority as other CCDF-eligible children	Subsidy guaranteed ¹²	Same priority as other CCDF-eligible children
Florida	Priority over other children, subsidy not guaranteed ¹³	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed ¹⁴	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children
Georgia	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	Priority over other children, subsidy not guaranteed ¹⁵	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
Guam	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Subsidy guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	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 ¹⁶	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children
Idaho	NA ¹⁷	NA ¹⁷	NA ¹⁷	NA ¹⁷	NA ¹⁷	NA ¹⁷	NA ¹⁷
Illinois	NA ¹⁸	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 ¹⁹	Same priority as other CCDF-eligible children

Table 26. Priority Policies for Different Groups (continued), 2019 ¹

State/Territory*	Children in Foster Care	Children in Head Start	Children in Pre-K	Homeless Families	Teen Parents Not in School	Teen Parents in School	Military Families
Indiana	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	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children
Iowa	Same priority as other CCDF-eligible children ²⁰	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Subsidy guaranteed	Same priority as other CCDF-eligible children ²¹	Priority over other children, subsidy not guaranteed ²¹	Same priority as other CCDF-eligible children
Kansas	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
Kentucky	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	Varies ²²	Priority over other children, subsidy not guaranteed ²³	Same priority as other CCDF-eligible children
Louisiana	Subsidy guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Subsidy guaranteed	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	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
Maryland	NA ¹⁸	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), 2019 ¹

State/Territory*	Children in Foster Care	Children in Head Start	Children in Pre-K	Homeless Families	Teen Parents Not in School	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 ¹⁷	NA ¹⁷	NA ¹⁷	NA ¹⁷	NA ¹⁷	NA ¹⁷	NA ¹⁷
Minnesota	NA ¹⁸	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 ²⁴	Priority over other children, subsidy not guaranteed ²⁵
Mississippi	Subsidy guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Subsidy guaranteed	Varies ²⁶	Priority over other children, subsidy not guaranteed ²⁶	Priority over other children, subsidy not guaranteed ²⁷
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	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
Nebraska	NA ¹⁸	NA ¹⁷	NA ¹⁷	NA ¹⁷	NA ¹⁷	NA ¹⁷	NA ¹⁷
Nevada	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	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	Subsidy guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Varies ²⁸

Table 26. Priority Policies for Different Groups (continued), 2019 ¹

State/Territory*	Children in Foster Care	Children in Head Start	Children in Pre-K	Homeless Families	Teen Parents Not in School	Teen Parents in School	Military Families
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 ²⁹	Priority over other children, subsidy not guaranteed ²⁹	Priority over other children, subsidy not guaranteed ²⁹	Same priority as other CCDF-eligible children
New Mexico	Subsidy guaranteed	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
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
No. Mariana Islands	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	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children
North Carolina	Priority over other children, subsidy not guaranteed ³⁰	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children ³¹	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children ³⁰	Same priority as other CCDF-eligible children
North Dakota	NA ¹⁷	NA ¹⁷	NA ¹⁷	NA ¹⁷	NA ¹⁷	NA ¹⁷	NA ¹⁷
Ohio	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	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children
Oklahoma	NA ¹⁷	NA ¹⁷	NA ¹⁷	NA ¹⁷	NA ¹⁷	NA ¹⁷	NA ¹⁷
Oregon	Subsidy guaranteed ³²	Varies ³³	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), 2019 ¹

State/Territory*	Children in Foster Care	Children in Head Start	Children in Pre-K	Homeless Families	Teen Parents Not in School	Teen Parents in School	Military Families
Pennsylvania	Priority over other children, subsidy not guaranteed	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	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children
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	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children
Rhode Island	NA ¹⁷	NA ¹⁷	NA ¹⁷	NA ¹⁷	NA ¹⁷	NA ¹⁷	NA ¹⁷
South Carolina	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	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	Subsidy guaranteed ³⁴	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	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
Texas	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	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed
Utah	NA ³⁵	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	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children
Vermont	NA ¹⁷	NA ¹⁷	NA ¹⁷	NA ¹⁷	NA ¹⁷	NA ¹⁷	NA ¹⁷

Table 26. Priority Policies for Different Groups (continued), 2019 ¹

State/Territory*	Children in Foster Care	Children in Head Start	Children in Pre-K	Homeless Families	Teen Parents Not in School	Teen Parents in School	Military Families
Virgin Islands	Subsidy guaranteed	Same priority as other CCDF-eligible children	Same priority as other CCDF-eligible children	Subsidy guaranteed	Priority over other children, subsidy not guaranteed	Priority over other children, subsidy not guaranteed	Same priority as other CCDF-eligible children
Virginia	Same priority as other CCDF-eligible children ³⁶	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
Washington	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	Varies ³⁷	Same priority as other CCDF-eligible children
West Virginia	NA ¹⁷	NA ¹⁷	NA ¹⁷	NA ¹⁷	NA ¹⁷	NA ¹⁷	NA ¹⁷
Wisconsin	NA ¹⁷	NA ¹⁷	NA ¹⁷	NA ¹⁷	NA ¹⁷	NA ¹⁷	NA ¹⁷
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

Source: CCDF Policies Database October 1, 2019 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2019 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

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 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.

⁴ Families with a minor parent are considered to have special needs and given priority over other families.

⁵ To receive priority, the child's biological parent must require child care assistance in order to serve in the military. For two-parent households, the second parent must also be engaged in a qualifying activity.

⁶ In order to receive priority, the family must be residing in a homeless shelter.

⁷ Counties have the option of prioritizing children in foster care.

⁸ 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 very low-income applicants with income below 130 percent of the Federal Poverty Guidelines, homeless families, and children of teen parents. The county may assign additional priority groups.

⁹ 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. New applicants who are teen parents ages 18 and 19 who attend high school or equivalent are not eligible for subsidies.

¹⁰ All parents under age 26 in high school or GED activities are included in this category.

¹¹ Homeless families are provided care for up to three months or until they find suitable living arrangements.

¹² Participants may be attending middle school, high school, adult basic education classes, GED classes, or a similar program approved by the state department of education.

¹³ This priority is given to children under the age of nine who are not enrolled concurrently in Pre-K and Head Start.

¹⁴ Families must have a documented referral from a certified homeless shelter or domestic violence shelter. This priority is given to children under the age of nine who are not enrolled concurrently in Pre-K and Head Start.

¹⁵ Children in state-funded Pre-K programs are given priority for before-and-after care. Children enrolled in privately funded Pre-K programs are not given priority and are treated the same as other CCDF-eligible children.

¹⁶ 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.

¹⁷ All CCDF-eligible children receive the same priority.

¹⁸ Foster child care is not provided under the state's primary child care subsidy program.

¹⁹ In order to be eligible for a priority service group, teen parents must be enrolled full time in elementary school, high school, or GED classes to obtain a high school degree or its equivalent. Teen parents who are in school retain priority through age 19.

²⁰ Only non-licensed relative foster families receive child care through the CCDF program.

²¹ First priority is given to minor parents working towards a high school diploma or its equivalent. Second priority is given 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.

²² If the teen parent is a TANF recipient, or attending high school or pursuing a general equivalency degree (GED), he or she is given priority over others.

²³ Families with teen parents are given priority over other children if the teen parents are attending high school or pursuing a general equivalency degree (GED).

²⁴ Parents under age 18 are given priority over parents age 18 to 20 within this group. This group is eligible for child care assistance under the TANF program if the teen parent in school is under 21 years old, pursuing a high school or general equivalency diploma, not a TANF participant, and lives in a county that has a waiting list. The teen parent is placed in the first priority group for the waiting list.

²⁵ Priority is given to families in which at least one parent in the assistance unit is a veteran.

²⁶ Teen parents must generally be enrolled full time in high school or attending a full-time educational program. If the teen parent has been legally emancipated from their parent, the teen parent must either meet the work requirement or be enrolled full time in an educational or training program.

²⁷ Children of parents deployed in the Mississippi National Guard or Reserve qualify for this priority status at up to 85 percent of the state median income.

²⁸ A child receiving child care subsidies with a single parent who is placed on orders or deployed for military service and will be out of the state for more than 30 days is exempt from the wait list if the child's legal guardian is determined eligible.

²⁹ 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.

³⁰ Counties have local options for how to prioritize these families when they have a waiting list in place.

³¹ 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.

³² A child involved with protective services may be eligible for child care assistance if it allows the child to be placed with a relative or adult with whom the child or family has an established relationship.

³³ The subsidy is guaranteed if the child is in a Head Start contracted slot. If the child is not in a contracted slot, the subsidy is not guaranteed.

³⁴ When a family experiencing homelessness applies for the subsidy, the family can receive care for up to 30 days while the application is reviewed and verified. At the end of 30 days, if the family is eligible they will continue to receive the subsidy. If the family is ineligible, their case will be closed but the care received would not be considered an overpayment.

³⁵ 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.

³⁶ Child care for foster children is not provided under the state's primary child care subsidy program. A foster child may receive CCDF funding if a local department maintains custody of the child, but the child is in the physical custody of his or her parents and the parents need child care in order to maintain employment or to attend an approved education or training program.

³⁷ Teen parents who are not living with a parent or guardian and are attending high school full time with an on-site child care center receive priority.

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.⁴⁵ Copayment amounts often vary by family size, income, number of children in care, and a variety of other factors. The family’s copayment is applied toward the maximum amount the State/Territory will pay to the provider, also known as the “reimbursement rate” (discussed in more detail in section V below).

Under the federal guidelines, States/Territories may choose to waive copayments in some cases.⁴⁶ 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 a 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 variety of methods to calculate copayments, including a flat dollar amount, percent of income, and percent of the price of care or maximum rate, and the amounts and percentages usually vary across state-established income bands. Some States/Territories use a combination of approaches, such as using a flat dollar amount for lower-income families while using a percentage, capped at a predetermined amount, for higher-income families. Additionally, States/Territories may 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 27 and 28)

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 guidelines or an earlier year’s guidelines. States/Territories may also choose to exempt families receiving benefits or services from certain other programs. Table 27 shows whether each State/Territory exempts

⁴⁵ 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. 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.

⁴⁶ 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. 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.

families from paying copayments when the family has income below the poverty guidelines, receives one of several benefits or services, or meets certain characteristics. Highlights for 2019 include:

- Sixteen 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 these States/Territories ranging from 2013 to 2019 (the current guidelines as of October 1, 2019).
- Three States (Maryland, Michigan, and Oklahoma) exempt SSI recipients from paying copayments.
- Two States (Pennsylvania and Texas) fully exempt participants in the SNAP Employment and Training program from paying copayments, while two more States (Kansas and Virginia) allow exemptions for SNAP Employment and Training program participants in some situations.
- Seven States have some type of copayment exemption for families with teen parents. In some of these cases, the teen parent must be attending school.
- One State (Missouri) has established copayment exemptions for families with children with special needs.
- Thirty-eight States/Territories allow copayment exemptions for families with CPS cases in some or all circumstances, while 34 States/Territories have a 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 CPS or foster care program.

Table 28 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 or guardians are not considered part of the TANF assistance unit), families transitioning out of the TANF program, families applying for TANF benefits, and families at risk of becoming dependent on TANF.⁴⁷ Key findings from 2019 include:

- Nineteen States exempt all families currently receiving TANF from paying copayments.

⁴⁷ The TANF program excludes parents or 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.

- Six States have some type of copayment exemption for families transitioning off TANF, while 14 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.

Copayment Administration (Table 29)

Copayment policies regarding how and what families are expected to pay also vary across the States/Territories. Table 29 provides policies for who collects the copayment, whether families are expected to pay providers for any charges that exceed the maximum reimbursement rate (the amount States/Territories will pay the provider, described in more detail in section V), 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. When the child is absent from care, the State/Territory may require the parent to still pay the provider a copayment or pay both the standard copayment and the amount the State/Territory would reimburse providers (the entire price of care).

Highlights from 2019 include:

- All but three States/Territories require all copayments to be paid to the provider. Additionally, one State/Territory does not require families to make copayments.
- Twelve States do not allow providers to charge families the difference when the price of care is higher than the maximum reimbursement rate. In some States/Territories, the parents may be asked to pay the difference only under certain circumstances or only for certain types of providers. (Tables 36 through 38 give State/Territory maximum rates for different types of providers.)
- In a majority of States/Territories, the family continues to pay the same copayment when the child is ill or on vacation. In two States (Oklahoma 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.
- A majority 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, Ohio, Oklahoma, and West Virginia) do not require parents to pay a copayment for days the provider is closed, while three States require parents to pay the entire price of care.

Copayment Calculation (Table 30)

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 price 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 could change with every change in family income.⁴⁸ When States/Territories set copayments as a percentage of the price of child care, the percentage varies depending on family income.⁴⁹

Table 30 shows each State's/Territory's basic computation method and indicates if each State/Territory uses a different income definition for computing copayments or has a minimum copayment policy. Key findings from 2019 include:

- In 34 States/Territories, copayments are specific dollar amounts based on set income ranges. In twelve States, copayments are specific percentages of family income based on set income ranges. In five States/Territories (Arkansas, Guam, Hawaii, Nevada, and Vermont), copayments are a percentage of the price of child care or of the maximum reimbursement rate. In four States (Ohio, Oregon, South Dakota, and Washington), the copayment is calculated using a more complex formula, such as using a combination of dollar amounts and percentages.
- Only New York uses different income definitions for establishing eligibility versus copayments. New York's copayment calculation uses only the portion of income that exceeds the poverty guideline.
- Ten States have explicitly defined minimum copayment amounts for all families, which may supersede the minimum copayment produced by the established fee schedule. Minimum copayments are expressed as monthly dollar amounts (ranging from \$1 per month in Illinois to \$27 per month in Oregon), weekly dollar amounts (ranging from \$5 per week in Pennsylvania to \$15 per week in New York City), or a percentage of the price of care (five percent of the price of care in Nevada). In these States, if the standard formula (such as a percentage of income) would result in a

⁴⁸ Most States now only require families to report changes in income if their new income exceeds the eligibility limit. In these States, if the copayment amount is based on a percentage of income, the family's copayment would only change if the family chose to report a decrease in income.

⁴⁹ The CCDF Final Rule no longer allows States/Territories to set copayments as a percentage of the price of care.

copayment lower than the State statutory minimum, the family instead pays the State statutory minimum copayment.

Copayment Adjustments (Table 31)

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 in care, the hours of child care, or the need for special-needs care. Table 31 describes these policies.

Highlights from 2019 concerning copayments for families with more than one child in care include:

- In 27 States/Territories, the copayment is a dollar amount or percentage of income and is family-level; it does not vary depending on the number of children in the family who are receiving subsidized child care.
- In nine 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 the one-child copayment in four States/Territories, to 75 percent of the one-child copayment in one State. Copayment adjustments for the third child in care range from 25 percent of the one-child copayment in Massachusetts and New Mexico to 50 percent of the one-child copayment in Florida.
- In nine of the States that adjust the copayment for additional children in care (Colorado, the District of Columbia, Iowa, Kentucky, Maryland, Tennessee, Texas, Utah, and Wisconsin), the amount of the adjustment varies by family income range.
- Five States/Territories (Arkansas, Guam, Hawaii, Nevada, and Vermont) set copayments as a percent of the maximum reimbursement rate or price 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 price of care for more children will result in a higher copayment.

Highlights from 2019 concerning part-time care and care for children with special needs 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 to 75 percent of the full-time copayment.
- Three States/Territories (Mississippi, Missouri, and South Dakota) make some type of adjustment to the copayment for children with special needs. Missouri does not require any copayment for children with special needs, Mississippi asks families with children with special needs to pay only \$10 per month, and South Dakota caps the copayment at 10 percent of the family's gross monthly income.

Copayment Amounts (Tables 32, 33, and 34)

After determining 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 32, 33, and 34 provide copayments for select family sizes and income levels. For the States in which copayments vary in different areas of the State, 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 32 shows copayments for a single-parent family with a two-year-old child, table 33 looks at a single-parent family with a two-year-old and a four-year-old, and table 34 gives copayments for a two-parent family with a two-year-old and a four-year-old. For each family makeup, the table shows the monthly copayment in each program for several 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; the earnings are received evenly over the year; and that the parents receive applicable State/Territory earned income disregards. In States/Territories that base the copayment on a percentage of the price of care, the maximum reimbursement rate is 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 made for each table are noted below.

Table 32 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 price of care or maximum reimbursement rate.) Key findings from 2019 include:

- Copayments for a two-person family with \$15,000 in annual earnings range from \$0 per month in 20 States/Territories to \$447 per month in Hawaii. The median copayment across the States/Territories for a family with those characteristics is \$25. A two-person family at this income level does not qualify for subsidized care in one State/Territory.
- Copayments for a two-person family with \$20,000 in annual earnings range from \$0 per month in five States/Territories to \$745 per month in Hawaii. The median copayment across the States/Territories is \$89. In one State/Territory, a two-person family at this income level does not qualify for subsidized care.
- Copayments for a two-person family with \$25,000 in annual earnings range from \$0 per month in three States/Territories to \$1,043 per month in Hawaii. The median copayment across the States/Territories is \$141. In 12 States/Territories, a two-person family at this income level does not qualify for subsidized care.
- Copayments for a two-person family with \$30,000 in annual earnings range from \$0 per month in one State/Territory to \$1,341 per month in Hawaii. Across the States/Territories, the median copayment is \$197. In 22 States/Territories, a two-person family at this income level does not qualify for subsidized care.

Table 33 provides monthly copayments for a three-person family. In addition to the assumptions used for all 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 2019 include:

- Copayments for a three-person family with \$15,000 in annual earnings range from \$0 per month in 21 States/Territories to \$446 per month in Hawaii. The median copayment across the States/Territories is \$31.
- Copayments for a three-person family with \$20,000 in annual earnings range from \$0 per month in 20 States/Territories to \$892 per month in Hawaii. The median copayment is \$50. A three-person family at this income level does not qualify for subsidized care in one State/Territory.
- Copayments for a three-person family with \$25,000 in annual earnings range from \$0 per month in four States/Territories to \$1,115 per month in Hawaii. The median copayment across the

States/Territories is \$130. A three-person family at this income level does not qualify for subsidized care in one State/Territory.

- Copayments for a three-person family with \$30,000 in annual earnings range from \$0 per month in four States/Territories to \$1,561 per month in Hawaii. Across the States/Territories, the median copayment is \$174. In 10 States/Territories, a three-person family at this income level does not qualify for subsidized care.

Table 34 provides monthly copayments for a four-person family. This table uses the same basic assumptions as the other copayment amount tables, and it also assumes the family consists of two parents and two children, ages 24 months and 48 months. Highlights from 2019 include:

- Copayments for a four-person family with \$25,000 in annual earnings range from \$0 per month in 18 States/Territories to \$892 per month in Hawaii. The median copayment is \$65. A four-person family at this income level does not qualify for subsidized care in one State/Territory.
- Copayments for a four-person family with \$30,000 in annual earnings range from \$0 per month in five States/Territories to \$1,115 per month in Hawaii. Across the States/Territories, the median copayment is \$142. A four-person family at this income level does not qualify for subsidized care in one State/Territory.
- Copayments for a four-person family with \$35,000 in annual earnings range from \$0 per month in four States/Territories to \$1,561 per month in Hawaii. The median copayment is \$196. In 8 States/Territories, a four-person family at this income level does not qualify for subsidized care.
- Copayments for a four-person family with \$40,000 in annual earnings range from \$0 per month in two States/Territories to \$1,784 per month in Hawaii. The median copayment is \$266. In 16 States/Territories, a four-person family at this income level does not qualify for subsidized care.

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 2018 to 2019

From 2018 to 2019, a handful of States/Territories made changes to policies related to copayment administration. Seven States updated the year of poverty guidelines used to exempt families from copayments. In addition, Nebraska and the Virgin Islands began exempting families with income below the 2019 poverty guidelines, and Oklahoma began to exempt families with income below the 2018 poverty guidelines. Kansas, New York, and the Virgin Islands began exempting families with children in foster care. Vermont and the Virgin Islands began exempting families with CPS cases. Arkansas began exempting from a

copayment TANF families with earned income, TANF families without earned income, and child-only TANF families from a copayment. Delaware changed how it calculates the copayment from a percent of cost or maximum reimbursement rate to a percent of income, and Nebraska changed how it calculates the copayment from a dollar amount to a percent of income. Four States/Territories (Delaware, Nebraska, Oklahoma, and the Virgin Islands) changed their policies to use a family-level copayment, with no adjustment for multiple children in care. Additionally, in Delaware, the new copayment policies do not adjust the copayment for part-time care.

Although there were relatively few changes in copayment administration, there were many changes in copayment amounts. From 2018 to 2019, there were changes in copayment amounts captured in the tables in 40 States/Territories, with the majority of States/Territories that implemented changes decreasing their copayment. For example, copayment amounts for a two-person family with \$15,000 in annual earnings increased in two States/Territories and decreased in nine. Copayment amounts for a two-person family with \$20,000 in annual earnings changed in 25 States/Territories, increasing in 4 and decreasing in 21. Copayment amounts for a two-person family with \$25,000 in annual earnings increased in two States/Territories and decreased in fifteen. Two-person families with \$25,000 were newly eligible in five States/Territories.⁵⁰ Copayment amounts for a two-person family with \$30,000 in annual earnings increased in North Dakota and decreased in 12 States. In four States/Territories, two-person families at this income level were not eligible in 2018, but they were eligible in 2019. In the Virgin Islands, two-person families at this income were eligible in 2018, but they were not eligible in 2019.

From 2018 to 2019, copayment amounts for a three-person family with \$15,000 in annual earnings changed in seven States/Territories, increasing in three and decreasing in four. Copayments for a three-person family with \$20,000 in annual earnings increased in two States/Territories and decreased in six. Copayment amounts for a three-person family with \$25,000 in annual earnings changed in 29 States/Territories from 2018 to 2019, increasing in four and decreasing in twenty-five. Copayments for a three-person family with \$30,000 in annual earnings changed in 18 States/Territories, increasing in four and decreasing in twelve. In Guam, three-person families at this income level were not eligible in 2018, but they were eligible in 2019. In Nebraska, three-person families at this income were eligible in 2018, but they were not eligible in 2019.

From 2018 to 2019, copayments for a four-person family with \$25,000 in annual earnings changed in 12 States/Territories, increasing in three and decreasing in nine. Copayments for a four-person family with \$30,000 in annual earnings increased in seven States/Territories and decreased in fifteen. Copayments for a

⁵⁰ Because the annual income amounts used for these tables have been held constant across the report series, some increases in the number of States/Territories allowing eligibility at a particular nominal income level are due to States/Territories increasing their eligibility limits in proportion to the degree of inflation.

four-person family with \$35,000 in annual earnings increased in three States/Territories and decreased in ten. In Guam, Missouri, and Nevada, four-person families at this income were not eligible in 2018, but they were eligible in 2019. In Nebraska and the Virgin Islands, four-person families at this income were eligible in 2018, but they were not eligible in 2019. Copayments for a four-person family with \$40,000 in annual earnings increased in four States/Territories and decreased in eight. In Guam, Kentucky, Louisiana, New Mexico, and South Carolina, four-person families at this income level were not eligible in 2018, but they were eligible in 2019. In Nebraska, four-person families at this income were eligible in 2018, but they were not eligible in 2019.

Table 27. Copayment Exemptions, 2019 ²

State/Territory*	Exempt if Income Under 100 Percent of the Federal Poverty Guidelines ³	Year of Poverty Guidelines Used for Exemption	Exempt if SSI Recipients	Exempt if Family with a Foster Child	Exempt if SNAP E&T Participants	Exempt if Teen Parents	Exempt if Family with a Child with Special Needs	Exempt if Family with CPS Case
Alabama	Yes	2017	No	No	No	No	No	Varies ⁴
Alaska	No	NA	No	No	No	No	No	No
American Samoa	Yes ⁵	--- ¹	NA ⁶	NA ⁵	NA ⁷	NA ⁵	NA ⁵	NA ⁵
Arizona	No	NA	No	Yes	No	No	No	Yes
Arkansas	No	NA	No	Yes	No	Varies ⁸	No	Yes
California	No ⁹	NA	No	No ¹⁰	NA ¹¹	No	No	Varies ¹²
Colorado	No ¹³	NA	No	Varies ¹⁴	NA ¹⁵	Varies ¹⁶	No	Varies ¹⁴
Connecticut	No	NA	No	Varies ¹⁷	No	No	No	No
DC	Yes	2019	No	Yes	No	Yes	No	Yes
Delaware	No ¹⁸	NA	No	No	No ¹⁹	Varies ²⁰	No	Yes
Florida	No ²¹	NA	No	Varies ²¹	NA ²²	No	No	Varies ²¹
Georgia	No ²³	NA	No	Yes	No	Varies ²⁴	No	Varies ²⁵
Guam	Yes	2013	No ²⁶	Yes	No	No	No	Yes
Hawaii	No ²⁷	NA	No	Yes	No	No	No	Yes
Idaho	No	NA	No	Yes	No	No	No	No
Illinois	No	NA	No	NA ²⁸	No	No	No	NA ²⁹
Indiana	Yes	2019	No	Yes ³⁰	No	No	No	Yes ³⁰
Iowa	Yes	2018	No	No ³¹	No	No	No	Yes
Kansas	No ³²	NA	No ³³	Yes ³⁴	Varies ³⁵	No	No	Yes ³⁶
Kentucky	No ³⁷	NA	No	No	No	No	No	Varies ³⁸
Louisiana	No	NA	No	Yes	No	No	No	Yes ³⁹
Maine	No	NA	No	No	No	No	No	No
Maryland	No	NA	Yes	NA ⁴⁰	No	No	No	NA ⁴¹
Massachusetts	No	NA	No	Yes	No	No	No	Yes
Michigan	Yes	2017	Yes	Yes	No	No	No	Yes
Minnesota	No ⁴²	NA	No	NA ⁴³	No	No	No	NA ⁴⁴
Mississippi	No	NA	No	No	No	No	No	No
Missouri	No ⁴⁵	NA	No	Yes	NA ⁴⁶	No	Yes	Yes

Table 27. Copayment Exemptions, 2019 ²

State/Territory*	Exempt if Income Under 100 Percent of the Federal Poverty Guidelines ³	Year of Poverty Guidelines Used for Exemption	Exempt if SSI Recipients	Exempt if Family with a Foster Child	Exempt if SNAP E&T Participants	Exempt if Teen Parents	Exempt if Family with a Child with Special Needs	Exempt if Family with CPS Case
Montana	No	NA	No	No	No	No	No	Yes
Nebraska	Yes	2019	No	Varies ⁴⁷	No	No	No	Varies ⁴⁷
Nevada	No	NA	No	Yes	No	No	No	Yes
New Hampshire	No	NA	No	Varies ⁴⁸	No	No	No	Varies ⁴⁸
New Jersey	Yes	2019	No	Yes ⁴⁹	NA ⁵⁰	No	No	Varies ⁵¹
New Mexico	No	NA	No	Yes	No	No	No	Yes
New York	No	NA	No	Yes	No	No	No	Yes ⁵²
No. Mariana Islands	No	NA	No	No	NA ⁵³	No	No	No
North Carolina	No	NA	No	Yes	No	No	No	Yes
North Dakota	No ⁵⁴	NA	No	NA ⁵⁵	No	Varies ⁵⁶	No	NA ⁵⁷
Ohio	Yes	2019	No	No	No	No	No	Yes
Oklahoma	Yes	2018	Yes ⁵⁸	Yes	No	No	No	Varies ⁵⁹
Oregon	No	NA	No	No	No	No	No	No
Pennsylvania	No	NA	No	No	Yes	No	No	No
Puerto Rico	No ⁶⁰	NA	No ⁶¹	Yes	NA ⁶²	No	No	Yes
Rhode Island	Yes	2018	No	No	No	No	No	No
South Carolina	No	NA	No	Yes ⁶³	No	No	No	Varies ⁶⁴
South Dakota	Yes ⁶⁵	2019	No	Yes	No	No	No	No
Tennessee	No	NA	No	Yes	No	No	No	Yes
Texas	No	NA	No	Yes	Yes	No	No	Yes ⁶⁶
Utah	Yes	2019	No	NA ⁶⁷	No	No	No	No
Vermont	No	NA	No	Yes	No	No	No	Yes ⁶⁸
Virgin Islands	Yes	2019	No ⁶⁹	Yes	No	No	No	Yes
Virginia	No ⁷⁰	NA	No	No ⁷¹	Varies ⁷²	No	No	No
Washington	No	NA	No	Varies ⁷³	No	No	No	Varies ⁷³
West Virginia	No	NA	No	Yes	No	No	No	Varies ⁷⁴
Wisconsin	No	NA	No	Yes	No	Varies ⁷⁵	No	Yes
Wyoming	Yes	2019	No	No	No	No	No	No

Source: CCDF Policies Database October 1, 2019 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2019 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ Information not found in State's/Territory'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 with income below 100 percent of the Federal Poverty Guidelines are exempt. Exemptions below 100 percent of the Federal Poverty Guidelines are footnoted.

⁴ The parental fee is not required unless the referral from the child protective services department specifically indicates that the parental fee requirement applies.

⁵ American Samoa serves all families that fall below the Federal Poverty Guidelines and waives the copayment for all eligible families.

⁶ This territory or outlying area does not have SSI or a similar program.

⁷ The nutrition assistance program does not have an employment and training program.

⁸ Parents attending high school full time are exempt from copayments.

⁹ Families with income below 40 percent of state median income are not assessed a copayment.

¹⁰ In counties participating in the Emergency Child Care Bridge Program for Foster Children, relative caretakers, foster families, or parenting youth in foster care are eligible to receive a six-month payment or voucher for child care services.

¹¹ Child care for SNAP E&T participants is not provided under the state's primary child care subsidy program.

¹² 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.

¹³ 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 \$5. 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 six months, although hardship awards may be extended if conditions causing hardship persist.

¹⁴ Protective services cases may have a parent fee if the child has income. The county may choose to waive the child's income on a case-by-case basis thus resulting in no copayment.

¹⁵ Child care for SNAP E&T participants is not provided under the state's primary child care subsidy program.

¹⁶ 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.

¹⁷ If the family is applying only for the foster child, there is no copayment, as the foster child is considered a family of one with no income.

¹⁸ Families with income below 40 percent of the Federal Poverty Guidelines are not assessed a copayment.

¹⁹ 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.

²⁰ Exemptions are limited to teen parents age 18 and younger attending high school or its equivalent.

²¹ Reduced fees or copayment exemptions are decided on a case-by-case basis.

- ²² Child care for SNAP E&T participants is not provided under the state's primary child care subsidy program.
- ²³ Families with a gross applicable income at or below 10 percent of the Federal Poverty Guidelines are exempt from paying a copayment.
- ²⁴ Minor parents, under 18 years old, are exempt.
- ²⁵ Families with open child protective services cases are not exempt from copayments. Children in foster care are exempt from the copayment.
- ²⁶ Recipients of Old-Age Assistance, Aid to the Blind, and Aid to the Permanently and Totally Disabled are not exempt.
- ²⁷ Families with income below 50 percent of the 2004 Federal Poverty Guidelines are exempt from copayments.
- ²⁸ Foster child care is not provided under the state's primary child care subsidy program.
- ²⁹ Child protective services child care is not provided under the state's primary child care subsidy program.
- ³⁰ Income is not counted, and therefore no copayment is assigned, for families receiving care for foster children.
- ³¹ Only non-licensed relative foster families receive child care through the CCDF program.
- ³² Employed families with income below 70 percent of the Federal Poverty Guidelines are not assigned a copayment.
- ³³ If the only child who needs child care assistance is an SSI recipient, only the child's non-exempt income is counted.
- ³⁴ Families with foster children are exempt from copayments for the care of the foster children even if the foster family's own children are included.
- ³⁵ 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.
- ³⁶ Children in child protective services generally are provided care through a different program. If a family is receiving services through family preservation or child protective services though, they may be eligible for the state's primary child care subsidy program, and they are exempt from copayments.
- ³⁷ Families whose monthly income is below \$900, regardless of family size, pay no copayment.
- ³⁸ 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.
- ³⁹ 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.
- ⁴⁰ Foster child care is not provided under the state's primary child care subsidy program.
- ⁴¹ Child protective services child care is not provided under the state's primary child care subsidy program.
- ⁴² Families with income below 75 percent of the Federal Poverty Guidelines are exempt from copayments.
- ⁴³ Foster child care is not provided under the state's primary child care subsidy program.
- ⁴⁴ Child protective services child care is not provided under the state's primary child care subsidy program.
- ⁴⁵ Families whose income is below 25 percent of the state median income pay only \$1 annually.
- ⁴⁶ Child care for SNAP E&T participants is not provided under the state's primary child care subsidy program.
- ⁴⁷ 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.
- ⁴⁸ Exemption from copayments for foster care and child protective services cases is determined on a case-by-case basis.
- ⁴⁹ There is no copayment for a child under department child protective services supervision who is in a paid foster placement. Families who provide foster care are exempt from copayments for foster children. If there are other children in the household receiving child care subsidies, the household income and size is calculated excluding foster children.

- ⁵⁰ Child care for SNAP E&T participants is not provided under the state's primary child care subsidy program.
- ⁵¹ 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.
- ⁵² Policy coded for New York City. Copayment exemptions for child protective services cases vary by district. Failure to pay a fee or family share cannot be a basis for denial or discontinuance of services for protective services.
- ⁵³ The nutrition assistance program does not have an employment and training program.
- ⁵⁴ The state may choose to waive the copayment requirement for families with very low income.
- ⁵⁵ Foster child care is not provided under the state's primary child care subsidy program.
- ⁵⁶ Teen parents are exempt from copayments if they are participating in the Crossroads program, a program to assist with child care costs for parents through age 20 who have primary responsibility for the care of their children and who are in high school or working on their GED.
- ⁵⁷ Child protective services child care is not provided under the state's primary child care subsidy program.
- ⁵⁸ 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.
- ⁵⁹ Child protective services cases may or may not be exempt from the copayment depending on the family's circumstances.
- ⁶⁰ Families with income below 50 percent of the state median income are exempt from copayments.
- ⁶¹ Recipients of Old-Age Assistance, Aid to the Blind, and Aid to the Permanently and Totally Disabled are not exempt.
- ⁶² The nutrition assistance program does not have an employment and training program.
- ⁶³ 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.
- ⁶⁴ If a child is part of an open child protective services case and is living outside the home with a relative or other designated caretaker, the caretaker is exempt from copayments.
- ⁶⁵ Families with income below 160 percent of the Federal Poverty Guidelines are exempt from copayments.
- ⁶⁶ Families are exempt unless the child protective services agency assigns a copayment.
- ⁶⁷ 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.
- ⁶⁸ The subsidy program makes full payment for child care services delivered to children in protective services in cases where the Family Services worker has determined the need for services. If a child care provider is not approved to provide specialized services at the time of the child's enrollment, the provider must be approved for specialized services within 30 days.
- ⁶⁹ Recipients of Old-Age Assistance, Aid to the Blind, and Aid to the Permanently and Totally Disabled are not exempt.
- ⁷⁰ Families with all children enrolled in Head Start and Early Head Start whose income falls at or below 100 percent of the Federal Poverty Guidelines are exempt from copayments. Families that include children not in Head Start are required to pay a copayment. For SNAP E&T participants, if income falls at or below 100 percent of the Federal Poverty Guidelines, the family is exempt from copayments.
- ⁷¹ There is a separate program for foster child care subsidies. A foster child may receive CCDF funding if a local department maintains custody of a child, but the child is in the physical custody of his or her parents and the parents need child care in order to maintain employment or to attend an approved education or training program.
- ⁷² For SNAP E&T participants, if income falls at or below 100 percent of the Federal Poverty Guidelines, the family is exempt from copayments.

⁷³ Children in child protective services and foster care can receive child care services through the child care program administered by the children's administration. If these families receive child care through the state's primary child care subsidy program, they are not exempt from copayments unless they received a referral from child welfare services or child protective services through a family assessment response.

⁷⁴ Families are not exempt unless the child protective services worker waives the fee as part of an approved safety or treatment plan.

⁷⁵ Teen parents who participate in the state's program to assist school-age children in TANF families with attending and completing school are exempt from the copayment. All other teen parents have their copayment set at the lowest copayment level.

Table 28. Copayment Exemptions for TANF Families, 2019 ¹

State/Territory*	Families at Risk of						Becoming Dependent on TANF ³
	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	
Alabama	No	No	No	No	No	No	No
Alaska	Yes	Yes	Yes	Yes	No	Yes	No
American Samoa	NA ⁴	NA ⁴	NA ⁴	NA ⁴	NA ⁴	NA ⁴	NA ⁴
Arizona	Yes	Yes	Yes	Yes	Varies ⁵	No	No
Arkansas	Yes	Yes	Yes	Yes	No	No	No
California	Yes	Yes	Yes	Yes	No	No	No
Colorado	No	Yes ⁶	Varies ⁶	No ⁶	No ⁷	No	No ⁷
Connecticut	No	Yes	No	Yes	No	No	No
DC	No	Yes	No	Yes	No	No	No
Delaware	Yes	Yes	Yes	Yes	No	Varies ⁸	No
Florida	No	No	No	Varies ⁹	No	No	No
Georgia	No	Yes	No	No	No	No	No
Guam	No	No	No	No	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	Varies 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 ¹⁵	No	No	No	No	No
Montana	No	No	No	No	No	No	No

Table 28. Copayment Exemptions for TANF Families, 2019 ¹

State/Territory*	Families at Risk of						Becoming Dependent on TANF ³
	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	
Nebraska	Yes	Yes	Yes	Yes	No	Yes	No
Nevada	No	Yes ¹⁶	Yes ¹⁶	No	No	No	No
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 ¹⁷	Yes	Yes	Yes	No	Yes ¹⁸	No
No. Mariana Islands	NA ⁴	NA ⁴	NA ⁴	NA ⁴	NA ⁴	NA ⁴	NA ⁴
North Carolina	No	No	No	Yes ¹⁹	No	No	No
North Dakota	No ²⁰	Yes ²⁰	Yes ²⁰	Varies ²¹	Varies ²²	No	Yes ²⁰
Ohio	No	No	No	NA ²³	No	No	No
Oklahoma	Yes	Yes	Yes	Yes	No	Yes	No
Oregon	No	No	No	No	No	No	No
Pennsylvania	No	Yes ²⁴	No	NA ²³	No	No	No
Puerto Rico	No	Yes	No	No	No	No	No
Rhode Island	Yes	Yes	Yes	Yes	No	Yes	No
South Carolina	No	Yes ²⁵	Yes ²⁵	No	No	Yes	No
South Dakota	Yes	Yes	Yes	Yes	No	No	No
Tennessee	Yes	Yes	Yes	Yes	No	No	No
Texas	No ²⁶	Yes	No	No	No	No	No
Utah	No	Yes	Yes	NA ²⁷	Yes	Yes	No
Vermont	Yes ²⁸	Yes ²⁸	Yes ²⁸	Yes ²⁸	No ²⁸	No ²⁸	Yes ²⁸
Virgin Islands	No	Yes ²⁹	No	No	No	Yes ²⁹	No
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	No	No ³⁰	No	No
Wyoming	No	No	No	No	No	No	No

Source: CCDF Policies Database October 1, 2019 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2019 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

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 \$0 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 This territory or outlying area does not have a TANF program.

⁵ Families receiving transitional child care are exempt from copayments beyond the third child in the family.

⁶ TANF participants enrolled in activities other than paid employment are not required to pay a parental fee.

⁷ 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 \$5.

⁸ TANF applicants who are required to participate in the employment and training program and are not working are exempt from copayments.

⁹ Reduced fees or copayment exemptions are decided on a case-by-case basis.

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 Employed non-parent caretaker relatives who receive a child-only TANF benefit for children needing care are exempt if cooperating with child support.

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 \$1 annually.

¹⁶ Only TANF recipients in the New Employees of Nevada (NEON) program are eligible to receive referrals for child care subsidies without a copayment.

¹⁷ Families receiving temporary assistance pay no copayment, unless they are repaying an overpayment. In New York City, families who choose to receive child care in lieu of temporary assistance pay \$15 per week full time, or \$9 per week part time. In other districts, these families pay the minimum copayment of \$1 per week.

¹⁸ TANF applicants who meet work requirements are not required to pay a copayment.

¹⁹ Children with no countable income residing with an adult other than their parents are exempt. TANF income is not countable income.

²⁰ The family is responsible for paying any amount that is over the allowable maximum child care amount.

²¹ 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.

²² Families transitioning off TANF are exempt from copayments as long as the authorized activity for subsidy eligibility is not completed by a TANF recipient who receives SSI, is a disqualified alien, or is an ineligible non-legally responsible caretaker. The family is still responsible for paying any amount that is over the allowable maximum child care amount.

²³ Child-only TANF families are not served under the state's primary child care subsidy program.

²⁴ TANF families that are not working but in the employment and training program are exempt.

²⁵ 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.

²⁶ Only TANF work program participants are exempt from copayments.

²⁷ Child-only TANF families are not served under the state's primary child care subsidy program.

²⁸ TANF recipients and TANF applicants in the diversion program are assigned no copayment and receive services at 100 percent of the established subsidy rate. The families are responsible for paying for fees and services that exceed the established subsidy rate.

²⁹ Copayments are waived for TANF and other families with income below the Federal Poverty Guidelines.

³⁰ Families transitioning off of a TANF work program are assigned the minimum copayment based on 65 percent of the Federal Poverty Guidelines instead of the family's actual income level for the remainder of their eligibility period.

