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Implementing the Child Care and Development Block Grant Reauthorization: A Guide for States
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Family-Friendly Policies

The CCDBG reauthorization includes important subsidy policy changes designed to reduce burdens for families trying to get and keep child care assistance. By minimizing reporting requirements and complexity that can result in families unduly losing their assistance, these improvements will help families have the stable, continuous child care that parents need to succeed on the job and that children need for their healthy development. These improvements can also facilitate partnerships between child care and other programs such as Early Head Start, Head Start, or prekindergarten that increase low-income families' access to high-quality early learning opportunities. In addition to the benefits for children and families, more streamlined subsidy policies can allow public agencies to operate more efficiently and effectively and better ensure program integrity.

In This Chapter:

- Meeting the Needs of Certain Populations, Priority Populations, and Parental Choice
- Eligibility Determination, Redetermination, and Protection of Working Parents
- Family Copayment Policies

MEETING THE NEEDS OF CERTAIN POPULATIONS, PRIORITY POPULATIONS, AND PARENTAL CHOICE

Key Provisions in the Law

Strategies to Improve Supply and Quality of Care for Target Populations

- States must describe in their state plans how they will implement strategies to increase the supply and improve the quality of child care for infants and toddlers, children in underserved geographic areas, children with disabilities, and children who receive care during non-traditional hours.
- State strategies may include alternative reimbursement rates to child care providers; direct contracts or grants to community-based organizations; certificates to parents; or other means determined by the state.
- States must describe in their plans how they will use investments to increase access to high-quality child care and prioritize those investments for children in areas with significant concentrations of poverty and unemployment and a lack of high-quality child care programs.

Parental Choice

- Parents must have a choice of enrolling their child in child care with a provider who has a grant or direct contract for providing child care services or receiving a child care certificate (or voucher) to use with a provider of their choice.
- New language clarifies that CCDBG law should not be considered to favor the use of grants or contracts over the use of child care certificates.

Priority Enrollment

- States must prioritize care for children in low-income families and children with special needs.
- States must have in place procedures for expedited enrollment of homeless children and children in foster care pending completion of documentation.

Implementation Considerations

Strategies to Increase the Supply and Quality of Child Care

The CCDBG Act focuses on improving access to high-quality care for those populations for whom access is most challenging. High-quality child care for infants and toddlers and children with disabilities is in short supply because it requires a highly prepared workforce, better provider-to-child ratios, small group size, special equipment, and additional space. These components involve additional costs that parents may not be able to support without help. In addition to such costs, there may be a lack of sufficient demand, difficulties in finding and keeping qualified staff, and increased operational or transportation costs that make it challenging to sustain a high-quality licensed child care program. License-exempt providers, the most-available option in some rural or economically disadvantaged communities or during non-traditional hours, may be as isolated as the families whose children they serve and in need of support to provide high-quality care.

States can address these shortages by targeting funds to support providers serving infants and toddlers, children with disabilities, children in underserved geographic areas, and children who receive care during non-traditional hours; offering incentives to encourage more providers to serve these populations; and supporting organizations that have experience in offering training and technical assistance to help providers serve these populations.

Direct Contracts. While CCDBG has always required states to offer parents a choice of care through direct contracts or grants or certificates, most CCDBG-funded care is paid for through certificates. In 2013, 90 percent of children receiving CCDBG-funded child care were served through certificates.[1] Yet, if designed well and funded adequately, direct contracts for child care offer opportunities to build capacity or improve the quality of care for targeted populations, including infants and toddlers and children with disabilities. As part of the contract, states can require that child care providers meet higher quality standards beyond basic licensing requirements. Contracts can be used:

- **To create or stabilize care in particular communities or for specific populations.** States have used contracts to promote high-quality care for teen parents, homeless families, parents who work non-traditional hours, children in protective care, children of migrant farmworkers, and infants and toddlers.
- **To create child care slots meeting quality standards,** above minimum child care licensing standards, such as better provider-to-child ratios and higher staff education or training requirements. States may require providers to meet national accreditation standards or higher levels of a state quality rating and improvement system (QRIS). Contracts in Vermont have required programs to be nationally accredited, earn four or five stars on the state's QRIS, and follow Head Start Program Performance Standards (if they are Head Start grantees).
- **To expand the availability of comprehensive services** through partnerships with Head Start or Early Head Start, or by providing additional resources to contracted providers to meet the costs of providing comprehensive services.
- **To extend the day or year of Head Start, Early Head Start, or state prekindergarten programs.** Contracts may be an important tool to facilitate Early Head Start-Child Care Partnerships by, for example, aligning CCDBG eligibility periods for children cared for in such partnerships.
- **To improve the quality of family child care** by awarding contracts through supportive family child care systems and increasing quality standards for participating family child care homes.

