



## Review of the Child Care Subsidy Sections of the Maryland State Plan Thursday, March 15, 2018

<b>Workgroup Attendees</b>	
<b>Provide Stable Child Care Financial Assistance to Families</b>	<p><b>Eligible Children and Families</b></p> <p>pg. 36</p> <p>a) The CCDF program serves children from <b>two</b> (weeks/<b>months</b>/years) to <b>twelve</b> years (through age 12). <i>Note:</i> Do not include children incapable of self-care or under court supervision, who are reported below in (b) and (c).</p> <p>pg. 38</p> <p><input type="checkbox"/> Yes. If yes, define the job-search time limit, keeping in mind a minimum of 3 months is required to be provided when a parent experiences a non-temporary loss or cessation of eligible activity: Job search is limited to parents in an approved FIA activity. <b><u>Eligible parents experiencing a non-temporary loss or cessation of an eligible activity may job search for up to three months from the end date of the approved activity. The parent must gain an approved activity within three months. Loss of cessation does not include breaks between educational terms (vouchers are not discontinued for periods of non-participation, work or training/education, that are less than 3 months)</u></b></p> <p>Increasing Access for Vulnerable Children and Families</p> <p>pg. 47</p> <p>a) How does the Lead Agency define “children with special needs” and include a description of how services are prioritized: <b><u>A child who has been diagnosed as being physically or mentally incapable of self-care appropriate to the age of the child, as verified by the State, based on a determination by a physician, a licensed or certified psychologist, or a licensed social worker. Services for a child with special needs are given the same priority status as TANF, including not being waitlisted. A child with special needs may be served up to age 19.</u></b></p> <p>pg. 48</p> <p>a) Describe the procedures to conduct outreach for children experiencing homelessness (as defined by the CCDF) and their families. <b><u>Providers receive a quarterly newsletter, PARTNERS, that provides information on programs and resources to families. The state child care resource and referral network and State Licensing Offices provide training and information on resources available to families. State child care associations hold yearly conferences where agencies provide information and training. Written materials and website resources are provided to child care providers to share with families. Maryland EXCELS, the state’s quality rating and</u></b></p>



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	<p><u>improvement system, requires participants to develop a resource list that they share with families.</u></p> <p><u>Maryland provides a grant to the United Way and providers who serve medically fragile children to provide outreach to homeless families. The grant to United Way for Central Maryland provides a community model that addresses self-sufficiency and addresses items such as health to housing.</u></p> <p><u>Maryland also collaborates with Head Starts that give priority placement and outreach services to families experiencing homelessness.</u></p> <p><u>Maryland intends to explore the following suggestions made by its stakeholder groups:</u></p> <ul style="list-style-type: none"> <li>• <u>Sending regional emails informing the provider community and others of the importance of supporting the educational development of homeless children</u></li> <li>• <u>Establishing its own partnerships with organizations already in established partnerships with community partners such as:</u> <ul style="list-style-type: none"> <li>○ <u>ARC-Nany Newman</u></li> <li>○ <u>Volunteers of America</u></li> <li>○ <u>Catholic Charities</u></li> <li>○ <u>211</u></li> </ul> </li> <li>• <u>Conducting outreach to the local school systems to inform them of the availability of the child care subsidy program for eligible children, including those who are homeless.</u></li> </ul> <p>pg. 48</p> <p>a) Describe procedures to provide a grace period to comply with immunization and other health and safety requirements, including how the length of the grace period was established in consultation with the state, territorial, or tribal health agency for:</p> <ul style="list-style-type: none"> <li>○ Children experiencing homelessness (as defined by CCDF). Families have 60 days to comply with immunization <u>requirements for non-school age children using informal care.</u></li> <li>○</li> </ul> <p>Protection for Working Families</p> <p>pg. 50</p> <p>a) Describe the Lead Agency's policies and procedures in implementing the minimum 12-month eligibility and redetermination requirements, including when a family experiences a temporary change in activity. <u>Maryland issues 12 month vouchers for all children eligible to receive CCS services. Parents are asked to report any changes in income (exceeding 85% of SMI, non-temporary change in activity, additional child,</u></p>
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	<p><u>lower copayment, etc.) so the State can process those changes.</u></p> <p>b) How does the Lead Agency define “temporary change?” <u>The parent is no longer engaged in the approved activity as required to authorize CCS services and has not gained or resumed the activity within three (3) months.</u></p> <p>c) Provide the citation for this policy and/or procedure. <u>Maryland is promulgating the regulations to address this. It is currently being addressed at the Case Management level to avoid penalizing children by not being able to serve them during the promulgation process. MSDE anticipates revisions to COMAR by June 30, 2019.</u></p> <p>Option to discontinue assistance during the 12-month eligibility period.</p> <p>pg. 51</p> <p><input type="checkbox"/> Excessive unexplained absences despite multiple attempts by the Lead Agency or designated entity to contact the family and provider, including the prior notification of a possible discontinuation of assistance.</p> <p style="padding-left: 40px;">Define the number of unexplained absences identified as excessive: <u>10 consecutive business days without the knowledge of the provider or the Lead Agency being able to contact the family.</u></p> <p><b>Family Contribution to Payments</b></p> <p>pg. 55</p> <p>a) What is the effective date of the sliding-fee scale(s)? <b>January 1, 2017</b></p>
<p><b>Ensure Equal Access to Child Care for Low-Income Children</b></p>	<p>pg. 65</p> <p><input type="checkbox"/> Differential rate for <i>higher quality</i>, as defined by the state/territory. Describe: <u>The EXCELS Branch approves an additional cost for child care providers who reach levels 3 through 5 of Maryland EXCELS. The costs exceed the payment rates in §§B-D of Regulation 13A.14.06.11 when a provider has achieved a quality level. An additional percentage is added to the base reimbursement rate as indicated below.</u></p> <p><u>Tiered Reimbursement Percentages for Maryland EXCELS Rated Child Care Facilities and Family Child Care Homes.</u></p> <p><u>Children 0- 24 months old (Level 3 - 22%) (Level 4 - 37%) (Level 5 - 44%)</u></p> <p><b>Summary of Facts Used To Determine That Payment Rates Are Sufficient To Ensure</b></p>