Table 29. Copayment Administration, 2019

State/Territory*	Who Collects the Copayment	If Family is Required to Pay the Difference Between the Maximum Reimbursement Rate and the Provider Rate ¹	What the Family Pays for Absences Due to Illness	What the Family Pays for Absences Due to Vacation	What the Family Pays for Absences Due to Approved Closings
Alabama	Provider	Always	Copayment	Copayment	Copayment
Alaska	Provider	Always	Varies ²	Varies ²	Varies ²
American Samoa	NA ³	Sometimes ⁴	NA ³	NA ³	NA ³
Arizona	Provider	Always ⁵	Varies ⁶	Varies ⁶	Varies ⁶
Arkansas	Provider	Sometimes ⁷	Copayment ⁸	Copayment ⁸	Copayment ⁸
California	Other ⁹	Always	Copayment	Copayment	Copayment
Colorado	Provider	Never ¹⁰	Copayment ¹¹	Copayment ¹¹	Copayment ¹¹
Connecticut	Provider	Always ¹²	Copayment	Copayment	Copayment
DC	Provider	Never	Copayment ¹³	Copayment ¹⁴	Copayment ¹⁵
Delaware	Provider	Sometimes ¹⁶	Copayment ¹⁷	Copayment ¹⁷	Copayment ¹⁸
Florida	Provider	Always	Copayment ¹⁹	Copayment ¹⁹	Copayment ²⁰
Georgia	Provider	Sometimes ²¹	Copayment	Varies ²²	Entire price of care ²³
Guam	Provider	Always	Copayment ²⁴	Copayment ²⁴	No copayment ²⁵
Hawaii	Provider	Always	Copayment	Copayment	Copayment
Idaho	Provider	Always	Copayment	Copayment	Copayment
Illinois	Provider	Sometimes ²⁶	Varies ²⁷	Varies ²⁷	Copayment
Indiana	Provider	Always ²⁸	Copayment	Copayment	Copayment
Iowa	Provider	Never ²⁹	Copayment ³⁰	Copayment ³⁰	Copayment ³⁰
Kansas	Provider ³¹	Always ³²	Varies ³²	Varies ³²	Varies ³²
Kentucky	Provider	Always	Copayment ³³	Copayment ³³	Copayment ³³
Louisiana	Provider	Always	Copayment ³⁴	Copayment ³⁴	Copayment ³⁴
Maine	Provider	Never	Copayment	Copayment	Copayment
Maryland	Provider	Always	Copayment	Copayment	Copayment
Massachusetts	Provider	Never ³⁵	Copayment	Copayment ³⁶	Copayment ³⁷
Michigan	Provider	Always	Copayment ³⁸	Copayment ³⁸	Copayment ³⁸
Minnesota	Provider	Always ³⁹	Copayment ⁴⁰	Copayment ⁴⁰	Copayment
Mississippi	Provider	Always	Copayment ⁴¹	Copayment ⁴¹	Copayment
Missouri	Provider	Always	Copayment	Copayment	Copayment

Table 29. Copayment Administration, 2019

State/Territory*	Who Collects the Copayment	If Family is Required to Pay the Difference Between the Maximum Reimbursement Rate and the Provider Rate ¹	What the Family Pays for Absences Due to Illness	What the Family Pays for Absences Due to Vacation	What the Family Pays for Absences Due to Approved Closings
Montana	Provider	Always	Varies ⁴²	Varies ⁴²	Varies ²
Nebraska	Provider	Never ⁴³	Varies ⁴⁴	Varies ⁴⁴	No copayment
Nevada	Provider	Always	Copayment ⁴⁵	Copayment ⁴⁵	Copayment
New Hampshire	Provider	Always ⁴⁶	Copayment ⁴⁷	Copayment ⁴⁷	Entire price of care
New Jersey	Provider	Always	Copayment	Copayment	Copayment
New Mexico	Provider	Never ⁴⁸	Copayment	Copayment ⁴⁹	Copayment
New York	Provider ⁵⁰	Always	Copayment ⁵¹	Copayment ⁵²	Copayment ⁵³
No. Mariana Islands	Other ⁵⁴	Always	Copayment	Copayment	Copayment
North Carolina	Provider	Always ⁵⁵	Copayment ⁵⁶	Copayment ⁵⁶	Copayment ⁵⁶
North Dakota	Provider	Always ⁵⁷	Varies ⁵⁸	Varies ⁵⁸	Varies ⁵⁹
Ohio	Provider	Never	Varies ⁶⁰	Varies ⁶⁰	No copayment
Oklahoma	Provider	Never ⁶¹	No copayment ⁶²	No copayment ⁶²	No copayment
Oregon	Provider	Sometimes ⁶³	Copayment ⁶⁴	Copayment ⁶⁴	Copayment
Pennsylvania	Provider	Always ⁴⁶	Copayment ⁶⁵	Copayment ⁶⁵	Copayment
Puerto Rico	Other ⁶⁶	Always	Copayment	Copayment	Copayment
Rhode Island	Provider	Never	Copayment ⁶⁷	Copayment ⁶⁷	Copayment
South Carolina	Provider	Always	Copayment	Copayment	Copayment
South Dakota	Provider	Always	Copayment	Copayment	Entire price of care
Tennessee	Provider	Always ⁶⁸	Copayment	Copayment	Copayment
Texas	Provider	Sometimes ⁶⁹	Copayment	Copayment	Copayment
Utah	Provider	Always ⁷⁰	Copayment	Copayment	Copayment
Vermont	Provider	Always	Copayment ⁷¹	Copayment ⁷²	Copayment ⁷³
Virgin Islands	Provider	Always	Copayment	Copayment	Copayment
Virginia	Provider	Sometimes ⁷⁴	Varies ⁷⁵	Varies ⁷⁵	Varies ⁷⁵
Washington	Provider	Never	Copayment	Copayment	Copayment
West Virginia	Provider	Never ⁷⁶	No copayment	No copayment	No copayment
Wisconsin	Provider	Always ⁷⁷	Copayment	Copayment	Copayment ⁷⁸
Wyoming	Provider	Always	Copayment ⁷⁹	Copayment ⁷⁹	Copayment ⁷⁹

Source: CCDF Policies Database October 1, 2019 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2019 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ 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.

² What the family pays depends on the provider's policies. Families must pay a copayment and any additional costs charged by the provider for absences.

³ American Samoa serves all families that fall below the Federal Poverty Guidelines and waives the copayment for all eligible families.

⁴ American Samoa waives the copayment for all eligible families. However, if a family chooses a provider that charges more than the territory's maximum reimbursement rate, the family may be asked to pay the difference.

⁵ If the family uses a provider that charges higher rates, the provider may require the family to pay the difference.

⁶ What the parent is required to pay depends on the provider's written policy.

⁷ The parent is not required to pay the difference unless the provider has received state quality accreditation of level two or higher. 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. Foster care and TANF families are exempt from paying the difference.

⁸ Absences beyond the maximum number allowed are the responsibility of the parent.

⁹ At the discretion of the local agency, copayments may be collected by either the provider or the local agency.

¹⁰ 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.

¹¹ Parental fees are not usually pro-rated for partial months of service. Counties may choose to pro-rate a parent fee on a case-by-case basis. 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.

¹² The parent is responsible for all costs not paid by the state on behalf of the parent.

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

¹⁷ The family will lose eligibility for the child care subsidy if they accrue 10 or more unexplained absences in a month.

¹⁸ The state only reimburses for six holidays per year.

¹⁹ Policy coded for Miami- Dade County. The agency pays for five unexcused absences per month per child and up to five additional absences with documentation of extraordinary circumstances.

²⁰ Policy coded for Miami-Dade County. The agency pays for 12 reimbursable holidays per year.

- ²¹ For children with special needs and children in state custody, the subsidy can be reimbursed up to the full amount of the provider's published rate.
- ²² Parents are required to pay the copayment for days the child is absent from care when the facility is open for the purpose of providing child care services. Care may be suspended for vacation, extended illness, or other extenuating circumstances. Suspension of care cannot extend beyond three weeks per eligibility period for absences taken for a vacation.
- ²³ The provider cannot bill the subsidy program for days the facility is not open for the purpose of providing child care services.
- ²⁴ Absences are reimbursed for a maximum of 10 days.
- ²⁵ The family pays no copayment if the child is absent less than 10 days in a row.
- ²⁶ Providers under the certificate program may require parents to pay the difference. Site-contracted providers cannot ask parents to pay the difference.
- ²⁷ Child care centers and licensed child care homes are paid based on eligible days if attendance at the provider exceeds 80 percent for all eligible days. For child care centers and licensed child care homes that have less than 80 percent attendance on eligible days and license-exempt providers, payments are made based on days of attendance and families may be required to pay the difference.
- ²⁸ The parent assumes responsibility for paying the difference unless the caregiver is willing to accept a lower rate of reimbursement.
- ²⁹ Providers cannot request additional payment from families except for late fees, activity fees, or the price of care if the family uses care beyond the amount approved by the agency.
- ³⁰ Payments may be made to providers for four absences per month.
- ³¹ The state agency pays the child care benefit directly to the parent.
- ³² 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.
- ³³ Payments may be made to providers for five absences per child, per month without verification. Providers can be paid for up to 10 holidays or closings per year, and the provider can choose which 10 holidays are paid.
- ³⁴ Payments may be made to providers for five absences per child, per month without verification. What the family pays depends on the provider's policies.
- ³⁵ 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.
- ³⁶ A maximum of two weeks is allowed for vacation.
- ³⁷ For each event requiring a program to close for emergency purposes, parents may be charged copayments for up to two days. Parents are not responsible for copayments for days the program is closed due to a provider's illness, vacation, or other closings that are not pre-approved by the agency.
- ³⁸ The state will reimburse the provider for up to 360 hours if the child is absent, the child would have regularly been in the care of the provider that day, and the provider charges all parents for absences.
- ³⁹ Payment of the difference is not a condition of child care eligibility.
- ⁴⁰ There is no change in the copayment for child absences except when absent days exceed 10 consecutive days, up to a total of 25 absent days in a calendar year, excluding holidays. In this case, the parents must pay the entire price of care. Exemptions may be made for documented medical conditions or if one parent is under the age of 21, does not have a high school or general equivalency diploma, and attends a school district with child care and other supportive services.
- ⁴¹ Children are allowed up to five paid unexcused absence days per month.

- ⁴² 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 24 days 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.
- ⁴³ 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.
- ⁴⁴ 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.
- ⁴⁵ When a household's child care subsidy payment is based on actual attendance, the child is allowed 21 days per calendar year to be absent from care. When a household's subsidy payment is based on the family's approved schedule, there is no limit to the amount of allowed absences.
- ⁴⁶ 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.
- ⁴⁷ Each child is given a determined annual allotment of absentee hours based on their authorized service level. Parents are responsible for paying for care when the absentee allotment hours have been exhausted.
- ⁴⁸ The copayment for a child cannot exceed the monthly provider reimbursement rate. If this situation arises, the copayment may be reduced by the amount it exceeds the monthly provider reimbursement rate.
- ⁴⁹ If a child is absent for five consecutive scheduled days without a reason such as illness, sudden death, or family medical emergency, payment may discontinue to the provider and the client will remain eligible for the remainder of the eligibility period.
- ⁵⁰ Policy coded for New York City. Each district determines how the copayment is collected. The district may choose to have either the provider or the district collect the copayment.
- ⁵¹ Policy coded for New York City. Local districts choose whether to pay for temporary absences, routine absences, or absences caused by extenuating circumstances.
- ⁵² Policy coded for New York City. Local districts choose whether to pay for breaks in activities. New York City will pay for a period not to exceed four weeks when child care arrangements would otherwise be lost.
- ⁵³ Policy coded for New York City. Local districts choose whether to pay for temporary absences, routine absences, or absences caused by extenuating circumstances. The agency can continue to reimburse providers for absences due to center closings up to five days per year.
- ⁵⁴ All copayments are made directly to the CNMI treasury.
- ⁵⁵ Payment for subsidized child care service is typically based on enrollment but in some instances may be based on attendance. Payment is based on attendance when the child has been absent for more than 10 days in a month, the provider charges on the basis of attendance, or if the provider has an unpaid closure.
- ⁵⁶ 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 10 days in a month and the provider charges on the basis of attendance, or if the provider has an unpaid closure.
- ⁵⁷ The agency may pay for registration fees that are required by the provider to enroll a child in the child care setting.
- ⁵⁸ Up to 40 hours per calendar month can be reimbursed for a child who is absent from the child care setting for any reason when the provider requires payment of the absence.
- ⁵⁹ Up to 40 hours per calendar month can be reimbursed for a child who is absent from the child care setting for any reason when the provider requires payment of the absence. More than 40 hours per calendar month can be allowed in situations that result in closures or absences due to inclement weather.

- ⁶⁰ Families are charged the weekly copayment if there is any service that week. If the price of service for the week is lower than the weekly copayment, the family is only required to pay the price of service. They do not pay anything if the child did not attend at all for the week.
- 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. 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.
- ⁶² 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.
- ⁶³ Parents may be responsible for paying the difference when the provider's rate exceeds the maximum reimbursement rate.
- ⁶⁴ 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. The agency will pay all certified center providers for all of the days that a child is absent if the child was scheduled to be in care on the absent days as long as the child attended the center at least one day during the calendar month. This policy does not apply to TANF recipients.
- ⁶⁵ The state will pay for a maximum of 40 days of absences in a state fiscal year.
- ⁶⁶ Providers may be paid in two ways. Contract providers collect the copayment, while the agency deducts the amount of the copayment from the voucher for providers receiving payment through a voucher.
- ⁶⁷ Payments may be made to providers for five absences per month.
- ⁶⁸ Parents are responsible for paying the difference in price when providers charge more than the state reimbursement rate, as long as the provider notifies the parent of the difference in price and the parent agrees in writing to pay the difference.
- ⁶⁹ 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.
- ⁷⁰ If the child care subsidy is less than the amount charged by the provider selected, the parent is responsible to pay the difference.
- ⁷¹ Approved relative child care providers are not reimbursed for child sick days, vacation days, or days when the provider is closed.
- ⁷² Absences for vacation are reimbursed for a maximum of 10 days per fiscal year. Approved relative child care providers are not reimbursed for child sick days, vacation days, or days when the provider is closed.
- ⁷³ Absences for days the provider is closed are reimbursed for a maximum of 15 days per fiscal year. Approved relative child care providers are not reimbursed for child sick days, vacation days, or days when the provider is closed.
- ⁷⁴ 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 annual registration fee. No child care subsidy funds may be used to pay provider activity fees.
- ⁷⁵ Copayments for absences are based on provider enrollment, provider attendance practices, and local department payment policies.
- ⁷⁶ Allowable extra charges by the provider are limited to registration fees, transportation fees, late fees, and charges for time not approved by the agency.
- ⁷⁷ What the family pays depends on the provider's policies.
- ⁷⁸ The agency will pay for up to one week of provider shutdown per year.
- ⁷⁹ Payment is approved for one absent day per month.

Table 30. Copayment Calculation, 2019

State/Territory*	Copayment Calculation Method	Copayment Income Definition	Minimum Copayment ¹
Alabama	Dollar amount	Same as for determining eligibility	NA ²
Alaska	Dollar amount	Same as for determining eligibility	\$20 monthly
American Samoa	NA ³	NA ³	NA ³
Arizona	Dollar amount	Same as for determining eligibility	NA
Arkansas	Percent of child care price or maximum reimbursement rate	Same as for determining eligibility	NA
California	Dollar amount	Same as for determining eligibility	NA
Colorado	Percent of income ⁴	Same as for determining eligibility	\$5 monthly ⁵
Connecticut	Percent of income	Same as for determining eligibility	NA
DC	Dollar amount	Same as for determining eligibility	NA
Delaware	Percent of income	Same as for determining eligibility	NA
Florida	Dollar amount	Same as for determining eligibility	NA
Georgia	Percent of income	Same as for determining eligibility	NA
Guam	Percent of child care price or maximum reimbursement rate	Same as for determining eligibility	NA
Hawaii	Percent of child care price or maximum reimbursement rate ⁶	Same as for determining eligibility	NA
Idaho	Dollar amount	Same as for determining eligibility	NA
Illinois	Dollar amount	Same as for determining eligibility	\$1 monthly
Indiana	Percent of income ⁷	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	Dollar amount	Same as for determining eligibility	NA
Maine	Percent of income	Same as for determining eligibility	NA

Table 30. Copayment Calculation, 2019

State/Territory*	Copayment Calculation Method	Copayment Income Definition	Minimum Copayment ¹
Maryland	Dollar amount	Same as for determining eligibility	NA
Massachusetts	Dollar amount	Same as for determining eligibility	NA
Michigan	Dollar amount	Same as for determining eligibility	NA
Minnesota	Dollar amount	Same as for determining eligibility	NA
Mississippi	Dollar amount	Same as for determining eligibility	\$10 monthly
Missouri	Dollar amount ⁸	Same as for determining eligibility	NA ⁹
Montana	Percent of income ¹⁰	Same as for determining eligibility	\$10 monthly
Nebraska	Percent of income	Same as for determining eligibility	NA
Nevada	Percent of child care price or maximum reimbursement rate	Same as for determining eligibility	5 percent of price of care ¹¹
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 ¹²	\$15 weekly ¹³
No. Mariana Islands	Dollar amount	Same as for determining eligibility	NA
North Carolina	Percent of income	Same as for determining eligibility	NA
North Dakota	Dollar amount ¹⁴	Same as for determining eligibility	NA
Ohio	Other ¹⁵	Same as for determining eligibility	NA
Oklahoma	Dollar amount	Same as for determining eligibility	NA
Oregon	Other ¹⁶	Same as for determining eligibility	\$27 monthly ¹⁷
Pennsylvania	Dollar amount	Same as for determining eligibility	\$5 weekly
Puerto Rico	Dollar amount	Same as for determining eligibility	NA
Rhode Island	Percent of income	Same as for determining eligibility	NA

Table 30. Copayment Calculation, 2019

State/Territory*	Copayment Calculation Method	Copayment Income Definition	Minimum Copayment ¹
South Carolina	Dollar amount	Same as for determining eligibility	NA
South Dakota	Other ¹⁸	Same as for determining eligibility	NA
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
Vermont	Percent of child care price or maximum reimbursement rate	Same as for determining eligibility	NA
Virgin Islands	Dollar amount	Same as for determining eligibility	NA
Virginia	Percent of income	Same as for determining eligibility	NA
Washington	Other ¹⁹	Same as for determining eligibility	\$15 monthly
West Virginia	Dollar amount	Same as for determining eligibility	NA
Wisconsin	Dollar amount ²⁰	Same as for determining eligibility	NA
Wyoming	Dollar amount	Same as for determining eligibility	NA

Source: CCDF Policies Database October 1, 2019 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2019 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

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 American Samoa serves all families that fall below the Federal Poverty Guidelines and waives the copayment for all eligible families.

⁴ Families pay a percentage of their income for the first child in care, plus a dollar amount for each additional child in care.

⁵ Families with financial hardship can have their fee reduced to no less than \$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.

⁶ The copayment is either a percentage of the maximum child care rate or child care price, whichever is less.

⁷ 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.

⁸ If an applicant is already receiving child care and his or her income increases to between 139 percent and 165 percent of the Federal Poverty Guidelines, he or she is classified under transitional child care level 1. The applicant will pay 25 percent of the price of care, after the sliding fee dollar amount. If an applicant is already receiving child care and his or her income increases to between 166 percent and 190 percent of the Federal Poverty Guidelines, he or she is classified under transitional child care level 2. The applicant will then pay 50 percent of the price of care, after the sliding fee dollar amount. If an applicant is already receiving child care and his or her income increases to between 191 percent and 215 percent of the Federal Poverty Guidelines, he or she is classified under transitional child care level 3. The applicant will pay 75 percent of the price of care, after the sliding fee dollar amount.

⁹ Families whose only income is TANF income and families whose income is below 25 percent of the state median income pay \$1 annually.

¹⁰ Families with incomes up to the first threshold pay a \$10 copayment. All other families pay the listed percent of income as a copayment.

¹¹ Families must pay a minimum five percent copayment unless they receive TANF, are experiencing homelessness, or have a foster care or child protective services case.

¹² 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.

¹³ In New York City the minimum copayment is \$15 per week for full-time care and \$9 per week for part-time care. Other districts require a minimum copayment of \$1 per week.

¹⁴ The amount paid to the provider is rounded down to the nearest dollar.

¹⁵ Caseworkers use a desk guide to show families their expected copayment. The state calculates the family's copayment by dividing the family's annual income by 100 percent of the Federal Poverty Guidelines. The family's poverty level is then rounded up to the nearest five percent, multiplied by 100 percent of the Federal Poverty Guidelines, divided by 12, and rounded up to the nearest whole number to get the maximum monthly income. The maximum monthly income is then multiplied by a copayment multiplier that varies depending on the family's poverty level, rounded to the nearest whole dollar, multiplied by 12, and divided by the number of weeks in the current state fiscal year to get the family's weekly copayment.

¹⁶ The copayment is calculated by a mathematical formula that gradually increases the copayment as family income increases. Workers calculate copayment amounts by entering a family's monthly income and family size into a web tool.

¹⁷ Families whose income is at or below 50 percent of the Federal Poverty Guidelines pay either 1.5 percent of their countable income or \$27, whichever is greater. The minimum copayment can be waived to \$0 if a family chooses to use a quality-star-rated child care provider.

¹⁸ Households with income at or below 160 percent of the Federal Poverty Guidelines pay \$0 monthly. Households with income above 160 percent of the Federal Poverty Guidelines calculate copayments by subtracting 160 percent of the Federal Poverty Guideline from their income and then dividing this number by two for a 50 percent reduction. Either this resulting amount or 12 percent of their income is the expected monthly copayment, whichever is less. Copayment amounts are rounded down to the closest whole dollar.

¹⁹ 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 by 0.50, and then adds \$65. For families with income above 200 percent of the Federal Poverty Guidelines, the state subtracts 137.5 percent of the Federal Poverty Guidelines from 200 percent of the Federal Poverty Guidelines, multiplies the amount by 0.50, and then adds \$65.

²⁰ The family copayment is calculated multiplying an hourly copayment amount (determined by the number of children in care) by the total number of hours of subsidized care for all children in the household. Families with five or more children in care pay the same copayment, regardless of the number of additional children in care.

Table 31. Other Copayment Calculation Policies, 2019

State/Territory*	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% 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
American Samoa	NA ¹	NA ¹	NA ¹	NA ¹	NA ¹
Arizona	Copayment is per child	Copayment is per child	50% of full-time copayment	Less than 6 hours daily	No adjustment
Arkansas	NA (Copay is percent of price or maximum rate)	NA (Copay is percent of price or maximum rate)	NA (Copay is percent of price or maximum rate)	NA ²	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% of full-time copayment ³	Less than 130 hours monthly ⁴	No adjustment
Colorado	Varies ⁵	Varies ⁵	55% of full-time copayment	Less than 5 hours daily ⁶	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
DC	Varies ⁷	NA ⁷	50% of full-time copayment	5 hours daily	No adjustment
Delaware	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 ⁸
Florida	50% of one child copayment ⁹	50% of one child copayment ⁹	50% of full-time copayment ¹⁰	Less than 6 hours daily ¹⁰	No adjustment
Georgia	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

Table 31. Other Copayment Calculation Policies, 2019

State/Territory*	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
Guam	NA (Copay is percent of price or maximum rate)	NA (Copay is percent of price or maximum rate)	NA (Copay is percent of price or maximum rate)	NA	No adjustment
Hawaii	NA (Copay is percent of price or maximum rate)	NA (Copay is percent of price or maximum rate)	NA (Copay is percent of price or maximum rate) ¹¹	NA	No adjustment
Idaho	Copayment is per child	Copayment is per child	50% of full-time copayment	24 hours weekly	No adjustment
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 ¹²	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 ¹³	Varies ¹³	50% of full-time copayment ¹⁴	5 hours daily ¹⁴	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 ¹⁵	Varies ¹⁵	No adjustment	NA	No adjustment
Louisiana	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
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 ¹⁶	Varies ¹⁶	67% of full-time copayment ¹⁷	Less than 6 hours daily ¹⁸	No adjustment
Massachusetts	50% of one child copayment ¹⁹	25% of one child copayment ¹⁹	50% of full-time copayment	Less than 6 hours daily ²⁰	No adjustment

Table 31. Other Copayment Calculation Policies, 2019

State/Territory*	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
Michigan	Copayment is per child ²¹	Copayment is per child ²¹	No adjustment	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	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% of full-time copayment	Less than 6 hours daily	\$10 monthly
Missouri	Copayment is per child	Copayment is per child	Other ²²	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 ²³	NA	No adjustment
Nebraska	Copayment is family level, does not vary by number of children in care ²⁴	Copayment is family level, does not vary by number of children in care ²⁴	No adjustment	NA	No adjustment
Nevada	NA (Copay is percent of price or maximum rate)	NA (Copay is percent of price or maximum rate)	NA (Copay is percent of price 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% of one child copayment	NA ²⁵	50% of full-time copayment	Less than 6 hours daily	No adjustment
New Mexico	50% of one child copayment ²⁶	25% of one child copayment ²⁶	75% of full-time copayment ²⁷	29 hours weekly ²⁷	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	61% of full-time copayment ²⁸	Less than 30 hours weekly ²⁸	No adjustment

Table 31. Other Copayment Calculation Policies, 2019

State/Territory*	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
No. Mariana Islands	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
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% of full-time copayment ²⁹	31 hours weekly	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	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
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
Puerto Rico	50% of one child copayment	NA ²⁵	No adjustment	NA	No adjustment
Rhode Island	Copayment is family level, does not vary by number of children in care ³⁰	Copayment is family level, does not vary by number of children in care ³⁰	No adjustment	NA	No adjustment
South Carolina	Copayment is per child ³¹	Copayment is per child ³¹	No adjustment	NA	No adjustment

Table 31. Other Copayment Calculation Policies, 2019					
State/Territory*	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
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 ³²
Tennessee	Varies ³³	Varies ³³	50% of full-time copayment	Less than 20 hours weekly	No adjustment
Texas	Varies ³⁴	Varies ³⁴	No adjustment	NA	No adjustment
Utah	Varies ³⁵	Varies ³⁵	No adjustment	NA	No adjustment
Vermont	NA (Copay is percent of price or maximum rate)	NA (Copay is percent of price or maximum rate)	NA (Copay is percent of price or maximum rate)	NA	No adjustment
Virgin Islands	Copayment is per child	Copayment is per child	No adjustment	NA	No adjustment
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 ³⁶	Copayment is per child ³⁶	No adjustment ³⁷	NA	No adjustment
Wisconsin	Varies ³⁸	Varies ³⁸	No adjustment	NA	No adjustment
Wyoming	Copayment is per child	Copayment is per child	50% of full-time copayment ³⁹	Less than 5 hours daily	No adjustment

Source: CCDF Policies Database October 1, 2019 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2019 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ American Samoa serves all families that fall below the Federal Poverty Guidelines and waives the copayment for all eligible families.

² Part-time care is defined as less than three hours per day. Half-time care is defined as between three and five total hours per day.

- ³ The part-time copayment is generally half of the full-time copayment. 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 The fee is determined based on the number of hours of care certified for the month. Contractors cannot recalculate fees based on a child's actual attendance.
- 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.
- 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 The copayment amount for two or more children in care is calculated by adding a daily dollar amount onto a daily base rate for one child in care. The base rate and additional fee are determined by income level. The copayment is applied to the two youngest children receiving care when there are multiple children in the family. No additional copayment is required when there are more than two children.
- ⁸ The copayment is based on a percent of gross family income. Families with children with special needs pay the same percent as families with children without special needs.
- ⁹ Policy Coded for Miami-Dade County. The copayment is computed for the youngest child when more than one child is receiving care.
- ¹⁰ Policy Coded for Miami-Dade County.
- ¹¹ The copayment is a percent of the maximum reimbursement rate.
- ¹² 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.
- ¹³ The copayment amount is determined by the number of children in care. Once the copayment level is determined, the copayment is not paid per child, but paid only for the child receiving the most units of care. If there are two children in care, the family pays 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. For a third child in care the copayment is \$1 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. The family is charged the same rate for more than three children as for three children.
- ¹⁴ 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.
- ¹⁵ 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.
- ¹⁶ 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.
- ¹⁷ 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.
- ¹⁸ There are two levels of part-time care: care for three hours or less per day, and care for more than three but less than six hours per day.
- ¹⁹ The full copayment is applied to the oldest child receiving care. The adjusted copayment of 50 percent of the full copayment is applied to the second oldest child receiving care.
- ²⁰ A half day is fewer than six hours.

- ²¹ The copayment is calculated per child. The total copayment cannot exceed a family limit. The family limit for the copayment varies based on family income.
- ²² 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.
- ²³ If the month's price of child care is less than the monthly copayment, the family is obligated to pay only the price of care, not the full copayment indicated on the child care certificate plan.
- ²⁴ The copayment amount is equal to 7 percent of the household's gross income and does not vary with the number of children in care, the amount of care they need, or the provider type.
- ²⁵ No additional copayment is required when there are more than two children in care.
- ²⁶ The copayment for each additional child is half the copayment of the previously counted child. For example, the copayment for the third child will be half the second child's copayment.
- ²⁷ The adjustment for part-time care varies depending on the amount of care used. For care provided 8 to 29 hours per week, the adjustment is 75 percent of the full-time rate. For care provided 7 hours or less per week, the adjustment is 25 percent of the full-time rate. For cases with split custody or where a child may have two providers and care is provided 8 to 19 hours per week, the adjustment is 50 percent of the full-time rate.
- ²⁸ Policy coded for New York City.
- ²⁹ 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. If the child requires part-time care during the school year and full-time care during the summer, care is calculated using a blended rate. When care is received at the blended rate, the copayment is 83 percent of the full-time copayment. The copayment applies to the entire eligibility period.
- ³⁰ The copayment is applied to the price of care for the child that receives services at the highest rate.
- ³¹ 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.
- ³² Copayments for care for children with advanced special needs are capped at 10 percent of gross monthly income.
- ³³ 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 fee schedules are provided up to family size 20 and for up to 10 children in care.
- ³⁴ Policy 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.
- ³⁵ The copayment is a family fee that increases by one percent of income with each additional child in care, up to three children. The copayment does not increase for four or more children in care. Separate fee schedules are provided based on the number of children in care.
- ³⁶ The copayment amount is the same for each child. Copayments are capped at three children. If more than three children are in care, the copayment is assessed for the youngest three children.
- ³⁷ Partial days of care are converted into full days for purposes of copayments and reimbursement.
- ³⁸ The family copayment is calculated multiplying an hourly copayment amount (determined by the number of children in care) by the total number of hours of subsidized care for all children in the household. Families with five or more children in care pay the same copayment, regardless of the number of additional children in care.
- ³⁹ Part-time care is provided for less than five hours a day. The copayment for part-time care is 50 percent of the daily full-time copayment.

**Table 32. Copayment Amounts for a Single Parent with a Two-Year-Old Child in Full-Time Care
(Monthly Dollar Amounts), 2019 ¹**

State/Territory*	Families with Annual Earnings of \$15,000	Families with Annual Earnings of \$20,000	Families with Annual Earnings of \$25,000	Families with Annual Earnings of \$30,000
Alabama	0	89	Not eligible	Not eligible
Alaska	37	65	125	198
American Samoa ²	0	0	0	0
Arizona	43	65	65	Not eligible
Arkansas ³	0	35	35	35
California	0	0	0	61
Colorado ⁴	13	133	229	300
Connecticut	25	67	125	150
DC	0	29	52	81
Delaware ⁵	50	150	188	225
Florida ⁶	24	95	131	Not eligible
Georgia ⁷	62	116	Not eligible	Not eligible
Guam ⁸	0	0	173	Not eligible
Hawaii ⁹	447	745	1,043	1,341
Idaho	40	100	Not eligible	Not eligible
Illinois	40	89	155	222
Indiana ¹⁰	0	117	Not eligible	Not eligible
Iowa ¹¹	0	75	Not eligible	Not eligible
Kansas	18	63	141	186
Kentucky	87	173	238	Not eligible
Louisiana ¹¹	0	44	44	Not eligible
Maine	75	133	188	250
Maryland ¹²	22	36	85	143
Massachusetts	97	173	271	379
Michigan	0	32	Not eligible	Not eligible
Minnesota	4	46	61	113
Mississippi	73	96	141	168
Missouri ¹¹	110	110	Not eligible	Not eligible
Montana	25	133	292	Not eligible
Nebraska	0	117	Not eligible	Not eligible
Nevada ¹³	42	84	Not eligible	Not eligible
New Hampshire	59	125	260	350
New Jersey	0	81	102	134
New Mexico	47	89	137	195
New York ¹⁴	65	87	234	381
No. Mariana Islands	18	18	Not eligible	Not eligible
North Carolina	125	167	208	250
North Dakota	67	133	133	193
Ohio	0	136	Not eligible	Not eligible
Oklahoma	0	115	142	169
Oregon	118	239	397	600
Pennsylvania	91	126	186	230

Table 32. Copayment Amounts for a Single Parent with a Two-Year-Old Child in Full-Time Care (Monthly Dollar Amounts), 2019 ¹

State/Territory*	Families with Annual Earnings of \$15,000	Families with Annual Earnings of \$20,000	Families with Annual Earnings of \$25,000	Families with Annual Earnings of \$30,000
Puerto Rico ¹⁵	Not eligible	Not eligible	Not eligible	Not eligible
Rhode Island	0	33	104	200
South Carolina ¹⁶	26	26	48	Not eligible
South Dakota ⁷	0	0	0	73
Tennessee ¹⁷	86	116	151	Not eligible
Texas ¹⁸	120	170	220	300
Utah	0	15	141	165
Vermont ¹⁹	0	0	33	165
Virgin Islands	0	48	48	Not eligible
Virginia ²⁰	62	99	144	223
Washington	65	65	138	347
West Virginia	108	146	184	Not eligible
Wisconsin ²¹	79	157	243	299
Wyoming	0	19	38	139

Source: CCDF Policies Database October 1, 2019 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2019 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

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) 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 American Samoa serves all families that fall below the Federal Poverty Guidelines and waives the copayment for all eligible families.

³ Copayment amounts based on center rates for providers certified at Better Beginnings Star level 1 in Urban counties.

⁴ Copayment amounts based on income eligibility thresholds for Denver and Tier 1 child care center rates. Parent fees are reduced by 20 percent if the child is attending a provider that is rated in the top three levels of the state's quality rating system.

⁵ Copayment amounts based on center reimbursement rates for New Castle.

⁶ Copayment amounts for Miami-Dade County.

⁷ Copayment amounts are rounded down to the closest whole dollar.

⁸ Copayment amounts based on reimbursement rates used for all providers.

⁹ Copayment amounts based on reimbursement rates for licensed centers and center based infant and toddler care.

¹⁰ Copayment amounts based on first year of assistance.

¹¹ Copayments are calculated using a multiplier of 22 days per month.

¹² Copayment amounts for center care in the Baltimore City Region.

¹³ Copayment amounts based on licensed one-star center reimbursement rates for Clark County. Copayments are calculated using a multiplier of 22 days per month to convert daily reimbursement rates to monthly reimbursement rates.

¹⁴ Copayment amounts for New York City.

¹⁵ Copayment amounts for center care.

¹⁶ Copayments are calculated using a multiplier of 4.33 weeks per month.

¹⁷ Copayments are calculated using a multiplier of 4.3 weeks per month.

¹⁸ Copayment amounts and income eligibility thresholds for the Gulf Coast Region.

¹⁹ Copayment amounts based on licensed center reimbursement rates. Copayments are calculated using a multiplier of 4.3 to convert weekly reimbursement rates to monthly reimbursement rates.

²⁰ Copayment amounts based on income eligibility thresholds for Group III. Copayment amounts are rounded down to the closest whole dollar.

²¹ The family copayment is calculated multiplying an hourly copayment amount (determined by the number of children in care) by the total number of hours of subsidized care for all children in the household. Maximum monthly copayments for each child are calculated by multiplying the hourly copayment by 152 hours of care.

Table 33. 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), 2019 ¹

State/Territory*	Families with Annual Earnings of \$15,000	Families with Annual Earnings of \$20,000	Families with Annual Earnings of \$25,000	Families with Annual Earnings of \$30,000
Alabama	0	0	178	Not eligible
Alaska	24	49	82	124
American Samoa ²	0	0	0	0
Arizona	43	87	130	130
Arkansas ³	0	0	65	65
California	0	0	0	0
Colorado ⁴	13	17	161	300
Connecticut	25	67	83	150
DC	0	0	40	70
Delaware ⁵	50	67	188	225
Florida ⁶	36	36	143	197
Georgia ⁷	62	83	145	175
Guam ⁸	0	0	0	0
Hawaii ⁹	446	892	1,115	1,561
Idaho	80	80	200	Not eligible
Illinois	36	69	112	195
Indiana ¹⁰	0	0	125	Not eligible
Iowa ¹¹	0	0	75	152
Kansas	22	22	79	177
Kentucky	108	152	238	303
Louisiana ¹¹	0	0	44	44
Maine	63	100	167	225
Maryland ¹²	36	36	62	103
Massachusetts	65	211	292	487
Michigan	0	0	65	Not eligible
Minnesota	0	4	54	76
Mississippi	67	87	108	155
Missouri ¹¹	132	220	220	Not eligible
Montana	25	50	167	325
Nebraska	0	0	146	Not eligible
Nevada ¹³	81	81	163	Not eligible
New Hampshire	59	79	156	313
New Jersey	0	0	142	170
New Mexico	56	105	162	233
New York ¹⁴	65	65	104	251
No. Mariana Islands	21	21	31	Not eligible
North Carolina	125	167	208	250
North Dakota	41	82	164	164
Ohio	0	0	172	Not eligible
Oklahoma	0	0	142	176
Oregon	81	173	296	451
Pennsylvania	74	117	152	208

Table 33. 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), 2019 ¹

State/Territory*	Families with Annual Earnings of \$15,000	Families with Annual Earnings of \$20,000	Families with Annual Earnings of \$25,000	Families with Annual Earnings of \$30,000
Puerto Rico ¹⁵	127	Not eligible	Not eligible	Not eligible
Rhode Island	0	0	42	125
South Carolina ¹⁶	52	52	52	95
South Dakota ⁷	0	0	0	0
Tennessee ¹⁷	159	202	262	310
Texas ¹⁸	85	160	225	290
Utah	0	0	38	115
Vermont ¹⁹	0	0	62	308
Virgin Islands	0	0	48	48
Virginia ²⁰	62	82	124	173
Washington	15	65	65	93
West Virginia	119	152	184	238
Wisconsin ²¹	58	137	198	283
Wyoming	0	0	38	76

Source: CCDF Policies Database October 1, 2019 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2019 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

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) 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 American Samoa serves all families that fall below the Federal Poverty Guidelines and waives the copayment for all eligible families.

³ Copayment amounts based on center rates for providers certified at Better Beginnings Star level 1 in Urban counties.

⁴ Copayment amounts based on income eligibility thresholds for Denver and Tier 1 child care center rates. Parent fees are reduced by 20 percent if the child is attending a provider that is rated in the top three levels of the state's quality rating system.

⁵ Copayment amounts based on center reimbursement rates for New Castle.

⁶ Copayment amounts for Miami-Dade County.

⁷ Copayment amounts are rounded down to the closest whole dollar.

⁸ Copayment amounts based on reimbursement rates used for all providers.

⁹ Copayment amounts based on reimbursement rates for licensed centers and center based infant and toddler care.

¹⁰ Copayment amounts based on first year of assistance.

¹¹ Copayments are calculated using a multiplier of 22 days per month.

¹² Copayment amounts for center care in the Baltimore City Region.

¹³ Copayment amounts based on licensed one-star center reimbursement rates for Clark County. Copayments are calculated using a multiplier of 22 days per month to convert daily reimbursement rates to monthly reimbursement rates.

¹⁴ Copayment amounts for New York City.

¹⁵ Copayment amounts for center care.

¹⁶ Copayments are calculated using a multiplier of 4.33 weeks per month.

¹⁷ Copayments are calculated using a multiplier of 4.3 weeks per month.

¹⁸ Copayment amounts and income eligibility thresholds for the Gulf Coast Region.

¹⁹ Copayment amounts based on licensed center reimbursement rates. Copayments are calculated using a multiplier of 4.3 to convert weekly reimbursement rates to monthly reimbursement rates.

²⁰ Copayment amounts based on income eligibility thresholds for Group III. Copayment amounts are rounded down to the closest whole dollar.

²¹ The family copayment is calculated multiplying an hourly copayment amount (determined by the number of children in care) by the total number of hours of subsidized care for all children in the household. Maximum monthly copayments for each child are calculated by multiplying the hourly copayment by 152 hours of care.

Table 34. 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), 2019 ¹

State/Territory*	Families with Annual Earnings of \$25,000	Families with Annual Earnings of \$30,000	Families with Annual Earnings of \$35,000	Families with Annual Earnings of \$40,000
Alabama	0	178	Not eligible	Not eligible
Alaska	60	98	144	231
American Samoa ²	0	0	0	0
Arizona	87	130	130	130
Arkansas ³	65	65	65	65
California	0	0	0	106
Colorado ⁴	21	190	346	392
Connecticut	83	100	175	200
DC	0	40	59	83
Delaware ⁵	83	225	263	300
Florida ⁶	36	71	197	Not eligible
Georgia ⁷	104	175	204	Not eligible
Guam ⁸	0	0	0	344
Hawaii ⁹	892	1,115	1,561	1,784
Idaho	80	200	Not eligible	Not eligible
Illinois	83	135	199	276
Indiana ¹⁰	0	150	Not eligible	Not eligible
Iowa ¹¹	0	75	141	Not eligible
Kansas	27	95	166	249
Kentucky	195	282	325	347
Louisiana ¹¹	0	44	44	66
Maine	125	200	263	333
Maryland ¹²	36	62	103	201
Massachusetts	260	292	406	487
Michigan	65	65	Not eligible	Not eligible
Minnesota	4	65	87	108
Mississippi	97	116	165	188
Missouri ¹¹	220	220	220	Not eligible
Montana	83	200	350	Not eligible
Nebraska	0	175	Not eligible	Not eligible
Nevada ¹³	81	163	326	Not eligible
New Hampshire	99	188	292	417
New Jersey	0	142	162	193
New Mexico	135	192	270	350
New York ¹⁴	65	121	269	412
No. Mariana Islands	38	43	43	Not eligible
North Carolina	208	250	292	333
North Dakota	98	195	195	284
Ohio	0	207	Not eligible	Not eligible
Oklahoma	0	169	209	229
Oregon	230	355	506	684
Pennsylvania	143	195	230	295

Table 34. 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), 2019 ¹

State/Territory*	Families with Annual Earnings of \$25,000	Families with Annual Earnings of \$30,000	Families with Annual Earnings of \$35,000	Families with Annual Earnings of \$40,000
Puerto Rico ¹⁵	Not eligible	Not eligible	Not eligible	Not eligible
Rhode Island	0	50	146	267
South Carolina ¹⁶	52	52	95	95
South Dakota ⁷	0	0	0	0
Tennessee ¹⁷	258	310	361	400
Texas ¹⁸	160	225	290	360
Utah	0	45	138	259
Vermont ¹⁹	0	62	231	461
Virgin Islands	0	48	Not eligible	Not eligible
Virginia ²⁰	103	148	202	264
Washington	65	65	65	256
West Virginia	119	152	173	Not eligible
Wisconsin ²¹	149	198	274	319
Wyoming	0	0	38	76

Source: CCDF Policies Database October 1, 2019 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2019 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

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. Both parents are working at least 30 hours per week and all income is earned. If the state uses an income disregard for calculating copayments, the disregard was applied. The lowest earnings level shown (\$25,000) is approximately equal to full-year pay for two parents each working 30 hours per week 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 American Samoa serves all families that fall below the Federal Poverty Guidelines and waives the copayment for all eligible families.

³ Copayment amounts based on center rates for providers certified at Better Beginnings Star level 1 in Urban counties.

⁴ Copayment amounts based on income eligibility thresholds for Denver and Tier 1 child care center rates. Parent fees are reduced by 20 percent if the child is attending a provider that is rated in the top three levels of the state's quality rating system.

⁵ Copayment amounts based on center reimbursement rates for New Castle.

⁶ Copayment amounts for Miami-Dade County.

⁷ Copayment amounts are rounded down to the closest whole dollar.

⁸ Copayment amounts based on reimbursement rates used for all providers.

⁹ Copayment amounts based on reimbursement rates for licensed centers and center based infant and toddler care.

- ¹⁰ Copayment amounts based on first year of assistance.
- ¹¹ Copayments are calculated using a multiplier of 22 days per month.
- ¹² Copayment amounts for center care in the Baltimore City Region.
- ¹³ Copayment amounts based on licensed one-star center reimbursement rates for Clark County. Copayments are calculated using a multiplier of 22 days per month to convert daily reimbursement rates to monthly reimbursement rates.
- ¹⁴ Copayment amounts for New York City.
- ¹⁵ Copayment amounts for center care.
- ¹⁶ Copayments are calculated using a multiplier of 4.33 weeks per month.
- ¹⁷ Copayments are calculated using a multiplier of 4.3 weeks per month.
- ¹⁸ Copayment amounts and income eligibility thresholds for the Gulf Coast Region.
- ¹⁹ Copayment amounts based on licensed center reimbursement rates. Copayments are calculated using a multiplier of 4.3 to convert weekly reimbursement rates to monthly reimbursement rates.
- ²⁰ Copayment amounts based on income eligibility thresholds for Group III. Copayment amounts are rounded down to the closest whole dollar.
- ²¹ The family copayment is calculated multiplying an hourly copayment amount (determined by the number of children in care) by the total number of hours of subsidized care for all children in the household. Maximum monthly copayments for each child are calculated by multiplying the hourly copayment by 152 hours of care.

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 how the State/Territory agency implementing CCDF-subsidized care pays the provider, whether the provider is paid during closings or child absences, the maximum reimbursement rates that will be paid by the State/Territory for CCDF-subsidized care, and rules for unlicensed providers who are outside the scope of a State's/Territory's broader child care regulations but who must meet certain standards to be paid through the subsidy system.