Massachusetts, Illinois, and New York City have all used contracts with family child care networks or systems to serve infants and toddlers in the subsidy system. Funds go directly to the network, and the network facilitates payments to individual providers caring for the children. Family child care networks provide administrative, professional development, and quality improvement support to individual family child care providers. Networks vary in size and operate as free-standing agencies or as programs of larger agencies serving children, some of which also serve children with subsidies in center-based child care.[2]

Direct contracts have the potential to offer more stable revenue to providers, who are then able to make investments in better-qualified teachers, supplies, materials, and other resources they may not have been able to afford. Contracts guarantee payment for a specific number of children, may guarantee payments over several years, and may be paid prospectively, which provides even more stability for a child care provider. However, it is critical that contracts are sufficiently funded; if states do not provide enough to meet the higher costs of a contract's requirements, it undermines the purpose of the contract.

Tiered Reimbursement. To further encourage the development of high-quality child care capacity for particular populations, states may provide tiered reimbursement or other financial incentives to those providers offering care for specific populations, during non-traditional hours, or in underserved geographic areas. As of 2014, 37 states have child care assistance systems that provide higher reimbursement rates to child care providers that meet specific quality requirements. Despite these efforts to incentivize care through tiered and varying rates, however, most states still do not have rates that reach the federally recommended 75th percentile of the market, even at their highest tiers, limiting options for high-quality care for families with subsidies. As of 2014, more than three-quarters of states offering tiered reimbursements did not reach the 75th percentile of the market rate at their highest payment level.[3]

Grants and Other Supports. States may consider start-up grants or equipment grants to centers, family child care homes, and license-exempt caregivers in underserved areas to improve quality. Providers who cannot afford basic materials and equipment have difficulty creating environments that support children's positive development.

Non-Traditional-Hour Care. Many parents work nonstandard hours (during evenings, nights, weekends) and/or have irregular, unpredictable schedules. In one study, roughly half of low-wage hourly workers reported working nonstandard schedules.[4] Yet there is an inadequate supply of licensed care during evenings and weekends, and significant barriers to addressing this unmet need. States can apply a range of strategies, which may include higher payment rates for providers during those hours or direct contracts to support extended-hour care. States can also support family, friend, and neighbor (FFN) caregivers, who are often the providers of care during non-standard hours. In the past, states such as California and Minnesota have offered targeted funding to organizations working with FFN providers. It is important to provide support that recognizes the wide variety of FFN providers and to design programs that meet their varied circumstances.

The CCDBG Act includes a number of other provisions related to increasing the supply and quality of care, particularly for certain target populations, outlined in the Quality Improvement section of this guide.

Priority Enrollment

The reauthorization did not change the requirement for states to prioritize services for children in low-income families and children with special needs. Both of those categories are defined by states. States may also choose to prioritize additional populations and may decide what strategies to use to prioritize care. In addition to prioritizing enrollment for these populations, states may pay higher rates for higher-quality care or waive copayments for poor families.

The reauthorization requires states to recognize the distinct challenges facing homeless families by permitting children in homeless families to enroll in the child care assistance program prior to having complete documentation and establishing a grace period to allow families to receive services while they take steps to comply with immunization and other health and safety requirements. States define "homeless" as it applies to this requirement and also have the flexibility to consider other high-needs populations that may be streamlined into the program.

Under CCDBG law, states may choose to expedite enrollment or use presumptive eligibility to allow families to enroll children quickly in care to meet parents' immediate employment needs. For example, states may consider allowing a period of 30 days for eligibility verification after care begins (provided that certain initial eligibility criteria are met) and establish policies to ensure that payments made for less than 30 days are not considered an improper payment. This type of strategy prevents administrative procedures from hindering access to care, so parents can quickly begin work while their children receive the care they need—and providers are assured of receiving payment.