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	<p><b>Equal Access</b> pg. 66</p> <p>a) Describe how a choice of the full range of providers pursuant to 98.30(e)(1) is made available; the extent to which child care providers participate in the CCDF system; and any barriers to participation, including barriers related to payment rates and practices. <u>Maryland families have access to a full range of child care provider types, if they can pay the out-of-pocket expense not covered by the approved subsidy amount and the required parental co-pay. For many Maryland families, the approved subsidy amount and the difference owed to the provider above subsidy reimbursement limits the range of accessible care. Maryland's current rate average statewide reimbursement is at the 11th percentile of the current MRS. Maryland's Governor is proposing an increase to at minimum the 20th percentile of all payment regions by July 2018. Maryland understands that this amount only allows customers eligible to receive subsidy to access 20% of the market accessed by parents not receiving CCDF assistance. Current legislation is being considered to gradually increase the percentile of subsidy reimbursement.</u></p> <p>pg. 67</p> <p>c) Describe how base payment rates enable providers to meet health, safety, quality, and staffing requirements under CCDF. <u>Maryland's current rate reimburses at the 11th percentile of the January 2017 MRS. Based on the percentage of subsidy reimbursement, Maryland's current reimbursement rate only allows for 11% or less of the child care market to meet health, safety, quality, and staffing requirements under CCDF. Maryland will increase provider payment rates per payment region to at minimum the 20th percentile of the current MRS by July 2018. Maryland will complete a new MRS by June 30, 2019. Current legislation is being considered to gradually increase the percentile of subsidy reimbursement over a three-year period.</u></p> <p>pg. 72</p> <p>b) Describe how the Lead Agency prioritizes increasing access to high-quality child care and development services for children of families in areas that have significant concentrations of poverty and unemployment and that do not have high-quality programs. <u>Maryland provides multiple entry points where CCS applicants can submit and or receive assistance with the completion of the application throughout Baltimore City. Parents receiving TCA are not subject to a wait list, the application process is expedited, and the parent can receive services if job searching and in an approved FIA activity.</u></p> <p><u>Maryland intends to further explore suggestions made by its stakeholders to:</u></p> <ul style="list-style-type: none"> <li>○ <u>Provide a differential payment above the subsidy amount for Priority 1 parents that choose an EXCELS Level 3, 4 or 5 provider in areas that have a significant concentration of poverty and unemployment.</u></li> <li>○ <u>Provide a differential payment amount above the EXCELS differential for</u></li> </ul>



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	<u>providers that serve Priority 1 customers.</u>