Provider Payments and Closings

The State/Territory agencies that implement CCDF-subsidized care may choose to pay providers directly, pay parents who then must pay providers, or handle provider payments in another way. States/Territories also set their own policies for whether providers are paid for days they are closed; examples of reasons for provider closings include federal holidays, inclement weather, provider illness, and provider vacation. Additionally, States/Territories determine whether providers continue to receive payments even if the children receiving the child care subsidy are absent from care.

Table 35 shows how providers are paid, if providers are paid when they are closed, and whether providers are paid for days the children are not in care. Findings from 2019 include:

- In 46 States/Territories, the provider is paid directly. In Guam, Hawaii, Kansas, and Wisconsin, the agency provides the money to the parents who are then responsible for paying their child care providers. Some States have varying payment requirements depending on the type of care. For example, in Minnesota, if care is provided in the child's home, the agency pays the parent, who then pays the provider.
- In 41 States/Territories, providers may receive payment on days they are closed; States/Territories may limit the number of days providers can be paid for closures or limit the policy to certain types of providers (e.g., licensed providers). In 14 States/Territories, providers are not paid for days they are closed.

- In 54 States/Territories, providers may be paid for days children are absent; the policies often vary based on the type of provider. In Nebraska and the Virgin Islands, payments are not approved for days the children are absent from care.

Under CCDBG reauthorization, States/Territories are required to provide assurance that they will, “to the extent practicable, implement enrollment and eligibility policies that support the fixed costs of providing child care services by delinking provider reimbursement rates from an eligible child’s occasional absences due to holidays or unforeseen circumstances such as illness.”⁵¹ As States/Territories implement policy changes in response to this requirement, the changes will be captured in the full CCDF Policies Database and future years’ tables.

Reimbursement Rates

Each CCDF program determines the maximum amounts that will be paid to child care providers—often referred to as “maximum reimbursement rates,” or “provider payments” —although officially termed “payment rates” in the CCDBG Act and Final Rule. While the terms “maximum reimbursement rates” and “payment rates” are sometimes used interchangeably, “payment rate” is a more general term that includes not only payment on a reimbursement basis, but also alternative payment practices. We continue to use the term “maximum reimbursement rate” in this report to be consistent with the underlying CCDF Policies Database.

The States/Territories establish these rates by conducting market rate surveys of child care prices throughout each State/Territory.⁵² Maximum rates affect not only providers but also families. For families, the maximum rates may establish the highest-priced care that the family can obtain with the subsidy, without paying an additional cost beyond the copayment. (Table 29 shows whether States/Territories may require a family to pay the difference between the maximum reimbursement rate and the provider’s full rate.)

States/Territories are expected to set base reimbursement rates at a level sufficient for child care providers to meet health and safety, quality, and staffing requirements established for CCDF providers. 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

⁵¹ The Child Care and Development Block Grant Act of 2014 is available at <https://www.congress.gov/113/plaws/publ186/PLAW-113publ186.pdf>.

⁵² States/Territories may choose to use alternative methodologies to the market rate survey (pending OCC approval), as outlined in their CCDF plans.

criteria beyond the basic licensing requirements (i.e., higher quality ratings), which can be referred to as a “tiered approach”. 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” for the purposes of these tables. States/Territories may also use higher rates for care provided during non-traditional hours or care for children with special needs.

States/Territories express their maximum rates in varying terms (e.g., daily or monthly); 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 only a few different sets of maximum rates or dozens of different sets of maximum rates.

Tables 36 through 38 show reimbursement rates for three basic types of providers: child care centers, family child care homes, and in-home child care providers. The full CCDF Policies Database also captures the reimbursement rates for group child care homes although these are not shown in the tables. 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 follows⁵³:

- 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. (Rates for group child care homes are not included in the tables but can be found in the full CCDF Policies Database.)
- In-home child care usually refers to legally unregulated or unlicensed care provided in the child’s home. In some cases, the State/Territory also refers to unlicensed care provided in the provider’s home as in-home care and provides two different in-home rates. In these cases, the table captures

⁵³ 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: <https://www.acf.hhs.gov/occ/resource/acf-800-reporting-instructions-definitions>.

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 three 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 for comparison 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 most populous region or county.

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 and family 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 registered or certified providers are used. For in-home child care providers, the base rates reflect the rates for unlicensed providers, unless a State/Territory only allows licensed providers to participate in the subsidy program, in which case the base rates will reflect the amounts paid to licensed in-home providers. For all provider types, for States/Territories with tiered reimbursement rates, the highest rates reflect the highest tiered or accredited rates available for that age group and provider type. 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 tiered 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 centers. Findings from 2019 include:

- Monthly base rates for infant care in child care centers range from \$200 in American Samoa to \$1,763 in Virginia. The median monthly base rate is \$860.
- Monthly base rates for toddler care in child care centers range from \$180 in American Samoa to \$1,634 in Connecticut. The median monthly base rate is \$721.
- Monthly base rates for preschool care in child care centers range from \$180 in American Samoa to \$1,505 in Virginia. The median monthly base rate is \$685.
- Monthly base rates for school-age before-and-after care in child care centers range from \$54 in American Samoa to \$924 in Virginia. The median monthly base rate is \$359.
- For the rates shown in the table, 33 States/Territories use higher tiered or accredited rates in addition to their base rates for care provided for at least some age groups 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 homes. Findings from 2019 include:

- Monthly base rates for infant care in family child care homes range from \$200 in American Samoa to \$1,254 in Oregon. The median monthly base rate is \$620.
- Monthly base rates for toddler care in family child care homes range from \$180 in American Samoa to \$1,140 in Oregon. The median monthly base rate is \$576.
- Monthly base rates for preschool care in family child care homes range from \$180 in American Samoa to \$1,075 in Virginia. The median monthly base rate is \$542.
- Monthly base rates for school-age before-and-after care in family child care homes range from \$54 in American Samoa to \$774 in Virginia. The median monthly base rate is \$324.
- For the rates shown in the table, 31 States/Territories use higher tiered or accredited rates in addition to their base rates for care provided for at least some age groups in family child care homes.

Maximum Reimbursement Rates for In-Home Child Care (Table 38)

Table 38 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 2019 include:

- Monthly base rates for infant care for in-home child care providers range from \$195 in South Carolina to \$1,571 in Iowa. The median monthly base rate is \$407.
- Monthly base rates for toddler care for in-home child care providers range from \$180 in American Samoa to \$1,571 in Iowa. The median monthly base rate is \$356.
- Monthly base rates for preschool care for in-home child care providers range from \$180 in American Samoa to \$1,571 in Iowa. The median monthly base rate is \$349.
- Monthly base rates for school-age before-and-after care for in-home child care providers range from \$54 in American Samoa to \$785 in Iowa. The median monthly base rate is \$191.
- For the rates shown in the table, 10 States/Territories use higher tiered or accredited rates in addition to their base rates for care provided for at least some age groups by in-home providers.
- In several States, the policies for the rates paid to in-home providers involve a requirement that they be paid at least the State minimum wage.

Changes in Reimbursement Rate Policies from 2018 to 2019

Only three States (California, Colorado, and Ohio) made changes to their provider payment policies between 2018 and 2019, but several States/Territories made changes to their payment rates. Thirty-one States/Territories made changes to the maximum reimbursement rates shown in the tables from 2018 to 2019. Most of the changes resulted in higher rates for providers.

For the age groups and rates shown in the tables, center child care rates changed in 29 States/Territories in 2019. The average absolute change across all age groups for center care was \$118 per month. Family child care home rates changed in 28 States/Territories; the average absolute change was \$68 per month. In home rates changed in 15 States/Territories, and the average absolute change was \$40 per month.

Policies for Unlicensed Home-Based 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 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 religiously-exempt child care centers. These providers are often referred to as “unlicensed providers,” “legally unregulated providers,” or “providers legally operating without regulation,” and each State/Territory establishes policies for these providers within the framework of the federal requirements.

States/Territories vary considerably on the requirements they place on unlicensed home-based 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). These policies also vary greatly within States/Territories based on who is providing care (a non-relative or a relative) or where care is provided (in the child’s home or outside of the child’s home). Tables 39a through 42 review these types of policies. Tables 39a, 40a, and 41a capture policies about *non-relative* providers. Tables 39b, 40b, and 41b capture policies about *relative* providers. (Appendix D provides more detail about the state-specific provider types to which the policies apply.)

Differences in policies for providers providing care in the child’s home or outside of the child’s home can be found in the footnotes. The policies described in this report reflect the requirements as of October 1, 2019. Under CCDBG reauthorization, some requirements for unlicensed home-based providers are standardized across the States/Territories. These standardized requirements are noted throughout.⁵⁴

Unlicensed Home-Based Provider Background Check Requirements (Table 39a and 39b)

States/Territories may require unlicensed home-based providers to have some sort of background check or screening. Relative providers who only care for related children may be exempt from the requirements at the States’/Territories’ discretion.⁵⁵ 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

⁵⁴ For additional information on the provider requirements, see “Implications of Child Care and Development Block Grant Reauthorization for State Policies: Changes to Requirements for Legally Unregulated Child Care Providers” available from <https://www.urban.org/research/publication/implications-child-care-and-development-block-grant-reauthorization-state-policies-changes-requirements-legally-unregulated-child-care-providers>.

⁵⁵ For additional information on relative provider background check requirements, see <https://childcareta.acf.hhs.gov/ccdf-fundamentals/criminal-background-checks>.

screened, while another State/Territory may require any person who might have access to the children while they are in care to be screened.

Table 39a describes the background checks to which *non-relative* unlicensed home-based providers are subject if they wish to receive CCDF payments. Findings from 2019 include:

- Nine States do not allow non-relative unlicensed providers to provide care through the subsidy program.
- Of the States/Territories where non-relative unlicensed home-based providers are allowed to provide care, forty-three States/Territories require criminal history background checks for the provider and other staff members or people in the home. Four States/Territories require criminal history background checks for only the provider.
- The types of background checks required across States/Territories for non-relative unlicensed home-based providers include state criminal history checks with fingerprinting (40 States/Territories), state sex offender registry checks (44 States/Territories), state child abuse and neglect registry checks (42 States/Territories), state checks for any State the provider or staff member resided in during the last five years (31 States/Territories), National Crime Information Center and/or National Sex Offender Registry checks (31 States/Territories), and Next Generation Identification FBI fingerprint checks (35 States/Territories).

Table 39b describes the background checks to which *relative* unlicensed home-based providers are subject if they wish to receive CCDF payments. Findings from 2019 include:

- North Carolina does not allow relative unlicensed home-based providers to provide care through the subsidy program.
- Forty-five States/Territories require criminal history background checks for the provider and other staff members or people in the home. Six States/Territories require criminal history background checks for only the provider. Four States/Territories (Alabama, California, Puerto Rico, and South Dakota) do not require criminal history background checks for relative unlicensed home-based providers.
- The types of background checks required across States/Territories for relative unlicensed home-based providers include state criminal history checks with fingerprinting (37 States/Territories), state sex offender registry checks (46 States/Territories), state child abuse and neglect registry checks (44 States/Territories), state checks for any State the provider or staff member resided in during the last five years (27 States/Territories), National Crime Information Center and/or

National Sex Offender Registry checks (28 States/Territories), and Next Generation Identification FBI fingerprint checks (31 States/Territories).

With the reauthorization of the CCDBG, States/Territories are required to conduct comprehensive background checks at least every five years for all license-exempt providers, as well as anyone who might have unsupervised access at any point to the children receiving subsidies. These criminal background checks must include a State criminal and sex offender registry using fingerprints, a State child abuse and neglect registry check, National Crime Information Center and National Sex Offender Registry check, and an FBI fingerprint check using the Next Generation Identification System. State/Territory searches must include the current State of residence and any State the individual lived in over the last five years. States/Territories were able to receive waivers from the Administration for Children and Families, Office of Child Care to delay implementation of the background check policies through September 30, 2018, as long as the state met certain milestones (additional requirements to receive waivers beyond September 2018 are outlined in the CCDF Plan Preprint).⁵⁶ Although a State/Territory may be listed as not requiring background checks, they may have received a waiver related to the new requirements. As States/Territories implement the background check requirements, these policy changes will be reflected in the CCDF Policies Database and future tables.

Unlicensed Home-Based Provider Training Requirements (Table 40a and 40b)

States/Territories are required to ensure that child care providers undergo minimum health and safety training, even if they are unlicensed. (Relatives who provide CCDF-funded care are not covered by the federal health and safety requirements but may still face State/Territory requirements.) The types of pre-service and orientation trainings States/Territories are required to include range from pediatric CPR and Shaken Baby Syndrome training to child safety classes and child nutrition classes. Certain types of provider training may make an in-home provider eligible to receive higher reimbursement rates.

Table 40a focuses on two aspects of training: whether States/Territories require *non-relative* unlicensed home-based providers to be trained in CPR and First Aid. Findings from 2019 include:

- Twenty-nine States/Territories require only the provider to complete CPR training, five States/Territories require at least one person on site to be trained in CPR, and seven States/Territories require the provider and others on site to be trained in CPR.

⁵⁶ With the creation of CCDF state plans for 2019, States/Territories are required to meet the national FBI fingerprint check, state criminal history check, state sex offender registry check, and state child abuse and neglect registry check by September 30, 2018. For more information, see the FY 2019-2021 State/Territory Plan Preprint available from the Office of Child Care: <https://www.acf.hhs.gov/occ/resource/ccdf-acf-pi-2018-02>.

- Twenty-eight States/Territories require the provider to complete First Aid training, four States/Territories require at least one person on site to have First Aid training, and seven States/Territories require the provider and others on site to have First Aid training.

Table 40b shows the CPR and First Aid training requirements for *relative* unlicensed home-based providers. Findings from 2019 include:

- Twenty-six States/Territories require only the provider to complete CPR training, five States/Territories require at least one person on site to be trained in CPR, and five States/Territories require the provider and others on site to be trained in CPR.
- Twenty-four States/Territories require only the provider to have First Aid training, four States/Territories require at least one person on site to have First Aid training, and five States/Territories require the provider and others on site to have First Aid training.

With the CCDBG reauthorization, States/Territories have to establish pre-service or orientation training and ongoing training requirements that address health and safety standards and are appropriate for the type of provider. The law specifies subject areas for training, and States/Territories have the flexibility to include additional subject areas determined necessary to protect the health and safety or promote the development of children in care. Additionally, some States/Territories have historically only required that someone on site when care is being provided have completed all State/Territory required trainings, rather than requiring all providers to be certified. Under the new regulations, all providers have to complete all State/Territory required trainings.⁵⁷ As States/Territories implement the training requirements, these policy changes will be reflected in the CCDF Policies Database and future tables.

Unlicensed Home-Based Provider Health and Safety Requirements (Table 41a and 41b)

States/Territories are required to ensure that child care providers meet applicable requirements to protect the health and safety of the children served, even if they are unlicensed. Requirements must address infectious disease prevention and control, as well as building and physical premises safety among other requirements. Some States/Territories require providers to comply with a list of health and safety requirements through a self-completed checklist, while others require providers to undergo home visits or inspections with certain frequency.

⁵⁷ For additional information on provider requirements, see CCDF Regulations 45 CFR Part 98 available from <https://www.federalregister.gov/documents/2016/09/30/2016-22986/child-care-and-development-fund-ccdf-program>.

Table 41a focuses on two aspects of health and safety requirements: if *non-relative* unlicensed home-based providers are required to comply with a list of health and safety standards and if home visits or inspections are required after the initial requirement has been met. Findings from 2019 include:

- Fifteen States/Territories require non-relative unlicensed home-based providers to comply with a list of health and safety standards through a self-completed checklist, and another 32 States/Territories require a home-visit or inspection to confirm the provider is complying with the list of health and safety standards.
- Thirty-nine States/Territories require the non-relative unlicensed home-based provider to have at least annual home visits or inspections after the initial requirement has been met. Five States/Territories require the provider to have home visits or inspections randomly or as needed, but the frequency is not specified.

Table 41b shows the health and safety requirements for *relative* unlicensed home-based providers. Findings from 2019 include:

- Twenty-two States/Territories require relative unlicensed home-based providers to comply with a list of health and safety standards through a self-completed checklist, and another 27 States/Territories require a home-visit or inspection to confirm the provider is complying with the list of health and safety standards.
- Thirty-three States/Territories require relative unlicensed home-based providers to have at least annual home visits or inspections after the initial requirement has been met. Five States/Territories require the provider to have home visits or inspections randomly or as needed, but the frequency is not specified.

Under CCDBG reauthorization, all States/Territories are required to have licensing inspectors (or qualified monitors designated by the State/Territory agency) perform annual inspections of non-relative license-exempt providers' facilities to ensure they are following health, safety, and fire standards. Additionally, States/Territories have to demonstrate how the licensing exemptions for unlicensed providers will not endanger the health and safety of the children in the program. As States/Territories implement the health and safety requirements, these policy changes will be reflected in the CCDF Policies Database and future tables.

Provider Policies: Who May Provide Care (Table 42)

Under the CCDBG reauthorization, providers are defined as an unrelated individual who is licensed, regulated, or registered with the State/Territory and is 18 years of age or older. A relative provider is an

individual 18 years of age or older who is related to all children in care.⁵⁸ 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 2019 include:

- In the 31 States/Territories that allow out of state providers to provide care through the subsidy program, 30 require the provider to be licensed in the State where care is provided.
- Most States/Territories require providers to be at least 18 years of age. Alabama and Nebraska require the provider to be at least 19, Connecticut requires the provider to be at least 20, and Georgia, Rhode Island, and South Carolina require that the provider be at least 21.
- All States/Territories except Mississippi allow relatives living outside of the home of the child to provide care, regardless of setting. In Mississippi, relatives living outside of the home are only allowed to provide care in the child's home, and only when the child has special needs that require in-home care.
- States/Territories differ in their rules concerning relatives who live in the same home as the child. For instance, 30 States/Territories allow relatives living in the home to provide care if they are not counted as part of the family assistance unit, while only five States allow some types of relatives included in the assistance unit to provide care.

Changes in Provider Policies from 2018 to 2019

Several States/Territories made changes to their policies for unlicensed home-based providers between 2018 and 2019. Six States/Territories that already required at least one type of background check added additional types of background checks to their requirements. Five States/Territories began using different requirements for relative and non-relative providers.

Three States expanded their CPR training requirements and two States expanded their First Aid training requirements for unlicensed home-based providers. Two States began using different requirements for relative and non-relative providers.

Two States began requiring home visits to complete the health and safety checklist for unlicensed home-based providers, and three States/Territories began requiring ongoing inspections. Rhode Island no

⁵⁸ More information on provider definitions and requirements is available from ACF: <https://childcareta.acf.hhs.gov/ccdf-fundamentals/licensing-and-exemptions>.

longer allows unlicensed non-relative home-based providers to provide care. Two States began using different requirements for relative and non-relative providers.

Table 35. Provider Payment Policies, 2019

State/Territory*	Who Pays the Provider	If Providers are Paid for Days the Provider is Closed	If Providers are Paid for Days Children are Absent
Alabama	Agency pays provider directly	Yes, all providers ²	Yes, licensed providers ³
Alaska	Agency pays provider directly ⁴	No	Other ⁵
American Samoa	Agency pays provider directly	--- ¹	Yes, all providers ⁶
Arizona	Agency pays provider directly	No	Yes, all providers ⁷
Arkansas	Agency pays provider directly	Yes, all providers ⁸	Yes, all providers ⁹
California	Agency pays provider directly	Yes, all providers ¹⁰	Yes, all providers ¹¹
Colorado	Agency pays provider directly	Yes, all providers ¹²	Yes, all providers ¹³
Connecticut	Agency pays provider directly	Yes, all providers	Yes, all providers ¹⁴
DC	Agency pays provider directly	Yes, all providers	Yes, all providers ¹⁵
Delaware	Agency pays provider directly	No ¹⁶	Yes, all providers ¹⁷
Florida	Agency pays provider directly	Yes, all providers ¹⁸	Yes, all providers ¹⁹
Georgia	Agency pays provider directly	No	Yes, all providers ²⁰
Guam	Agency gives money to parents, who then pay the providers ²¹	No	Yes, all providers ²²
Hawaii	Agency gives money to parents, who then pay the providers ²³	Yes, all providers	Yes, all providers
Idaho	Agency pays provider directly	Yes, all providers ²⁴	Yes, all providers ²⁵
Illinois	Agency pays provider directly ²⁶	No ²⁷	Yes, licensed providers and unlicensed centers ²⁸
Indiana	Other ²⁹	Yes, all providers ³⁰	Yes, all providers ³¹
Iowa	Agency pays provider directly	Yes, all providers ³²	Yes, all providers ³³
Kansas	Agency gives money to parents, who then pay the providers	Yes, all providers ³⁴	Yes, all providers ³⁴
Kentucky	Agency pays provider directly	Yes, licensed and regulated providers ³⁵	Yes, licensed and regulated providers ³⁶
Louisiana	Agency pays provider directly	Yes, all providers	Yes, all providers ³⁷
Maine	Agency pays provider directly	Yes, all providers	Yes, all providers ³⁸
Maryland	Agency pays provider directly	Yes, licensed and regulated providers ³⁹	Yes, licensed providers ⁴⁰
Massachusetts	Agency pays provider directly	Yes, all providers	Yes, all providers ⁴¹
Michigan	Other ⁴²	Yes, all providers ⁴³	Yes, all providers ⁴⁴
Minnesota	Other ⁴⁵	Yes, all providers ⁴⁶	Yes, licensed providers and unlicensed centers ⁴⁷
Mississippi	Agency pays provider directly	Yes, all providers ⁴⁸	Yes, licensed providers ⁴⁹
Missouri	Agency pays provider directly ⁵⁰	Yes, all providers ⁵¹	Yes, all providers ⁵¹

Table 35. Provider Payment Policies, 2019

State/Territory*	Who Pays the Provider	If Providers are Paid for Days the Provider is Closed	If Providers are Paid for Days Children are Absent
Montana	Agency pays provider directly	No	Yes, licensed and regulated providers ⁵²
Nebraska	Agency pays provider directly	No	No
Nevada	Agency pays provider directly	Yes, all providers	Yes, all providers ⁵³
New Hampshire	Agency pays provider directly	No	Yes, all providers ⁵⁴
New Jersey	Agency pays provider directly ⁵⁵	Yes, all providers	Yes, all providers ⁵⁶
New Mexico	Other ⁵⁷	Yes, all providers ⁵⁸	Yes, all providers ⁵⁹
New York	Agency pays provider directly ⁶⁰	Yes, licensed providers ⁶¹	Yes, licensed providers ⁶²
No. Mariana Islands	Agency pays provider directly	Yes, all providers	Yes, all providers
North Carolina	Agency pays provider directly	Yes, all providers ⁶³	Other ⁶⁴
North Dakota	Other ⁶⁵	Yes, all providers ⁶⁶	Yes, all providers ⁶⁷
Ohio	Agency pays provider directly	Other ⁶⁸	Other ⁶⁹
Oklahoma	Agency pays provider directly	No	Yes, licensed providers ⁷⁰
Oregon	Agency pays provider directly	Other ⁷¹	Yes, all providers ⁷²
Pennsylvania	Other ⁷³	Yes, regulated providers ⁷⁴	Yes, all providers ⁷⁵
Puerto Rico	Agency pays provider directly	Yes, all providers ⁷⁶	Yes, all providers ⁷⁶
Rhode Island	Agency pays provider directly	No	Yes, licensed providers ⁷⁷
South Carolina	Agency pays provider directly	Yes, all providers ⁷⁸	Yes, all providers ⁷⁹
South Dakota	Agency pays provider directly	No	Yes, licensed providers ⁸⁰
Tennessee	Agency pays provider directly	Yes, all providers ⁸¹	Yes, all providers ⁸²
Texas	Agency pays provider directly ⁸³	Yes, licensed and regulated providers ⁸⁴	Yes, licensed and regulated providers ⁸⁴
Utah	Agency pays provider directly	Yes, all providers ⁸⁵	Yes, all providers ⁸⁵
Vermont	Agency pays provider directly	Yes, licensed and regulated providers ⁸⁶	Yes, licensed and regulated providers ⁸⁷
Virgin Islands	Agency pays provider directly	No	No ⁸⁸
Virginia	Agency pays provider directly	Yes, licensed and regulated providers ⁸⁹	Yes, licensed providers ⁹⁰
Washington	Agency pays provider directly	Yes, licensed providers	Yes, licensed providers
West Virginia	Agency pays provider directly	Yes, all providers ⁶	Yes, all providers ⁶
Wisconsin	Agency gives money to parents, who then pay the providers	Yes, all providers ⁹¹	Yes, all providers ⁹²
Wyoming	Agency pays provider directly	No	Yes, all providers ⁹³

Source: CCDF Policies Database October 1, 2019 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2019 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ Information not found in State's/Territory's manual.

² The provider is paid for pre-established center closing days.

³ Informal care providers are only reimbursed for actual days of child care. Providers are reimbursed for absences only if the provider collects such reimbursement from private-pay parents. Providers are reimbursed for five absences in a month. If the child has a documented mental or physical illness, the provider is reimbursed for an additional five days in the month.

⁴ Unregulated in-home care providers are hired by the eligible family, which receives money from the state to pay for care.

⁵ Providers are paid at a full- or part-month rate based on a range of the child's actual attendance. Providers are paid for the required 10 business-day notice when care ends regardless of if the child actually attends unless both parties have signed a mutual agreement waiving the 10 business-day notice.

⁶ Providers are paid the full monthly rate of 20 days as long as a child attends at least 13 days.

⁷ The provider may bill for up to two absent days per child per month.

⁸ Providers are paid for observed holidays or days the center is closed due to inclement weather.

⁹ Foster care and child protective services cases are exempt from absent day limits.

¹⁰ Providers are reimbursed for a maximum of 10 non-operational days per fiscal year.

¹¹ Providers are paid for approved child absences or for circumstances where unsubsidized families would be required to pay for a child's absence.

¹² Child care providers are required to be paid for a minimum number of holidays based on their quality tier. Counties have the option to pay for additional holidays beyond the minimum required by the state.

¹³ Absences are paid for a maximum number of days as defined by the county.

¹⁴ Occasional absences from care do not affect the amount of the provider payment, unless the provider charges less due to the reduced hours.

¹⁵ Payment is authorized for the provider for up to five days of unexcused absences and 15 days of excused absences for a child per month.

¹⁶ Providers are not paid for days the center is closed, except when there is a state of emergency declared by the governor.

¹⁷ Providers are paid for up to five absent days per month.

¹⁸ Reimbursement may be made for temporary emergency closures and for a maximum of 12 calendar days for holidays.

¹⁹ Reimbursement may be made for a total of three absences per child per calendar month. Absences beyond three days (but no more than ten days) will be reimbursed only in the event of illness, medical emergency, death in the family, etc., with the submission of written documentation by the parent justifying the extraordinary circumstance.

²⁰ Providers are paid the full weekly rate as long as the child attends at least one day.

²¹ Child care certificates are issued to the parents for payment to the provider.

²² Absences are reimbursed for a maximum of 10 days.

²³ The agency pays families through direct deposit into a checking account or on the family's EBT card.

²⁴ Providers may be paid for days they are closed if they also bill private-pay parents for those days.

²⁵ Providers may be paid for days children are absent if they also bill private-pay parents for those days. If child care arrangements would otherwise be lost, providers may be paid for up to one month for a child's absence, as long as the child plans to return.

²⁶ Payments are processed by the local resource and referral agency and issued directly to the provider from the lead agency.

²⁷ Licensed and license-exempt child care center providers are paid for days the child is absent if the child is in attendance for at least 80 percent of the days the child is eligible for care. License-exempt home-based providers are only paid for the days the child attends care.

- ²⁸ Child care centers and licensed child care homes are paid based on eligible days if attendance at the provider exceeds 80 percent for all eligible days. For child care centers and licensed child care homes that have less than 80 percent attendance on eligible days and license-exempt providers, payments are made based on days of attendance and families may be required to pay the difference.
- ²⁹ With the exception of nanny care, the agency pays the provider directly. In the case of nanny care, defined as care in the child's home by a nonresident, the subsidy payment is made to the parent who is responsible for paying the provider.
- ³⁰ Providers are reimbursed for up to six holidays per year, provided the child was in attendance in the 21 days prior to the holiday. Providers are also reimbursed for up to five inclement weather closings per year when there was a travel advisory in their county.
- ³¹ Providers are paid for up to 20 absences per year. For a child with special health situations (i.e. prolonged illness or injury), the treating physician must document the child's needs for treatment or recuperation. With special approval, this prescribed time may result in absences in excess of 20 days.
- ³² Providers are paid for center closings due to holidays if they bill private-pay parents for those days. Providers are not paid for days the center is closed due to illness or vacation.
- ³³ Providers may be paid for up to four days per month for days a child is absent from care.
- ³⁴ Providers are paid for these days if they also bill private-pay parents and the policy is part of the parent and provider agreement.
- ³⁵ Providers can be paid for up to 10 holidays per calendar year, with the holidays chosen by the provider.
- ³⁶ Licensed providers and certified family care homes may be paid for a maximum of five absences per month. Absences beyond five days may be approved with documentation when there is a death in the family, illness of the child or parent, court order, or natural disaster. Registered providers are not paid for absences.
- ³⁷ Providers are paid for the days children are absent for a maximum of five days in a calendar month. Days when the provider is closed or unable to provide care are counted as absent days for the children. Payments to providers will not be made for absences for part-time care.
- ³⁸ Providers can be paid for excused absences, including holidays, vacations, inclement weather, illnesses, or family emergencies. The amount of hours allowed for excused absences is based on the child's enrollment; children receiving full-time care are eligible for 200 hours of excused absences, and children receiving part-time care are eligible for 150 hours of excused absences.
- ³⁹ Family homes and child care centers are paid for six predetermined holidays per year. Family homes and centers are also paid for the days when the provider is closed for an official weather emergency or voluntary closure as long as it does not exceed two consecutive weeks annually and the provider gives two weeks written notice. Informal providers are not paid for holidays in which the provider is closed, but can be paid for holidays that are documented as worked. Informal providers are paid for voluntary closures.
- ⁴⁰ Family homes and child care centers are paid for an absent child up to 60 days in one year.
- ⁴¹ Providers will not be paid for more than 30 child absence days in a six-month period or for more than three consecutive unexplained absences without written approval from the agency.
- ⁴² All payments are mailed or direct deposited directly to the provider, except in the case of license-exempt-related (family) and license-exempt-unrelated (friend and neighbor) providers, for which payment is mailed to the parent or guardian.
- ⁴³ Providers are paid for days a child is absent, is reasonably expected to return, and would normally have been in care, regardless of the reason for the absence. The number of absence hours for which a provider may be paid is capped at 360 hours per fiscal year and limited to no more than 10 days of absences when no care is provided.
- ⁴⁴ Providers are paid for days children would normally have been in attendance, limited to 360 hours per fiscal year.
- ⁴⁵ The agency pays the provider directly unless care is provided in the child's home, in which case the payment is made to the parent.
- ⁴⁶ Providers are paid only for days the center is closed for holidays. Providers cannot be paid for provider vacation days, provider sick days, or any other days that child care is not available.

⁴⁷ All licensed providers and license-exempt centers may be paid for days children are absent. The subsidy will not be provided after 10 consecutive days of absences or up to 25 days in a calendar year per child. Children with a medical condition or children whose parents or siblings have a medical condition documented by a qualified medical professional may exceed the limits. Children may be exempt from the absent day limits if at least one parent is under the age of 21, does not have a high school or general equivalency diploma, and is a student in a district or program that provides or arranges child care, parenting support, social services support, career and employment supports, and academic supports. The exemption must be approved by the county. If the provider fails to accurately mark a child absent on any day that the child does not attend care, that day is considered an overpayment regardless of whether the child reached or is exempt from the absent day limits for the year.

⁴⁸ Providers may elect to observe up to 11 holidays a year. If the governor allows more than one day in observance of a holiday, the providers must be allowed these extra days.

⁴⁹ A child may be allowed up to five paid unexcused absence days per month. Child care providers are paid for a full month for up to five absent days. If a child is absent for more than five days, the child care provider will be paid on a daily basis. No documentation is needed for these absences. Absences are considered excessive whenever a child is absent from a child care center for 60 consecutive days or more.

⁵⁰ Parents may pay the provider directly and be reimbursed for authorized child care services if children are in protective services, residing out of state, and the out-of-state child care provider is unwilling to accept direct payment.

⁵¹ The provider is paid for up to five absences or holidays per month for children authorized to attend 20 or more units of care per month. The provider is paid for up to three absences or holidays per month for children authorized to attend 2 to 19 units of care per month. A holiday is any day the provider is closed during normal operating hours, including legal and local holidays, inclement weather, or a provider vacation.

⁵² Payments for absences are only approved for children who attend the facility full time (30 or more hours per week). Payments will only be made to licensed child care centers and registered family and group providers.

⁵³ When a child's subsidy payment is based on actual attendance, the provider can be reimbursed for up to 21 absences per year with written authorization from the parent. When a child's subsidy payment is based on the parent's approved schedule, there is no limit to the amount of allowed absences for which providers are reimbursed.

⁵⁴ Each child is given a determined annual allotment of absentee hours based on their authorized service level. Parents are responsible for paying the child care provider for any hours of child care services when the child's attendance falls below the approved service level and the child's absentee allotment has been exhausted.

⁵⁵ The provider must complete and sign an agreement, along with a parent signature, before payment can be received.

⁵⁶ If children are present at least 80 percent of the service period, full payment is rendered. If the child is absent more than five days due to illness, a physician's note is required in order to receive payment.

⁵⁷ The agency pays all licensed providers and registered home providers directly. For in-home providers, the agency pays the parent, who then pays the provider.

⁵⁸ Providers are paid if they are closed for up to five days. If the child receives care from a different provider while the original provider is closed, the payment will go to the provider who cares for the child while the original provider is closed.

⁵⁹ Payment is based upon the child's enrollment with the provider as reflected in the child care placement agreement, rather than daily attendance. Child care providers must notify the department within three business days after the fifth day of non-attendance if the child is disenrolled or is absent for five consecutive scheduled days. If authorized child care has not been used for five consecutive scheduled days without a reason such as illness, sudden death, or family medical emergency, payment may discontinue to the provider and the client will remain eligible for the remainder of the eligibility period.

⁶⁰ Policy coded for New York City. Payments may be made either to the parent or the provider, as determined by each district.

⁶¹ Policy Coded for New York City. Districts have the option to pay for center closings for holidays, extenuating circumstances, or emergency closings. Legally exempt family child care homes and in-home providers are not reimbursed for days the center is closed.

- ⁶² Legally-exempt family child care homes and in-home providers are not reimbursed for absences. Day care centers, group family day care centers, family day care, legally-exempt group day care centers, and school-age child care providers can be reimbursed for absences.
- ⁶³ Providers can choose 15 days a calendar year for automatic approval for holidays and vacation days. This does not include inclement weather and emergencies; the limit for inclement weather and emergencies is up to five calendar days per month.
- ⁶⁴ Payment for services is typically based on enrollment. Providers are paid based on attendance if the child has been absent more than 10 days, the provider charges on the basis of attendance, or if the provider has an unpaid closure.
- ⁶⁵ The provider chooses who will be paid. The agency may pay the provider directly or the provider may request the payment be issued to the family.
- ⁶⁶ Providers can be reimbursed more than 40 hours per calendar month for closures due to inclement weather.
- ⁶⁷ Up to 40 hours per calendar month can be reimbursed for a child who is absent from the child care setting for any reason when the provider requires payment of the absence.
- ⁶⁸ A provider may be paid for two professional development days in a fiscal year, defined as July 1st through June 30th of the following year. The two days cannot be utilized in two consecutive days or two consecutive months. This does not apply to In-Home Aides.
- ⁶⁹ Providers are reimbursed for up to 10 absent days per child during each six-month period that care is provided (January 1st through June 30th). This does not apply to In-Home Aides.
- ⁷⁰ If the child in care is authorized for weekly units of care and the child attends a minimum of 15 days during the month, the provider can be reimbursed for absences. In-home providers are not paid the weekly rate.
- ⁷¹ If the provider is approved for the full-time or part-time monthly rate and the child is in care for the minimum number of hours to qualify for the full-time or part-time rate during the month, the provider is paid the established rate regardless of any closings. If, due to the closings, the child is not in care for the minimum number of hours to qualify for the full-time or part-time rate, the provider is paid a lower rate (part-time or hourly) that does not cover the closings.
- ⁷² All certified center providers can be paid for anticipated hours of attendance at the beginning of the month. This removes the absent day restriction and allows centers to receive payment for all of the days that children were scheduled to attend but were absent as long as the children attended the center at least one day during the calendar month. This policy does not apply to TANF recipients. All other providers will continue to be paid 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.
- ⁷³ The agency pays the provider directly with the exception of in-home care; the agency gives the payment to the parent if care is provided in the child's own home.
- ⁷⁴ Regulated providers are paid for up to 15 closure days per fiscal year.
- ⁷⁵ Providers are paid for a maximum of 40 days of absence for each child during the state's fiscal year. If absences exceed 40 days for a child, the parent or caretaker is responsible for paying the provider for all additional absences.
- ⁷⁶ Providers are paid for service, unless service is provided for less than the 80 percent monthly service requirement.
- ⁷⁷ Payments may be made to providers for five absences per month.
- ⁷⁸ The provider must also bill private-pay parents for the days the center is closed.
- ⁷⁹ When a child is absent for two consecutive weeks (Monday through Friday), but returns on any day of the third week, the provider can continue to bill and be paid for that time period for the child.
- ⁸⁰ The provider may be paid for up to 50 hours a month when a child is absent due to illness, vacation, or the failure of the child's parent to report an absence. Payment for absent hours may only be requested if the provider would normally charge other families for absent hours.
- ⁸¹ Providers are paid for approved state holidays if the provider is closed.
- ⁸² Providers may be paid for up to five days per month for days a child is absent from care.
- ⁸³ Payment is made to providers either by the Local Workforce Development Board or the Board's designated contractor.
- ⁸⁴ Policy coded for Gulf Coast. Providers are paid for up to 40 days of absences in a year when the child is scheduled to attend. The child care subsidy will be terminated on the 15th day after the child has been absent for more than 40 days in a year unless the agency has approved extended absence for a documented chronic illness.

⁸⁵ Providers are paid prospectively. Providers retain their full monthly payment as long as the child received care for at least eight hours in the month. Providers must report a child has not attended for eight hours within ten days of learning of the change or by the 25th of the month, whichever is sooner.

⁸⁶ Approved relative child care providers are not reimbursed for days the provider is closed.

⁸⁷ Licensed and registered providers are reimbursed for days children are absent. Approved relative child care providers are not reimbursed for days children are absent.

⁸⁸ The provider is not paid for days the child was absent due to vacation or if the parent stopped sending the child.

⁸⁹ Licensed providers, certified preschools, voluntarily registered family day homes, and religiously exempt child day centers may be paid up to 10 holidays identified by the state, if the provider charges the general public for those holidays. The department does not pay for holidays when an unlicensed family day home or local government approved recreation program is closed.

⁹⁰ Licensed providers are paid for up to 36 absent days per fiscal year.

⁹¹ The agency will pay for up to one week of provider shutdown per year.

⁹² Providers are paid based on a child's expected attendance based on the parent's schedule at the beginning of the month.

⁹³ Providers are paid for up to one absent day per month.

Table 36. Maximum Reimbursement Rates for Licensed Child Care Centers (Monthly Dollar Amounts), 2019 ¹

State/Territory*	Full Time Infant Care (11 months): Base Rate	Full Time Infant Care (11 months): Highest Rate	Full Time Toddler Care (35 months): Base Rate	Full Time Toddler Care (35 months): Highest Rate	Full Time Preschooler Care (59 months): Base Rate	Full Time Preschooler Care (59 months): Highest Rate	Before-and-After School Age Care (84 months): Base Rate	Before-and-After School Age Care (84 months): Highest Rate
Alabama ²	615	676	581	637	581	637	238	264
Alaska ³	900	900	800	800	700	700	375	375
American Samoa	200	200	180	180	180	180	54	54
Arizona ⁴	884	1,061	796	955	693	832	412	494
Arkansas ⁵	619	711	578	664	511	588	364	419
California ⁶	1,594	1,594	1,124	1,124	1,124	1,124	502	502
Colorado ⁷	1,208	1,701	1,083	1,576	915	1,170	354	655
Connecticut ⁸	1,634	1,716	1,634	1,716	1,049	1,102	486	510
DC ⁹	1,418	2,035	1,418	2,035	1,059	1,332	469	469
Delaware ¹⁰	845	845	652	652	652	652	344	344
Florida ¹¹	612	735	518	622	482	578	323	388
Georgia ¹²	650	910	624	874	537	752	303	425
Guam	675	675	575	575	570	570	390	390
Hawaii ¹³	1,490	1,490	740	919	740	919	155	155
Idaho ¹⁴	790	790	650	650	650	650	471	471
Illinois ¹⁵	1,050	1,050	887	887	739	739	370	370
Indiana ¹⁶	1,070	1,499	966	1,352	763	1,066	399	559
Iowa ¹⁷	737	949	639	810	639	810	264	325
Kansas ¹⁸	659	659	508	508	508	508	197	197
Kentucky ¹⁹	585	607	585	607	542	542	325	325
Louisiana ²⁰	550	550	523	523	484	484	330	330
Maine ²¹	1,313	1,313	1,209	1,209	1,122	1,122	487	487
Maryland ²²	958	1,379	659	830	659	830	438	551
Massachusetts ²³	1,732	1,784	1,018	1,663	1,018	1,018	705	705
Michigan ²⁴	693	953	477	737	477	737	238	368

Table 36. Maximum Reimbursement Rates for Licensed Child Care Centers (Monthly Dollar Amounts), 2019 ¹

State/Territory*	Full Time Infant Care (11 months): Base Rate	Full Time Infant Care (11 months): Highest Rate	Full Time Toddler Care (35 months): Base Rate	Full Time Toddler Care (35 months): Highest Rate	Full Time Preschooler Care (59 months): Base Rate	Full Time Preschooler Care (59 months): Highest Rate	Before-and-After School Age Care (84 months): Base Rate	Before-and-After School Age Care (84 months): Highest Rate
Minnesota ²⁵	1,161	1,393	871	1,045	871	1,045	650	780
Mississippi ²⁶	480	480	480	480	440	440	244	244
Missouri ²⁷	829	995	638	766	638	766	267	320
Montana ²⁸	866	866	866	866	758	758	284	284
Nebraska ²⁹	975	1,001	919	975	849	929	520	572
Nevada ³⁰	924	1,056	836	924	792	880	704	836
New Hampshire ³¹	963	963	909	909	801	801	385	385
New Jersey ³²	976	1,172	677	798	677	798	311	311
New Mexico ³³	721	1,271	590	1,140	491	841	327	515
New York ³⁴	1,759	1,759	1,365	1,365	1,252	1,252	672	672
No. Mariana Islands ³⁵	425	425	425	425	340	340	170	170
North Carolina ³⁶	963	1,194	937	1,120	881	1,035	443	475
North Dakota	840	840	790	790	720	720	477	477
Ohio ³⁷	910	1,278	815	1,144	713	1,001	269	378
Oklahoma ³⁸	357	961	311	784	311	580	184	347
Oregon ³⁹	1,415	1,415	1,404	1,404	1,060	1,060	641	641
Pennsylvania ⁴⁰	925	1,211	792	1,072	725	924	506	576
Puerto Rico ⁴¹	351	351	351	351	338	338	258	258
Rhode Island ⁴²	860	1,116	860	1,116	718	848	475	475
South Carolina ⁴³	802	888	802	888	702	789	325	355
South Dakota ⁴⁴	702	702	702	702	624	624	321	321
Tennessee ⁴⁵	765	920	512	615	512	615	258	310
Texas ⁴⁶	727	902	626	830	548	770	350	532
Utah ⁴¹	900	900	650	650	585	585	525	525
Vermont ⁴⁷	860	1,204	827	1,158	711	996	364	509

Table 36. Maximum Reimbursement Rates for Licensed Child Care Centers (Monthly Dollar Amounts), 2019 ¹								
State/Territory*	Full Time Infant Care (11 months): Base Rate	Full Time Infant Care (11 months): Highest Rate	Full Time Toddler Care (35 months): Base Rate	Full Time Toddler Care (35 months): Highest Rate	Full Time Preschooler Care (59 months): Base Rate	Full Time Preschooler Care (59 months): Highest Rate	Before-and-After School Age Care (84 months): Base Rate	Before-and-After School Age Care (84 months): Highest Rate
Virgin Islands	300	300	300	300	300	300	150	150
Virginia ⁴⁸	1,763	1,763	1,505	1,505	1,505	1,505	924	924
Washington ⁴⁹	1,650	1,981	1,278	1,534	1,278	1,534	501	602
West Virginia ⁵⁰	640	720	600	680	560	640	250	290
Wisconsin ⁵¹	1,189	1,525	1,076	1,380	921	1,181	405	519
Wyoming ⁴¹	650	650	573	573	542	542	336	336

Source: CCDF Policies Database October 1, 2019 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2019 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

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 Base rates are center reimbursement rates with no star rating for the Birmingham Region. Highest rates are star 5 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 or First Thing's First Quality First five-star center reimbursement rates for District 1.