ELIGIBILITY DETERMINATION, REDETERMINATION, AND PROTECTION OF WORKING PARENTS

Key Provisions in the Law

The CCDBG Act of 2014 includes several provisions that simplify eligibility policies to improve access and stability for families.

- Once a child has been determined eligible for child care assistance, states must consider the child eligible for a minimum of 12 months regardless of temporary changes in a parent's work, education or training activities, or family income, as long as income does not exceed 85 percent of state median income (SMI).

- States may not terminate child care assistance based on parental job loss or cessation of education and training unless they continue assistance for a period of at least three months to provide time for job search.
- States must describe how their redetermination procedures and policies do not require working parents, and in particular parents receiving Temporary Assistance to Needy Families (TANF), to disrupt employment in order to comply.
- States must demonstrate how they will take into account irregular fluctuations in parents' earnings when determining and redetermining eligibility.
- At redetermination, states must have policies in place to continue child care assistance at the beginning of the new eligibility period for parents who are working or attending job training or education but whose income exceeds the state's qualifying income eligibility and is below 85 percent of SMI.

With additional resources, states will be able to manage their caseloads not by depending on families to lose their assistance after only a few months—which has negative consequences for children's well-being and parents' employment—but by designing their programs in a way that truly works for families.

Implementation Considerations

To make subsidy policies work better for families, states will need to take a number of steps, including assessing the administrative bottlenecks, duplicative paperwork, and other requirements that may impede families' access to assistance; considering improved processes, technological solutions, and other strategies to address these barriers; and providing guidance and training to ensure consistent implementation of changes throughout the system, including at the local level and among individual caseworkers. These efforts should encompass all stages of the child care subsidy program—including application, eligibility determination, approval for assistance, interim reporting requirements, and redetermination—even if a particular stage is not explicitly addressed in the reauthorization, given that the stages are interrelated.

While these subsidy policy changes are good for children and parents and reduce administrative costs, they do entail some additional costs, since the changes enable families to retain child care assistance for longer periods. States will need increased resources to ensure that these changes do not result in more children being placed on waiting lists for assistance or certain groups of children being denied assistance. With additional resources, states will be able to manage their caseloads not by depending on families to lose their assistance after only a few months—which has negative consequences for children's well-being and parents' employment—but by designing their programs in a way that truly works for families.

Annual Eligibility

Prior to this reauthorization, states had the discretion to set their maximum eligibility period for child care assistance. As of this writing, states are roughly evenly divided between having six-month and 12-month eligibility periods—yet children commonly experience much shorter periods of assistance, and a modest increase in earnings or a brief period of unemployment may cause a family to lose child care assistance, resulting in a large increase in the family's child care costs. A recent study of administrative data across 35 states found that families use child care subsidies for relatively short time periods in most states, usually less than a year. In 31 states, the median length of subsidy receipt was between four and eight months. The study showed that the same families frequently return to the subsidy programs after they exit.[5] A recent study of child care subsidy receipt in Maryland found that, despite the state policy of 12-month (maximum) eligibility, only 35 percent of children were given eligibility periods of more than 48 weeks. In practice, clients were assigned shorter eligibility periods based on short-term training programs, temporary jobs, and other factors subject to caseworker discretion.[6]

Now, under the updated CCDBG law, all children determined eligible for child care assistance must be considered eligible for a minimum of 12 months, regardless of temporary changes in parental employment or participation in education or training, or income, as long as household income remains below 85 percent of SMI. The intent is to enable families to maintain their child care assistance—and their child care—during short-term or predictable changes in employment. Research suggests that longer authorizations reduce the risk of losing benefits, supporting stable parental employment and continuity of care for the child.[7] Annual eligibility has benefits for states and administering agencies as well. State and local agencies do not have to spend resources on frequent redeterminations for families whose circumstances have not changed and can better align their child care assistance programs with other programs in which CCDBG-eligible families commonly enroll, including Medicaid and the Supplemental Nutrition Assistance Program (SNAP) as well as Head Start, Early Head Start, and state prekindergarten. States will want to examine existing eligibility policies, as well as how they differ for families with different circumstances, such as those participating in education or training and those qualifying for child care under TANF, to ensure that 12-month eligibility is implemented in accordance with the new law.