⁵ Base rates are Better Beginnings quality incentive star level 1 rates for centers in urban areas. Highest rates are Better Beginnings quality incentive star level 3 rates for centers in urban areas.

⁶ Center reimbursement rates for Los Angeles. Before-and-after care rates reflect monthly part-time rates.

- ⁷ Base rates are tier one center reimbursement rates for Denver. Highest rates are tier five 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 Base rates are developing or preliminary child development center reimbursement rates. Highest rates are high quality child development center reimbursement rates. Rates were calculated using a multiplier of 21.667 to convert daily rates to monthly rates.
- ¹⁰ Center reimbursement rates for New Castle.
- ¹¹ Base rates are licensed or exempt center reimbursement rates for the Miami-Dade Coalition. Highest rates are Gold Seal center reimbursement rates for the Miami-Dade Coalition. Before-and-after care rates reflect part-time, before- or after-school rates for school-age children.
- ¹² Base rates are center rates with no additional star rating for Zone 1. Highest rates are three-star center 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 Cluster 3, which includes Boise County. Rates are determined based on the parent's qualifying activity hours and are authorized up to the full-time rate for before-and-after care if the provider charges full-time rates for the amount of care provided.
- 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 licensed, level four center reimbursement rates for Marion.
- ¹⁷ Base rates are basic care center rates. Highest rates are Quality Rating System level 5 center rates.
- ¹⁸ Center reimbursement rates for Sedgwick County.
- ¹⁹ Base rates are licensed type II center rates for Jefferson County. Highest rates are licensed type I center rates for Jefferson County. Providers participating in the All STARS program receive an initial achievement award, an annual award, and monthly subsidy enrollment award per subsidized child based on the age of the child. These payments vary based on the STARS level, from level one through five.
- ²⁰ Base rates are one star Type III and Class M center rates. Highest rates are five star Type III and Class M center rates. The state authorizes a maximum 22 days per month. The multiplier for converting maximum daily rates to maximum monthly rates is 22. In addition to the rates shown, lump sum bonus payments are issued after the end of each calendar quarter to child care centers based on the center's star rating and a percentage of all child care subsidy payments received by the center during the prior quarter. Five star-rated centers are paid a lump sum equal to 20 percent of the total amount of child care subsidy payments received.
- ²¹ Licensed center reimbursement rates for Cumberland County.
- ²² Base rates are unaccredited licensed center reimbursement rates for Baltimore City. Highest rates are level five center reimbursement rates for Baltimore City.
- ²³ Base rates are reimbursement rates for centers with no additional rating in Region 6. Highest rates are QRIS level two and above center reimbursement rates for Region 6.
- ²⁴ Base rates are licensed one-star child care center reimbursement rates. Highest rates are licensed five-star child care center reimbursement rates.
- ²⁵ Base rates are unaccredited center reimbursement rates for Hennepin County. Highest rates are four-star center reimbursement rates for Hennepin County.
- ²⁶ Standard licensed child care center reimbursement rates.
- ²⁷ 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.
- ²⁸ Rates were calculated using a multiplier of 21.65 to convert full-time daily rates to monthly rates.

- ²⁹ 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.
- ³⁰ Base rates are One Star licensed center reimbursement rates for Clark County. Highest rates are Five Star licensed center reimbursement rates for Clark County. Rates were calculated using a multiplier of 22 to convert daily rates to monthly rates. Full-day school-age rates are used to calculate before-and-after care rates.
- ³¹ Licensed center reimbursement rates. Rates were calculated using a multiplier of 4.33 to convert weekly rates to monthly rates. School age children are only eligible for half-time service during the school year and are allowed full-time service during scheduled school breaks.
- ³² Base rates are licensed center reimbursement rates. Highest rates are Grow NJ Kids five-star rated provider rates.
- ³³ Base rates are licensed center reimbursement rates. Highest rates are FOCUS (the state's quality rating system) five-star center or New Mexico Children, Youth, and Family Department approved national accreditation reimbursement rates.
- ³⁴ Day care center reimbursement rates for Group 5 counties: New York, Bronx, Kings, Queens, and Richmond.
- ³⁵ A maximum of three hours of care per day is approved for after school programs.
- ³⁶ Base rates are licensed three-star center reimbursement rates for Mecklenburg County. Highest rates are licensed five-star center reimbursement rates for Mecklenburg County. The before-and-after school rate is calculated at 75 percent of the full-time summer care rate.
- ³⁷ Base rates are licensed center reimbursement rates for Franklin County. Highest rates are licensed five-star center reimbursement rates for Franklin County.
- ³⁸ Base rates are one-star center reimbursement rates. Highest rates are three-star center reimbursement rates. Before-and-after care rates are blended rates for a traditional school year. The multiplier for converting maximum daily rates to maximum monthly rates is 23.
- ³⁹ Certified center reimbursement rates for Group Area A.
- ⁴⁰ Base rates are star one center reimbursement rates for Philadelphia. Highest rates are star four center reimbursement rates for Philadelphia.
- ⁴¹ Licensed center reimbursement rates.
- ⁴² Base rates are tier 1 licensed center reimbursement rates. Highest rates are tier 5 licensed center reimbursement rates.
- ⁴³ Base rates are level C licensed center reimbursement rates for urban counties. Highest rates are level A+ highest achieving center reimbursement rates for urban counties. The highest reimbursement rates include a quality incentive bonus of an additional \$20 for full-time care and \$10 for part-time care. Providers who do not receive the quality incentive bonus are reimbursed at \$10 to \$20 less per week.
- ⁴⁴ Licensed center reimbursement rates for Minnehaha County.
- ⁴⁵ 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.
- ⁴⁶ Base rates are licensed center rates for the Gulf Coast Region. Highest rates are licensed four-star center rates for the Gulf Coast Region.
- ⁴⁷ Base rates are licensed center reimbursement rates. Highest rates are licensed five-star center reimbursement rates. Rates were calculated using a multiplier of 4.3 to convert weekly rates to monthly rates.
- ⁴⁸ Level two center reimbursement rates for Fairfax. Rates were calculated using a multiplier of 21.5 days per month. Reimbursement amounts are rounded down to the closest whole dollar.
- ⁴⁹ Base rates are licensed level 1 center reimbursement rates for Region 4. Highest rates are Early Achievers level 5 licensed center reimbursement rates for Region 4. Rates were calculated using a multiplier of 23 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.

⁵⁰ Base rates are tier one center reimbursement rates. Highest rates are tier three center reimbursement rates. Rates were calculated using a multiplier of 20 days per month.

⁵¹ Base rates are licensed two-star center rates for Milwaukee. Highest rates are licensed five-star center rates for Milwaukee. The state calculates maximum monthly reimbursement rates by multiplying the hourly reimbursement rates by 153 hours.

Table 37. Maximum Reimbursement Rates for Licensed Family Child Care Homes (Monthly Dollar Amounts), 2019 ¹

State/Territory*	Full Time Infant Care (11 months): Base Rate	Full Time Infant Care (11 months): Highest Rate	Full Time Toddler Care (35 months): Base Rate	Full Time Toddler Care (35 months): Highest Rate	Full Time Preschooler Care (59 months): Base Rate	Full Time Preschooler Care (59 months): Highest Rate	Before-and-After School Age Care (84 months): Base Rate	Before-and-After School Age Care (84 months): Highest Rate
Alabama ²	542	598	520	572	520	572	230	251
Alaska ³	700	700	650	650	545	545	301	301
American Samoa	200	200	180	180	180	180	54	54
Arizona ⁴	607	728	563	676	542	650	368	442
Arkansas ⁵	619	711	578	664	511	588	364	419
California ⁶	927	927	867	867	867	867	525	525
Colorado ⁷	775	1,127	650	1,083	650	1,083	313	536
Connecticut ⁸	1,131	1,187	1,131	1,187	877	921	538	564
DC ⁹	1,093	1,512	1,093	1,512	668	936	364	364
Delaware ¹⁰	542	542	507	507	507	507	282	282
Florida ¹¹	528	634	466	559	456	547	303	363
Georgia ¹²	542	758	520	728	455	637	238	334
Guam	675	675	575	575	570	570	390	390
Hawaii ¹³	650	650	600	600	600	600	534	534
Idaho ¹⁴	618	618	555	555	555	555	488	488
Illinois ¹⁵	765	765	713	713	648	648	324	324
Indiana ¹⁶	563	789	542	758	433	607	334	468
Iowa ¹⁷	562	607	542	596	542	596	234	271
Kansas ¹⁸	499	499	451	451	451	451	225	225
Kentucky ¹⁹	542	542	542	542	520	520	303	303
Louisiana ²⁰	396	396	396	396	374	374	165	165
Maine ²¹	953	953	867	867	802	802	455	455
Maryland ²²	702	906	576	738	576	738	386	494
Massachusetts ²³	1,074	1,106	780	803	780	780	468	468
Michigan ²⁴	546	806	459	719	459	719	230	360

Table 37. Maximum Reimbursement Rates for Licensed Family Child Care Homes (Monthly Dollar Amounts), 2019¹

State/Territory*	Full Time Infant Care (11 months): Base Rate	Full Time Infant Care (11 months): Highest Rate	Full Time Toddler Care (35 months): Base Rate	Full Time Toddler Care (35 months): Highest Rate	Full Time Preschooler Care (59 months): Base Rate	Full Time Preschooler Care (59 months): Highest Rate	Before-and-After School Age Care (84 months): Base Rate	Before-and-After School Age Care (84 months): Highest Rate
Minnesota ²⁵	706	847	615	738	615	738	420	504
Mississippi ²⁶	349	349	348	348	318	318	152	152
Missouri ²⁷	447	536	408	490	408	490	216	259
Montana ²⁸	650	650	650	650	606	606	227	227
Nebraska ²⁹	650	737	650	693	650	693	390	394
Nevada ³⁰	704	814	693	770	660	748	660	748
New Hampshire ³¹	747	747	725	725	660	660	260	260
New Jersey ³²	670	703	527	550	527	550	263	275
New Mexico ³³	567	817	464	714	412	662	305	493
New York ³⁴	867	867	849	849	802	802	498	498
No. Mariana Islands ³⁵	425	425	425	425	340	340	170	170
North Carolina ³⁶	740	799	743	773	699	727	386	404
North Dakota ¹³	640	640	620	620	600	600	500	500
Ohio ³⁷	621	872	623	875	535	751	287	403
Oklahoma ³⁸	357	805	304	736	304	612	177	347
Oregon ³⁹	1,254	1,254	1,140	1,140	1,000	1,000	563	563
Pennsylvania ⁴⁰	747	1,033	658	939	619	818	440	509
Puerto Rico	270	270	270	270	264	264	220	220
Rhode Island ⁴¹	789	958	789	958	710	732	504	520
South Carolina ⁴²	585	620	585	620	542	576	325	360
South Dakota ⁴³	520	520	520	520	494	494	260	260
Tennessee ⁴⁴	581	697	439	525	439	525	323	387
Texas ⁴⁵	578	792	551	753	500	713	354	537
Utah ¹³	656	656	575	575	550	550	500	500
Vermont ⁴⁶	595	834	579	810	496	695	273	382

Table 37. Maximum Reimbursement Rates for Licensed Family Child Care Homes (Monthly Dollar Amounts), 2019¹								
State/Territory*	Full Time Infant Care (11 months): Base Rate	Full Time Infant Care (11 months): Highest Rate	Full Time Toddler Care (35 months): Base Rate	Full Time Toddler Care (35 months): Highest Rate	Full Time Preschooler Care (59 months): Base Rate	Full Time Preschooler Care (59 months): Highest Rate	Before-and-After School Age Care (84 months): Base Rate	Before-and-After School Age Care (84 months): Highest Rate
Virgin Islands	300	300	300	300	300	300	150	150
Virginia ⁴⁷	1,182	1,182	1,075	1,075	1,075	1,075	774	774
Washington ⁴⁸	1,251	1,501	945	1,134	945	1,134	574	688
West Virginia ⁴⁹	500	580	440	520	440	520	200	240
Wisconsin ⁵⁰	948	1,216	860	1,104	788	1,011	366	470
Wyoming ¹³	554	554	542	542	500	500	318	318

Source: CCDF Policies Database October 1, 2019 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2019 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

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 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. The rates shown are for family child care home providers. States may also use separate rates for group child care home providers; rates for group child care home providers can be found in the full detail of the CCDF Policies Database.

² Base rates are family day care home reimbursement rates with no star rating for the Birmingham Region. Highest rates are star 5 family day care home reimbursement rates for the Birmingham region.

³ Family home care rates for Anchorage.

⁴ Base rates are certified child care group home reimbursement rates for District 1. Highest rates are accredited or First Thing's First Quality First five-star group home reimbursement rates for District 1.

⁵ Base rates are Better Beginnings quality incentive star level 1 rates for family child care homes in urban areas. Highest rates are Better Beginnings quality incentive star level 3 rates for family child care homes in urban areas.

⁶ Licensed family child care home rates for Los Angeles. Before-and-after care rates reflect monthly part-time rates.

- ⁷ Base rates are tier one home reimbursement rates for Denver. Highest rates are tier five home reimbursement rates for Denver.
- ⁸ Base rates are licensed family day 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.
- ⁹ Base rates are developing or preliminary child development home reimbursement rates. Highest rates are high quality child development home reimbursement rates. Rates were calculated using a multiplier of 21.667 to covert daily rates to monthly rates.
- ¹⁰ Licensed family child care home rates for New Castle.
- ¹¹ Base rates are licensed family child care home reimbursement rates for the Miami-Dade Coalition. Highest rates are Gold Seal family child care home rates for the Miami-Dade Coalition. Before-and-after care rates reflect part-time, before- or after-school rates for school-age children.
- ¹² Base rates are family child care home rates with no additional star rating for Zone 1. Highest rates are three-star family child care home rates for Zone 1.
- ¹³ Licensed family child care home rates.
- ¹⁴ Family child care home rates for Cluster 3, which includes Boise County. Rates are determined based on the parent's qualifying activity hours and are authorized up to the full-time rate for before-and-after care if the provider charges full-time rates for the amount of care provided.
- ¹⁵ Licensed family day 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.
- ¹⁶ Base rates are licensed family child care home rates for Marion. Highest rates are licensed, level four family child care home rates for Marion.
- ¹⁷ Base rates are registered Child Development Home category A and B basic registered rates. Highest rates are registered Child Development Home category A and B Quality Rating System level 5 rates.
- ¹⁸ Licensed family child care home rates for Sedgwick County.
- ¹⁹ Certified family child care home rates for Jefferson County. Providers participating in the All STARS program receive an initial achievement award, an annual award, and monthly subsidy enrollment award per subsidized child based on the age of the child. These payments vary based on the STARS level, from level one through five.
- ²⁰ The state authorizes a maximum of 22 days per month. The multiplier for converting maximum daily rates to maximum monthly rates is 22.
- ²¹ Licensed family child care home rates for Cumberland County.
- ²² Base rates are unaccredited licensed family child care home rates for Baltimore City. Highest rates are level five family child care home rates for Baltimore City.
- ²³ Base rates are reimbursement rates for non-systems family child care homes with no additional rating in Region 6. Highest rates are QRIS level two and above non-systems family child care home rates for Region 6. For family child care settings and informal child care settings, before-and-after care for school-age children is calculated as 60 percent of the full-time rate.
- ²⁴ Base rates are licensed one-star family home reimbursement rates. Highest rates are licensed five-star family home reimbursement rates.
- ²⁵ Base rates are licensed unaccredited family child care rates for Hennepin County. Highest rates are licensed four-star family child care rates for Hennepin County.
- ²⁶ Standard family child care home reimbursement 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 Rates were calculated using a multiplier of 21.65 to convert full-time daily rates to monthly rates.
- ²⁹ Base rates are licensed family child care home rates for Lancaster, Dakota, Douglas, and Sarpy Counties. Highest rates are accredited family child care home rates for the entire state.

- ³⁰ Base rates are One Star licensed family child care home reimbursement rates for Clark County. Highest rates are Five Star licensed family child care home reimbursement rates for Clark County. Rates were calculated using a multiplier of 22 to convert daily rates to monthly rates. Full-day school-age rates are used to calculate before-and-after care rates.
- ³¹ Licensed family child care home rates. Rates were calculated using a multiplier of 4.33 to convert weekly rates to monthly rates. School age children are only eligible for half-time service during the school year and are allowed full-time service during scheduled school breaks.
- ³² Base rates are registered family child care home rates. Highest rates are accredited family child care home rates.
- ³³ Base rates are licensed family child care home rates. Highest rates are FOCUS (the state's quality rating system) five-star family child care home or New Mexico Children, Youth, and Family Department approved national accreditation reimbursement rates.
- ³⁴ Registered family day care home rates for Group 5 counties: New York, Bronx, Kings, Queens, and Richmond.
- ³⁵ A maximum of three hours of care per day is approved for after school programs.
- ³⁶ Base rates are licensed three-star center reimbursement rates for Mecklenburg County. Highest rates are licensed five-star center reimbursement rates for Mecklenburg County. The before-and-after school rate is calculated at 75 percent of the full-time summer care rate.
- ³⁷ Base rates are licensed Type B family child care home rates for Franklin County. Highest rates are licensed five-star family child care home rates for Franklin County.
- ³⁸ Base rates are one-star family child care home rates. Highest rates are three-star family child care home rates. Before-and-after care rates are blended rates for a traditional school year. The multiplier for converting maximum daily rates to maximum monthly rates is 23.
- ³⁹ Certified family child care home rates for Group Area A.
- ⁴⁰ Base rates are star one family child care home rates for Philadelphia. Highest rates are star four family child care home rates for Philadelphia.
- ⁴¹ Base rates are step 1, star 1 licensed family child care home rates. Highest rates are step 4, star 5 licensed family child care home rates. Providers participating in the state's quality rating system are eligible to receive a once yearly incentive payment of \$500.
- ⁴² Base rates are level C licensed family child care home rates for urban counties. Highest rates are level B+ licensed family child care home rates for urban counties. The highest reimbursement rates include a quality incentive bonus of an additional \$20 for full-time care and \$10 for part-time care. Providers who do not receive the quality incentive bonus are reimbursed at \$10 to \$20 less per week.
- ⁴³ Regulated family child care home rates for Minnehaha County.
- ⁴⁴ 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.
- ⁴⁵ Base rates are licensed family child care home rates for the Gulf Coast Region. Highest rates are licensed four-star family child care home rates for the Gulf Coast Region.
- ⁴⁶ Base rates are registered family child care home rates. Highest rates are registered five-star family child care home rates. Rates were calculated using a multiplier of 4.3 to convert weekly rates to monthly rates.
- ⁴⁷ Level two family day home rates for Fairfax. Rates were calculated using a multiplier of 21.5 days per month. Reimbursement amounts are rounded down to the closest whole dollar.
- ⁴⁸ Base rates are level 1 licensed family child care home reimbursement rates for Region 4. Highest rates are Early Achievers level 5 licensed family child care home reimbursement rates for Region 4. Rates were calculated using a multiplier of 23 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.

⁴⁹ Base rates are tier one family child care home rates. Highest rates are tier three family child care home rates. Rates were calculated using a multiplier of 20 days per month.

⁵⁰ Base rates are licensed two-star family child care home rates for Milwaukee. Highest rates are licensed five-star family child care home rates for Milwaukee. The state calculates maximum monthly reimbursement rates by multiplying the hourly reimbursement rates by 153 hours.

Table 38. Maximum Reimbursement Rates for In-Home Child Care (Monthly Dollar Amounts), 2019¹

State/Territory*	Full Time Infant Care (11 months): Base Rate	Full Time Infant Care (11 months): Highest Rate	Full Time Toddler Care (35 months): Base Rate	Full Time Toddler Care (35 months): Highest Rate	Full Time Preschooler Care (59 months): Base Rate	Full Time Preschooler Care (59 months): Highest Rate	Before-and-After School Age Care (84 months): Base Rate	Before-and-After School Age Care (84 months): Highest Rate
Alabama ²	217	217	217	217	217	217	108	108
Alaska ³	518	518	492	492	440	440	258	258
American Samoa	200	200	180	180	180	180	54	54
Arizona ⁴	227	477	227	477	227	477	130	286
Arkansas ⁵	619	711	578	664	511	588	364	419
California ⁶	649	649	607	607	607	607	230	230
Colorado ⁷	325	325	325	325	325	325	156	156
Connecticut ⁸	632	632	632	632	632	632	378	378
DC ⁹	307	307	307	307	189	189	98	98
Delaware ¹⁰	542	542	507	507	507	507	282	282
Florida ¹¹	528	634	466	559	456	547	303	363
Georgia ¹²	412	412	368	368	325	325	217	217
Guam	675	675	575	575	570	570	390	390
Hawaii ¹³	400	400	350	350	350	350	312	312
Idaho ¹⁴	618	618	555	555	555	555	488	488
Illinois ¹⁵	351	351	351	351	351	351	176	176
Indiana ¹⁶	1,257	1,257	1,257	1,257	1,257	1,257	628	628
Iowa ¹⁷	1,571	1,571	1,571	1,571	1,571	1,571	785	785
Kansas	419	419	419	419	419	419	210	210
Kentucky ¹⁸	282	282	282	282	260	260	130	130
Louisiana ¹⁹	385	385	385	385	385	385	160	160
Maine ²⁰	667	667	607	607	561	561	318	318
Maryland ²¹	420	420	347	347	347	347	230	230
Massachusetts ²²	352	352	352	352	352	352	211	211
Michigan ²³	277	511	277	451	277	451	139	225

Table 38. Maximum Reimbursement Rates for In-Home Child Care (Monthly Dollar Amounts), 2019¹

State/Territory*	Full Time Infant Care (11 months): Base Rate	Full Time Infant Care (11 months): Highest Rate	Full Time Toddler Care (35 months): Base Rate	Full Time Toddler Care (35 months): Highest Rate	Full Time Preschooler Care (59 months): Base Rate	Full Time Preschooler Care (59 months): Highest Rate	Before-and-After School Age Care (84 months): Base Rate	Before-and-After School Age Care (84 months): Highest Rate
Minnesota ²⁴	385	442	335	385	335	385	155	179
Mississippi ²⁵	349	349	348	348	318	318	152	152
Missouri ²⁶	330	330	286	286	286	286	176	176
Montana ²⁷	552	552	552	552	515	515	193	193
Nebraska ²⁸	1,560	1,560	1,560	1,560	1,560	1,560	780	780
Nevada ²⁹	506	506	440	440	418	418	396	396
New Hampshire ³⁰	523	523	508	508	462	462	182	182
New Jersey ³¹	404	404	314	314	314	314	157	157
New Mexico	290	290	275	275	252	252	189	189
New York ³²	563	607	550	594	520	563	325	347
No. Mariana Islands ³³	425	425	425	425	340	340	170	170
North Carolina ³⁴	740	799	743	773	699	727	386	404
North Dakota ³⁵	350	420	330	390	322	382	186	222
Ohio ³⁶	1,482	1,482	1,482	1,482	1,482	1,482	741	741
Oklahoma ³⁷	321	321	273	273	273	273	159	159
Oregon ³⁸	651	800	625	750	586	730	298	458
Pennsylvania ³⁹	283	283	271	271	251	251	222	222
Puerto Rico	270	270	270	270	264	264	220	220
Rhode Island ⁴⁰	431	444	431	444	256	263	188	194
South Carolina ⁴¹	195	195	195	195	182	182	95	95
South Dakota ⁴²	329	329	329	329	329	329	165	165
Tennessee ⁴³	409	409	310	310	310	310	181	181
Texas ⁴⁴	329	329	286	286	245	245	143	143
Utah ¹³	340	340	274	274	213	213	176	176
Vermont ⁴⁵	345	345	345	345	288	288	169	169

Table 38. Maximum Reimbursement Rates for In-Home Child Care (Monthly Dollar Amounts), 2019¹								
State/Territory*	Full Time Infant Care (11 months): Base Rate	Full Time Infant Care (11 months): Highest Rate	Full Time Toddler Care (35 months): Base Rate	Full Time Toddler Care (35 months): Highest Rate	Full Time Preschooler Care (59 months): Base Rate	Full Time Preschooler Care (59 months): Highest Rate	Before-and-After School Age Care (84 months): Base Rate	Before-and-After School Age Care (84 months): Highest Rate
Virgin Islands	300	300	300	300	300	300	150	150
Virginia ⁴⁶	666	666	623	623	623	623	408	408
Washington ⁴⁷	439	439	439	439	439	439	225	225
West Virginia ⁴⁸	400	400	360	360	360	360	180	180
Wisconsin ⁴⁹	1,109	1,109	1,109	1,109	1,109	1,109	555	555
Wyoming ¹³	335	335	335	335	335	335	168	168

Source: CCDF Policies Database October 1, 2019 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2019 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ 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.

² One star plus in-home child care rates.

³ Approved in-home child care rates for Anchorage.

⁴ Base rates are in-home rates for non-certified relative providers. Highest rates are First Thing's First Quality First four star in-home child care rates for District 1.

⁵ Base rates are Better Beginnings quality incentive star level 1 rates for registered child care family homes in urban areas. Highest rates are Better Beginnings quality incentive star level 3 rates for registered child care family homes in urban areas.

⁶ In-home rates for Los Angeles. Before-and-after care rates reflect monthly part-time rates.

⁷ In-home rates 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 Rates were calculated using a multiplier of 21.667 to convert daily rates to monthly rates.

¹⁰ In-home child care rates for New Castle.

¹¹ Informal providers cannot provide care through the subsidy program in the Miami-Dade Coalition. All providers must be licensed. Base rates are licensed home reimbursement rates for the Miami-Dade Coalition. Highest rates are Gold Seal home rates for the Miami-Dade Coalition. Before-and-after care rates reflect part-time, before- or after-school rates for school-age children.

¹² In-home child care rates for Zone 1.

¹³ License-exempt in-home child care rates.

¹⁴ In-home child care rates for Cluster 3, which includes Boise County. Rates are determined based on the parent's qualifying activity hours and are authorized up to the full-time rate for before-and-after care if the provider charges full-time rates for the amount of care provided.

¹⁵ 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.

¹⁶ In-home child care rates for Marion. The rate reflects the federal minimum wage and is divided by the number of children in care.

¹⁷ 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.

¹⁸ Registered in-home child care rates for Jefferson County.

¹⁹ The state authorizes a maximum of 22 days per month. The multiplier for converting maximum daily rates to maximum monthly rates is 22.

²⁰ Unlicensed in-home child care rates for Cumberland County.

²¹ In-home provider rates for Baltimore City.

²² Rates for care provided in the child's home. For family child care settings and informal child care settings, before-and-after care for school-age children is calculated as 60 percent of the full-time rate.

²³ Base rates are tier one in-home child care rates. Highest rates are tier two in-home child care rates.

²⁴ Base rates are unaccredited legal-non-licensed provider rates for Hennepin County. Highest rates are accredited in-home child care rates for Hennepin County.

²⁵ Standard in-home provider reimbursement rates.

²⁶ Registered in-home rates for St. Louis County. Rates calculated using a multiplier of 22 days per month.

²⁷ Rates were calculated using a multiplier of 21.65 to convert full-time daily rates to monthly rates.

²⁸ 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.

²⁹ Unlicensed informal child care rates for Clark County. Rates were calculated using a multiplier of 22 to convert daily rates to monthly rates. Full-day school-age rates are used to calculate before-and-after care rates.

³⁰ Rates for license-exempt child care providers. Rates were calculated using a multiplier of 4.33 to convert weekly rates to monthly rates. School age children are only eligible for half-time service during the school year and are allowed full-time service during scheduled school breaks.

³¹ In-home child care rates for informal or relative care.

³² 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.

- ³³ A maximum of three hours of care per day is approved for after school programs.
- ³⁴ Unregulated providers cannot provide care through the subsidy program. Providers must be licensed at the three to five star levels. Base rates are licensed three-star center reimbursement rates for Mecklenburg County. Highest rates are licensed five-star center reimbursement rates for Mecklenburg County. The before-and-after school rate is calculated at 75 percent of the full-time summer care rate.
- ³⁵ Base rates are in-home child care rates for informal and relative care. Highest rates are registered in-home child care rates.
- ³⁶ In-home child care aide rates for Franklin County.
- ³⁷ The multiplier for converting maximum daily rates to maximum monthly rates is 23.
- ³⁸ 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 for part-time care provided by standard in-home providers.
- ³⁹ In-home child care rates for Philadelphia. Parents are required to make sure in-home providers are paid minimum wage.
- ⁴⁰ Base rates are step 1 license-exempt provider rates. Highest rates are step 4 license-exempt provider rates.
- ⁴¹ In-home child care rates for urban counties.
- ⁴² Unregulated in-home child care rates.
- ⁴³ 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.
- ⁴⁴ Unregulated relative care provider rates for the Gulf Coast Region.
- ⁴⁵ Approved relative child care provider rates. Rates were calculated using a multiplier of 4.3 weeks per month.
- ⁴⁶ In-home child care rates for Fairfax. Rates were calculated using a multiplier of 21.5 days per month. Reimbursement amounts are rounded down to the closest whole dollar.
- ⁴⁷ Rates for in-home providers are calculated using a multiplier that assumes 4.3 weeks per month. Part-time rates for in-home providers are calculated using a multiplier that assumes 20.5 hours per week.
- ⁴⁸ Rates were calculated using a multiplier of 20 days per month.
- ⁴⁹ 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. The state calculates monthly rates by multiplying the state hourly minimum wage by 153 hours per month.

Table 39a. Unlicensed Non-Relative Home-Based Provider Background Check Requirements, 2019 ²

State/Territory*	If There is a Criminal History Background Check Requirement	Background Check Includes: State Criminal History Check with Fingerprinting	Background Check Includes: State Sex Offender Registry Check	Background Check Includes: State Child Abuse and Neglect Registry Check	Background Check Includes: State Check in any State of Residence for Last Five Years	Background Check Includes: National Crime Information Center and/or National Sex Offender Registry Check	Background Check Includes: Next Generation Identification FBI Fingerprint Check
Alabama	NA ³	NA ³	NA ³	NA ³	NA ³	NA ³	NA ³
Alaska	NA ³	NA ³	NA ³	NA ³	NA ³	NA ³	NA ³
American Samoa	Yes, for provider and others	--- ¹	Yes, for provider and others	--- ¹	--- ¹	--- ¹	--- ¹
Arizona	Yes, for provider and others ⁴	Yes, for provider and others ⁴	Yes, for provider and others ⁴	Yes, for provider and others ⁴	No	Yes, for provider and others ⁴	Yes, for provider and others ⁴
Arkansas	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	No	No	Yes, for provider and others
California	Yes, for the provider only ⁵	Yes, for the provider only	Yes, for the provider only	Yes, for the provider only	No	No	No
Colorado	Yes, for provider and others ⁶	Yes, for provider and others ⁶	Yes, for provider and others ⁶	Yes, for provider and others ⁶	No	No	Yes, for provider and others ⁶
Connecticut	NA ³	NA ³	NA ³	NA ³	NA ³	NA ³	NA ³
DC	Yes, for provider and others	--- ¹	Yes, for provider and others	--- ¹	--- ¹	--- ¹	--- ¹
Delaware	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	No	No	No	No
Florida	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others

Table 39a. Unlicensed Non-Relative Home-Based Provider Background Check Requirements, 2019 ²

State/Territory*	If There is a Criminal History Background Check Requirement	Background Check Includes: State Criminal History Check with Fingerprinting	Background Check Includes: State Sex Offender Registry Check	Background Check Includes: State Child Abuse and Neglect Registry Check	Background Check Includes: State Check in any State of Residence for Last Five Years	Background Check Includes: National Crime Information Center and/or National Sex Offender Registry Check	Background Check Includes: Next Generation Identification FBI Fingerprint Check
Georgia	Yes, for provider and others ⁷	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others
Guam	Yes, for provider and others ⁸	No	Yes, for provider and others	Yes, for provider and others	No	No	No
Hawaii	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others
Idaho	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others
Illinois	Yes, for the provider only ⁹	Yes, for the provider only	Yes, for the provider only	Yes, for the provider only	Yes, for the provider only	No	Yes, for the provider only
Indiana	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	No	Yes, for provider and others	Yes, for provider and others
Iowa	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others ¹⁰	No	Yes, for provider and others
Kansas	NA ³	NA ³	NA ³	NA ³	NA ³	NA ³	NA ³
Kentucky	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others ¹¹	Yes, for provider and others	Yes, for provider and others ¹¹	Yes, for provider and others	Yes, for provider and others
Louisiana	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others

Table 39a. Unlicensed Non-Relative Home-Based Provider Background Check Requirements, 2019 ²

State/Territory*	If There is a Criminal History Background Check Requirement	Background Check Includes: State Criminal History Check with Fingerprinting	Background Check Includes: State Sex Offender Registry Check	Background Check Includes: State Child Abuse and Neglect Registry Check	Background Check Includes: State Check in any State of Residence for Last Five Years	Background Check Includes: National Crime Information Center and/or National Sex Offender Registry Check	Background Check Includes: Next Generation Identification FBI Fingerprint Check
Maine	Yes, for provider and others	No	No	Yes, for provider and others	No	No	No
Maryland	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	No	Yes, for provider and others
Massachusetts	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others
Michigan	Yes, for the provider only	Yes, for the provider only	Yes, for the provider only	Yes, for the provider only	Yes, for the provider only	Yes, for the provider only	Yes, for the provider only
Minnesota	Yes, for provider and others ¹²	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others ¹³	Yes, for provider and others	Yes, for provider and others
Mississippi	Yes, for provider and others ¹⁴	Yes, for provider and others ¹⁴	Yes, for provider and others ¹⁴	Yes, for provider and others ¹⁴	Yes, for provider and others ¹⁴	Yes, for provider and others ¹⁴	Yes, for provider and others ¹⁴
Missouri	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others
Montana	Yes, for provider and others ¹⁵	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	No	Yes, for provider and others
Nebraska	Yes, for provider and others ¹⁶	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others ¹⁷	Yes, for provider and others	No	No
Nevada	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others

Table 39a. Unlicensed Non-Relative Home-Based Provider Background Check Requirements, 2019 ²

State/Territory*	If There is a Criminal History Background Check Requirement	Background Check Includes: State Criminal History Check with Fingerprinting	Background Check Includes: State Sex Offender Registry Check	Background Check Includes: State Child Abuse and Neglect Registry Check	Background Check Includes: State Check in any State of Residence for Last Five Years	Background Check Includes: National Crime Information Center and/or National Sex Offender Registry Check	Background Check Includes: Next Generation Identification FBI Fingerprint Check
New Hampshire	Yes, for provider and others	Yes, for provider and others	No	No	Yes, for provider and others ¹⁸	No	Yes, for provider and others
New Jersey	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	No	Yes, for provider and others	No
New Mexico	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	No	Yes, for provider and others	Yes, for provider and others
New York	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others
No. Mariana Islands	Yes, for provider and others	Yes, for the provider only	Yes, for the provider only	Yes, for the provider only	No	Yes, for the provider only	Yes, for the provider only
North Carolina	NA ¹⁹	NA ¹⁹	NA ¹⁹	NA ¹⁹	NA ¹⁹	NA ¹⁹	NA ¹⁹
North Dakota	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for the provider only	Yes, for provider and others	No
Ohio	Yes, for the provider only ²⁰	Yes, for the provider only	Yes, for the provider only	Yes, for the provider only	Yes, for the provider only	Yes, for the provider only ²¹	Yes, for the provider only
Oklahoma	NA ²²	NA ²²	NA ²²	NA ²²	NA ²²	NA ²²	NA ²²
Oregon	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others
Pennsylvania	NA ³	NA ³	NA ³	NA ³	NA ³	NA ³	NA ³

Table 39a. Unlicensed Non-Relative Home-Based Provider Background Check Requirements, 2019 ²

State/Territory*	If There is a Criminal History Background Check Requirement	Background Check Includes: State Criminal History Check with Fingerprinting	Background Check Includes: State Sex Offender Registry Check	Background Check Includes: State Child Abuse and Neglect Registry Check	Background Check Includes: State Check in any State of Residence for Last Five Years	Background Check Includes: National Crime Information Center and/or National Sex Offender Registry Check	Background Check Includes: Next Generation Identification FBI Fingerprint Check
Puerto Rico	Yes, for provider and others	No	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others
Rhode Island	NA ³	NA ³	NA ³	NA ³	NA ³	NA ³	NA ³
South Carolina	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others
South Dakota	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	No	Yes, for provider and others	Yes, for provider and others
Tennessee	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others
Texas	Yes, for provider and others	No ²³	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	No	No ²³
Utah	Yes, for provider and others ²⁴	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others
Vermont	NA ³	NA ³	NA ³	NA ³	NA ³	NA ³	NA ³
Virgin Islands	Yes, for provider and others	--- ¹	Yes, for provider and others	--- ¹	--- ¹	--- ¹	--- ¹
Virginia	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others
Washington	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	No	Yes, for provider and others	No

Table 39a. Unlicensed Non-Relative Home-Based Provider Background Check Requirements, 2019 ²							
State/Territory*	If There is a Criminal History Background Check Requirement	Background Check Includes: State Criminal History Check with Fingerprinting	Background Check Includes: State Sex Offender Registry Check	Background Check Includes: State Child Abuse and Neglect Registry Check	Background Check Includes: State Check in any State of Residence for Last Five Years	Background Check Includes: National Crime Information Center and/or National Sex Offender Registry Check	Background Check Includes: Next Generation Identification FBI Fingerprint Check
West Virginia	Yes, for provider and others	Yes, for provider and others	No	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others
Wisconsin	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others
Wyoming	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others

Source: CCDF Policies Database October 1, 2019 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2019 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ Information not found in State's/Territory's manual.

² States shown as not requiring one or more types of background checks may have received a waiver from the Administration for Children and Families, Office of Child Care to delay implementing background check requirements.

³ All non-relative home-based providers must be licensed in order to participate in the subsidy program.

⁴ Only the provider is subject to a background check if care is provided in the child's home.

⁵ Individual providers exempt from licensure must be registered on TrustLine, with the exception of grandparents, aunts, and uncles.

⁶ Policy coded for care provided in the provider's home. If care is provided in the child's home, only the provider is required to have a background check.

⁷ All adults in the home 17 years of age or older must achieve a satisfactory criminal record check determination prior to authorization of the subsidy.

⁸ Providers must complete a police clearance and court clearance in order to provide care through the subsidy program.

⁹ Policies shown are for care provided in the child's home. 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 Background checks are required only for states that participate in the National Fingerprint File (NFF) Program.

¹¹ Background checks include the child abuse and neglect central registry, the sex offender registry, criminal records, and criminal records for any previous state of residence outside of Kentucky in the last five years.

¹² 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 child care in the child's home, but not in the provider's home.

¹³ The state background check includes a criminal history and child abuse and neglect registry check in any state of residence for the last five years.

¹⁴ In-home providers may only be approved for children with special needs that require in-home care.

¹⁵ Background checks are required for the applicant and all adults living in the provider's household.

¹⁶ Child care employees who began working prior to October 1, 2019, or individuals who already resided in the home have until October 1, 2021, to submit fingerprints for a national criminal history record check.

¹⁷ Background checks include checking a registry for child abuse and neglect and adult protective services.

¹⁸ The state police also perform a Tri-State Criminal Background check which includes New Hampshire, Vermont, and Maine.

¹⁹ Unregulated providers cannot provide care through the subsidy program. Providers must be licensed at the three to five star levels or have a notice of compliance.

²⁰ The state has two types of license exempt providers: in-home aides certified by the county departments of job and family services and day camps accredited by the American Camp Association who are also approved and regulated by the state. The approved day camps have identical background check requirements for owners, employees, and child care staff members as in-home aids and all licensed providers.

²¹ The National Sex Offender Registry check is completed through the public-facing registry.

²² Unregulated family child care homes are not eligible to participate in the subsidy program. License-exempt in-home providers are eligible to provide care only when the caregiver is related to the children in care.

²³ A fingerprint check is only required if the person has lived in a different state in the last five years.

²⁴ In addition to the state, FBI, and sex offender registry checks, juvenile records are also checked in certain instances.

Table 39b. Unlicensed Relative Home-Based Provider Background Check Requirements, 2019 ²

State/Territory*	If There is a Criminal History Background Check Requirement	Background Check Includes: State Criminal History Check with Fingerprinting	Background Check Includes: State Sex Offender Registry Check	Background Check Includes: State Child Abuse and Neglect Registry Check	Background Check Includes: State Check in any State of Residence for Last Five Years	Background Check Includes: National Crime Information Center and/or National Sex Offender Registry Check	Background Check Includes: Next Generation Identification FBI Fingerprint Check
Alabama	No	NA	NA	NA	NA	NA	NA
Alaska	Yes, for the provider only ³	Yes, for the provider only ³	Yes, for the provider only ³	Yes, for the provider only ³	Yes, for the provider only ³	Yes, for the provider only ³	Yes, for the provider only ³
American Samoa	Yes, for provider and others	--- ¹	Yes, for provider and others	--- ¹	--- ¹	--- ¹	--- ¹
Arizona	Yes, for provider and others ⁴	Yes, for provider and others ⁴	Yes, for provider and others ⁴	Yes, for provider and others ⁴	No	Yes, for provider and others ⁴	Yes, for provider and others ⁴
Arkansas	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	No	No	Yes, for provider and others
California	No ⁵	NA	NA	NA	NA	NA	NA
Colorado	Yes, for provider and others ⁶	Yes, for provider and others ⁶	Yes, for provider and others ⁶	Yes, for provider and others ⁶	No	No	Yes, for provider and others ⁶
Connecticut	Yes, for the provider only ⁷	Yes, for the provider only ⁷	No	Yes, for the provider only	No	No	No
DC	Yes, for provider and others	--- ¹	Yes, for provider and others	--- ¹	--- ¹	--- ¹	--- ¹
Delaware	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	No	No	No	No
Florida	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others

Table 39b. Unlicensed Relative Home-Based Provider Background Check Requirements, 2019 ²

State/Territory*	If There is a Criminal History Background Check Requirement	Background Check Includes: State Criminal History Check with Fingerprinting	Background Check Includes: State Sex Offender Registry Check	Background Check Includes: State Child Abuse and Neglect Registry Check	Background Check Includes: State Check in any State of Residence for Last Five Years	Background Check Includes: National Crime Information Center and/or National Sex Offender Registry Check	Background Check Includes: Next Generation Identification FBI Fingerprint Check
Georgia	Yes, for provider and others ⁸	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others
Guam	Yes, for provider and others ⁹	No	Yes, for provider and others	Yes, for provider and others	No	No	No
Hawaii	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others
Idaho	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others
Illinois	Yes, for the provider only ¹⁰	Yes, for the provider only	Yes, for the provider only	Yes, for the provider only	No	No	No
Indiana	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	No	Yes, for provider and others	Yes, for provider and others
Iowa	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others ¹¹	No	Yes, for provider and others
Kansas	Yes, for provider and others	No	Yes, for provider and others	Yes, for provider and others	No	Yes, for provider and others ¹²	No
Kentucky	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others ¹³	Yes, for provider and others	Yes, for provider and others ¹³	Yes, for provider and others	Yes, for provider and others
Louisiana	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others

Table 39b. Unlicensed Relative Home-Based Provider Background Check Requirements, 2019 ²

State/Territory*	If There is a Criminal History Background Check Requirement	Background Check Includes: State Criminal History Check with Fingerprinting	Background Check Includes: State Sex Offender Registry Check	Background Check Includes: State Child Abuse and Neglect Registry Check	Background Check Includes: State Check in any State of Residence for Last Five Years	Background Check Includes: National Crime Information Center and/or National Sex Offender Registry Check	Background Check Includes: Next Generation Identification FBI Fingerprint Check
Maine	Yes, for provider and others	No	No	Yes, for provider and others	No	No	No
Maryland	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	No	Yes, for provider and others
Massachusetts	Yes, for provider and others	No	Yes, for provider and others	No	No	No	No
Michigan	Yes, for provider and others	No	Yes, for provider and others	Yes, for provider and others	No	No	No
Minnesota	Yes, for provider and others ¹⁴	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others ¹⁵	Yes, for provider and others	Yes, for provider and others
Mississippi	Yes, for provider and others ¹⁶	Yes, for provider and others ¹⁶	Yes, for provider and others ¹⁶	Yes, for provider and others ¹⁶	Yes, for provider and others ¹⁶	Yes, for provider and others ¹⁶	Yes, for provider and others ¹⁶
Missouri	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others
Montana	Yes, for provider and others ¹⁷	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	No	Yes, for provider and others
Nebraska	Yes, for provider and others ¹⁸	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others ¹⁹	Yes, for provider and others	No	No
Nevada	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others

Table 39b. Unlicensed Relative Home-Based Provider Background Check Requirements, 2019 ²

State/Territory*	If There is a Criminal History Background Check Requirement	Background Check Includes: State Criminal History Check with Fingerprinting	Background Check Includes: State Sex Offender Registry Check	Background Check Includes: State Child Abuse and Neglect Registry Check	Background Check Includes: State Check in any State of Residence for Last Five Years	Background Check Includes: National Crime Information Center and/or National Sex Offender Registry Check	Background Check Includes: Next Generation Identification FBI Fingerprint Check
New Hampshire	Yes, for provider and others	Yes, for provider and others	No	No	Yes, for provider and others ²⁰	No	Yes, for provider and others
New Jersey	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	No	Yes, for provider and others	No
New Mexico	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	No	Yes, for provider and others	Yes, for provider and others
New York	Yes, for provider and others ²¹	No	Yes, for provider and others	No ²²	No	No	No
No. Mariana Islands	Yes, for provider and others	Yes, for the provider only	Yes, for the provider only	Yes, for the provider only	No	Yes, for the provider only	Yes, for the provider only
North Carolina	NA ²³	NA ²³	NA ²³	NA ²³	NA ²³	NA ²³	NA ²³
North Dakota	Yes, for provider and others	No	Yes, for provider and others	Yes, for provider and others	Yes, for the provider only	No	No
Ohio	Yes, for the provider only ²⁴	Yes, for the provider only	Yes, for the provider only	Yes, for the provider only	Yes, for the provider only	Yes, for the provider only ¹²	Yes, for the provider only
Oklahoma	Yes, for the provider only ²⁵	Yes, for the provider only	Yes, for the provider only	Yes, for the provider only	No	No	No
Oregon	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others

Table 39b. Unlicensed Relative Home-Based Provider Background Check Requirements, 2019 ²

State/Territory*	If There is a Criminal History Background Check Requirement	Background Check Includes: State Criminal History Check with Fingerprinting	Background Check Includes: State Sex Offender Registry Check	Background Check Includes: State Child Abuse and Neglect Registry Check	Background Check Includes: State Check in any State of Residence for Last Five Years	Background Check Includes: National Crime Information Center and/or National Sex Offender Registry Check	Background Check Includes: Next Generation Identification FBI Fingerprint Check
Pennsylvania	Yes, for the provider only	No ²⁶	Yes, for the provider only	Yes, for the provider only	No	Yes, for the provider only	Yes, for the provider only
Puerto Rico	No	NA	NA	NA	NA	NA	NA
Rhode Island	Yes, for provider and others	No	No	Yes, for provider and others	No	No	No
South Carolina	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others
South Dakota	No	NA	NA	NA	NA	NA	NA
Tennessee	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others
Texas	Yes, for provider and others	No ²⁷	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	No	No ²⁷
Utah	Yes, for provider and others ²⁸	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others
Vermont	Yes, for provider and others	No	Yes, for provider and others	Yes, for provider and others	No	No	No
Virgin Islands	Yes, for provider and others	--- ¹	Yes, for provider and others	--- ¹	--- ¹	--- ¹	--- ¹
Virginia	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others

Table 39b. Unlicensed Relative Home-Based Provider Background Check Requirements, 2019 ²							
State/Territory*	If There is a Criminal History Background Check Requirement	Background Check Includes: State Criminal History Check with Fingerprinting	Background Check Includes: State Sex Offender Registry Check	Background Check Includes: State Child Abuse and Neglect Registry Check	Background Check Includes: State Check in any State of Residence for Last Five Years	Background Check Includes: National Crime Information Center and/or National Sex Offender Registry Check	Background Check Includes: Next Generation Identification FBI Fingerprint Check
Washington	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	No	Yes, for provider and others	No
West Virginia	Yes, for provider and others	Yes, for provider and others	No	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others
Wisconsin	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others
Wyoming	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others	Yes, for provider and others

Source: CCDF Policies Database October 1, 2019 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2019 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ Information not found in State's/Territory's manual.

² States shown as not requiring one or more types of background checks may have received a waiver from the Administration for Children and Families, Office of Child Care to delay implementing background check requirements.

³ Policy coded for care provided in the child's home. If care is provided in the provider's home, all household members 16 years of age and older must meet the background check requirements.

⁴ Only the provider is subject to a background check if care is provided in the child's home.

⁵ Grandparents, aunts, and uncles are exempt from the background check.

⁶ Policy coded for care provided in the provider's home. If care is provided in the child's home, only the provider is required to have a background check.

⁷ All active unlicensed relative providers have a state criminal background check conducted annually. If a crime is noted, the agency will conduct a full federal and state criminal background check with fingerprints.

⁸ All adults in the home 17 years of age or older must achieve a satisfactory criminal record check determination prior to authorization of the subsidy.

- ⁹ Providers must complete a police clearance and court clearance in order to provide care through the subsidy program.
- ¹⁰ Policies shown are for care provided in the child's home. 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.
- ¹¹ Background checks are required only for states that participate in the National Fingerprint File (NFF) Program.
- ¹² The National Sex Offender Registry check is completed through the public-facing registry.
- ¹³ Background checks include the child abuse and neglect central registry, the sex offender registry, criminal records, and criminal records for any previous state of residence outside of Kentucky in the last five years.
- 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 child care in the child's home, but not in the provider's home.
- ¹⁵ The state background check includes a criminal history and child abuse and neglect registry check in any state of residence for the last five years.
- ¹⁶ In-home providers may only be approved for children with special needs that require in-home care.
- ¹⁷ Background checks are required for the applicant and all adults living in the provider's household.
- ¹⁸ Child care employees who began working prior to October 1, 2019, or individuals who already resided in the home have until October 1, 2021, to submit fingerprints for a national criminal history record check.
- ¹⁹ Background checks include checking a registry for child abuse and neglect and adult protective services.
- ²⁰ The state police also perform a Tri-State Criminal Background check which includes New Hampshire, Vermont, and Maine.
- ²¹ Individuals must disclose whether they have ever been convicted of a misdemeanor or felony. Disclosed convictions are then evaluated to determine if they are allowed to provide care.
- ²² Individuals must disclose any indicated report of child abuse and maltreatment.
- ²³ Unregulated providers cannot provide care through the subsidy program. Providers must be licensed at the three to five star levels or have a notice of compliance.
- ²⁴ The state has two types of license exempt providers: in-home aides certified by the county departments of job and family services and day camps accredited by the American Camp Association who are also approved and regulated by the state. The approved day camps have identical background check requirements for owners, employees, and child care staff members as in-home aids and all licensed providers.
- ²⁵ Unregulated family child care homes are not eligible to participate in the subsidy program. License-exempt in-home providers are eligible to provide care only when the caregiver is related to the children in care.
- ²⁶ The state requires a state criminal history check for providers but does not require fingerprinting as part of the state check.
- ²⁷ A fingerprint check is only required if the person has lived in a different state in the last five years.
- ²⁸ In addition to the state, FBI, and sex offender registry checks, juvenile records are also checked in certain instances.

Table 40a. Unlicensed Non-Relative Home-Based Provider Training Requirements, 2019

State/Territory*	If CPR Training is Required	If First Aid Training is Required
Alabama	NA ¹	NA ¹
Alaska	NA ¹	NA ¹
American Samoa	Yes, for at least one person on site ²	Yes, for at least one person on site ²
Arizona	Yes, for the provider and others ³	Yes, for the provider and others ³
Arkansas	Yes, for the provider and others	Yes, for the provider and others
California	No	No
Colorado	Yes, for the provider only ⁴	Yes, for the provider only ⁴
Connecticut	NA ¹	NA ¹
DC	No	No
Delaware	Yes, for the provider only	Yes, for the provider only
Florida	Yes, for the provider only	Yes, for the provider only
Georgia	Yes, for the provider only ⁵	No ⁶
Guam	Yes, for at least one person on site ⁷	Yes, for at least one person on site ⁷
Hawaii	No	No
Idaho	Yes, for at least one person on site	Yes, for at least one person on site
Illinois	Yes, for the provider only ⁸	Yes, for the provider only ⁸
Indiana	Yes, for at least one person on site	Yes, for the provider and others ⁹
Iowa	Yes, for the provider only	Yes, for the provider only
Kansas	NA ¹	NA ¹
Kentucky	No	No
Louisiana	Yes, for the provider only	Yes, for the provider only
Maine	Yes, for the provider only	Yes, for the provider only
Maryland	Yes, for the provider only	Yes, for the provider only
Massachusetts	Yes, for the provider only ¹⁰	Yes, for the provider only ¹⁰
Michigan	Yes, for the provider only	Yes, for the provider only
Minnesota	Yes, for the provider only	Yes, for the provider only
Mississippi	Yes, for the provider only ¹¹	Yes, for the provider only ¹¹
Missouri	Yes, for the provider only	Yes, for the provider only
Montana	Yes, for the provider only	Yes, for the provider only
Nebraska	Yes, for the provider and others	Yes, for the provider and others
Nevada	Yes, for the provider only	Yes, for the provider only
New Hampshire	Yes, for the provider and others	Yes, for the provider and others
New Jersey	Yes, for the provider only	Yes, for the provider only
New Mexico	Yes, for the provider and others ¹²	Yes, for the provider and others ¹²
New York	No	No
No. Mariana Islands	Yes, for the provider only	Yes, for the provider only
North Carolina	NA ¹³	NA ¹³
North Dakota	Yes, for the provider only	Yes, for the provider only
Ohio	Yes, for the provider only ¹⁴	Yes, for the provider only ¹⁴

Table 40a. Unlicensed Non-Relative Home-Based Provider Training Requirements, 2019

State/Territory*	If CPR Training is Required	If First Aid Training is Required
Oklahoma	NA ¹⁵	NA ¹⁵
Oregon	Yes, for the provider only ¹⁶	Yes, for the provider only ¹⁶
Pennsylvania	NA ¹	NA ¹
Puerto Rico	Yes, for the provider only	Yes, for the provider only
Rhode Island	NA ¹	NA ¹
South Carolina	Yes, for the provider only	Yes, for the provider only
South Dakota	Yes, for the provider only ¹⁷	Yes, for the provider only
Tennessee	Yes, for the provider only	Yes, for the provider only
Texas	Yes, for the provider and others ¹⁸	Yes, for the provider and others ¹⁸
Utah	Yes, for the provider only	Yes, for the provider only
Vermont	NA ¹	NA ¹
Virgin Islands	Yes, for the provider only	Yes, for the provider only
Virginia	Yes, for at least one person on site	Yes, for at least one person on site
Washington	Yes, for the provider only ¹⁹	No
West Virginia	No ²⁰	Yes, for the provider only ²⁰
Wisconsin	Yes, for the provider and others ²¹	No
Wyoming	Yes, for the provider only	Yes, for the provider only

Source: CCDF Policies Database October 1, 2019 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2019 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ All non-relative home-based providers must be licensed in order to participate in the subsidy program.

² Within 60 days of authorization, at least one person on site must be certified in CPR, and at least one person on site must have current first aid training. By the end of the authorization period, at least half of the on-site staff must be certified. Providers must complete 12 additional hours of CPR and first aid training within the first six months of providing care.

³ The provider and all backup providers must have CPR and first aid training.

⁴ The training requirement applies to non-relative qualified exempt providers.

⁵ CPR training for infants and toddlers must be completed prior to the provider's enrollment in the child care subsidy program.

⁶ Providers must complete ten hours of child care related health and safety training, which may include first aid training.

⁷ At least two staff members must maintain first aid and CPR training, and at least one certified staff member must be on the premises at all times children are in care.

⁸ License-exempt providers who only care for school age children are exempt from training requirements.

⁹ The requirement applies to any individual who is employed or volunteers as a caregiver at the facility where child care is provided.

¹⁰ Both relative and non-relative in-home providers must complete an orientation that includes first aid and CPR training. Non-relative providers must complete additional health and safety pre-service and annual trainings.

¹¹ In-home providers may only be approved for children with special needs that require in-home care.

¹² Providers and others who are at least 18 years old and authorized to provide care must maintain current CPR and first aid certification.

¹³ Unregulated providers cannot provide care through the subsidy program. Providers must be licensed at the three to five star levels or have a notice of compliance.

¹⁴ The state has two types of license exempt providers: in-home aides certified by the county departments of job and family services and day camps accredited by the American Camp Association who are also approved and regulated by the state. The approved day camps have CPR and First Aid training requirements.

¹⁵ Unregulated family child care homes are not eligible to participate in the subsidy program. License-exempt in-home providers are eligible to provide care only when the caregiver is related to the children in care.

¹⁶ All non-relative license-exempt providers must complete first aid and CPR training. Providers are also required to be first aid and CPR certified if they want to qualify for the enhanced rate. To qualify for enhanced rates, exempt centers must have at least one staff member who has first aid and CPR certification for every 20 children. Registered and certified providers must have first aid and CPR certifications.

¹⁷ CPR certification must include hands-on skill testing as part of the training.

¹⁸ Listed home providers are not required to meet minimum standards on training requirements.

¹⁹ CPR training is required within 90 days of receiving the first subsidy payment.

²⁰ Policy coded for family child care providers. In-home providers must complete two hours of health and safety training. CPR and First Aid training are not required, but may be included as part of the two-hour training.

²¹ Preservice CPR training is required for providers, substitutes, and employees or volunteers who are involved in the care or supervision of children. The training must result in a certificate of completion.

Table 40b. Unlicensed Relative Home-Based Provider Training Requirements, 2019

State/Territory*	If CPR Training is Required	If First Aid Training is Required
Alabama	No	No
Alaska	Yes, for the provider only	Yes, for the provider only
American Samoa	Yes, for at least one person on site ¹	Yes, for at least one person on site ¹
Arizona	No	No
Arkansas	Yes, for the provider and others	Yes, for the provider and others
California	No	No
Colorado	No	No
Connecticut	No ²	No ²
DC	No	No
Delaware	Yes, for the provider only	Yes, for the provider only
Florida	Yes, for the provider only	Yes, for the provider only
Georgia	Yes, for the provider only ³	No ⁴
Guam	Yes, for at least one person on site ⁵	Yes, for at least one person on site ⁵
Hawaii	No	No
Idaho	Yes, for at least one person on site	Yes, for at least one person on site
Illinois	Yes, for the provider only ⁶	Yes, for the provider only ⁶
Indiana	Yes, for at least one person on site	Yes, for the provider and others ⁷
Iowa	Yes, for the provider only	Yes, for the provider only
Kansas	No	No
Kentucky	No	No
Louisiana	Yes, for the provider only	Yes, for the provider only
Maine	Yes, for the provider only	Yes, for the provider only
Maryland	Yes, for the provider only	Yes, for the provider only
Massachusetts	Yes, for the provider only ⁸	Yes, for the provider only ⁸
Michigan	Yes, for the provider only	Yes, for the provider only
Minnesota	Yes, for the provider only	Yes, for the provider only
Mississippi	Yes, for the provider only ⁹	Yes, for the provider only ⁹
Missouri	Yes, for the provider only	Yes, for the provider only
Montana	No ¹⁰	No ¹⁰
Nebraska	Yes, for the provider and others	Yes, for the provider and others
Nevada	Yes, for the provider only	Yes, for the provider only
New Hampshire	Yes, for the provider and others	Yes, for the provider and others
New Jersey	Yes, for the provider only	Yes, for the provider only
New Mexico	Yes, for the provider and others ¹¹	Yes, for the provider and others ¹¹
New York	No	No
No. Mariana Islands	Yes, for the provider only	Yes, for the provider only
North Carolina	NA ¹²	NA ¹²
North Dakota	No	No
Ohio	Yes, for the provider only ¹³	Yes, for the provider only ¹³

Table 40b. Unlicensed Relative Home-Based Provider Training Requirements, 2019

State/Territory*	If CPR Training is Required	If First Aid Training is Required
Oklahoma	Yes, for the provider only ¹⁴	Yes, for the provider only ¹⁴
Oregon	No	No
Pennsylvania	No	No
Puerto Rico	No ¹⁵	No ¹⁵
Rhode Island	No	No
South Carolina	Yes, for the provider only	Yes, for the provider only
South Dakota	No	No
Tennessee	Yes, for the provider only	Yes, for the provider only
Texas	No	No
Utah	Yes, for the provider only	Yes, for the provider only
Vermont	Yes, for the provider only	Yes, for the provider only
Virgin Islands	Yes, for the provider only	Yes, for the provider only
Virginia	Yes, for at least one person on site	Yes, for at least one person on site
Washington	Yes, for the provider only ¹⁶	No
West Virginia	No ¹⁷	No ¹⁷
Wisconsin	Yes, for the provider and others ¹⁸	No
Wyoming	Yes, for the provider only	Yes, for the provider only

Source: CCDF Policies Database October 1, 2019 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2019 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ Within 60 days of authorization, at least one person on site must be certified in CPR, and at least one person on site must have current first aid training. By the end of the authorization period, at least half of the on-site staff must be certified. Providers must complete 12 additional hours of CPR and first aid training within the first six months of providing care.

² Relative providers caring only for related children are exempt from the CPR and First Aid requirement.

³ CPR training for infants and toddlers must be completed prior to the provider's enrollment in the child care subsidy program.

⁴ Providers must complete ten hours of child care related health and safety training, which may include first aid training.

⁵ At least two staff members must maintain first aid and CPR training, and at least one certified staff member must be on the premises at all times children are in care.

⁶ License-exempt providers who only care for school age children are exempt from training requirements.

⁷ The requirement applies to any individual who is employed or volunteers as a caregiver at the facility where child care is provided.

⁸ Both relative and non-relative in-home providers must complete an orientation that includes first aid and CPR training.

⁹ In-home providers may only be approved for children with special needs that require in-home care.

¹⁰ Policy coded for Relative Care Exempt (RCE) providers. Providers related to the children in care may also provide care as a Family, Friend, and Neighbor (FFN) provider. FFN providers are required to meet CPR and first aid training requirements.

¹¹ Providers and others who are at least 18 years old and authorized to provide care must maintain current CPR and first aid certification.

¹² Unregulated providers cannot provide care through the subsidy program. Providers must be licensed at the three to five star levels or have a notice of compliance.

¹³ The state has two types of license exempt providers: in-home aides certified by the county departments of job and family services and day camps accredited by the American Camp Association who are also approved and regulated by the state. The approved day camps have CPR and First Aid training requirements.

¹⁴ Unregulated family child care homes are not eligible to participate in the subsidy program. License-exempt in-home providers are eligible to provide care only when the caregiver is related to the children in care.

¹⁵ Relative providers are not monitored by the territory's Department of Health and Safety for routine background checks or health inspections.

¹⁶ CPR training is required within 90 days of receiving the first subsidy payment.

¹⁷ Policy coded for informal and relative family child care providers. In-home providers must complete two hours of health and safety training. CPR and First Aid training are not required, but may be included as part of the two-hour training.

¹⁸ Preservice CPR training is required for providers, substitutes, and employees or volunteers who are involved in the care or supervision of children. The training must result in a certificate of completion.

Table 41a. Unlicensed Non-Relative Home-Based Provider Health and Safety Requirements, 2019

State/Territory*	If Providers are Required to Comply with a List of Health and Safety Standards	If Home Visits or Inspections are Required After the Initial Requirement Has Been Met
Alabama	NA ¹	NA ¹
Alaska	NA ¹	NA ¹
American Samoa	Yes, self-completed checklist ²	Yes, 1 per month ³
Arizona	Yes, completed through home visit/inspection ⁴	Yes, 2 per year
Arkansas	Yes, completed through home visit/inspection	Yes, random inspections
California	Yes, self-completed checklist ⁵	No
Colorado	Yes, completed through home visit/inspection	Yes, 1 per year
Connecticut	NA ¹	NA ¹
DC	Yes, self-completed checklist	Yes, 1 per year
Delaware	Yes, completed through home visit/inspection ⁶	Yes, as needed
Florida	Yes, completed through home visit/inspection	Yes, 1 per year
Georgia	Yes, completed through home visit/inspection	Yes, 1 per year ⁷
Guam	Yes, completed through home visit/inspection ⁸	Yes, 4 per year ⁹
Hawaii	Yes, self-completed checklist	No
Idaho	Yes, completed through home visit/inspection ¹⁰	Yes, 1 per year ¹⁰
Illinois	Yes, completed through home visit/inspection	Yes, 1 per year
Indiana	Yes, completed through home visit/inspection	Yes, 1 per year
Iowa	Yes, self-completed checklist	Yes, 1 per year
Kansas	NA ¹	NA ¹
Kentucky	Yes, self-completed checklist ¹¹	Yes, 1 per year
Louisiana	Yes, completed through home visit/inspection	Yes, 1 per year ¹²
Maine	Yes, self-completed checklist	Yes, 1 per year
Maryland	Yes, completed through home visit/inspection	Yes, random inspections
Massachusetts	Yes, self-completed checklist ¹³	Yes, 1 per year ¹⁴
Michigan	Yes, completed through home visit/inspection	Yes, 1 per year
Minnesota	Yes, self-completed checklist ¹⁵	Yes, 1 per year
Mississippi	Yes, completed through home visit/inspection ¹⁶	Yes, 1 per year ¹⁷
Missouri	Yes, completed through home visit/inspection	Yes, 1 per year

Table 41a. Unlicensed Non-Relative Home-Based Provider Health and Safety Requirements, 2019

State/Territory*	If Providers are Required to Comply with a List of Health and Safety Standards	If Home Visits or Inspections are Required After the Initial Requirement Has Been Met
Montana	Yes, completed through home visit/inspection	Yes, 1 per year
Nebraska	Yes, self-completed checklist	Yes, 1 per year ¹⁸
Nevada	Yes, completed through home visit/inspection	Yes, 1 per year
New Hampshire	Yes, completed through home visit/inspection ¹⁹	Yes, 1 per year
New Jersey	Yes, completed through home visit/inspection	Yes, 1 per year ²⁰
New Mexico	Yes, completed through home visit/inspection	Yes, 1 per year
New York	Yes, self-completed checklist ²¹	Yes, 1 per year ²²
No. Mariana Islands	Yes, self-completed checklist	No
North Carolina	NA ²³	NA ²³
North Dakota	Yes, completed through home visit/inspection ²⁴	Yes, 1 per year ²⁵
Ohio	Yes, completed through home visit/inspection	Yes, 1 per year ²⁶
Oklahoma	NA ²⁷	NA ²⁷
Oregon	Yes, completed through home visit/inspection	Yes, 1 per year
Pennsylvania	NA ¹	NA ¹
Puerto Rico	Yes, completed through home visit/inspection	Yes, random inspections ²⁸
Rhode Island	NA ¹	NA ¹
South Carolina	Yes, self-completed checklist	Yes, 1 per year
South Dakota	Yes, completed through home visit/inspection	Yes, 1 per year
Tennessee	Yes, completed through home visit/inspection	Yes, 1 per year
Texas	Yes, completed through home visit/inspection ²⁹	Yes, as needed ³⁰
Utah	Yes, completed through home visit/inspection	Yes, 2 per year ³¹
Vermont	NA ¹	NA ¹
Virgin Islands	Yes, completed through home visit/inspection	Yes, 1 per year
Virginia	Yes, completed through home visit/inspection ³²	Yes, 1 per year
Washington	Yes, completed through home visit/inspection	Yes, 1 per year ³³
West Virginia	Yes, self-completed checklist ³⁴	Yes, 1 per year
Wisconsin	Yes, completed through home visit/inspection	Yes, 1 per year ³⁵
Wyoming	Yes, self-completed checklist	Yes, 1 per year

Source: CCDF Policies Database October 1, 2019 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2019 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ All non-relative home-based providers must be licensed in order to participate in the subsidy program.

² The provider must receive certification from the department of health verifying that minimum health and safety standards are met. In-home providers are not required to receive certification, but must still self-certify that the home is safe and that they meet the health and safety requirements. All providers must self-certify that the home is safe.

³ The provider must be certified with the department of health to initially qualify. The agency conducts routine home visits for all providers.

⁴ The requirement applies to non-relative certified family child care home providers and non-relative certified in-home providers who are not caring for the child in the child's home. Providers who care for children in the children's home are not monitored for health and safety standards or subject to inspection.

⁵ TrustLined providers complete a Health and Safety Self-Certification form.

⁶ While not required prior to entering the subsidy program, an inspection is completed to ensure providers comply with health and safety requirements.

⁷ Random inspections occur once per federal fiscal year (October 1 through September 30) following the initial visit.

⁸ Providers must meet required mandates and rules.

⁹ The agency inspects providers quarterly.

¹⁰ All providers must comply with health and safety requirements. All providers, except in-home child care providers caring for children in the children's home, must agree to a health and safety inspection. In-home child care providers are instead required to take training that covers the health and safety requirements.

¹¹ A checklist is not required if care is provide in the child's home.

¹² The agency will make unannounced inspections of the facility at any time during normal working hours. The inspection is not limited to the health and safety checklist.

¹³ In-home and relative caregivers must complete a health and safety checklist.

¹⁴ The state conducts announced and unannounced annual inspection visits for each child care provider.

¹⁵ Unlicensed home-based providers who are not related to all children in their care are also subject to annual monitoring.

¹⁶ In-home providers may only be approved for children with special needs that require in-home care.

¹⁷ The state conducts both announced and unannounced annual inspection visits for each child care provider.

¹⁸ The caseworker must assess the health and safety of the service provision at least once during the agreement period (usually one year) by observing service delivery, visiting the service facility, interviewing the provider, or interviewing a client served by the provider.

¹⁹ The Bureau of Child Development Head Start Collaboration verifies compliance prior to enrollment. Child Care Licensing verifies annual training compliance through yearly home visits/inspections.

²⁰ Unannounced inspections occur once per year.

²¹ The provider completes an initial checklist to enroll with an enrollment agency.

²² The agency is required to inspect annually currently enrolled legally exempt non-relative child care providers. Inspections are also completed following any complaints.

²³ Unregulated providers cannot provide care through the subsidy program. Providers must be licensed at the three to five star levels or have a notice of compliance.

²⁴ Inspections are conducted annually at recertification.

²⁵ Providers who have been issued a correction order are subject to additional inspections.

²⁶ The state has two types of license exempt providers: in-home aides certified by the county departments of job and family services and day camps accredited by the American Camp Association who are also approved and regulated by the state. The approved day camps have health and safety requirements that are completed through an inspection. All are inspected at least once per year.

²⁷ Unregulated family child care homes are not eligible to participate in the subsidy program. License-exempt in-home providers are eligible to provide care only when the caregiver is related to the children in care.

²⁸ Unannounced inspections are carried out annually and when complaints are made.

²⁹ The local agency ensures that there are requirements to protect the health and safety of the children, including building and physical premises safety.

³⁰ The frequency with which the agency visits a provider depends on the type of provider and the level of risk a deficiency presents to the children in care.

³¹ The approval is renewed annually. The state conducts both announced and unannounced inspection visits for each child care provider yearly.

³² Complaint inspections are prioritized over non-complaint inspections for unlicensed providers.

³³ Home visits may occur on a more frequent basis as determined by the department or if the provider is found to have failed to comply with requirements.

³⁴ Checklists are also completed by child care agency workers during monitoring visits.

³⁵ In addition to an annual inspection, providers may also be inspected as needed.

Table 41b. Unlicensed Relative Home-Based Provider Health and Safety Requirements, 2019

State/Territory*	If Providers are Required to Comply with a List of Health and Safety Standards	If Home Visits or Inspections are Required After the Initial Requirement Has Been Met
Alabama	No ¹	NA
Alaska	Yes, completed through home visit/inspection	Yes, 1 per year ²
American Samoa	Yes, self-completed checklist ³	Yes, 1 per month ⁴
Arizona	No ⁵	NA
Arkansas	Yes, completed through home visit/inspection	Yes, random inspections
California	No	NA
Colorado	No	NA
Connecticut	Yes, self-completed checklist ⁶	No
DC	Yes, self-completed checklist	Yes, 1 per year
Delaware	Yes, completed through home visit/inspection ⁷	Yes, as needed
Florida	Yes, completed through home visit/inspection	Yes, 1 per year
Georgia	Yes, completed through home visit/inspection	Yes, 1 per year ⁸
Guam	Yes, completed through home visit/inspection ⁹	Yes, 4 per year ¹⁰
Hawaii	Yes, self-completed checklist	No
Idaho	Yes, completed through home visit/inspection ¹¹	Yes, 1 per year ¹¹
Illinois	Yes, completed through home visit/inspection	Yes, 1 per year
Indiana	Yes, completed through home visit/inspection	Yes, 1 per year
Iowa	Yes, self-completed checklist	Yes, 1 per year
Kansas	Yes, self-completed checklist	No
Kentucky	Yes, self-completed checklist ¹²	Yes, 1 per year
Louisiana	Yes, completed through home visit/inspection	Yes, 1 per year ¹³
Maine	Yes, self-completed checklist	Yes, 1 per year
Maryland	Yes, completed through home visit/inspection	Yes, random inspections
Massachusetts	Yes, self-completed checklist ¹⁴	Yes, 1 per year ¹⁵
Michigan	Yes, completed through home visit/inspection	Yes, 1 per year
Minnesota	Yes, self-completed checklist	No
Mississippi	Yes, completed through home visit/inspection ¹⁶	Yes, 1 per year ¹⁷
Missouri	Yes, completed through home visit/inspection	Yes, 1 per year
Montana	Yes, self-completed checklist ¹⁸	No ¹⁸

Table 41b. Unlicensed Relative Home-Based Provider Health and Safety Requirements, 2019

State/Territory*	If Providers are Required to Comply with a List of Health and Safety Standards	If Home Visits or Inspections are Required After the Initial Requirement Has Been Met
Nebraska	Yes, self-completed checklist	Yes, 1 per year ¹⁹
Nevada	Yes, completed through home visit/inspection	Yes, 1 per year
New Hampshire	Yes, completed through home visit/inspection ²⁰	Yes, 1 per year
New Jersey	Yes, completed through home visit/inspection	Yes, 1 per year ²¹
New Mexico	Yes, completed through home visit/inspection	Yes, 1 per year
New York	Yes, self-completed checklist ²²	Yes, as needed ²³
No. Mariana Islands	Yes, self-completed checklist	No
North Carolina	NA ²⁴	NA ²⁴
North Dakota	No	NA
Ohio	Yes, completed through home visit/inspection	Yes, 1 per year ²⁵
Oklahoma	Yes, self-completed checklist ²⁶	No
Oregon	Yes, completed through home visit/inspection	Yes, 1 per year
Pennsylvania	Yes, self-completed checklist	No
Puerto Rico	No ²⁷	NA
Rhode Island	Yes, self-completed checklist	No
South Carolina	Yes, self-completed checklist	Yes, 1 per year
South Dakota	Yes, self-completed checklist	No
Tennessee	Yes, completed through home visit/inspection	Yes, 1 per year
Texas	Yes, completed through home visit/inspection ²⁸	Yes, as needed ²⁹
Utah	Yes, completed through home visit/inspection	Yes, 2 per year ³⁰
Vermont	Yes, self-completed checklist	No
Virgin Islands	Yes, completed through home visit/inspection	Yes, 1 per year
Virginia	Yes, completed through home visit/inspection ³¹	Yes, 1 per year
Washington	Yes, completed through home visit/inspection	Yes, 1 per year ³²
West Virginia	Yes, self-completed checklist ³³	Yes, 1 per year
Wisconsin	Yes, completed through home visit/inspection	Yes, 1 per year ³⁴
Wyoming	Yes, self-completed checklist	Yes, 1 per year

Source: CCDF Policies Database October 1, 2019 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2019 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ The agency may exempt relatives from some or all health and safety requirements if there are no unrelated children in care.

² The provider is responsible to provide satisfactory evidence of compliance with health and safety requirements, if requested.

³ The provider must receive certification from the department of health verifying that minimum health and safety standards are met. In-home providers are not required to receive certification, but must still self-certify that the home is safe and that they meet the health and safety requirements. All providers must self-certify that the home is safe.

⁴ The provider must be certified with the department of health to initially qualify. The agency conducts routine home visits for all providers.

⁵ Relative providers and providers who care for children in the children's home are not monitored for health and safety standards or subject to inspection.

⁶ The parent provider agreement form requires providers to indicate they meet a set of minimum safety requirements (e.g., have a fire extinguisher and operating smoke alarm). If providers indicate they do not meet the minimum requirements, child care arrangements are not approved through the subsidy program.

⁷ While not required prior to entering the subsidy program, an inspection is completed to ensure providers comply with health and safety requirements.

⁸ Random inspections occur once per federal fiscal year (October 1 through September 30) following the initial visit.

⁹ Providers must meet required mandates and rules.

¹⁰ The agency inspects providers quarterly.

¹¹ All providers must comply with health and safety requirements. All providers, except in-home child care providers caring for children in the children's home, must agree to a health and safety inspection. In-home child care providers are instead required to take training that covers the health and safety requirements.

¹² A checklist is not required if care is provided in the child's home.

¹³ The agency will make unannounced inspections of the facility at any time during normal working hours. The inspection is not limited to the health and safety checklist.

¹⁴ In-home and relative caregivers must complete a health and safety checklist.

¹⁵ The state conducts announced and unannounced annual inspection visits for each child care provider.

¹⁶ In-home providers may only be approved for children with special needs that require in-home care.

¹⁷ The state conducts both announced and unannounced annual inspection visits for each child care provider.

¹⁸ Policy coded for Relative Care Exempt (RCE) providers. Providers related to the children in care may also provide care as a Family, Friend, and Neighbor (FFN) provider. FFN providers are required to meet an annual home inspection requirement.

¹⁹ The caseworker must assess the health and safety of the service provision at least once during the agreement period (usually one year) by observing service delivery, visiting the service facility, interviewing the provider, or interviewing a client served by the provider.

²⁰ The Bureau of Child Development Head Start Collaboration verifies compliance prior to enrollment. Child Care Licensing verifies annual training compliance through yearly home visits/inspections.

²¹ Unannounced inspections occur once per year.

²² The provider completes an initial checklist to enroll with an enrollment agency.

²³ Inspections are completed following any complaints.

²⁴ Unregulated providers cannot provide care through the subsidy program. Providers must be licensed at the three to five star levels or have a notice of compliance.

²⁵ The state has two types of license exempt providers: in-home aides certified by the county departments of job and family services and day camps accredited by the American Camp Association who are also approved and regulated by the state. The approved day camps have health and safety requirements that are completed through an inspection. All are inspected at least once per year.

²⁶ Unregulated family child care homes are not eligible to participate in the subsidy program. License-exempt in-home providers are eligible to provide care if the caregiver is related to the children in care. This policy is coded for in-home relative care.

²⁷ Relative providers are not monitored by the territory's Department of Health and Safety for routine background checks or health inspections.

²⁸ The local agency ensures that there are requirements to protect the health and safety of the children, including building and physical premises safety.

²⁹ The frequency with which the agency visits a provider depends on the type of provider and the level of risk a deficiency presents to the children in care.

³⁰ The approval is renewed annually. The state conducts both announced and unannounced inspection visits for each child care provider yearly.

³¹ Complaint inspections are prioritized over non-complaint inspections for unlicensed providers.

³² Home visits may occur on a more frequent basis as determined by the department or if the provider is found to have failed to comply with requirements.

³³ Checklists are also completed by child care agency workers during monitoring visits.

³⁴ In addition to an annual inspection, providers may also be inspected as needed.

Table 42. Provider Policies: Who May Provide Care, 2019 ²

State/Territory*	Where Out of State Providers Must Be Licensed	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	Licensed from state where care is provided ³	19	NA ⁴	No	Yes	NA ⁴	No
Alaska	NA (not eligible for subsidies)	18	NA ⁴	No	Yes	NA ⁴	No
American Samoa	--- ¹	--- ¹	NA ⁴	No	Yes	NA ⁴	No
Arizona	Licensed from state where care is provided	18	No	Yes ⁵	Yes	NA ⁶	Yes
Arkansas	Licensed from state where care is provided	18	No	No	Yes	NA ⁶	No
California	--- ¹	18	No	Yes	Yes	NA ⁶	Yes
Colorado	Licensed from state where care is provided	18	Yes ⁷	Yes ⁷	Yes	NA ⁶	Yes ⁷
Connecticut	Licensed from state where care is provided	20 ⁸	NA ⁴	Yes ⁹	Yes	NA ⁴	No ¹⁰
DC	NA (not eligible for subsidies)	18	No	Yes	Yes	NA ⁶	Yes
Delaware	NA (not eligible for subsidies)	18	NA ⁴	No	Yes	NA ⁴	Yes
Florida	NA (not eligible for subsidies)	18 ¹¹	Yes ¹²	Yes	Yes	Yes	Yes
Georgia	Licensed from state where care is provided	21 ¹³	NA ⁴	Yes	Yes	NA ⁴	No

Table 42. Provider Policies: Who May Provide Care, 2019 ²

State/Territory*	Where Out of State Providers Must Be Licensed	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
Guam	Licensed from state where child lives and from which subsidy is paid	18	NA ⁴	Yes	Yes	NA ⁴	No
Hawaii	NA (not eligible for subsidies)	18	NA ⁴	Yes ⁵	Yes	NA ⁴	Yes
Idaho	Licensed from state where care is provided	18	No	No	Yes	NA ⁶	No
Illinois	NA (not eligible for subsidies)	18	Yes ¹⁴	Yes ¹⁵	Yes	NA ⁶	Yes ¹⁶
Indiana	NA (not eligible for subsidies)	18	NA ¹⁷	Yes	Yes	NA ¹⁷	No
Iowa	Licensed from state where care is provided	18	NA ¹⁷	Yes	Yes	NA ¹⁷	Yes
Kansas	Licensed from state where care is provided ¹⁸	18	No	No	Yes	NA ⁶	No
Kentucky	--- ¹	18	No	No	Yes	NA ⁶	No
Louisiana	NA (not eligible for subsidies)	18	No	No	Yes ¹⁹	NA ⁶	No
Maine	Licensed from state where care is provided	18	NA ⁴	No	Yes	NA ⁴	No
Maryland	--- ¹	18	No	Yes	Yes	NA ⁶	Yes
Massachusetts	NA (not eligible for subsidies)	18	No	Yes	Yes	NA ⁶	No

Table 42. Provider Policies: Who May Provide Care, 2019 ²

State/Territory*	Where Out of State Providers Must Be Licensed	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
Michigan	NA (not eligible for subsidies)	18	NA ⁴	Yes	Yes	NA ⁴	Yes
Minnesota	Licensed from state where care is provided	18	No	No	Yes	NA ⁶	No
Mississippi	NA (not eligible for subsidies)	18	No	No	No ²⁰	NA ⁶	No
Missouri	Licensed from state where care is provided ²¹	18	NA ⁴	Yes ²²	Yes	NA ⁴	Yes
Montana	Licensed from state where care is provided ²³	18	No	Yes	Yes	NA ⁶	Yes
Nebraska	Licensed from state where care is provided ²⁴	19 ²⁵	NA ⁴	No ²⁶	Yes	NA ⁴	No ²⁶
Nevada	Licensed from state where care is provided	18	No	No	Yes	NA ⁶	No
New Hampshire	--- ¹	18	No	No	Yes	NA ⁶	No
New Jersey	Licensed from state where care is provided	18	Yes ²⁷	Yes	Yes	Yes	Yes
New Mexico	NA (not eligible for subsidies)	18	No	Yes	Yes	NA ⁶	Yes
New York	Licensed from state where care is provided	18	No	Yes	Yes	NA ⁶	Yes

Table 42. Provider Policies: Who May Provide Care, 2019 ²

State/Territory*	Where Out of State Providers Must Be Licensed	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
No. Mariana Islands	Licensed from state where care is provided	18	NA ⁴	No	Yes	NA ⁴	Yes
North Carolina	Licensed from state where care is provided	18	NA ⁴	Yes ²⁸	Yes ²⁸	NA ⁴	Yes ²⁸
North Dakota	Licensed from state where care is provided	18	No	Yes ²⁹	Yes	NA ⁶	Yes ²⁹
Ohio	Licensed from state where care is provided ³⁰	18	NA ³¹	No	Yes	NA ³¹	No
Oklahoma	NA (not eligible for subsidies)	18	NA ⁴	No	Yes	NA ⁴	No
Oregon	NA (not eligible for subsidies)	18	No	Yes ⁵	Yes	NA ⁶	Yes
Pennsylvania	Licensed from state where care is provided	18	No	No	Yes	NA ⁶	No
Puerto Rico	--- ¹	18	No	No	Yes	NA ⁶	No
Rhode Island	NA (not eligible for subsidies)	21	NA ⁴	No	Yes	NA ⁴	No
South Carolina	Licensed from state where care is provided ³²	21	NA ³³	No	Yes	No ³⁴	No
South Dakota	Licensed from state where care is provided ³⁵	18	No	Yes	Yes	NA ⁶	No ⁶

Table 42. Provider Policies: Who May Provide Care, 2019 ²

State/Territory*	Where Out of State Providers Must Be Licensed	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
Tennessee	Licensed from state where care is provided	18 ³⁶	No	NA	Yes	NA ⁶	No
Texas	Licensed from state where care is provided ³⁷	18	Yes ³⁸	Yes ³⁸	Yes	No	No
Utah	NA (not eligible for subsidies) ³⁹	18	No ⁴⁰	No ⁴⁰	Yes	NA ⁶	No
Vermont	Licensed from state where care is provided ⁴¹	18	No	Yes ⁵	Yes	NA ⁶	No
Virgin Islands	NA (not eligible for subsidies)	18	No	No	Yes	NA ⁶	No
Virginia	NA (not eligible for subsidies)	18	NA ⁴	Yes	Yes	NA ⁴	Yes
Washington	Licensed from state where care is provided	18	No	Yes	Yes	NA ⁶	Yes
West Virginia	Licensed from state where care is provided	18	NA ⁴	Yes	Yes	NA ⁴	Yes
Wisconsin	Licensed from state where care is provided	18	No ⁴²	No ⁴²	Yes	NA ⁶	No ⁴²
Wyoming	NA (not eligible for subsidies)	18	No	Yes	Yes	NA ⁶	Yes

Source: CCDF Policies Database October 1, 2019 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2019 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ Information not found in State's/Territory's manual.