Minimizing improper payments is an important priority for state administrators who must spend scarce resources appropriately. By federal definition, an improper payment (distinct from fraud) is one made in a way that is inconsistent with state or federal eligibility or payment policies. States should revise their eligibility and payment policies to reflect that federal law now establishes a minimum initial eligibility period of 12 months and allows families to retain assistance during temporary changes in employment or job training/education attendance, so that payments for care provided during those gaps in employment or education (including maternity leave, temporary disability, school semester breaks, etc.) are not considered improper payments.

Actualizing *continuous* 12-month eligibility depends on strong policies as well as caseworker training to understand the new policy requirement and how it relates to all families and their employment or education/training circumstances.

States will need to assess the *actual* eligibility periods granted to families under current policies to better understand situations in which families are granted shorter benefit periods and how to address any discrepancies between policy and implementation practices. States should also consider interim reporting requirements (discussed below) and how they may impede goals of continuous eligibility.

Interim Reporting

In between redeterminations, subsidy agencies commonly require parents to report changes in their circumstances that may affect their eligibility for (or the level of) benefits. In some cases, states require parents to report if they experience any one of a long list of changes—in income, work schedule, employment, residence, household composition, or child care provider—even if the change has little or no effect on their benefit. This type of policy places a significant burden on parents; on agencies, which have to process even minimal changes; and on child care providers, which must keep track of multiple adjustments to a family's status. Onerous reporting requirements and frequent reviews of eligibility result in many families receiving child care assistance for shorter periods of time than originally authorized.

While the reauthorization legislation does not address interim reporting requirements, the provision establishing minimum 12-month eligibility clearly signals the importance of facilitating families' continuous access to child care assistance for an extended time period. States should consider eliminating or simplifying interim reporting requirements to better achieve this objective. They should consider what reporting requirements are currently in place and assess whether they are necessary given the transition to more continuous eligibility inclusive of temporary changes in employment and income. If a state does not completely eliminate interim reporting, it should at least end any current practices requiring all information to be reported at interim periods and should not act on any changes that would decrease benefits until the next redetermination.

Other benefit programs offer models for how states can encourage continuous eligibility for child care assistance and minimize burdens for families. For example, SNAP only requires clients to report changes between redetermination periods if a household no longer meets federal income eligibility criteria for the program (income at or below 130 percent of the federal poverty level, or FPL). SNAP also gives families the option of reporting other changes, such as loss of income or increased number of household members, which could benefit the family by making it eligible for higher SNAP benefits. Similarly, states could make it easier for families receiving child care assistance to report changes that would benefit them—e.g., an increase in work hours that requires additional hours of care or a decrease in income that would reduce their parent fees. For example, West Virginia does not act on income changes reported before redetermination unless the parent is asking to reduce his or her parent fees.[8]

Assistance in the Event of Job Loss

The CCDBG legislation gives states the *option* of terminating assistance after a parent's job loss or cessation of education or training, but only if the state allows for a minimum of three months of job search prior to ending assistance. The Senate committee conference report on the CCDBG reauthorization law clarifies that this option should not be used unless there is "demonstrated evidence of prolonged cessation in work, education, or training activities" and states that the committee "strongly discourages States from exercising this option if the intended effect is to abruptly discontinue assistance if there are brief periods when a parent is not engaged in work, education, or training activities during the 12-month eligibility period."[9]

As states decide whether to employ this option, they should think of the dual-generation purpose of CCDBG. The vast majority of low-income families work, even if they experience periods of disruption in employment.[10] Meanwhile, children benefit from continuity when they participate in early childhood experiences that support their development. In fact, during periods of instability—such as a parent's job loss—children may be even more dependent on the stability of a trusted child care provider while their household is experiencing upheaval. Parents, too, may need more than three months to secure employment, or potentially decline an offer of employment if their ability to pay for child care is uncertain. According to the U.S. Department of Labor, half of unemployed persons find work within 14 weeks of losing a job, which is about 3.5 months.[11]

Redetermination Process

Periodically proving eligibility is common across benefit programs and can be important to ensure that individuals do not continue to receive benefits for which they are no longer eligible. However, how states implement eligibility redetermination, what they require of parents, and how often, are central to whether eligible clients are able to keep benefits easily. Overly burdensome redetermination requirements and processes not only cause eligible families to lose assistance, but also create significant administrative costs when families cycle off and on the program because of procedural problems (also known as "churn").