² The unit refers to the group of people included in the family size for purposes of determining eligibility and copayments.

³ The department verifies licensure and health and safety inspection requirements for out of state providers with the neighboring state prior to enrollment in Alabama's CCDF program.

⁴ Adult non-parent relatives and non-relatives are not considered part of the assistance unit.

⁵ Relatives living in the home and not part of the assistance unit may provide care, with the exception of siblings, who must reside outside of the home in order to provide care.

⁶ Adult non-parent, non-relatives are not considered part of the assistance unit.

⁷ 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.

⁸ Unlicensed in-home relative providers must be at least 20 at the beginning of their authorization period.

⁹ A relative living in the same household cannot be authorized to provide care between 11:00 pm and 7:00 am, unless the child is under three years old or has special needs. A sibling cannot provide care at any hour.

¹⁰ Non-relatives living in the home may not be an unlicensed home-based provider.

¹¹ The operator of a child care facility must be 21 years of age or older. A child care facility cannot 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.

¹² Informal providers, defined as persons who provide care for eligible children from only one family who are, by marriage, blood relationship, or court decree, the grandchild, great grandchild, sibling (if such provider lives in a separate residence), niece, or nephew of such provider, are not required to be licensed. However, if informal providers receive CCDF funding, they must meet the same health, safety, sanitation, screening, and inspection requirements as family day care home providers.

¹³ Informal providers must be 21 years of age. The director of a licensed child care program must also be 21 years of age, while lead teachers must be 18 years of age and an assistant teacher, who cannot be left alone with children, must be 16 years of age.

¹⁴ The provider cannot be a parent, a step-parent, anyone in the same TANF assistance unit, a person living in the home who is a parent of the child's sibling or has a child with the applicant, or a sibling living in the home. Siblings must reside outside of the home in order to provide care.

¹⁵ Payments will not be made to a provider's sibling living in the same household.

¹⁶ A non-relative must not be a parent of the child's sibling or have a child in common with the applicant.

¹⁷ Relatives and non-relatives who are over age 18 are never considered part of the unit.

¹⁸ Out-of-state providers are required to meet the minimum requirements for child care providers and be licensed in their state of residence. Relative providers are not required to be licensed in either state.

¹⁹ A relative is not authorized to care for a child if it is a TANF case.

²⁰ Relatives may only provide care in the child's home for children with special needs who require in-home care.

²¹ The provider must also comply with Missouri's registration requirements.

²² Siblings must be living outside of the household in order to provide care.

- ²³ Out-of-jurisdiction providers must complete Montana's child care licensing paperwork and send a copy of their licensing/registration credentials. Once the state determines that the licensing/registration criteria meet or exceed Montana's standards, a for-payment-purposes-only number may be issued.
- ²⁴ Out-of-state care may be provided for foster children or children with an adoption or guardianship subsidy. The provider must meet licensing or registration requirements in the state where care is provided.
- ²⁵ Providers must be 19 years of age, or providers aged 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.
- ²⁶ Individuals living in the home can only provide care if the child has special needs.
- ²⁷ Siblings must be 18 years of age or older and live outside the home in order to provide care.
- ²⁸ Unregulated providers cannot provide care through the subsidy program. Providers must be licensed at the three to five star levels.
- ²⁹ If the provider and the child live in the same home, care may be allowed only when the provider is licensed and not the caretaker of the child.
- ³⁰ An out-of-state child care provider must be located in a state that borders Ohio in order to provide care to Ohio children through the subsidy program.
- ³¹ Adult non-parent relatives and non-relatives are not considered part of the assistance unit. Regardless, the state does not permit care by anyone living in the child's own home.
- ³² The state may reimburse regulated center-based, group, or family child care providers that operate outside of the state. Primarily, this policy is applied to allow payment for child care costs for children in foster care or child protective services. However, this option can be used for all child care categories. This is only done with the prior approval of the arrangement by the designated program staff and human services worker.
- ³³ Adult non-parent relatives are not considered part of the assistance unit.
- ³⁴ 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.
- ³⁵ Licensed or registered providers must be in compliance with their state's licensing requirements and provide a copy of a valid child care license or certification from the provider's state of residence. Relative providers are required to meet the same criteria as relative providers residing in South Dakota. Informal and in-home providers must reside in South Dakota.
- ³⁶ Unregulated providers must be age 21.
- ³⁷ The out-of-state provider must agree to comply with both state-wide and local requirements, including maximum reimbursement rates, where the child lives.
- ³⁸ 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.
- ³⁹ Out-of-state providers are not approved for care. A caregiver who resides in another state may be approved to provide care in the child's home within the state of Utah.
- ⁴⁰ An exception may be granted when a child in the home has special needs that have been documented and the provider living in the home is not a sibling of the child needing care.
- ⁴¹ Licensed, registered, and certified providers in other states may provide care upon receipt of appropriate documentation and subsequent review and approval by Vermont's child care agency. Uncertified providers may provide care subject to the same review and approval, but they may only provide care in the child's home in Vermont.
- ⁴² Authorizations cannot be issued to a provider to care for a child that lives in the provider's home. Children who live with a provider who is not their parent can attend a different provider.

Appendix A. Content of the CCDF Policies Database

Table A-1. 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 families experiencing homelessness. Time limits for families experiencing homelessness 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.

Variable Category/Subcategory	Description of Variables
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.
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.

Variable Category/Subcategory	Description of Variables
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.
<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.

Variable Category/Subcategory	Description of Variables
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.
<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.
Unlicensed 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.
<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.

Variable Category/Subcategory	Description of Variables
<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.
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.

Variable Category/Subcategory	Description of Variables
<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

Table B-1 shows initial and continuing eligibility thresholds for a three-person family as a percent of the 2019 Federal Poverty Guidelines. (See tables 14, 15, and 16 of Section II (Financial Eligibility Tests) in the Book of Tables for additional detail about eligibility thresholds.) Across the States/Territories, the initial eligibility threshold for a three-person family ranges from 124 percent of the Federal Poverty Guidelines (in Michigan) to 326 percent of the Federal Poverty Guidelines (in California).

State	Initial Eligibility Threshold	Initial Threshold as Percent of Poverty Guidelines	Threshold During Eligibility	Threshold during Eligibility as Percent of Poverty Guidelines	Threshold at Redetermination	Threshold at Redetermination as Percent of Poverty Guidelines
Alabama	2,311	130%	4,368	246%	4,368	246%
Alaska	5,156	232%	5,156	232%	5,156	232%
Arizona	2,934	165%	4,486	252%	4,486	252%
Arkansas	3,650	205%	3,650	205%	3,650	205%
California	5,802	326%	5,802	326%	5,802	326%
Colorado ²	3,999	225%	5,685	320%	5,685	320%
Connecticut	4,057	228%	6,897	388%	5,274	297%
Delaware	4,444	250%	6,258	352%	6,258	352%
DC	3,289	185%	5,647	318%	3,556	200%
Florida	2,666	150%	4,171	235%	4,171	235%
Georgia	2,562	144%	4,356	245%	4,356	245%
Hawaii	3,927	192%	3,927	192%	3,927	192%
Idaho	2,311	130%	4,184	235%	4,184	235%
Illinois	3,555	200%	5,320	299%	4,000	225%
Indiana	2,257	127%	4,526	255%	4,526	255%
Iowa	2,578	145%	4,989	281%	4,989	281%
Kansas	3,289	185%	4,812	271%	4,812	271%
Kentucky	2,771	156%	4,808	270%	3,463	195%
Louisiana	2,884	162%	4,457	251%	4,457	251%
Maine	4,833	272%	4,833	272%	4,833	272%
Maryland	5,007	282%	6,547	368%	6,547	368%
Massachusetts	4,191	236%	7,125	401%	7,125	401%
Michigan	2,213	124%	4,705	265%	4,705	265%
Minnesota	3,288	185%	5,946	334%	4,687	264%
Mississippi	3,640	205%	3,640	205%	3,640	205%
Missouri	2,454	138%	3,823	215%	3,823	215%
Montana	2,666	150%	3,288	185%	3,288	185%
Nebraska	2,311	130%	5,122	288%	3,288	185%
Nevada	2,471	139%	4,544	256%	4,544	256%

Table B-1. Initial and Continuing Eligibility Thresholds for a Three-Person Family, as a Percent of the 2019 Federal Poverty Guidelines ¹

State	Initial Eligibility Threshold	Initial Threshold as Percent of Poverty Guidelines	Threshold During Eligibility	Threshold during Eligibility as Percent of Poverty Guidelines	Threshold at Redetermination	Threshold at Redetermination as Percent of Poverty Guidelines
New Hampshire	3,911	220%	6,286	354%	4,444	250%
New Jersey	3,555	200%	7,166	403%	7,166	403%
New Mexico	3,555	200%	4,444	250%	4,444	250%
New York	3,555	200%	3,555	200%	3,555	200%
North Carolina	3,555	200%	4,565	257%	4,565	257%
North Dakota	4,085	230%	5,787	257%	5,787	325%
Ohio	2,311	130%	5,333	300%	5,333	300%
Oklahoma	4,200	236%	4,200	236%	4,200	236%
Oregon	3,288	185%	4,847	273%	4,847	273%
Pennsylvania	3,555	200%	5,271	296%	4,177	235%
Rhode Island	3,200	180%	3,999	225%	3,999	225%
South Carolina	2,826	159%	4,367	246%	4,367	246%
South Dakota	3,716	209%	4,947	278%	4,947	278%
Tennessee	2,926	165%	2,926	165%	2,926	165%
Texas ³	3,555	200%	4,663	262%	4,663	262%
Utah	3,236	182%	4,585	258%	4,045	228%
Vermont	5,333	300%	5,333	300%	5,401	304%
Virginia ⁴	3,289	185%	5,978	336%	5,978	336%
Washington	3,556	200%	5,460	307%	3,911	220%
West Virginia	2,666	150%	3,288	185%	3,288	185%
Wisconsin	3,288	185%	5,241	295%	5,241	295%
Wyoming	3,111	175%	3,999	225%	3,999	225%
Average	3,408	190%	4,888	272%	4,606	257%
Median	3,289	185%	4,808	262%	4,457	250%

Source: Eligibility Thresholds are from the CCDF Policies Database October 1, 2019 data. Federal Poverty Guidelines are from the Department of Health and Human Services (<https://aspe.hhs.gov/2019-poverty-guidelines>).

¹ All numbers are rounded to whole numbers. The 2019 Federal Poverty Guidelines for a three-person family are \$21,330 annually (\$1,778 monthly) for the 48 contiguous States, \$26,660 annually (\$2,222 monthly) for Alaska, and \$24,540 annually (\$2,045 monthly) for Hawaii.

² Policy coded for Denver County. Counties may establish initial eligibility thresholds between 165 percent of the Federal Poverty Guidelines and 85 percent of the state median income.

³ Policy coded for the Gulf Coast Region. Local boards have the authority to establish eligibility thresholds as a percent of either the Federal Poverty Guidelines or the state median income, but not to exceed 85 percent of state median income.

⁴ Policy coded for areas in Group III. Across Virginia, eligibility thresholds range from 150 to 250 percent of the Federal Poverty Guidelines. Group III's eligibility thresholds are set at 185 percent of the Federal Poverty Guidelines.

Appendix C. Additional Application and Waiting List Policies

In order to verify additional information from the database, States/Territories were asked to review this appendix table. Each year, the appendix will present different policies that have not been verified in order to fill in missing or incomplete information in the database. Table C-1 captures three additional aspects of programs' application and waiting list procedures that are not found in table 18 (Application and Waiting List Procedures). The policies include whether an interview is required during the application process and how the interview is conducted, when eligibility is determined if there is a waiting list in place, and how often families on the waiting list are reviewed for eligibility.

As of October 1, 2019:

- Thirty-three States/Territories require an interview during the application process. Twenty States/Territories allow the interview to take place by phone or in-person. Eleven States/Territories require the interview to take place in-person, while Connecticut requires the interview to take place by phone. New Mexico requires an interview but does not specify the manner in which the interview must occur.
- Of the 37 States/Territories that have a waiting list, 27 require families to be eligible to be placed on the list. Five determine eligibility when the subsidy becomes available. A family must be determined to be eligible within 30 days of being placed on the list in North Carolina. The remaining four States/Territories have policies that involve other approaches.
- In the 37 States/ Territories with waiting lists, 16 have no explicit eligibility review of families who remain on the list. Three (American Samoa, Northern Mariana Islands, and Virgin Islands) require a review after one month. In the remainder of States/Territories that require a review, the review happens between 90 days and 12 months of being on the waiting list.

Table C-1. Additional Application and Waiting List Policies, 2019

State/Territory*	If an Interview is Required During the Application Process	When Eligibility is Determined	How Often Families on the Waiting List are Reviewed for Eligibility
Alabama	No ²	Must be eligible to be placed on list	Review required at 12 months
Alaska	Yes, in-person or by phone	Must be eligible to be placed on list	No explicit review
American Samoa	Yes, in-person	Must be eligible to be placed on list	Review required at 1 month
Arizona	Yes, in-person or by phone	Must be eligible to be placed on list	Review required at 12 months
Arkansas	Yes, in-person or by phone	Must be eligible to be placed on list	Review required at 12 months
California	--- ^{1, 3}	--- ^{1, 3}	No explicit review ³
Colorado	No ⁴	Must be eligible to be placed on list ⁵	No explicit review ⁶
Connecticut	Yes, by phone ⁷	Must be eligible to be placed on list	No explicit review
DC	Yes, in-person	Must be eligible to be placed on list	No explicit review
Delaware	Yes, in-person or by phone	Must be eligible to be placed on list	No explicit review
Florida	No	Other ⁸	Review required at 6 months
Georgia	Yes, in-person or by phone	NA (no waiting list)	NA (no waiting list)
Guam	Yes, in-person or by phone	Must be eligible to be placed on list	No explicit review
Hawaii	Yes, in-person or by phone	NA (no waiting list)	NA (no waiting list)
Idaho	--- ¹	NA (no waiting list)	NA (no waiting list)
Illinois	No	NA (no waiting list)	NA (no waiting list)
Indiana	Yes, in-person	Other ⁹	Review required at 90 days ¹⁰
Iowa	No	Must be eligible to be placed on list ¹¹	No explicit review ¹²
Kansas	Yes, in-person or by phone ¹³	Must be eligible to be placed on list	No explicit review
Kentucky	Yes, in-person or by phone ¹⁴	NA (no waiting list)	NA (no waiting list)
Louisiana	No	Must be eligible to be placed on list	No explicit review ¹⁵
Maine	No	Must be eligible to be placed on list	Review required at 12 months
Maryland	--- ¹	Must be eligible to be placed on list	No explicit review
Massachusetts	--- ¹	When the subsidy becomes available to the family ¹⁶	Review required at 12 months
Michigan	Yes, in-person or by phone ¹⁷	NA (no waiting list)	NA (no waiting list)

Table C-1. Additional Application and Waiting List Policies, 2019

State/Territory	If an Interview is Required During the Application Process	When Eligibility is Determined	How Often Families on the Waiting List are Reviewed for Eligibility
Minnesota	No	Other ¹⁸	Review required at 6 months
Mississippi	No	When the subsidy becomes available to the family	Review required at 12 months ¹⁹
Missouri	Yes, in-person or by phone ²⁰	Must be eligible to be placed on list ²¹	Review required at 12 months
Montana	Yes, in-person or by phone	Must be eligible to be placed on list ²²	No explicit review
Nebraska	Yes, in-person or by phone	NA (no waiting list)	NA (no waiting list)
Nevada	Yes, in-person or by phone	Must be eligible to be placed on list	Review required at 3 months
New Hampshire	Yes, in-person or by phone	Must be eligible to be placed on list	Review required at 6 months
New Jersey	No	Must be eligible to be placed on list ²³	Review required at 6 months
New Mexico	Yes ²⁴	NA (no waiting list)	NA (no waiting list)
New York	No	Must be eligible to be placed on list ²⁵	No explicit review ²⁵
No. Mariana Islands	Yes, in-person	Must be eligible to be placed on list	Review required at 1 month
North Carolina	Yes, in-person	Must be eligible within 30 days of being placed on the list ²⁶	Review required at 6 months
North Dakota	No	NA (no waiting list)	NA (no waiting list)
Ohio	No	NA (no waiting list)	NA (no waiting list)
Oklahoma	Yes, in-person or by phone	NA (no waiting list)	NA (no waiting list)
Oregon	Yes, in-person or by phone ²⁷	Other ²⁸	No explicit review
Pennsylvania	Yes, in-person or by phone ²⁹	Must be eligible to be placed on list	Review required at 12 months
Puerto Rico	Yes, in-person	When the subsidy becomes available to the family	No explicit review
Rhode Island	No	NA (no waiting list)	NA (no waiting list)
South Carolina	--- ¹	NA (no waiting list)	NA (no waiting list)
South Dakota	No	Must be eligible to be placed on list	Review required at 12 months
Tennessee	Yes, in-person ³⁰	NA (no waiting list)	NA (no waiting list)
Texas	Yes, in-person or by phone ³¹	When the subsidy becomes available to the family ³¹	No explicit review ³¹
Utah	No	NA (no waiting list)	NA (no waiting list)
Vermont	No	NA (no waiting list)	NA (no waiting list)
Virgin Islands	Yes, in-person ³²	Must be eligible to be placed on list	Review required at 1 month
Virginia	Yes, in-person	When the subsidy becomes available to the family	Review required at 3 months ³³

Table C-1. Additional Application and Waiting List Policies, 2019

State/Territory	If an Interview is Required During the Application Process	When Eligibility is Determined	How Often Families on the Waiting List are Reviewed for Eligibility
Washington	No	Must be eligible to be placed on list	Review required at 12 months
West Virginia	Yes, in-person	NA (no waiting list)	NA (no waiting list)
Wisconsin	Yes, in-person or by phone ³⁴	NA (no waiting list)	NA (no waiting list)
Wyoming	Yes, in-person ³⁵	NA (no waiting list)	NA (no waiting list)

Source: CCDF Policies Database October 1, 2019 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2019 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ Information not found in State's/Territory's manual.

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

³ Policy coded for Non-CalWORKs Alternative Payment Program.

⁴ Policy coded for Denver. Interviews are determined at the county level and can be conducted in-person or by phone. Counties must ensure that the interview process is not burdensome to families by allowing a family to complete the process via phone or electronic tools or by offering extended office hours to hold the interview.

⁵ Counties with waiting lists require families to complete an application and be found eligible in order to be placed on the waiting list. In the case of an enrollment freeze, counties have the option to pre-screen applicants for the waiting list.

⁶ If a county implements an enrollment freeze, a review is required every six months.

⁷ Parents may be required to complete a telephone interview as part of the application process.

⁸ If there is a wait list in place and a family's pre-application questionnaire appears to meet the requirements for eligibility, the family will be placed on the wait list before filling out the full application.

⁹ Preliminary eligibility is determined at the time a family applies for the waiting list (declaration of service need and limited wage verification). Eligibility is more fully determined if funds become available and the family applies when notified of availability of funds. Preliminary eligibility is determined at the time a family applies for the waiting list (declaration of service need and limited wage verification).

¹⁰ Caseworkers contact families to verify continuing need for the subsidy but not to verify income.

¹¹ A family must be eligible to be placed on the waiting list. Families are notified when funds become available and they must reapply to determine if they are still eligible for child care benefits.

¹² 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.

¹³ A face-to-face interview is recommended, but if the client is unable to come to an in-person interview, the face-to-face interview can be waived.

¹⁴ Phone interviews may be requested and provided if an individual is physically unable to come to the office. If the applicant is physically unable to complete an in-person interview, he or she may designate a representative to complete the application process. CPS cases and participants in the state's transitional assistance program who are working, in a work program, or teen parents attending high school or GED classes apply through a different department and are not required to complete the interview. A fax can also be used to complete the application process.

¹⁵ 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.

¹⁶ Families can be placed on the waiting list if they will have a future need for service.

- ¹⁷ The person interviewed may be any responsible family or group member or an authorized representation. In-person interviews must be conducted if the client requests one, if a specialist determines it is appropriate, or if the client is submitting a joint application with other programs that require an in-person interview.
- ¹⁸ Preliminary eligibility is determined when families are placed on the list, but families who are temporarily ineligible can be placed on the list if it appears they will become eligible. Once funds become available, if the family at the top of the list is temporarily ineligible, the family is left on the list and the next family is selected.
- ¹⁹ Every 12 months families are required to resubmit application materials or they will be removed from the waiting list.
- ²⁰ Interviews are not required if all items required for verification are included with an application or an applicant had an active case in the previous 12 months.
- ²¹ Eligibility is also reviewed when funds become available.
- ²² Non-TANF families who are selected off the list must be re-determined for eligibility before subsidies are secured.
- ²³ The family must also provide updated eligibility documentation within 10 days of notification that funding is available to them.
- ²⁴ An interview is required during the application process, but the method of contact (in-person, by phone) for the interview is not specified.
- ²⁵ Policy coded for New York City.
- ²⁶ Before adding a family to the list, the agency conducts an informal eligibility screening based on the reason care is needed, family size, and income. A family must appear eligible to be placed on the list. If the family is not eligible at the time of the screening, but is reasonably expected to become eligible within 30 days, the agency may place them on list.
- ²⁷ An interview is not required if the application contains unquestionable information to determine a denial for child care assistance. A phone interview is preferable. However, a face-to-face interview is an option if it can be arranged around the applicant's work schedule and the applicant prefers a face-to-face meeting. For clients transitioning from TANF, the application for child care assistance can be made by a phone call or office visit by either the worker or the client, a notice returned by the client by mail, or any other method that results in enough information to determine eligibility and benefit level.
- ²⁸ The agency uses a first in/first out monthly selection process with the waiting list, and selected applicants are invited to apply. Eligibility is determined after the family applies.
- ²⁹ If funding is available when the family is determined eligible, an in-person meeting must occur within 30 days from the date the family is notified. If funding is not available, the family must attend an in-person meeting no later than 30 calendar days following the date the first child from a family is enrolled in subsidized child care. If a family claims hardship, the eligibility agency may grant an additional 30 days from the date the hardship is claimed for the meeting. The eligibility agency may substitute a telephone contact for an in-person meeting if an in-person meeting cannot be scheduled without the family experiencing a hardship. The in-person meeting may be waived if the family has completed an in-person meeting within the previous 12 months.
- ³⁰ A face-to-face interview is not required for teen parents, TANF child only cases, CPS, and foster care cases.
- ³¹ Policy coded for the Gulf Coast Region.
- ³² Applicants are required to have an appointment with a subsidy counselor at the agency.
- ³³ Local departments are required to update their waiting lists at least quarterly in January, April, July, and October. Applicants on the waiting list will be sent a form 45 days prior to the end of the quarterly update month. To remain on the waiting list, they must sign and return this form before the end of the update month.
- ³⁴ The child care caseworker has five business days to schedule an interview with the applicant upon receiving the completed application.
- ³⁵ The applicant does not have to participate in an in-office interview if a waiver has been granted when applying for SNAP.

Appendix D. Provider Types Used to Fill in the Unlicensed Home-Based Provider Policy Tables

The unlicensed home-based provider policies presented in tables 39a through 41b apply to the following provider types in each State/Territory (table D-1).

Table D-1. Provider Types Used to Fill in the Unlicensed Home-Based Provider Policy Tables (Tables 39-41), 2019 ¹

State/Territory*	Background Checks for Non-Relatives (Table 39a)	Background Checks for Relatives (Table 39b)	Training Requirements for Non-Relatives (Table 40a)	Training Requirements for Relatives (Table 40b)	Health and Safety Requirements for Non-Relatives (Table 41a)	Health and Safety Requirements for Relatives (Table 41b)
Alabama	NA ²	Home-based relative providers	NA ²	Home-based relative providers	NA ²	Home-based relative providers
Alaska	NA ²	Approved relative and in-home care	NA ²	Approved relative and in-home care	NA ²	Approved relative and in-home care
American Samoa	In-home care	In-home care	In-home care	In-home care	In-home care	In-home care
Arizona	DES certified child care homes, DES certified in-home providers, Non- certified relative providers	DES certified child care homes, DES certified in-home providers, Non- certified relative providers	DES certified child care homes, DES certified in-home providers	Non-certified relative providers	DES certified child care homes, DES certified in-home providers	Non-certified relative providers
Arkansas	In-home child care providers; relative child care providers	In-home child care providers; relative child care providers	In-home child care providers; relative child care providers	In-home child care providers; relative child care providers	In-home child care providers; relative child care providers	In-home child care providers; relative child care providers
California	TrustLined providers	Relative providers	TrustLined providers; relative providers	TrustLined providers; relative providers	TrustLined providers	Relative providers
Colorado	In-home and out-of- home non-relative and relative providers	In-home and out-of- home non-relative and relative providers	In-home and out- of-home non- relative providers	In-home and out- of-home relative providers	In-home and out-of- home non-relative providers	In-home and out- of-home relative providers
Connecticut	NA ²	Unlicensed relative child care providers	NA ²	Unlicensed relative child care providers	NA ²	Unlicensed relative child care providers
DC	In-home care; relative care	In-home care; relative care	In-home care; relative care	In-home care; relative care	In-home care; relative care	In-home care; relative care

Table D-1. Provider Types Used to Fill in the Unlicensed Home-Based Provider Policy Tables (Tables 39-41), 2019 ¹

State/Territory*	Background Checks for Non-Relatives (Table 39a)	Background Checks for Relatives (Table 39b)	Training Requirements for Non-Relatives (Table 40a)	Training Requirements for Relatives (Table 40b)	Health and Safety Requirements for Non-Relatives (Table 41a)	Health and Safety Requirements for Relatives (Table 41b)
Delaware	In-home care providers	In-home care providers	In-home care providers	In-home care providers	In-home care providers	In-home care providers
Florida	Informal providers	Informal providers	Informal providers	Informal providers	Informal providers	Informal providers
Georgia	Informal providers	Informal providers	Informal providers	Informal providers	Informal providers	Informal providers
Guam	License-exempt family day care (relative/non- relative); license- exempt in-home care (relative/non- relative)	License-exempt family day care (relative/non- relative); license- exempt in-home care (relative/non- relative)	License-exempt family day care (relative/non- relative); license- exempt in-home care (relative/non- relative)	License-exempt family day care (relative/non- relative); license- exempt in-home care (relative/non- relative)	License-exempt family day care (relative/non- relative); license- exempt in-home care (relative/non- relative)	License-exempt family day care (relative/non- relative); license- exempt in-home care (relative/non- relative)
Hawaii	License-exempt providers	License-exempt providers	License-exempt providers	License-exempt providers	License-exempt providers	License-exempt providers
Idaho	In-home child care; relative child care	In-home child care; relative child care	In-home child care; relative child care	In-home child care; relative child care	In-home child care; relative child care	In-home child care; relative child care

Table D-1. Provider Types Used to Fill in the Unlicensed Home-Based Provider Policy Tables (Tables 39-41), 2019 ¹

State/Territory*	Background Checks for Non-Relatives (Table 39a)	Background Checks for Relatives (Table 39b)	Training Requirements for Non-Relatives (Table 40a)	Training Requirements for Relatives (Table 40b)	Health and Safety Requirements for Non-Relatives (Table 41a)	Health and Safety Requirements for Relatives (Table 41b)
Illinois	Day care home exempt from licensing; relative exempt from licensing (in home of provider); non- relative exempt from licensing (in home of child); relative exempt from licensing (in home of child)	Day care home exempt from licensing; relative exempt from licensing (in home of provider); non- relative exempt from licensing (in home of child); relative exempt from licensing (in home of child)	Day care home exempt from licensing; relative exempt from licensing (in home of provider); non- relative exempt from licensing (in home of child); relative exempt from licensing (in home of child)	Day care home exempt from licensing; relative exempt from licensing (in home of provider); non- relative exempt from licensing (in home of child); relative exempt from licensing (in home of child)	Day care home exempt from licensing; relative exempt from licensing (in home of provider); non- relative exempt from licensing (in home of child); relative exempt from licensing (in home of child)	Day care home exempt from licensing; relative exempt from licensing (in home of provider); non- relative exempt from licensing (in home of child); relative exempt from licensing (in home of child)
Indiana	Legally license- exempt providers (in home, relative, nanny)	Legally License- Exempt Providers (in home, relative, nanny)	Legally license- exempt providers (in home, relative, nanny)	Legally License- Exempt Providers (in home, relative, nanny)	Legally license- exempt providers (in home, relative, nanny)	Legally License- Exempt Providers (in home, relative, nanny)
Iowa	Non-registered providers	Non-registered providers	Non-registered providers	Non-registered providers	Non-registered providers	Non-registered providers
Kansas	NA ²	Relative in-home care	NA ²	Relative in-home care	NA ²	Relative in-home care
Kentucky	Registered providers	Registered providers	Registered providers	Registered providers	Registered providers	Registered Providers
Louisiana	Home-based providers	Home-based providers	Home-based providers	Home-based providers	Home-based providers	Home-based providers

Table D-1. Provider Types Used to Fill in the Unlicensed Home-Based Provider Policy Tables (Tables 39-41), 2019 ¹

State/Territory*	Background Checks for Non-Relatives (Table 39a)	Background Checks for Relatives (Table 39b)	Training Requirements for Non-Relatives (Table 40a)	Training Requirements for Relatives (Table 40b)	Health and Safety Requirements for Non-Relatives (Table 41a)	Health and Safety Requirements for Relatives (Table 41b)
Maine	Legal, unregulated child care provider; in-home child care provider	Legal, unregulated child care provider; in-home child care provider	Legal, unregulated child care provider; in-home child care provider	Legal, unregulated child care provider; in-home child care provider	Legal, unregulated child care provider; in-home child care provider	Legal, unregulated child care provider; in- home child care provider
Maryland	Informal care	Informal care	Informal care	Informal care	Informal care	Informal care
Massachusetts	Non-relative informal caregivers	Relative informal caregivers	Non-relative informal caregivers	Relative informal caregivers	Non-relative informal caregivers; relative informal caregivers	Non-relative informal caregivers; relative informal caregivers
Michigan	License-exempt unrelated ³	License-exempt related ³	License-exempt unrelated; license- exempt related ³	License-exempt unrelated; license- exempt related ³	License-exempt unrelated; license- exempt related ³	License-exempt unrelated; license-exempt related ³
Minnesota	Legal-non-licensed providers	Legal-non-licensed providers	Legal-non-licensed providers	Legal-non-licensed providers	Legal-non-licensed providers	Legal-non- licensed providers
Mississippi	License-exempt providers ⁴	License-exempt providers ⁴	License-exempt providers ⁴	License-exempt providers ⁴	License-exempt providers ⁴	License-exempt providers ⁴
Missouri	License-exempt providers	License-exempt providers	License-exempt providers	License-exempt providers	License-exempt providers	License-exempt providers

Table D-1. Provider Types Used to Fill in the Unlicensed Home-Based Provider Policy Tables (Tables 39-41), 2019 ¹

State/Territory*	Background Checks for Non-Relatives (Table 39a)	Background Checks for Relatives (Table 39b)	Training Requirements for Non-Relatives (Table 40a)	Training Requirements for Relatives (Table 40b)	Health and Safety Requirements for Non-Relatives (Table 41a)	Health and Safety Requirements for Relatives (Table 41b)
Montana	Family, friend, and neighbor (FFN) providers; and relative care exempt (RCE) providers	Family, friend, and neighbor (FFN) providers; and relative care exempt (RCE) providers	Family, friend, and neighbor (FFN) providers	Family, friend, and neighbor (FFN) providers; and relative care exempt (RCE) providers ⁵	Family, friend, and neighbor (FFN) providers	Family, friend, and neighbor (FFN) providers; and relative care exempt (RCE) providers ⁵
Nebraska	In-home providers	In-home providers	In-home providers	In-home providers	In-home providers	In-home providers
Nevada	Family, friend, and neighbor (FFN) providers	Family, friend, and neighbor (FFN) providers	Family, friend, and neighbor (FFN) providers	Family, friend, and neighbor (FFN) providers	Family, friend, and neighbor (FFN) providers	Family, friend, and neighbor (FFN) providers
New Hampshire	License-exempt family provider	License-exempt family provider	License-exempt family provider	License-exempt family provider	License-exempt family provider	License-exempt family provider
New Jersey	Approved home providers (Including family, friends, and neighbors (FFN) and in-home providers); registered family child care providers; accredited home providers	Approved home providers (Including family, friends, and neighbors (FFN) and in-home providers); registered family child care providers; accredited home providers	Approved home providers (Including family, friends, and neighbors (FFN) and in-home providers); registered family child care providers; accredited home providers	Approved home providers (Including family, friends, and neighbors (FFN) and in-home providers); registered family child care providers; accredited home providers	Approved home providers (Including family, friends, and neighbors (FFN) and in-home providers); registered family child care providers; accredited home providers	Approved home providers (Including family, friends, and neighbors (FFN) and in-home providers); registered family child care providers; accredited home providers
New Mexico	Registered home	Registered home	Registered home	Registered home	Registered home	Registered home

Table D-1. Provider Types Used to Fill in the Unlicensed Home-Based Provider Policy Tables (Tables 39-41), 2019 ¹

State/Territory*	Background Checks for Non-Relatives (Table 39a)	Background Checks for Relatives (Table 39b)	Training Requirements for Non-Relatives (Table 40a)	Training Requirements for Relatives (Table 40b)	Health and Safety Requirements for Non-Relatives (Table 41a)	Health and Safety Requirements for Relatives (Table 41b)
New York	Legally-exempt child care providers	Legally-exempt child care providers	Legally-exempt child care providers	Legally-exempt child care providers	Legally-exempt child care providers	Legally-exempt child care providers
No. Mariana Islands	License-exempt family home providers; in-home providers	License-exempt family home providers; in-home providers	License-exempt family home providers; in-home providers	License-exempt family home providers; in-home providers	License-exempt family home providers; in-home providers	License-exempt family home providers; in- home providers
North Carolina	NA ⁶	NA ⁶	NA ⁶	NA ⁶	NA ⁶	NA ⁶
North Dakota	In-home child care providers; self- declared providers	Approved relative providers	In-home child care providers; self- declared providers	Approved relative providers	In-home child care providers; self- declared providers	Approved relative providers
Ohio	In-home aides (IHA)	In-home aides (IHA)	In-home aides (IHA)	In-home aides (IHA)	In-home aides (IHA)	In-home aides (IHA)
Oklahoma	NA ⁷	Relative in-home providers ⁷	NA ⁷	Relative in-home providers ⁷	NA ⁷	Relative in-home providers ⁷
Oregon	License-exempt home-based providers; family, friend, and neighbor (FFN) providers	License-exempt home-based providers; family, friend, and neighbor (FFN) providers	License-exempt home-based providers; family, friend, and neighbor (FFN) providers	License-exempt home-based providers; family, friend, and neighbor (FFN) providers	License-exempt home-based providers; family, friend, and neighbor (FFN) providers	License-exempt home-based providers; family, friend, and neighbor (FFN) providers
Pennsylvania	NA ²	Relative providers; in-home care providers	NA ²	Relative providers; in-home care providers	NA ²	Relative providers; in- home care providers

Table D-1. Provider Types Used to Fill in the Unlicensed Home-Based Provider Policy Tables (Tables 39-41), 2019 ¹

State/Territory*	Background Checks for Non-Relatives (Table 39a)	Background Checks for Relatives (Table 39b)	Training Requirements for Non-Relatives (Table 40a)	Training Requirements for Relatives (Table 40b)	Health and Safety Requirements for Non-Relatives (Table 41a)	Health and Safety Requirements for Relatives (Table 41b)
Puerto Rico	Proveedor exento no familiar	Proveedor familiar	Proveedor exento no familiar	Proveedor familiar	Proveedor exento no familiar	Proveedor familiar
Rhode Island	NA ²	License-exempt child care providers	NA ²	License-exempt child care providers	NA ²	License-exempt child care providers
South Carolina	Family, friend, and neighbor (FFN) providers; family child care home providers; group child care homes	Family, friend, and neighbor (FFN) providers; family child care home providers; group child care homes	Family, friend, and neighbor (FFN) providers; family child care home providers	Family, friend, and neighbor (FFN) providers; family child care home providers	Family, friend, and neighbor (FFN) providers; family child care home providers	Family, friend, and neighbor (FFN) providers; family child care home providers
South Dakota	Family day care providers; informal providers; in-home providers	Relative providers	Family day care providers; informal providers; in-home providers	Relative providers	Family day care providers; informal providers; in-home providers	Relative providers
Tennessee	Unregulated providers	Unregulated providers	Unregulated providers	Unregulated providers	Unregulated providers	Unregulated providers
Texas	Unregulated (relative care providers); registered child care homes; listed child care homes	Unregulated (relative care providers); registered child care homes; listed child care homes ⁸	Registered child care homes; listed child care homes	Unregulated (relative care providers); registered child care homes; listed child care homes ⁸	Unregulated (relative care providers); registered child care homes; listed child care homes	Unregulated (relative care providers); registered child care homes; listed child care homes ⁸
Utah	Legally license- exempt home providers	Legally license- exempt home providers	Legally license- exempt home providers	Legally license- exempt home providers	Legally license- exempt home providers	Legally license- exempt home providers

Table D-1. Provider Types Used to Fill in the Unlicensed Home-Based Provider Policy Tables (Tables 39-41), 2019 ¹

State/Territory*	Background Checks for Non-Relatives (Table 39a)	Background Checks for Relatives (Table 39b)	Training Requirements for Non-Relatives (Table 40a)	Training Requirements for Relatives (Table 40b)	Health and Safety Requirements for Non-Relatives (Table 41a)	Health and Safety Requirements for Relatives (Table 41b)
Vermont	NA ²	Approved relative child care providers	NA ²	Approved relative child care providers	NA ²	Approved relative child care providers
Virgin Islands	Approved home providers; in-home day care providers; informal care providers	Approved home providers; in-home day care providers; informal care providers	Approved home providers; in-home day care providers; informal care providers	Approved home providers; in-home day care providers; informal care providers	Approved home providers; in-home day care providers; informal care providers	Approved home providers; in- home day care providers; informal care providers
Virginia	Unlicensed family day homes	Unlicensed family day homes	Unlicensed family day homes	Unlicensed family day homes	Unlicensed family day homes	Unlicensed family day homes
Washington	In-home and relative providers	In-home and relative providers	In-home and relative providers	In-home and relative providers	In-home and relative providers	In-home and relative providers
West Virginia	Family child care providers; informal or relative family child care providers; in-home care providers	Family child care providers; informal or relative family child care providers; in-home care providers	Family child care providers	Informal and relative family child care providers	Family child care providers; informal or relative family child care providers; in-home care providers	Family child care providers; informal or relative family child care providers; in- home care providers
Wisconsin	Certified family and certified in-home providers	Certified family and certified in-home providers	Certified family and certified in- home providers	Certified family and certified in- home providers	Certified family and certified in-home providers	Certified family and certified in- home providers

Table D-1. Provider Types Used to Fill in the Unlicensed Home-Based Provider Policy Tables (Tables 39-41), 2019 ¹						
State/Territory*	Background Checks for Non-Relatives (Table 39a)	Background Checks for Relatives (Table 39b)	Training Requirements for Non-Relatives (Table 40a)	Training Requirements for Relatives (Table 40b)	Health and Safety Requirements for Non-Relatives (Table 41a)	Health and Safety Requirements for Relatives (Table 41b)
Wyoming	Legally exempt providers	Legally exempt providers	Legally exempt providers	Legally exempt providers	Legally exempt providers	Legally exempt providers

Source: CCDF Policies Database October 1, 2019 Data

* Each State/Territory was asked to review and verify the accuracy of the data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2019 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the data in the tables, see table I.B in the report.

¹ This table shows the types of providers to which the policies in tables 39a through 41b apply. If the same policies apply to both relative and non-relative providers, the entries for the non-relative (a) tables and relative (b) tables will match.

² All non-relative home-based providers must be licensed in order to participate in the subsidy program.

³ License exempt-unrelated providers are required to provide care in the child's home, whereas the license exempt-related providers may provide care in the child's home or the provider's home.

⁴ In-home providers may only be approved for children with special needs that require in-home care.

⁵ Providers related to the children in care may provide care as either a Relative Care Exempt (RCE) provider or a Family, Friend, and Neighbor (FFN) provider. In cases where the policies vary between RCE and FFN providers, the policy for RCE providers is shown in the tables and the policy for FFN providers is described in the footnotes.

⁶ Unregulated providers cannot provide care through the subsidy program. Providers must be licensed at the three to five star levels or have a notice of compliance.

⁷ Unregulated family child care homes are not eligible to participate in the subsidy program. License-exempt in-home providers are eligible to provide care only when the caregiver is related to the children in care.

⁸ Providers related to the children in care may provide care as either an unregulated (relative care provider), registered child care home, or a listed child care home.

Appendix E. State Policies from 2015 to 2019: Selected Policies from the CCDF Policies Database

Over time, States/Territories revise their policies, sometimes to account for funding changes or evolving policy priorities. Here, we look at selected policies for the past five years (from 2015 to 2019) across four broad policy areas. Changes between years are shown in bold in tables E-1 through E-9; in some cases, the policy change is captured in the table itself and in other cases the policy changes are captured in the tables' footnotes.

Eligibility Requirements for Families

A majority of States/Territories made changes to some aspect of their eligibility policies over this period. From 2015 to 2019, 10 States/Territories made changes to their policies regarding the number of hours parents or guardians must work in order to qualify for subsidies (table E-1). Twenty-seven States/Territories made changes to their policies regarding eligibility during periods of job search (table E-2), with most of the changes occurring between 2016 and 2017. While only about half of the States/Territories changed their work hour requirements and job search policies, almost all States/Territories made changes to the monthly income eligibility thresholds from 2015 to 2019, with most of the changes resulting in higher thresholds over time (table E-3).

Reporting Changes, Redetermination, and Waiting Lists

Several States/Territories made changes in policies related to eligibility redetermination and waiting lists. Between 2015 and 2019 10 States/Territories made changes to their policies regarding how many days families have to report changes in their circumstances (table E-4). Thirty States/Territories made changes to their redetermination periods between 2015 and 2019, with most of the changes occurring between 2015 and 2016 (table E-5). Two States/Territories (New Mexico and Northern Mariana Islands) changed their policies regarding waiting lists between 2015 and 2019 (table E-6).

Family Copayment Policies

Numerous States/Territories made changes to their copayment amounts between 2015 and 2019. Twenty-four States/Territories changed the monthly copayment amounts for a family of three (one parent or guardian and children ages 2 and 4) earning \$15,000 (table E-7). A little over two-thirds of

States/Territories that made changes decreased their copayment amounts. This could be due to policy changes or inflation, as the family size and income used remains the same over time.

Provider Reimbursement Rates

Most States/Territories changed their reimbursement rates at least once between 2015 and 2019. Fifty States/Territories changed their reimbursement rates for toddlers in center-based care during this time period (table E-8). Forty-four States/Territories changed their reimbursement rates for toddlers in family child care homes between 2015 and 2019 (table E-9). The majority of these changes were increases to the reimbursement rates or beginning to use tiered reimbursement rates.

Table E-1. Minimum Work Hours Per Week Required for CCDF Eligibility, 2015-2019¹

State/Territory*	2015	2016	2017	2018	2019
Alabama	15	15 ²	15 ²	15 ²	15 ²
Alaska	No minimum	No minimum	No minimum	No minimum	No minimum
American Samoa	20	20	20	20	20
Arizona	No minimum	No minimum	No minimum	No minimum	No minimum
Arkansas	30	30	30	30	30
California	No minimum	No minimum	No minimum	No minimum	No minimum
Colorado	No minimum	No minimum	No minimum	No minimum	No minimum
Connecticut	No minimum	No minimum	No minimum	No minimum	No minimum
DC	20	20	20	20	20
Delaware	No minimum	No minimum	No minimum	No minimum	No minimum
Florida	20 ³	20 ³	20 ³	20 ³	20 ³
Georgia	24 ⁴	24 ⁵	24 ⁵	24 ⁵	24 ⁵
Guam	No minimum	No minimum	No minimum	No minimum	No minimum
Hawaii	No minimum	No minimum	No minimum	No minimum	No minimum
Idaho	No minimum	No minimum	No minimum	No minimum	No minimum
Illinois	No minimum	No minimum	No minimum	No minimum	No minimum
Indiana	No minimum	No minimum	No minimum	No minimum	No minimum
Iowa	28 ⁶	28 ⁶	28 ⁶	28 ⁶	28 ⁶
Kansas	28 ⁷	28 ⁷	28 ⁷	28 ⁷	20 ⁸
Kentucky	20	20	20 ⁹	20 ⁹	20 ⁹
Louisiana	30	30 ¹⁰	30 ¹⁰	20 ¹¹	20 ¹¹
Maine	No minimum ¹²	No minimum ¹²	No minimum ¹²	No minimum ¹²	No minimum ¹²
Maryland	No minimum	No minimum	No minimum	No minimum	No minimum
Massachusetts	20	20	20	20	20
Michigan	No minimum	No minimum	No minimum	No minimum	No minimum
Minnesota	20	20	20	20	20
Mississippi	25	25	25	25	25
Missouri	No minimum	No minimum	No minimum	No minimum	No minimum
Montana	Other ¹³	Other ¹⁴	Other ¹⁴	Other ¹⁴	Other ¹⁴
Nebraska	No minimum	No minimum	No minimum	No minimum	No minimum
Nevada	No minimum	No minimum	No minimum	No minimum	No minimum
New Hampshire	No minimum	No minimum	No minimum	No minimum	No minimum
New Jersey	30 ¹⁵	30 ¹⁵	30 ¹⁵	30 ¹⁵	30 ¹⁵
New Mexico	No minimum	No minimum	No minimum	No minimum	No minimum
New York	20 ¹⁶	20 ¹⁶	20 ¹⁶	20 ¹⁶	20
No. Mariana Islands	30	30	30	30	30
North Carolina	No minimum ¹⁷	No minimum ¹⁷	No minimum ¹⁷	No minimum ¹⁷	No minimum ¹⁷
North Dakota	No minimum	No minimum	No minimum	No minimum	No minimum
Ohio	No minimum ¹⁸	No minimum ¹⁸	No minimum ¹⁸	No minimum ¹⁸	No minimum ¹⁸
Oklahoma	No minimum ¹⁹	No minimum ¹⁹	No minimum ¹⁹	No minimum ¹⁹	No minimum ¹⁹
Oregon	No minimum	No minimum	No minimum	No minimum	No minimum
Pennsylvania	20 ²⁰	20 ²⁰	20 ²⁰	20 ²⁰	20 ²⁰
Puerto Rico	15	20	20	20	20
Rhode Island	20 ²¹	20 ²¹	20 ²¹	20 ²¹	20 ²¹
South Carolina	15 ²²	15 ²²	15 ²²	15 ²²	15 ²²

Table E-1. Minimum Work Hours Per Week Required for CCDF Eligibility, 2015-2019¹

State/Territory*	2015	2016	2017	2018	2019
South Dakota	20 ²³	20 ²³	20 ²³	20 ²³	20 ²³
Tennessee	30	30	30	30	30
Texas	25 ²⁴	25 ²⁴	25 ²⁴	25 ²⁴	25 ²⁴
Utah	15	15	15	15	15
Vermont	No minimum	No minimum	No minimum	No minimum	No minimum
Virgin Islands	30 ²⁵	30 ²⁵	30 ²⁵	30 ²⁵	30 ²⁵
Virginia	No minimum	No minimum	No minimum	No minimum	No minimum
Washington	No minimum ²⁶	No minimum ²⁶	No minimum ²⁶	No minimum ²⁶	No minimum ²⁶
West Virginia	No minimum	20	20	20	20
Wisconsin	No minimum	No minimum	No minimum	No minimum	No minimum
Wyoming	No minimum	No minimum	No minimum	No minimum	No minimum

Source: CCDF Policies Database. Data as of October 1 of each year.

* Each State/Territory was asked to review and verify the accuracy of the 2019 data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2019 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the 2019 data in the tables, see table I.B in the report.

¹ 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 for students or different eligibility groups, such as TANF recipients. The minimum work hour requirement for qualifying for any amount of child care assistance is captured here. This table is not intended to capture the states' definitions of full-time and part-time care.

² Each parent must participate in one or more approved activities for a minimum average of 15 hours per week. Approved activities include employment, education, and training.

³ If individuals are employed and also in school or an approved training program, they can work less than 20 hours, as long as their combined participation in approved activities is at least 20 hours per week.

⁴ Each parent must participate in one or more approved activities for a minimum average of 24 hours per week. Approved activities include employment, job search, education, and training. If participants' work hours are reduced for economic-hardship-related reasons only, they must average 20 hours per week as long as they remain with the same employer. New applicants must still meet the 24-hour requirement.

⁵ Each parent must participate in one or more approved activities for a minimum average of 24 hours per week. Approved activities include employment, job search, education, and training. New applicants must still meet the 24-hour requirement.

⁶ TANF recipients do not need to meet the minimum work hours requirement. For participants who are working and in school or in a training program, a minimum of 28 hours of school and work combined confers eligibility.

⁷ TANF recipients do not need to meet the minimum work hours requirement. 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 28-hour-per-week minimum.

⁸ TANF recipients do not need to meet the minimum work hours requirement. TANF recipients who gain employment, and therefore lose their cash assistance, are not required to meet the work hours requirement for the rest of their 12-month eligibility period. If a new application is made within two months of losing TANF eligibility, the family is also exempt from meeting the minimum work hours requirement.

⁹ A single parent must work an average of 20 hours per week.

¹⁰ There is no work requirement for families in Child Protective Services. Foster parents must work or be enrolled in an educational program a minimum of 25 hours per week.

- ¹¹ The employment and training requirements for families of children with special needs may be reduced to 15 hours per week.
- ¹² Applicants who are self-employed must participate in a self-employment activity a minimum average of 20 hours per week.
- ¹³ 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 earn at least the current applicable minimum wage to be eligible for assistance.
- 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 part time are required to work 40 hours per month. The recipient must earn at least the current applicable minimum wage to be eligible for assistance.
- ¹⁵ A parent or applicant is considered to be working full time if work and education or training activities combine to equal 30 hours per week.
- ¹⁶ Policy coded for New York City.
- ¹⁷ In general, there is no minimum number of hours a recipient must work to receive a subsidy. In order to receive full-time care though, a recipient must work an average of 30 hours or more per week. Part-time care is approved for any number of hours less than full time.
- ¹⁸ Both parents must be engaged in an activity and have a need for care.
- ¹⁹ Foster families must work a minimum of 20 hours per week.
- ²⁰ Ten hours of training may be substituted for 10 hours of the 20-hour work requirement.
- ²¹ Income eligible parents must work an average of at least 20 hours per week in a month.
- ²² TANF applicants must meet the participation requirements outlined in their TANF family plan. A parent who receives SSI may be eligible for assistance if he or she is either employed at least part time or participating in an activity that will enable him or her to become employed.
- ²³ Applicants must work a minimum of 80 hours per month. Applicants must also receive a salary equivalent to the federal minimum wage.
- ²⁴ Policy coded for Gulf Coast Region. If individuals are employed and also in school or an approved training program, they can work less than 25 hours, as long as their combined participation in approved activities is at least 25 hours per week.
- ²⁵ A parent or applicant is considered to be working full time if work and education or training activities combine to equal 30 hours per week.
- ²⁶ 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.

Table E-2. Job Search as an Approved Activity for CCDF Eligibility, 2015-2019

State/Territory*	2015	2016	2017	2018	2019
Alabama	No	Yes, only for continuing eligibility	Yes, only for continuing eligibility	Yes, only for continuing eligibility	Yes, only for continuing eligibility
Alaska	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, only for continuing eligibility	Yes, only for continuing eligibility	Yes, only for continuing eligibility
American Samoa	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility
Arizona	Yes, only for continuing eligibility	Yes, only for continuing eligibility	Yes, only for continuing eligibility	Yes, only for continuing eligibility	Yes, only for continuing eligibility
Arkansas	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility
California	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility
Colorado	Yes, for initial and continuing eligibility ¹	Yes, for initial and continuing eligibility ¹	Yes, for initial and continuing eligibility ¹	Yes, for initial and continuing eligibility ¹	Yes, for initial and continuing eligibility ¹
Connecticut	Yes, only for continuing eligibility	Yes, only for continuing eligibility	Yes, only for continuing eligibility	Yes, only for continuing eligibility	Yes, only for continuing eligibility
DC	Yes, for initial and continuing eligibility ²	Yes, for initial and continuing eligibility ²	Yes, for initial and continuing eligibility ²	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility
Delaware	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility
Florida	Yes, only for continuing eligibility ³	Yes, only for continuing eligibility ³	Yes, only for continuing eligibility ³	Yes, only for continuing eligibility ³	Yes, only for continuing eligibility ³
Georgia	Yes, only for continuing eligibility ⁴	Yes, only for continuing eligibility ⁵	Yes, only for continuing eligibility ⁵	Yes, only for continuing eligibility ⁵	Yes, only for continuing eligibility ⁵
Guam	No	No	No	No ⁶	No ⁶
Hawaii	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility
Idaho	No	Yes, only for continuing eligibility	Yes, only for continuing eligibility	Yes, only for continuing eligibility	Yes, only for continuing eligibility

Table E-2. Job Search as an Approved Activity for CCDF Eligibility, 2015-2019

State/Territory*	2015	2016	2017	2018	2019
Illinois	Yes, only for continuing eligibility ⁷	Yes, only for continuing eligibility ⁷	Yes, only for continuing eligibility ⁷	Yes, only for continuing eligibility ⁷	Yes, only for continuing eligibility ⁷
Indiana	Yes, only for continuing eligibility	Yes, only for continuing eligibility	Yes, only for continuing eligibility	Yes, only for continuing eligibility	Yes, only for continuing eligibility
Iowa	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility
Kansas	No ³	Yes, only for continuing eligibility ³	Yes, only for continuing eligibility ³	Yes, only for continuing eligibility ³	Yes, only for continuing eligibility ³
Kentucky	Yes, for initial and continuing eligibility ⁸	Yes, for initial and continuing eligibility ⁹	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility
Louisiana	No	No	No	No	No
Maine	Yes, only for continuing eligibility ¹⁰	Yes, only for continuing eligibility ¹⁰	Yes, only for continuing eligibility ¹⁰	Yes, only for continuing eligibility ¹⁰	Yes, only for continuing eligibility ¹⁰
Maryland	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, only for continuing eligibility ³	Yes, only for continuing eligibility ³	Yes, only for continuing eligibility ³
Massachusetts	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility
Michigan	Yes, only for continuing eligibility ¹¹	Yes, only for continuing eligibility ¹¹	Yes, only for continuing eligibility ¹¹	Yes, only for continuing eligibility ¹¹	Yes, only for continuing eligibility ¹¹
Minnesota	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility
Mississippi	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility
Missouri	Yes, only for continuing eligibility ³	Yes, only for continuing eligibility ³	Yes, only for continuing eligibility ³	Yes, only for continuing eligibility ³	Yes, only for continuing eligibility ³
Montana	Yes, only for continuing eligibility ¹²	Yes, only for continuing eligibility ¹²	Yes, only for continuing eligibility ¹²	Yes, only for continuing eligibility ¹³	Yes, only for continuing eligibility ¹³
Nebraska	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, only for continuing eligibility

Table E-2. Job Search as an Approved Activity for CCDF Eligibility, 2015-2019

State/Territory*	2015	2016	2017	2018	2019
Nevada	Yes, for initial and continuing eligibility ¹⁴	Yes, for initial and continuing eligibility ¹⁴	Yes, for initial and continuing eligibility ¹⁴	Yes, for initial and continuing eligibility ¹⁴	Yes, for initial and continuing eligibility ¹⁴
New Hampshire	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility
New Jersey	No ³	No ³	Yes, only for continuing eligibility ¹⁵	Yes, only for continuing eligibility ¹⁵	Yes, only for continuing eligibility ¹⁵
New Mexico	Yes, only for continuing eligibility	Yes, only for continuing eligibility	Yes, only for continuing eligibility	Yes, only for continuing eligibility	Yes, only for continuing eligibility
New York	No ¹⁶	Yes, for initial and continuing eligibility ¹⁶	Yes, for initial and continuing eligibility ¹⁶	Yes, for initial and continuing eligibility ¹⁶	Yes, for initial and continuing eligibility ¹⁶
No. Mariana Islands	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility
North Carolina	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility
North Dakota	Yes, for initial and continuing eligibility	Yes, only for continuing eligibility ¹⁷	Yes, only for continuing eligibility ¹⁸	Yes, only for continuing eligibility ¹⁸	Yes, only for continuing eligibility ¹⁸
Ohio	Yes, only for continuing eligibility ¹⁹	Yes, only for continuing eligibility ¹⁹	Yes, only for continuing eligibility ²⁰	Yes, only for continuing eligibility ²⁰	Yes, only for continuing eligibility ²⁰
Oklahoma	Yes, only for continuing eligibility ²¹	No ²²	No ²²	No ²²	No ²²
Oregon	Yes, only for continuing eligibility	Yes, only for continuing eligibility	Yes, only for continuing eligibility	Yes, only for continuing eligibility	Yes, only for continuing eligibility
Pennsylvania	Yes, only for continuing eligibility	Yes, only for continuing eligibility	Yes, only for continuing eligibility	Yes, only for continuing eligibility	Yes, only for continuing eligibility
Puerto Rico	No	Yes, only for continuing eligibility	Yes, only for continuing eligibility	Yes, only for continuing eligibility	Yes, only for continuing eligibility
Rhode Island	Yes, only for continuing eligibility ²³	Yes, only for continuing eligibility ²³	Yes, only for continuing eligibility ²³	Yes, only for continuing eligibility	Yes, only for continuing eligibility

Table E-2. Job Search as an Approved Activity for CCDF Eligibility, 2015-2019

State/Territory*	2015	2016	2017	2018	2019
South Carolina	Yes, only for continuing eligibility	Yes, only for continuing eligibility	Yes, only for continuing eligibility	Yes, only for continuing eligibility	Yes, only for continuing eligibility
South Dakota	Yes, only for continuing eligibility ²⁴	Yes, only for continuing eligibility²⁵	Yes, only for continuing eligibility ²⁵	Yes, only for continuing eligibility ²⁵	Yes, only for continuing eligibility ²⁵
Tennessee	No	Yes, only for continuing eligibility	Yes, only for continuing eligibility	Yes, only for continuing eligibility	Yes, only for continuing eligibility
Texas	Yes, only for continuing eligibility	Yes, only for continuing eligibility	Yes, only for continuing eligibility	Yes, only for continuing eligibility	Yes, only for continuing eligibility
Utah	Yes, only for continuing eligibility ²⁶	Yes, only for continuing eligibility ²⁶	Yes, only for continuing eligibility ²⁶	Yes, only for continuing eligibility²⁷	No²⁸
Vermont	Yes, for initial and continuing eligibility ²⁹	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility
Virgin Islands	No	No	No	No	Yes, only for continuing eligibility³⁰
Virginia	No ³¹	No ³¹	No ³¹	No ³¹	No ³¹
Washington	Yes, only for continuing eligibility ³	Yes, only for continuing eligibility ³	Yes, only for continuing eligibility ³	Yes, only for continuing eligibility ³	Yes, only for continuing eligibility ³
West Virginia	Yes, only for continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility	Yes, for initial and continuing eligibility
Wisconsin	No ³¹	No ³¹	No ³¹	Yes, only for continuing eligibility³²	Yes, only for continuing eligibility ³²
Wyoming	No	Yes, only for continuing eligibility	Yes, only for continuing eligibility	Yes, only for continuing eligibility	Yes, only for continuing eligibility

Source: CCDF Policies Database. Data as of October 1 of each year.

* Each State/Territory was asked to review and verify the accuracy of the 2019 data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2019 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the 2019 data in the tables, see table I.B in the report.

¹ Policy coded for Denver. Counties may opt out of counting job search as an approved activity for eligibility at application.

² Job search is approved if parents lose employment through no fault of their own. Job search is not approved when parents resign or are dismissed for cause.

- ³ For TANF clients, job search is an eligible activity for initial and continuing eligibility.
- ⁴ Each parent must participate in one or more approved activities for a minimum average of 24 hours per week. Approved activities include employment, job search, education, and training. Only clients with continuing eligibility can count job search hours towards their hours requirement.
- ⁵ Each parent must participate in one or more approved activities for a minimum average of 24 hours per week. Approved activities include employment, job search, education, and training. Job search qualifies as an initial eligibility activity for clients who receive priority due to TANF, homelessness, or domestic violence. Clients with job search as an activity for continuing eligibility can count job search hours towards their hours requirement.
- ⁶ Job search is an allowable activity for families experiencing homelessness.
- ⁷ For TANF clients participating in an approved agency program, job search is an eligible activity for initial and continuing eligibility if listed in their plan.
- ⁸ The parent must have lost employment within four weeks of application to initially qualify for job search activities.
- ⁹ The parent must have lost employment or training within 90 days of application through no fault of the recipient to initially qualify for job search activities.
- ¹⁰ Job search activities may be approved for a maximum of 12 weeks for current recipients who have lost work or who have completed school and are looking for work. Coverage starts on the first day of unemployment, and parents are granted up to 20 hours of care per week. Families are eligible for care during one of three breaks in eligibility (maternal/paternal leave, short-term medical leave, or job search) within a six-month period.
- ¹¹ For TANF work program families, job search is an eligible activity for initial and continuing eligibility if it is part of their work participation requirement.
- ¹² For TANF recipients, job search activities are only approved for applicants who have job search in their family investment agreement or employability plan.
- ¹³ For TANF recipients, job search activities are only approved for applicants who have job search in their employability or service plan.
- ¹⁴ Families are not eligible for job search if the eligible child is school age (between 6 and 12 years old) or has special needs (over 13 years old). If the child is not in school due to school breaks or holidays, child care is approved during job search activities.
- ¹⁵ For TANF clients, job search is an eligible activity for initial and continuing eligibility. Non-TANF families may continue to receive child care assistance if they experience a temporary absence from work, as long as this temporary change in circumstances does not last more than three months. If the cessation in work lasts more than three months, applicants can apply for job search child care assistance for an additional three months. Families that are not engaged in work, school, or a training activity when the three-month period ends are no longer eligible for the subsidy.
- ¹⁶ Policy coded for New York City. Job search activities are defined by each district.
- ¹⁷ Job search is an approved activity for initial eligibility only for TANF and Transitional Child Care families who have job search listed on their employment plan.
- ¹⁸ Job search is an approved activity for initial eligibility for homeless households and for TANF and Transitional Child Care families who have job search listed on their employment plan.
- ¹⁹ When an approved activity ends, child care can be continued for up to 13 weeks. These 13 weeks may not extend beyond the eligibility period and only one extension is permitted per year.
- ²⁰ When an approved activity ends, child care can be continued for up to 13 weeks. These 13 weeks may not extend beyond the eligibility period.
- ²¹ 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 90 days and no more than twice per calendar year, for a total of 180 days per year, and only if the individual was employed or attending school for at least 90 days between job search activities.
- ²² Job search activities are approved if they are part of a TANF work assignment.

²³ Income-eligible parents receiving a child care subsidy may be granted a grace period not to exceed 21 days when experiencing temporary unemployment or a transition between jobs.

²⁴ 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.

²⁵ If a person is already receiving child care assistance and suffers a loss of employment, three months of continued assistance can be granted from the last day of employment.

²⁶ Single parent clients who lose eligibility for employment-related child care due to job loss can be approved to receive child care during a job search. In order to be eligible, clients must have been working at least 32 hours per week, report the job termination within 10 days of the last day worked, and formally request continued assistance during the job search period.

²⁷ Employment Support and Job Search Child Care are available to families diverted from financial assistance if otherwise eligible.

²⁸ Effective May 31, 2019, child care assistance for job search activities is no longer available. Households already utilizing the previous program will remain eligible through the end of their current certification period.

²⁹ 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.

³⁰ A three-month job search period is triggered if the parent or legal guardian loses his or her employment during the eligibility period. If the parent or legal guardian engages in a qualifying activity by the end of the grace period, assistance continues until the end of the 12-month eligibility period.

³¹ Job search activities are only approved if they are part of a TANF or SNAP work program.

³² Eligible parents who experience a permanent loss of employment or a permanent loss of another approved activity will be offered an opportunity to receive at least the same level of child care assistance for job search for up to three months.

Table E-3. Initial Eligibility Thresholds and Thresholds During the Eligibility Period for Family Size Three: Maximum Monthly Countable Income, 2015-2019 ¹

State/Territory*	2015		2016		2017		2018		2019	
	Initial	Higher Continuing	Initial	Higher Continuing	Initial	Higher Continuing	Initial	Higher Continuing	Initial	Higher Continuing
Alabama ²	2,176	2,511	2,184	3,942	2,212	4,066	2,251	4,188	2,311	4,368
Alaska	4,524	-	4,524	-	5,156	-	5,156	-	5,156	-
American Samoa	3,927	-	3,927	-	3,927	-	3,927	-	3,927	-
Arizona ³	2,764	-	2,772	4,004	2,809	4,088	2,858	4,269	2,934	4,486
Arkansas	2,480	-	2,578	-	2,578	-	3,650	-	3,650	-
California ⁴	3,518	-	3,518	-	4,340	5,270	4,502	5,467	5,802	-
Colorado ⁵	3,767	-	3,780	-	3,829	-	3,896	5,428	3,999	5,685
Connecticut	3,716	-	3,800	6,461	3,855	6,553	3,939	6,696	4,057	6,897
DC ⁶	3,815	4,258	3,815	4,258	4,254	4,765	4,329	5,896	4,444	6,258
Delaware	3,349	-	3,360	-	3,404	-	3,204	-	3,289	5,647
Florida	2,511	3,348	2,520	3,913	2,553	4,025	2,598	4,063	2,666	4,171
Georgia ⁷	2,347	-	2,455	4,173	2,455	4,173	2,562	4,356	2,562	4,356
Guam	2,283	-	2,283	-	2,283	-	2,283	-	2,812	-
Hawaii	3,927	-	3,927	-	3,927	-	3,927	-	3,927	-
Idaho ⁸	2,177	-	2,184	3,822	2,213	3,822	2,252	3,946	2,311	4,184
Illinois ⁹	838	3,098	2,722	3,108	3,149	-	3,204	5,138	3,555	5,320
Indiana	2,126	2,846	2,134	4,302	2,161	4,368	2,161	4,419	2,257	4,526
Iowa ¹⁰	2,428	-	2,436	4,718	2,468	4,778	2,511	4,835	2,578	4,989
Kansas ¹¹	3,097	-	3,108	4,505	3,149	4,627	3,204	4,698	3,289	4,812
Kentucky ¹²	2,317	2,549	2,688	2,772	2,723	4,808	2,723	4,808	2,771	4,808
Louisiana ¹³	2,545	-	2,656	3,983	2,684	4,148	2,684	4,148	2,884	4,457
Maine	4,549	-	4,549	-	4,686	-	4,715	-	4,833	-
Maryland	2,499	-	2,499	-	2,499	6,547	5,007	6,547	5,007	6,547

Table E-3. Initial Eligibility Thresholds and Thresholds During the Eligibility Period for Family Size Three: Maximum Monthly Countable Income, 2015-2019 ¹

State/Territory*	2015		2016		2017		2018		2019	
	Initial	Higher Continuing	Initial	Higher Continuing	Initial	Higher Continuing	Initial	Higher Continuing	Initial	Higher Continuing
Massachusetts ¹⁴	3,716	6,317	3,814	6,484	3,814	6,484	3,984	6,772	4,191	7,125
Michigan	1,990	4,069	1,990	4,069	2,213	4,705	2,213	4,705	2,213	4,705
Minnesota	2,955	4,213	3,030	4,320	3,105	4,427	3,163	5,721	3,288	5,946
Mississippi	2,917	-	2,917	-	2,917	-	3,640	-	3,640	-
Missouri ¹⁵	2,059	2,930	2,318	3,612	2,318	3,612	2,318	3,612	2,454	3,823
Montana ¹⁶	2,511	-	2,520	3,108	2,520	3,108	2,598	3,204	2,666	3,288
Nebraska ¹⁷	2,176	3,097	2,184	3,108	2,212	3,148	2,251	3,204	2,311	5,122
Nevada	3,954	-	4,104	-	4,127	-	2,366	4,260	2,471	4,544
New Hampshire	4,186	-	4,200	-	3,744	4,255	3,810	6,091	3,911	6,286
New Jersey ¹⁸	3,298	4,123	3,360	4,200	3,403	6,551	3,463	6,634	3,555	7,166
New Mexico	2,511	3,348	2,520	3,360	2,553	3,403	2,598	3,463	3,555	4,444
New York	3,348	-	3,360	-	3,403	-	3,463	-	3,555	-
No. Mariana Islands	2,126	-	2,192	-	2,192	-	2,192	-	2,192	-
North Carolina ¹⁹	3,348	-	3,348	-	3,403	4,165	3,403	4,165	3,555	4,565
North Dakota	5,279	-	3,727	-	3,811	-	3,881	5,498	4,085	5,787
Ohio	2,177	5,022	2,184	5,040	2,213	5,105	2,252	5,195	2,311	5,333
Oklahoma ²⁰	2,925	-	2,925	-	2,925	3,976	2,925	4,059	4,200	-
Oregon	3,099	4,362	3,108	4,200	3,149	4,315	3,204	4,405	3,288	4,847
Pennsylvania	3,348	3,934	3,360	3,948	3,403	3,999	3,463	4,069	3,555	5,271
Puerto Rico ²¹	1,423	-	1,423	-	1,423	-	1,423	-	1,423	-
Rhode Island	3,014	3,767	3,024	3,780	3,063	3,829	3,117	3,896	3,200	3,999
South Carolina	2,511	2,930	2,520	3,959	2,594	4,008	2,704	4,179	2,826	4,367
South Dakota ²²	2,930	-	2,940	-	2,978	4,801	3,031	4,801	3,716	4,947

Table E-3. Initial Eligibility Thresholds and Thresholds During the Eligibility Period for Family Size Three: Maximum Monthly Countable Income, 2015-2019 ¹										
State/Territory*	2015		2016		2017		2018		2019	
	Initial	Higher Continuing	Initial	Higher Continuing	Initial	Higher Continuing	Initial	Higher Continuing	Initial	Higher Continuing
Tennessee ²³	2,775	-	2,815	-	2,848	-	2,926	-	2,926	-
Texas ²⁴	3,348	4,136	3,360	4,243	3,403	4,315	3,463	4,456	3,555	4,663
Utah ²⁵	2,773	3,466	2,773	3,466	2,854	4,332	2,918	4,429	3,236	4,585
Vermont ²⁶	3,298	-	5,040	-	5,105	5,223	5,195	-	5,333	-
Virgin Islands	2,752	-	2,752	-	2,752	-	2,752	-	2,506	-
Virginia ²⁷	3,098	-	3,108	-	3,149	-	3,204	5,760	3,289	5,978
Washington ²⁸	3,350	-	3,348	5,058	3,404	5,161	3,464	5,239	3,556	5,460
West Virginia	2,474	3,051	2,474	3,051	2,553	3,148	2,598	3,204	2,666	3,288
Wisconsin ²⁹	3,097	3,348	3,108	3,360	3,148	3,403	3,204	5,073	3,288	5,241
Wyoming	2,930	3,767	2,940	3,780	2,978	3,829	3,030	3,896	3,111	3,999

Source: CCDF Policies Database. Data as of October 1 of each year.

* Each State/Territory was asked to review and verify the accuracy of the 2019 data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2019 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the 2019 data in the tables, see table I.B in the report.

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 captures the continuing eligibility thresholds used during the family's eligibility period. Information about continuing eligibility thresholds used at the end of the eligibility period (i.e., at redetermination), can be found in the footnotes and full detail of the CCDF Policies Database. This table does not capture eligibility threshold differences between various eligibility groups, such as TANF recipients.

² In 2019, eligibility thresholds at redetermination are set at 85 percent of the state median income. At redetermination, if a family's income is above 85 percent of the state median income, they can receive three months of services at the maximum copay as a graduated phase out.

³ In 2016, 2017, and 2018 at redetermination, if the family's income exceeds 165 percent of the Federal Poverty Guidelines, but is below 85 percent of the state median income, the family will receive a graduated phase-out period of three months.

⁴ In 2015, 2016, 2017, and 2018, California allows pilot counties to set the initial maximum monthly countable income threshold at 85 percent of the state median income. In 2017, 2018, and 2019, income eligibility after initial determination is 85 percent of the state median income.

⁵ Policy coded for Denver County. In 2015, 2016, 2017, and 2018, counties could establish initial eligibility thresholds between 165 percent of the Federal Poverty Guidelines and 85 percent of state median income and continuing eligibility thresholds between 130 percent of the Federal Poverty Guidelines and 85 percent of state median income. In 2019, counties could not set initial eligibility thresholds below 185 percent of the Federal Poverty Guidelines and the continuing eligibility threshold is set at 85 percent of state median income.

⁶ In 2016 and 2017, at redetermination, if the family's income exceeds 300 percent of the Federal Poverty Guidelines or 85 percent of the state median income, the family will receive a graduated phase-out period of three months. In 2018 and 2019, at redetermination, if the family's income exceeds 85 percent of the state median income, the family will receive a graduated phase-out period of three months. If the family's income is less than 85 percent of the state median income at the end of the three months, they will continue to receive assistance.

⁷ In 2016 and 2017, if a family's gross income exceeds 50 percent of state median income and is below 85 percent of state median income, they may receive services for up to 12 months as part of a graduated phase out.

⁸ In 2016 and 2017, if at the time of redetermination, a family's income exceeds 130 percent of the Federal Poverty Guidelines but is below 85 percent of the state median income, the family will continue to receive benefits for three months. In 2018 and 2019, if at the time of redetermination, a family's income exceeds 150 percent of the Federal Poverty Guidelines but is below 85 percent of the state median income, the family will continue to receive benefits for 12 months.

⁹ In 2015 and 2016, new applications exceeding the initial eligibility thresholds by family size will not be approved unless that family receives TANF, has a child with special needs, or is a teen parent enrolled in high school or GED courses full time. A family that submits a change of information or a redetermination form will be considered income eligible based on the continuing eligibility thresholds by family size. In 2018, eligibility thresholds at redetermination are set at 200 percent of the Federal Poverty Guidelines. Families with incomes above 200 percent of the Federal Poverty Guidelines and below 85 percent of the state median income will receive graduated phase-out period of three months. In 2019, eligibility thresholds at redetermination are set at 225 percent of the Federal Poverty Guidelines. Families with incomes above 225 percent of the Federal Poverty Guidelines and below 85 percent of the state median income will receive graduated phase-out period of three months.

¹⁰ 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. In 2017, 2018, and 2019, if at the time of redetermination, a family's income exceeds the initial eligibility limit but is below 85 percent of state median income, the family will remain eligible for an additional 12 months or until their income exceeds 85 percent of state median income.

¹¹ In 2016 and 2017, at redetermination, families may be eligible for three additional months of child care assistance if their income exceeds 185 percent of the Federal Poverty Guidelines but is below 85 percent of the state median income.

¹² In 2015, 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.

¹³ In 2018 and 2019, at redetermination, if the family's income exceeds 55 percent of the state median income, but is below 85 percent of the state median income, the family will receive a graduated phase-out period of 12 months.

¹⁴ Families requiring care for children with special needs use a different set of eligibility thresholds.

¹⁵ Families in the first income category are not assigned a daily copayment; they pay \$1 per year. If an applicant is already receiving child care and his or her income increases to between 139 percent and 165 percent of the Federal Poverty Guidelines, he or she is classified under transitional child care level 1. The applicant will then receive 75 percent of the calculated benefit amount. If an applicant is already receiving child care and his or her income increases to between 166 percent and 190 percent of the Federal Poverty Guidelines, he or she is classified under transitional child care level 2. The applicant will then receive 50 percent of the calculated benefit amount. If an applicant is already receiving child care and his or her income increases to between 191 percent and 215 percent of the Federal Poverty Guidelines, he or she is classified under transitional child care level 3. The applicant will then receive 25 percent of the calculated benefit amount.

¹⁶ In 2016 and 2017, families with income between 150 and 185 percent of the Federal Poverty Guidelines are eligible for a six-month eligibility period. In 2018 and 2019, families with income between 150 and 185 percent of the Federal Poverty Guidelines are eligible for a 12-month eligibility period.

¹⁷ In 2015, 2016, 2017, and 2018, a family whose income exceeds 130 percent of the Federal Poverty Guidelines may receive subsidies for up to 24 consecutive months or until the family's income exceeds 185 percent of the Federal Poverty Guidelines, whichever occurs first. If the family's income falls to or below 130 percent of the Federal Poverty Guidelines during that time, the child care agency will re-determine the family's eligibility and eligibility is no longer time-limited. In 2019, once a family is determined eligible and child care is authorized, they will remain eligible for care through the remainder of the eligibility period as long as their income is below 85 percent of state median income. At redetermination, if the family's income does not exceed 185 percent of the Federal Poverty Guidelines, the family will receive a graduated phase-out period of 12 months.

¹⁸ In 2017, 2018, and 2019, families with income exceeding 250 percent of the Federal Poverty Guidelines but less than 85 percent of state median income at redetermination can qualify for one additional year of graduated phase-out assistance. This period of assistance can only be granted once.

¹⁹ The eligibility thresholds shown are for non-school-age children (children through age five) and children of all ages with special needs and are set at 200 percent of the Federal Poverty Guidelines. For school-age children (children ages six through twelve), eligibility is set at 133 percent of the Federal Poverty Guidelines. In 2016, 2017, and 2018, if a family's income increases above the initial eligibility threshold but below 85 percent of the state median income, the family will be given a graduated phase-out period of 90 days. In 2019, if a family's income increases above the initial eligibility threshold but below 85 percent of the state median income, the family will be given a graduated phase-out period of 12 months.

²⁰ In 2015, 2016, 2017, and 2018, eligibility thresholds vary based on both family size and the number of children in care. These thresholds assume a family size three has two children in care. The initial threshold for any family size with one child in care is \$2,425 per month. The initial threshold for any family size with two children in care is \$2,925 per month. The initial threshold for any family size with three or more children in care is \$3,625 per month.

²¹ In 2016, 2017, 2018, and 2019, at redetermination, families may be eligible for three additional months if their income exceeds 85 percent of the state median income.

²² In 2017, if at redetermination, the family's income exceeds 175 percent of the Federal Poverty Guidelines but is below 85 percent of the state median income, the family will receive a graduated phase out period of two months.

²³ In 2016, 2017, 2018, and 2019, income thresholds are set at 60 percent of state median income. However, applicants who are working or in post-secondary education and have children who are six weeks through five years of age may qualify for the state's Smart Steps Child Care program with income up to 85 percent of state median income.

²⁴ Policies coded for the Gulf Coast Region. Local boards have the authority to establish eligibility thresholds as a percent of either the Federal Poverty Guidelines or the state median income, but not to exceed 85 percent of state median income.

²⁵ The thresholds used at initial eligibility are higher for children with special needs.

²⁶ In 2019, the threshold for family size three is greater at redetermination than at initial eligibility or during the eligibility period.

²⁷ Policies coded for areas in Group III. Across Virginia, eligibility thresholds range from 150 to 250 percent of the Federal Poverty Guidelines. Group III's eligibility thresholds are set at 185 percent of the Federal Poverty Guidelines. There is an exception for applicants that are considered not financially responsible for the child in need of care under Virginia law. For these individuals, eligibility is set at 250 percent of the Federal Poverty Guidelines, not to exceed 85 percent of state median income.

²⁸ If a family's income is greater than 200 percent but below 220 percent of the Federal Poverty Guidelines, in 2016 and 2017, they may be eligible for three months of service, and in 2018 and 2019 the family will receive a graduated phase-out period of 12 months.

²⁹ Family income cannot exceed 185 percent of the Federal Poverty Guidelines, unless the family is providing foster care, subsidized guardianship, or court-ordered kinship care while receiving the kinship benefit, in which case the natural or adoptive family's gross family income cannot exceed 200 percent of the Federal Poverty Guidelines at the time of the child's placement. In 2015, 2016, and 2017, the maximum gross income for a family to remain eligible for child care assistance is 200 percent of the Federal Poverty Guidelines. For non-court-ordered kinship care, if a family's income exceeds 200 percent of the Federal Poverty Guidelines for two consecutive months, the subsidy will be discontinued. In 2018 and 2019, the maximum gross income for a family to remain eligible for child care assistance is 85 percent of state median income.

Table E-4. Within How Many Days the Family Must Notify the Agency of Changes, 2015-2019

State/Territory*	2015	2016	2017	2018	2019
Alabama	10	10	10	10	10
Alaska	10	10	10	10	10
American Samoa	10	10	10	10	10
Arizona	2	5	5	5	5
Arkansas	10	10	10	10	10
California	5	5 ¹	30 ²	30 ²	30 ²
Colorado	Other ³	Other ³	Other ³	Other ³	Other ³
Connecticut	10	10	10	10	10
DC	3	10	10	10	10
Delaware	10	10	10	10	10
Florida	10	10	10	10	10
Georgia	10	10	10	10	10
Guam	10	10	10	10	10
Hawaii	10	10	10	10	10
Idaho	Other ⁴	Other ⁴	Other ⁴	Other ⁴	Other ⁴
Illinois	10	10	10 ⁵	10 ⁵	10 ⁵
Indiana	10	10	10	10	10
Iowa	10	10	10	10	10
Kansas	10	10	10	10	10
Kentucky	10	10	10	10	10
Louisiana	10	10	10	10	10
Maine	10	10	10	10	10
Maryland	10	10	10	10	10
Massachusetts	14	14	14	14	30
Michigan	10	10	10	10	10
Minnesota	10	10	10	10	10
Mississippi	10	10	10	10	10
Missouri	10	10	10	10	10
Montana	10 ⁶	10 ⁶	10 ⁶	10 ⁶	10 ⁶
Nebraska	10	10	10	10	10
Nevada	10	10	10	10	10
New Hampshire	10	10	10	10	10
New Jersey	10	10	10	10	10
New Mexico	5	5	5	5	5
New York	Other ⁷	Other ⁷	Other ⁷	Other ⁷	Other ⁷
No. Mariana Islands	10	10	10	10	10
North Carolina	5	5	5	5	10 ⁸
North Dakota	10	10	10	10	10
Ohio	10	10	10	10	10
Oklahoma	10	10	10 ⁹	10 ⁹	10 ⁹
Oregon	10	10	10	10	10
Pennsylvania	10	10	10	10	10
Puerto Rico	10	10	10	10	10
Rhode Island	10	10	10	10	10
South Carolina	10	10	10	10	10

Table E-4. Within How Many Days the Family Must Notify the Agency of Changes, 2015-2019

State/Territory*	2015	2016	2017	2018	2019
South Dakota	10	10	10	10	10
Tennessee	10	10	10	10	10 ¹⁰
Texas	10	14	14	14	14
Utah	10	10	10	10	10
Vermont	10	10	10	10	10
Virgin Islands	10 ¹¹	10 ¹¹	10 ¹¹	10 ¹¹	10 ¹¹
Virginia	5	10	10	10	10
Washington	10 ¹²	10 ¹²	10 ¹²	10 ¹²	10 ¹²
West Virginia	5	5	5	5	5
Wisconsin	10	10	10	10	10
Wyoming	10	10	10	10	10

Source: CCDF Policies Database. Data as of October 1 of each year.

* Each State/Territory was asked to review and verify the accuracy of the 2019 data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2019 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the 2019 data in the tables, see table I.B in the report.

¹ Families must report changes in income, family size, and need within five days, unless they receive care based on child protective services, risk of abuse, risk of neglect, risk of exploitation, homelessness, or receipt of cash assistance.

² Participants must report and verify changes in income that exceed 85 percent of the state median income within 30 days of the change.

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 Parents must report changes by the 10th day of the month following the month in which the change occurred.

⁵ Clients must report changes that may effect eligibility within 10 days of the change. Clients must report a job loss or a break in activity within 30 days to maintain eligibility through grace period provisions.

⁶ Parents must report a change in provider within one business day.

⁷ The client must report changes immediately.

⁸ Recipients must report changes to the state within 10 business days from the date of the change.

⁹ Recipients must only report when income exceeds the eligibility threshold.

¹⁰ At-risk child-only, Transitional Child Care, and Smart Steps families are not required to report changes during the eligibility period. All other families have to report changes within 10 days.

¹¹ The parent must notify the department of any change in family circumstances immediately but not later than 10 days from the occurrence.

¹² A change in providers must be reported within five days.

Table E-5. Redetermination Period (in months), 2015-2019¹

State/Territory*	2015	2016	2017	2018	2019
Alabama	12 ²	12 ²	12 ²	12 ²	12 ²
Alaska	6	6	12	12	12
American Samoa	6	6	6	6	6
Arizona	6	12	12	12	12
Arkansas	12	12	12	12	12
California	12 ³	12⁴	12	12	12
Colorado	12 ⁵	12 ⁵	12 ⁵	12 ⁵	12 ⁵
Connecticut	12	12	12	12	12
DC	12	12	12	12	12
Delaware	12 ⁶	12 ⁶	12 ⁶	12 ⁶	12⁷
Florida	12 ⁸	12⁹	12 ⁹	12 ⁹	12 ⁹
Georgia	12	12	12	12	12
Guam	12	12	12	12	12
Hawaii	6	6	6	6	6
Idaho	6 ¹⁰	12	12	12	12
Illinois	6 ¹¹	6 ¹¹	6 ¹¹	12	12
Indiana	6	12¹²	12 ¹²	12 ¹²	12 ¹²
Iowa	6 ¹³	12¹⁴	12 ¹⁴	12¹⁵	12 ¹⁵
Kansas	12	12	12	12	12
Kentucky	12 ¹⁶	12	12	12	12
Louisiana	12	12	12	12¹⁷	12 ¹⁷
Maine	12 ¹⁸	12 ¹⁸	12 ¹⁸	12 ¹⁸	12 ¹⁸
Maryland	12	12	12	12	12
Massachusetts	12 ¹⁹	12 ¹⁹	12 ¹⁹	12	12
Michigan	12	12	12	12	12
Minnesota	6 ²⁰	6 ²⁰	6 ²⁰	12²¹	12 ²¹
Mississippi	12 ²²	12	12	12	12
Missouri	12	12	12	12	12
Montana	12	12	12	12	12
Nebraska	12	12	18²³	18 ²³	18 ²³
Nevada	12 ²⁴	12	12	12	12
New Hampshire	12	12	12	12	12
New Jersey	12	12	12	12	12
New Mexico	6	12	12	12	12
New York	12	12	12	12	12
No. Mariana Islands	12	12	12	12	12
North Carolina	12	12	12	12	12
North Dakota	6	12	12	12	12
Ohio	12 ²⁵	12 ²⁵	12 ²⁵	12 ²⁵	12 ²⁵
Oklahoma	6 ²⁶	12	12	12	12
Oregon	12	12	12	12	12
Pennsylvania	6	12	12	12	12
Puerto Rico	6	12	12	12	12
Rhode Island	12 ²⁷	12 ²⁷	12²⁸	12 ²⁸	12 ²⁸
South Carolina	12 ²⁹	12	12	12	12

Table E-5. Redetermination Period (in months), 2015-2019 ¹

State/Territory*	2015	2016	2017	2018	2019
South Dakota	6 ³⁰	12	12	12	12
Tennessee	6 ³¹	12	12	12	12
Texas	6 ³²	12	12	12	12
Utah	6	12	12	12	12
Vermont	12	12	12	12	12
Virgin Islands	12	12	12	12	12
Virginia	12	12	12	12	12
Washington	12	12	12	12	12
West Virginia	6	6	6	12	12
Wisconsin	6	12	12	12	12 ³³
Wyoming	6	12	12	12	12

Source: CCDF Policies Database. Data as of October 1 of each year.

* Each State/Territory was asked to review and verify the accuracy of the 2019 data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2019 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the 2019 data in the tables, see table I.B in the report.

¹ The redetermination period is how often the family's eligibility must be reviewed in order to continue receiving care.

² The redetermination period may be shorter than 12 months if the parent's authorized activity will last fewer than 12 months or if the parent fails to comply with program requirements.

³ 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.

⁴ 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 six months, at which point the family must be redetermined eligible under a different need criteria.

⁵ If children receiving care are also enrolled in a Head Start or Early Head Start program, their redetermination period will be aligned with the Head Start or Early Head Start program year. This may result in a redetermination period that is longer than 12 months, though the redetermination period cannot be shorter than 12 months.

⁶ Parents must complete an interim form every six months.

⁷ Parents must complete an interim form every six months. Redetermination may be set for a shorter period if the client provides a written statement verifying the length of time requested for care. The statement may be from the parent or caretaker, a medical professional verifying care required for a special need, or the state verifying the length of time required to prevent child abuse or neglect.

⁸ Redetermination for families in TANF and protective services must be completed every six months. Each coalition must also conduct redetermination every six months for half of all other families receiving subsidies, using statistically valid random sampling to select families. Redetermination periods for the remaining families may vary by coalition, but must be completed at least every 12 months.

⁹ Redetermination for families in TANF must be completed every six months.

¹⁰ Redetermination is completed at least every six months. Redetermination is completed every three months for protective service cases.

¹¹ Families must be redetermined every six months except when parents are enrolled in an education or training program that lasts less than six months or the family has a service plan that indicates the activity lasts less than six months. Families must be redetermined every 12 months when the children are in a collaborative child care arrangement between child care and early education providers. If the participant has not worked two full pay periods at the time of application or redetermination, redetermination is required in three months.

¹² Redetermination is required at least every 53 weeks. At redetermination, if a family's income exceeds the eligibility threshold due to a temporary fluctuation in income that is expected to last for 8 weeks or less, the family will be allowed an additional 13 weeks to update their income.

¹³ Families are certified for a period of up to six months. Families may have shorter certification periods depending on their need for child care.

¹⁴ Families are certified for a period of 12 months, except when the applicant meets one of three criteria at the time of application. If the applicant is conducting a job search, then the family is certified for a period of 30 days. If the child who will be receiving care will turn 13 within 6 months after the end of a 12-month certification period, then the family is certified for a period of up to 18 months. For families attending post-secondary education, if the 24-month funding limit will be reached within 6 months after the end of a 12-month period, then the family is certified for a period of up to 18 months.

¹⁵ Families are certified for a period of 12 months, except when the applicant meets one of two criteria at the time of application. If the child who will be receiving care will turn 13 within 6 months after the end of a 12-month certification period, then the family is certified for a period of up to 18 months. For families attending post-secondary education, if the 24-month funding limit will be reached within 6 months after the end of a 12-month period, then the family is certified for a period of up to 18 months.

¹⁶ Redetermination for protection and permanency cases is every six months.

¹⁷ Households with children between the ages of three and four are certified for 24 months.

¹⁸ Full redetermination is done at 12 months. At six months, the family must indicate that the information on file is still correct.

¹⁹ 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 weeks (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, a natural disaster, etc.

²⁰ Redetermination of eligibility for some high school students under the age of 21 is deferred beyond 6 months, not to exceed 12 months, to the end of the student's school year.

²¹ Redetermination of eligibility for some high school students under the age of 21 may be deferred beyond 12 months, not to exceed 24 months, to the end of the student's school year.

²² Redetermination of a working parent's eligibility occurs in the months of February, March, April, and May. Redetermination of a student parent's eligibility is established every semester or quarter. 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 rolleE-over based upon the established priorities.

²³ Redetermination must be conducted at least once every 18 months, but not more than once every 12 months.

²⁴ Redetermination for minor students is required every school period (i.e. semester or quarter).

²⁵ The eligibility period extends to the Saturday after the last day of the 12th month of eligibility.

²⁶ Redetermination is completed every 6 months, except for families receiving TANF or a state supplemental payment, in which case redetermination is completed every 12 months.

²⁷ Certification periods cannot exceed 12 months. Income eligible families are subject to redetermination every 6 to 12 months depending on employment circumstances. For those with a 12-month certification period, a 6-month interim report is required.

²⁸ The eligibility period cannot be less than 12 months. Benefits must be redetermined through the recertification process prior to the end of the 12-month period.

²⁹ Child care is authorized for 26 weeks at a time for TANF recipients.

³⁰ 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 receive one year of continuous eligibility.

³¹ The redetermination period for TANF families is 12 months.

³² Policy coded for Gulf Coast Region.

³³ The recipient may complete an early renewal after the start of the 11th month and prior to the end of the 12-month eligibility period if he or she has stated his or her consent to complete an early renewal in order to align the child care subsidy eligibility period with the eligibility period of another income assistance program.

Table E-6. If the State Uses a Waiting List When Needed, 2015-2019 ¹

State/Territory*	2015	2016	2017	2018	2019
Alabama	Yes	Yes	Yes	Yes	Yes
Alaska	Yes ²	Yes ²	Yes ²	Yes ²	Yes ²
American Samoa	Yes	Yes	Yes	Yes	Yes
Arizona	Yes	Yes	Yes	Yes	Yes
Arkansas	Yes	Yes	Yes	Yes	Yes
California	Yes ³	Yes ³	Yes ³	Yes ³	Yes ³
Colorado	Yes ⁴	Yes ⁴	Yes ⁴	Yes ⁴	Yes ⁴
Connecticut	Yes	Yes	Yes	Yes	Yes
DC	Yes	Yes	Yes	Yes	Yes
Delaware	Yes ⁵	Yes ⁵	Yes ⁵	Yes ⁵	Yes ⁵
Florida	Yes	Yes	Yes	Yes	Yes
Georgia	No	No	No	No	No
Guam	Yes	Yes	Yes	Yes	Yes
Hawaii	No	No	No	No	No
Idaho	No	No	No	No	No
Illinois	No	No	No	No	No
Indiana	Yes	Yes	Yes	Yes	Yes
Iowa	Yes	Yes	Yes	Yes	Yes
Kansas	Yes	Yes	Yes	Yes	Yes
Kentucky	No	No	No	No	No
Louisiana	Yes	Yes	Yes	Yes	Yes
Maine	Yes	Yes	Yes	Yes	Yes
Maryland	Yes	Yes	Yes	Yes	Yes
Massachusetts	Yes	Yes	Yes	Yes	Yes
Michigan	No	No	No	No	No
Minnesota	Yes	Yes	Yes	Yes	Yes
Mississippi	Yes	Yes	Yes	Yes	Yes
Missouri	Yes	Yes	Yes	Yes	Yes
Montana	Yes ⁶	Yes ⁶	Yes ⁶	Yes ⁶	Yes ⁶
Nebraska	No	No	No	No	No
Nevada	Yes	Yes	Yes	Yes	Yes
New Hampshire	Yes	Yes	Yes	Yes	Yes
New Jersey	Yes	Yes	Yes	Yes	Yes
New Mexico	Yes	Yes	Yes	Yes	No
New York	Yes ⁷	Yes ⁷	Yes ⁷	Yes ⁷	Yes ⁷
No. Mariana Islands	No	No	Yes	Yes	Yes
North Carolina	Yes	Yes	Yes	Yes	Yes
North Dakota	No	No	No	No	No
Ohio	No	No	No	No	No
Oklahoma	No	No	No	No	No
Oregon	Yes	Yes	Yes	Yes	Yes
Pennsylvania	Yes	Yes	Yes	Yes	Yes
Puerto Rico	Yes	Yes	Yes	Yes	Yes
Rhode Island	No	No	No	No	No
South Carolina	No	No	No	No	No
South Dakota	Yes	Yes	Yes	Yes	Yes
Tennessee	No	No	No	No	No

Table E-6. If the State Uses a Waiting List When Needed, 2015-2019 ¹

State/Territory*	2015	2016	2017	2018	2019
Texas	Yes	Yes	Yes	Yes	Yes
Utah	No	No	No	No	No
Vermont	No	No	No	No	No
Virgin Islands	Yes	Yes	Yes	Yes	Yes
Virginia	Yes	Yes	Yes	Yes	Yes
Washington	Yes	Yes	Yes	Yes	Yes
West Virginia	No	No	No	No	No
Wisconsin	No	No	No	No	No
Wyoming	No	No	No	No	No

Source: CCDF Policies Database. Data as of October 1 of each year.

* Each State/Territory was asked to review and verify the accuracy of the 2019 data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2019 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the 2019 data in the tables, see table I.B in the report.

¹ 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. Exemptions to the waiting list requirements are not shown in this table.

² 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.

³ Policy coded for Non-CalWORKs Alternative Payment Program. 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.

⁴ 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. Counties also have the option to freeze enrollment.

⁵ 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.

⁶ A statewide waiting list is maintained for non-TANF families when the demand for non-TANF subsidies exceeds the resources.

⁷ Districts may maintain waiting lists when funds are not available for all eligible families.

Table E-7. Copayment Amount for a Three-Person Family Earning \$15,000 Annually, with a Single Parent with a Two-Year-Old Child and a Four-Year-Old Child in Full-Time Care (Monthly Dollar Amounts), 2015-2019 ¹

State/Territory*	2015	2016	2017	2018	2019
Alabama	91	91	91	0	0
Alaska	24	24	24	24	24
American Samoa ²	0	0	0	0	0
Arizona	43	43	43	43	43
Arkansas ³	0	0	0	0	0
California	0	0	0	0	0
Colorado ⁴	13	13	13	13	13
Connecticut	25	25	25	25	25
DC	48	48	0	0	0
Delaware ⁵	115	115	115	115	50
Florida ⁶	52	52	52	52	36
Georgia ⁷	138	138	138	62	62
Guam ⁸	0	0	0	0	0
Hawaii ⁹	414	414	446	446	446
Idaho	80	80	80	80	80
Illinois	Not eligible	35	35	36	36
Indiana ¹⁰	0	0	0	0	0
Iowa ¹¹	0	0	0	0	0
Kansas	22	22	22	22	22
Kentucky	108	108	108	108	108
Louisiana ¹²	158	0	0	0	0
Maine	63	63	63	63	63
Maryland ¹³	103	103	103	36	36
Massachusetts	65	65	65	65	65
Michigan	54	65	0	0	0
Minnesota	4	0	0	0	0
Mississippi	65	77	77	67	67
Missouri ¹¹	132	132	132	132	132
Montana	13	13	13	25	25
Nebraska	0	0	0	0	0
Nevada ¹⁴	56	56	56	56	81
New Hampshire	59	59	59	59	59
New Jersey	0	0	0	0	0
New Mexico	59	59	59	57	56
New York ¹⁵	65	65	65	65	65
No. Mariana Islands	21	21	21	21	21
North Carolina	125	125	125	125	125
North Dakota	38	75	39	39	41
Ohio	0	0	0	0	0
Oklahoma	95	95	95	95	0
Oregon	81	81	81	81	81
Pennsylvania	74	74	74	74	74
Puerto Rico ¹⁶	66	127	127	127	127
Rhode Island	0	0	0	0	0

Table E-7. Copayment Amount for a Three-Person Family Earning \$15,000 Annually, with a Single Parent with a Two-Year-Old Child and a Four-Year-Old Child in Full-Time Care (Monthly Dollar Amounts), 2015-2019 ¹

State/Territory*	2015	2016	2017	2018	2019
South Carolina ¹⁷	95	95	52	52	52
South Dakota ⁷	0	0	0	0	0
Tennessee ¹⁸	151	151	151	159	159
Texas ¹⁹	160	85	85	85	85
Utah	18	0	0	0	0
Vermont ²⁰	0	0	0	0	0
Virgin Islands	0	0	0	0	0
Virginia ²¹	62	62	62	62	62
Washington	15	15	15	15	15
West Virginia	108	108	108	119	119
Wisconsin ²²	60	60	57	55	58
Wyoming	0	0	0	0	0

Source: CCDF Policies Database. Data as of October 1 of each year.

* Each State/Territory was asked to review and verify the accuracy of the 2019 data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2019 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the 2019 data in the tables, see table I.B in the report.

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 earnings level shown (\$15,000) 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 American Samoa serves only families with income below the Federal Poverty Guidelines and waives the copayment for all participating families.

³ In 2015, copayment amounts are based on center rates for providers with no additional quality incentive rating in Pulaski County. All new providers must be certified at Better Beginnings Star level 1 or higher. Providers already participating in the program may continue to provide care with no Better Beginnings quality incentive rating through January 1, 2016. In 2016 and 2017, copayment amounts are based on center rates for providers certified at Better Beginnings Star level 1 in Pulaski County. In 2018 and 2019, copayment amounts are based on rates for providers certified at Better Beginnings Star level 1 in Urban counties.

⁴ Copayment amounts based on income eligibility thresholds for Denver. In 2018 and 2019, copayment amounts are based on income eligibility thresholds for Denver and Tier 1 child care center rates. Parent fees are reduced by 20 percent if the child is attending a provider that is rated in the top three levels of the state's quality rating system.

⁵ Copayment amounts based on center reimbursement rates for New Castle.

⁶ Copayment amounts for Miami-Dade County.

⁷ Copayment amounts are rounded down to the closest whole dollar.

- ⁸ Copayment amounts based on reimbursement rates used for all providers.
- ⁹ Copayment amounts based on reimbursement rates for licensed centers and center-based infant and toddler care.
- ¹⁰ Copayment amounts based on first year of assistance.
- ¹¹ Copayments are calculated using a multiplier of 22 days per month.
- ¹² Copayment amounts based on center reimbursement rates. In 2016, 2017, 2018, and 2019, copayments are calculated using a multiplier of 22 days per month.
- ¹³ Copayment amounts for center care in the Baltimore City Region.
- ¹⁴ Copayment amounts based on licensed center reimbursement rates for Clark County. In 2018 and 2019, copayments are calculated using a multiplier of 22 days per month.
- ¹⁵ Copayment amounts for New York City.
- ¹⁶ In 2016, 2017, 2018, and 2019, copayment amounts are for center-based care.
- ¹⁷ Copayments are calculated using a multiplier of 4.33 weeks per month.
- ¹⁸ Copayments are calculated using a multiplier of 4.3 to convert weekly rates to monthly rates.
- ¹⁹ Copayment amounts and income eligibility thresholds for the Gulf Coast Region.
- ²⁰ Copayment amounts based on licensed center reimbursement rates. Copayments are calculated using a multiplier of 4.3 to convert weekly rates to monthly rates.
- ²¹ Copayment amounts are based on income eligibility thresholds for Group III. Copayment amounts are rounded down to the closest whole dollar.
- ²² Copayments are calculated using a multiplier of 4.3 to convert weekly rates to monthly rates. In 2016, for counties participating in the state's Electronic Benefit Transfer card pilot program, each family is assigned a base copayment determined by the family's monthly child care hours with an additional per-child amount determined by the monthly hours for the individual child. In 2018 and 2019, the family copayment is calculated multiplying an hourly copayment amount (determined by the number of children in care) by the total number of hours of subsidized care for all children in the household. Maximum monthly copayments for each child are calculated by multiplying the hourly copayment by 152 hours of care.

Table E-8. Maximum Licensed Center Reimbursement Rate for Toddlers (Monthly Dollar Amounts), 2015-2019¹										
State/Territory*	2015		2016		2017		2018		2019	
	Base Rate	Highest Rate	Base Rate	Highest Rate	Base Rate	Highest Rate	Base Rate	Highest Rate	Base Rate	Highest Rate
Alabama ²	442	442	468	468	468	468	581	637	581	637
Alaska ³	800	800	800	800	800	800	800	800	800	800
American Samoa	180	180	180	180	180	180	180	180	180	180
Arizona ⁴	576	634	576	634	576	634	576	692	796	955
Arkansas ⁵	531	664	578	664	578	664	578	664	578	664
California ⁶	889	889	889	889	1,039	1,039	1,124	1,124	1,124	1,124
Colorado ⁷	672	888	883	1,300	883	1,300	883	1,300	1,083	1,576
Connecticut ⁸	1,036	1,088	1,036	1,088	1,036	1,088	1,036	1,088	1,634	1,716
DC ⁹	1,008	1,287	1,008	1,287	1,071	1,432	1,418	2,035	1,418	2,035
Delaware ¹⁰	574	574	574	574	574	574	574	574	652	652
Florida ¹¹	450	540	450	540	518	622	518	622	518	622
Georgia ¹²	559	615	559	699	559	699	559	783	624	874
Guam	450	450	450	450	450	450	575	575	575	575
Hawaii ¹³	675	710	675	710	740	919	740	919	740	919
Idaho ¹⁴	492	492	623	623	623	623	623	623	650	650
Illinois ¹⁵	851	851	851	851	851	851	887	887	887	887
Indiana ¹⁶	906	1,179	906	1,270	906	1,270	906	1,270	966	1,352
Iowa ¹⁷	586	586	586	758	586	758	586	758	639	810
Kansas ¹⁸	395	395	468	468	468	468	468	468	508	508
Kentucky ¹⁹	520	520	542	542	542	542	542	542	585	607
Louisiana ²⁰	407	407	495	495	495	495	495	495	523	523
Maine ²¹	932	932	984	984	984	984	1,209	1,209	1,209	1,209
Maryland ²²	486	612	486	612	494	622	533	672	659	830
Massachusetts ²³	840	1,157	870	1,199	941	1,536	984	1,607	1,018	1,663
Michigan ²⁴	433	607	433	607	477	737	477	737	477	737
Minnesota ²⁵	871	1,045	871	1,045	871	1,045	871	1,045	871	1,045
Mississippi ²⁶	326	357	326	357	326	357	480	480	480	480
Missouri ²⁷	364	437	413	495	413	495	413	495	638	766

Table E-8. Maximum Licensed Center Reimbursement Rate for Toddlers (Monthly Dollar Amounts), 2015-2019¹										
State/Territory*	2015		2016		2017		2018		2019	
	Base Rate	Highest Rate	Base Rate	Highest Rate	Base Rate	Highest Rate	Base Rate	Highest Rate	Base Rate	Highest Rate
Montana ²⁸	649	649	662	662	662	662	866	866	866	866
Nebraska ²⁹	854	929	854	929	867	975	896	975	919	975
Nevada ³⁰	616	616	616	924	616	924	616	924	836	924
New Hampshire ³¹	888	888	888	888	909	909	909	909	909	909
New Jersey ³²	573	604	573	604	573	604	585	646	677	798
New Mexico ³³	590	1,140	590	1,140	590	1,140	590	1,140	590	1,140
New York ³⁴	1,105	1,105	1,161	1,161	1,161	1,161	1,161	1,161	1,365	1,365
No. Mariana Islands	350	350	400	400	400	400	425	425	425	425
North Carolina ³⁵	754	822	754	822	937	1,120	937	1,120	937	1,120
North Dakota	600	600	600	600	676	676	790	790	790	790
Ohio ³⁶	652	815	652	916	743	1,044	743	1,044	815	1,144
Oklahoma ³⁷	311	662	311	662	311	662	311	784	311	784
Oregon ³⁸	1,037	1,037	1,237	1,237	1,237	1,237	1,237	1,237	1,404	1,404
Pennsylvania ³⁹	772	951	772	951	772	991	792	1,010	792	1,072
Puerto Rico ⁴⁰	343	343	351	351	351	351	351	351	351	351
Rhode Island ⁴¹	815	815	839	839	839	839	860	1,116	860	1,116
South Carolina ⁴²	455	650	628	819	628	819	802	888	802	888
South Dakota ⁴³	685	685	685	685	685	685	702	702	702	702
Tennessee ⁴⁴	426	512	426	512	426	512	426	512	512	615
Texas ⁴⁵	613	670	613	670	613	670	626	758	626	830
Utah ⁴⁰	638	638	638	638	638	638	650	650	650	650
Vermont ⁴⁶	591	827	591	827	591	827	799	1,118	827	1,158
Virgin Islands	300	300	300	300	300	300	300	300	300	300
Virginia ⁴⁷	1,139	1,139	1,139	1,139	1,139	1,139	1,505	1,505	1,505	1,505
Washington ⁴⁸	789	907	805	926	853	981	853	981	1,278	1,534
West Virginia ⁴⁹	480	560	600	680	600	680	600	680	600	680
Wisconsin ⁵⁰	899	1,183	899	1,183	909	1,196	996	1,257	1,076	1,380
Wyoming ⁴⁰	531	531	531	531	531	531	531	531	573	573

Source: CCDF Policies Database. Data as of October 1 of each year.

* Each State/Territory was asked to review and verify the accuracy of the 2019 data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2019 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the 2019 data in the tables, see table I.B in the report.

¹ For the purposes of the tables, toddlers are defined as children through 35 months of age. 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 care provided for children with special needs 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.

² In 2015, 2016, and 2017, rates are center reimbursement rates for the Birmingham Region. In 2018 and 2019, base rates are center rates with no star rating and highest rates are star 5 rates for the Birmingham Region.

³ Center reimbursement rates for Anchorage.

⁴ Base rates are licensed center reimbursement rates for District 1. In 2015, 2016, and 2017, highest rates are licensed accredited center reimbursement rates for District 1. In 2018 and 2019, highest rates are for First Thing's First Quality First five-star centers for District 1.

⁵ Beginning January 1, 2014, all new providers must be certified at Better Beginnings Star level 1 or higher. Providers already participating in the program may continue to provide care with no Better Beginnings quality incentive rating through January 1, 2016. Beginning January 1, 2019, all new providers must be certified at Better Beginnings level 2 or higher. Providers already participating in the program have until July 1, 2021, to become certified at Better Beginnings Level 2 or higher. In 2016, 2017, 2018, and 2019, base rates are Better Beginnings quality incentive star level 1 rates for centers in urban areas. Highest rates are Better Beginnings quality incentive star level 3 rates for centers in urban areas.

⁶ Center reimbursement rates for Los Angeles.

⁷ In 2015, 2016, and 2017, base rates are reimbursement rates for centers with no additional rating in Denver. In 2018 and 2019, base rates are tier one rates for Denver. Highest rates are tier five 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 In 2015, 2016, and 2017, base rates are bronze tier center reimbursement rates and highest rates are gold tier center reimbursement rates. In 2018 and 2019, base rates are Developing or Preliminary Child Development Center reimbursement rates and highest rates are High Quality Child Development Center reimbursement rates. Rates were calculated using a multiplier of 22 to convert daily rates to monthly rates.

¹⁰ Center reimbursement rates for New Castle.

¹¹ Base rates are licensed or exempt center reimbursement rates for Miami-Dade Coalition. Highest rates are Gold Seal center reimbursement rates for the Miami-Dade Coalition.

¹² Base rates are center rates with no additional star rating for Zone 1, and highest rates are three-star center rates for Zone 1.

- ¹³ Base rates are licensed center reimbursement rates. Highest rates are licensed accredited center reimbursement rates.
- ¹⁴ In 2015, reimbursement rates are for Region 4. In 2016, 2017, and 2018, reimbursement rates are for Cluster 2. In 2019, reimbursement rates are for Cluster 3.
- ¹⁵ Licensed center reimbursement rates are 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, and highest rates are licensed, level four center reimbursement rates for Marion.
- ¹⁷ In 2016, 2017, 2018, and 2019, base rates are basic care center rates. Highest rates are Quality Rating System level 5 center rates.
- ¹⁸ Center reimbursement rates for Sedgwick County.
- ¹⁹ Licensed center reimbursement rates for Jefferson County. In 2015, 2016, and 2017, providers participating in the STARS for KIDS NOW program receive an initial achievement payment based on the number of children served, an annual payment based on the number of children served, and a monthly quality incentive payment per subsidized child based on the percentage of children served who are receiving subsidies and the age of the child. These payments also vary based on the STARS level, from level one through four. In 2018 and 2019, providers participating in the Kentucky All STARS program receive an initial achievement award, an annual award, and monthly subsidy enrollment award per subsidized child based on the age of the child. These payments vary based on the STARS level, from level one through five.
- ²⁰ The state authorizes a maximum 22 days per month. The multiplier for converting maximum daily rates to maximum monthly rates is 22. In addition to the rates shown, lump sum bonus payments are issued after the end of each calendar quarter to child care centers based on the center's star rating and a percentage of all child care subsidy payments received by the center during the prior quarter. Five star-rated centers are paid a lump sum equal to 20 percent of the total amount of child care subsidy payments received. In 2018 and 2019, base rates are one star Type III and Class M center rates and highest rates are five star Type III and Class M center rates.
- ²¹ Licensed center reimbursement rates for Cumberland County.
- ²² Base rates are unaccredited center reimbursement rates for Baltimore City. Highest rates are level five center reimbursement rates for Baltimore City.
- ²³ Base rates are reimbursement rates for centers with no additional rating in Region 6, and highest rates are QRIS level two and above center reimbursement rates for Region 6.
- ²⁴ Base rates are licensed blank-star and one-star center reimbursement rates, and highest rates are licensed five-star center reimbursement rates.
- ²⁵ Base rates are unaccredited center reimbursement rates for Hennepin County, and highest rates are four-star center reimbursement rates for Hennepin County.
- ²⁶ In 2015, 2016, and 2017, base rates are tier two center reimbursement rates and highest rates are tier one center reimbursement rates. In 2018 and 2019, rates are standard licensed child care center rates.
- ²⁷ 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.
- ²⁸ Center reimbursement rates for the Billings Region. In 2015, 2016, and 2017, rates were calculated using a multiplier of 4.33 to convert weekly rates to monthly rates. In 2018 and 2019, rates were calculated using a multiplier of 21.65 to convert daily rates to monthly rates.
- ²⁹ 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.

³⁰ In 2015, rates are licensed center reimbursement rates for Clark County. In 2016, 2017, 2018, and 2019, base rates are One Star licensed center reimbursement rates for Clark County and highest rates are Five Star licensed center reimbursement rates for Clark County. Rates were calculated using a multiplier of 22 to convert daily rates to monthly rates.

³¹ Licensed center reimbursement rates. Rates were calculated using a multiplier of 4.33 to convert weekly rates to monthly rates.

³² Base rates are licensed center reimbursement rates. In 2015, 2016, and 2017, highest rates are accredited center reimbursement rates. In 2018 and 2019, highest rates are Grow NJ Kids five-star rated provider rates.

³³ Base rates are licensed center reimbursement rates, and highest rates are FOCUS (the state's quality rating system) five-star center reimbursement rates.

³⁴ Day care center reimbursement rates are for Group 5 counties: New York, Bronx, Kings, Queens, and Richmond.

³⁵ Base rates are licensed three-star center reimbursement rates for Mecklenburg County, and highest rates are licensed five-star center reimbursement rates for Mecklenburg County.

³⁶ In 2015 and 2016, base rates are licensed center reimbursement rates for Cuyahoga County, and highest rates are five-star center reimbursement rates for Cuyahoga County. In 2017, 2018, and 2019, base rates are licensed center reimbursement rates for Franklin County, and highest rates are five-star center reimbursement rates for Franklin County.

³⁷ In 2015, 2016, and 2017, base rates are one-star center reimbursement rates for Enhanced Areas and highest rates are three-star center reimbursement rates for Enhanced Areas. In 2018 and 2019, base rates are one-star center reimbursement rates for all counties and three-star center reimbursement rates for all counties. The multiplier for converting maximum daily rates to maximum monthly rates is 23.

³⁸ Certified center reimbursement rates for Group Area A.

³⁹ In 2015 and 2016, base rates are reimbursement rates for centers with no additional rating for Philadelphia. In 2017, 2018, and 2019, base rate are for star one center reimbursement rates in Philadelphia. Highest rates are star four center reimbursement rates for Philadelphia.

⁴⁰ Licensed center reimbursement rates.

⁴¹ In 2015, 2016, and 2017, rates are for licensed center reimbursement rates. In 2018 and 2019, base rates are tier 1 licensed center reimbursement rates. Highest rates are tier 5 licensed center reimbursement rates.

⁴² Base rates are level C licensed center reimbursement rates for urban counties. Highest rates are level A+ highest achieving center reimbursement rates for urban counties. The highest reimbursement rates include a quality incentive bonus of an additional \$20 for full-time care and \$10 for part-time care. Providers who do not receive the quality incentive bonus are reimbursed at \$10 to \$20 less per week.

⁴³ Licensed center reimbursement rates for Minnehaha County.

⁴⁴ 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.

⁴⁵ Base rates are licensed center rates for the Gulf Coast Region. Highest rates are licensed four-star center rates for the Gulf Coast Region.

⁴⁶ Base rates are licensed center reimbursement rates. Highest rates are licensed five-star center reimbursement rates. Rates were calculated using a multiplier of 4.3 to convert weekly rates to monthly rates.

⁴⁷ Level two center reimbursement rates for Fairfax.

⁴⁸ Base rates are Early Achievers Level 1 licensed center reimbursement rates for Region 4, and highest rates are Early Achievers Level 5 licensed center reimbursement rates for Region 4. Rates were calculated using a multiplier of 23 days per month.

⁴⁹ Base rates are tier one center reimbursement rates. Highest rates are tier three center reimbursement rates. In 2016, 2017, 2018, and 2019, rates were calculated using a multiplier of 20 days per month.

⁵⁰ Base rates are licensed two-star center rates for Milwaukee, and highest rates are licensed five-star center rates for Milwaukee. In 2015 and 2016, the state used a multiplier of 4.3 to convert weekly rates to monthly rates. In 2017, the state used monthly rates. In 2018 and 2019, the state calculates maximum monthly reimbursement rates by multiplying the hourly reimbursement rates by 153 hours.

Table E-9. Maximum Licensed Family Child Care Home Reimbursement Rate for Toddlers (Monthly Dollar Amounts), 2015-2019 ¹										
State/Territory*	2015		2016		2017		2018		2019	
	Base Rate	Highest Rate	Base Rate	Highest Rate	Base Rate	Highest Rate	Base Rate	Highest Rate	Base Rate	Highest Rate
Alabama ²	360	360	381	381	381	381	520	572	520	572
Alaska ³	650	650	650	650	650	650	650	650	650	650
American Samoa	180	180	180	180	180	180	180	180	180	180
Arizona ⁴	433	477	433	477	433	477	433	520	563	676
Arkansas ⁵	487	664	578	664	578	664	578	664	578	664
California ⁶	741	741	741	741	846	846	867	867	867	867
Colorado ⁷	585	737	580	850	580	850	580	850	650	1,083
Connecticut ⁸	925	971	1,049	1,102	1,079	1,133	1,105	1,160	1,131	1,187
DC ⁹	687	860	687	860	793	974	1,093	1,512	1,093	1,512
Delaware ¹⁰	448	448	448	448	448	448	448	448	507	507
Florida ¹¹	405	486	405	486	466	559	466	559	466	559
Georgia ¹²	433	477	433	542	433	542	433	607	520	728
Guam	450	450	450	450	450	450	575	575	575	575
Hawaii ¹³	600	600	600	600	600	600	600	600	600	600
Idaho ¹⁴	460	460	555	555	555	555	555	555	555	555
Illinois ¹⁵	713	713	713	713	713	713	713	713	713	713
Indiana ¹⁶	542	706	542	758	542	758	542	758	542	758
Iowa ¹⁷	528	528	528	585	528	585	528	585	542	596
Kansas ¹⁸	347	347	383	383	383	383	383	383	451	451
Kentucky ¹⁹	455	455	477	477	477	477	477	477	542	542
Louisiana ²⁰	352	352	352	352	352	352	352	352	396	396
Maine ²¹	672	672	693	693	867	867	867	867	867	867
Maryland ²²	461	590	461	590	468	599	507	649	576	738
Massachusetts ²³	666	685	690	710	731	753	760	783	780	803
Michigan ²⁴	416	589	416	589	459	719	459	719	459	719
Minnesota ²⁵	615	738	615	738	615	738	615	738	615	738
Mississippi ²⁶	237	259	237	259	237	259	348	348	348	348
Missouri ²⁷	309	371	350	420	350	420	350	420	408	490

Table E-9. Maximum Licensed Family Child Care Home Reimbursement Rate for Toddlers (Monthly Dollar Amounts), 2015-2019 ¹										
State/Territory*	2015		2016		2017		2018		2019	
	Base Rate	Highest Rate	Base Rate	Highest Rate	Base Rate	Highest Rate	Base Rate	Highest Rate	Base Rate	Highest Rate
Montana ²⁸	563	563	574	574	574	574	650	650	650	650
Nebraska ²⁹	624	667	624	667	624	693	650	693	650	693
Nevada ³⁰	594	594	594	770	594	770	594	770	693	770
New Hampshire ³¹	725	725	725	725	725	725	725	725	725	725
New Jersey ³²	527	550	527	550	527	550	527	550	527	550
New Mexico ³³	464	714	464	714	464	714	464	714	464	714
New York ³⁴	693	693	802	802	802	802	802	802	849	849
No. Mariana Islands	350	350	400	400	400	400	425	425	425	425
North Carolina ³⁵	550	587	550	587	743	773	743	773	743	773
North Dakota ¹³	470	470	470	470	520	520	620	620	620	620
Ohio ³⁶	547	684	547	768	623	875	623	875	623	875
Oklahoma ³⁷	283	570	283	570	283	570	304	736	304	736
Oregon ³⁸	900	900	1,000	1,000	1,000	1,000	1,020	1,020	1,140	1,140
Pennsylvania ³⁹	642	821	642	821	642	861	658	877	658	939
Puerto Rico	270	270	270	270	270	270	270	270	270	270
Rhode Island ⁴⁰	672	672	736	736	736	736	762	785	789	958
South Carolina ⁴¹	377	494	498	585	498	585	585	620	585	620
South Dakota ⁴²	485	485	494	494	494	494	520	520	520	520
Tennessee ⁴³	366	439	366	439	366	439	366	439	439	525
Texas ⁴⁴	523	572	523	572	523	572	534	650	551	753
Utah ¹³	540	540	540	540	540	540	575	575	575	575
Vermont ⁴⁵	487	682	487	682	487	682	562	787	579	810
Virgin Islands	300	300	300	300	300	300	300	300	300	300
Virginia ⁴⁶	795	795	795	795	795	795	1,075	1,075	1,075	1,075
Washington ⁴⁷	744	856	920	1,104	938	1,126	938	1,126	945	1,134
West Virginia ⁴⁸	400	480	440	520	440	520	440	520	440	520
Wisconsin ⁴⁹	723	951	723	951	731	962	802	1,012	860	1,104
Wyoming ¹³	488	488	488	488	488	488	488	488	542	542

Source: CCDF Policies Database. Data as of October 1 of each year.

* Each State/Territory was asked to review and verify the accuracy of the 2019 data in the tables. Not all States/Territories were able to complete the review, especially in light of the review process for the 2019 tables falling at the same time as the COVID-19 pandemic. For more information on which States/Territories reviewed and verified the 2019 data in the tables, see table I.B in the report.

¹ For the purposes of the tables, toddlers are defined as children through 35 months of age. 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 care provided for children with special needs 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.

² In 2015, 2016, and 2017, rates are family day care rates for the Birmingham Region. In 2018 and 2019, base rates are family day care home reimbursement rates with no star rating for the Birmingham Region and highest rates are star 5 family day care home reimbursement rates for the Birmingham region.

³ Family home care rates for Anchorage.

⁴ Base rates are certified family child care home rates for District 1. Highest rates are accredited family child care home rates for District 1. In 2018 and 2019, highest rates are accredited or First Thing's First Quality First five star family child care home rates for District 1.

⁵ Beginning January 1, 2014, all new providers must be certified at Better Beginnings Star level 1 or higher. Providers already participating in the program may continue to provide care with no Better Beginnings quality incentive rating through January 1, 2016. In 2016, 2017, 2018, and 2019, base rates are Better Beginnings quality incentive level 1 rates for family child care homes in urban areas. Highest rates are Better Beginnings quality incentive level 3 rates for family child care homes in urban areas.

⁶ Licensed family child care home rates for Los Angeles.

⁷ Highest rates are tier five family child care home rates for Denver. In 2015, base rates are reimbursement rates for family child care homes with no additional rating for Denver. In 2016 and 2017, base rates are tier zero family child care home rates for Denver. In 2018 and 2019, base rates are tier one home rates for Denver.

⁸ 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.

⁹ In 2015, 2016, and 2017, base rates are bronze tier family child care home reimbursement rates. Highest rates are gold tier family child care home reimbursement rates. In 2018 and 2019, base rates are Developing or Preliminary Child Development Homes reimbursement rates. Highest rates are High Quality Child Development Homes reimbursement rates. Rates were calculated using a multiplier of 22 to convert daily rates to monthly rates.

¹⁰ Licensed family child care home rates for New Castle.

¹¹ Base rates are licensed family child care home reimbursement rates for the Miami-Dade Coalition. Highest rates are Gold Seal family child care home rates for the Miami-Dade Coalition.

¹² Base rates are family child care home rates with no additional star rating for Zone 1, and highest rates are three-star family child care home rates for Zone 1.

¹³ Licensed family child care home rates.

¹⁴ In 2015, rates are for family child care homes in Region 4. In 2016, 2017, and 2018, rates are for family child care homes in Cluster 2. In 2019, rates are for family child care homes in Cluster 3.

¹⁵ 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.

¹⁶ Base rates are licensed family child care home rates for Marion, and highest rates are licensed, level four family child care home rates for Marion.

¹⁷ In 2015, rates are registered Child Development Home category A and B rates. In 2016, 2017, 2018 and 2019, base rates are registered Child Development Home category A and B basic rates. Highest rates are registered Child Development Home category A and B Quality Rating System level 5 rates.

¹⁸ Licensed family child care home rates for Sedgwick County.

¹⁹ Certified family child care home rates for Jefferson County. Providers participating in the STARS for KIDS NOW program receive an initial achievement payment, an annual payment, and a monthly quality incentive payment per subsidized child based on the age of the child. In 2015, 2016, and 2017, these payments vary based on the STARS level, from level one through four. In 2018 and 2019, these payments vary based on the STARS level, from level one through five.

²⁰ This state authorizes a maximum of 22 days per month. The multiplier for converting maximum daily rates to maximum monthly rates is 22.

²¹ Licensed family child care home rates for Cumberland County.

²² Base rates are unaccredited family child care home rates for Baltimore City. Highest rates are level five family child care home rates for Baltimore City.

²³ Base rates are reimbursement rates for systems family child care homes with no additional rating in Region 6. Highest rates are QRIS level two and above family child care home rates for Region 6.

²⁴ Base rates are licensed blank-star and one-star family child care home reimbursement rates. Highest rates are licensed five-star family child care home reimbursement rates.

²⁵ Base rates are licensed unaccredited family child care home rates for Hennepin County. Highest rates are licensed four-star family child care home rates for Hennepin County.

²⁶ In 2015, 2016, and 2017, base rates are tier two family child care home rates and highest rates are tier one family child care home rates. In 2018 and 2019, rates are for standard family child care homes.

²⁷ Base rates are licensed family home rates for St. Louis County. Highest rates are licensed accredited family home rates for St. Louis County. All rates were calculated using a multiplier of 22 days per month.

²⁸ Family child care home rates for the Billings Region. In 2015, 2016 and 2017, rates were calculated using a multiplier of 4.33 to convert weekly rates to monthly rates. In 2018 and 2019, rates were calculated using a multiplier of 21.65 to convert daily rates to monthly rates.

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 In 2015, rates are licensed family child care home rates for Clark County. In 2016, 2017, 2018, and 2019, base rates are One Star licensed family child care home reimbursement rates for Clark County, and highest rates are Five Star licensed family child care home reimbursement rates for Clark County. Rates were calculated using a multiplier of 22 to convert daily rates to monthly rates.

³¹ Licensed family child care home rates. Rates were calculated using a multiplier of 4.33 to convert weekly rates to monthly rates.

- ³² Base rates are registered family child care home rates. Highest rates are accredited family child care home rates.
- ³³ Base rates are licensed family child care home reimbursement rates. Highest rates are FOCUS (the state's quality rating system) five-star family child care home rates or the state's Children, Youth and Families Department (CYFD) approved national accreditation reimbursement rates.
- ³⁴ Registered family day care rates for Group 5 counties: New York, Bronx, Kings, Queens, and Richmond.
- ³⁵ Base rates are licensed three-star family child care home rates for Mecklenburg County, and highest rates are licensed five-star family child care home rates for Mecklenburg County.
- ³⁶ In 2015 and 2016, base rates are licensed Type B home rates for Cuyahoga County, and highest rates are licensed five-star Type B home rates for Cuyahoga County. In 2017, 2018, and 2019, base rates are licensed Type B home rates for Franklin County, and highest rates are licensed five-star Type B home rates for Franklin County.
- ³⁷ Base rates are one-star family child care home reimbursement rates for Enhanced Areas. Highest rates are three-star family child care home reimbursement rates for Enhanced Areas. The multiplier for converting maximum daily rates to maximum monthly rates is 23.
- ³⁸ Certified child care home reimbursement rates for Group Area A.
- ³⁹ In 2015, 2016, and 2017, base rates are reimbursement rates for family child care homes with no additional rating for Philadelphia. In 2017, 2018, and 2019, base rates are star one family child care home rates for Philadelphia. Highest rates are star four family child care home rates for Philadelphia.
- ⁴⁰ In 2015, 2016, and 2017, rates are licensed family child care home rates. In 2018, base rates are step 1 licensed family child care home rates and highest rates are step 4 licensed family child care home rates. In 2019, base rates are step 1, star 1 licensed family child care home rates, and highest rates are step 4, star 5 licensed family child care home rates.
- ⁴¹ In 2015, base rates are level C+ licensed family child care home rates for urban counties. In 2016, 2017, 2018, and 2019, base rates are level C licensed family child care home rates for urban counties. Highest rates are level B+ enhanced licensed family child care home rates for urban counties.
- ⁴² Regulated family child care home rates for Minnehaha County.
- ⁴³ 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.
- ⁴⁴ Base rates are registered family child care home rates for the Gulf Coast Region. Highest rates are tier four family child care home rates for the Gulf Coast Region.
- ⁴⁵ Base rates are registered family child care home rates. Highest rates are registered five-star family child care home rates. Rates were calculated using a multiplier of 4.3 to convert weekly rates to monthly rates.
- ⁴⁶ Level two family day home rates for Fairfax.
- ⁴⁷ Base rates are Early Achievers Level 1 licensed family child care home reimbursement rates for Region 4, and highest rates are Early Achievers Level 5 licensed family child care home reimbursement rates for Region 4. Rates were calculated using a multiplier of 23 days per month.
- ⁴⁸ Base rates are tier one family child care home rates. Highest rates are tier three family child care home rates. In 2016, 2017, 2018, and 2019, rates were calculated using a multiplier of 20 days per month.
- ⁴⁹ Base rates are licensed two-star family child care home rates for Milwaukee, and highest rates are licensed five-star family child care home rates for Milwaukee. In 2015 and 2016, the state used a multiplier of 4.3 to convert weekly rates to monthly rates. In 2017, the state used a monthly rate. In 2018 and 2019, the state calculates maximum monthly reimbursement rates by multiplying the hourly reimbursement rates by 153 hours.

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