To ease this burden, the law states that compliance with the redetermination process must not force parents to disrupt employment. To achieve that goal, states can look to strategies that simplify the redetermination process to make it more accessible, including coordinating processes across work support programs since families commonly participate in more than one program.

Increased Accessibility. States can make the redetermination process (as well as the initial eligibility determination process) more accessible and less disruptive for families by offering processes electronically or via telephone, not requiring in-person visits, and/or offering services during nonstandard business hours.

Simplification and Streamlining. States can seek first to verify information from existing data sources and only ask parents to produce documentation as a last resort. Maryland's child care subsidy program, for example, instructs case managers not to request verification from families that is current and available in other systems. In Medicaid, states rely on information available through electronic databases and only ask for information they do not already have access to electronically.[12] And both Medicaid and SNAP consider elements that do not change, such as date of birth and Social Security numbers, to be "permanent" verifications that do not need to be re-verified. In CCDBG, some states ask parents for the same information every time the family's eligibility is assessed, regardless of whether it is likely to have changed—but a better strategy, which states are increasingly using, is to prepopulate renewal or interim change reporting forms with any information that the state already has and ask the family to note where information has changed.

Coordination Across Work Support Programs. Families receiving multiple public benefits—such as child care, SNAP, or Medicaid/CHIP—have the cumulative burden of redetermining eligibility for all programs. Families may undergo multiple, frequent redetermination processes owing to each system's distinct requirements. Systems often require families to provide the same information to multiple offices or caseworkers, creating unnecessary burden and confusion. Coordinating recertification across benefit programs can help eligible families retain benefits and help states reduce administrative burden.

New Hampshire has coordinated eligibility across SNAP, Medicaid, child care, and TANF, offering a single application for all four programs and aligning documentation and verification practices across programs. Families receive 12-month eligibility for child care, and when they receive multiple benefits, redetermination dates synchronize with SNAP, TANF, and Medicaid. At redetermination, families do not have to provide verification for items that have not changed since the initial eligibility determination (e.g., identity, date of birth). The state uses a simplified review form for redetermination. An online portal allows families to screen, apply for, and track multiple benefits, including child care.[13]

Income Eligibility

Under the new law, states can continue to set income eligibility limits for child care assistance at any level up to 85 percent of SMI. However, three provisions in the reauthorized law are intended to support stability for families by addressing increases in earnings. First, after families have initially been determined eligible, states are required to allow them to continue receiving assistance even if their income has increased above state income eligibility as long as it remains below 85 percent of SMI.

Second, states must design their eligibility and redetermination policies to consider irregular fluctuations in parents' earnings. States will want to design policies so that if families work overtime hours or additional hours at specific times of the year, they will not risk losing their child care assistance. Some states allow workers to average earnings over an extended period of time, while others allow workers to disregard additional income as long as clients can prove that it is temporary.[14] New Hampshire, for example, asks clients to provide their four most *representative* pay checks, rather than *recent* paychecks, so that eligibility determinations are not distorted by atypical or temporary fluctuations in pay.

Third, if at redetermination after 12 months, a child's household income is above the state's income eligibility threshold (but below 85 percent of SMI), the state must have in place policies and procedures to continue assistance for families for at least a graduated phase-out period. According to the ACF CCDF (draft) state plan preprint, states will be able to comply with this requirement by either establishing an income eligibility threshold at redetermination that is higher than that for initial eligibility (commonly known as tiered-income eligibility) or through similar policies, such as granting a period of continued assistance to the family before termination. As of February 2014, 16 states had tiered-income eligibility, and two states permitted counties to use tiered eligibility.[15] States with two-tier income eligibility policies would grant a subsequent 12-month eligibility period to parents whose income has increased above the initial income eligibility threshold but remains below the higher exit income eligibility limit at redetermination. This policy can support families as their income rises so that exceeding the initial eligibility threshold—which may result from even a small increase in income—does not result in losing benefits, and may help families better avoid the "cliff effect" (a sudden, drastic change in expenses following a loss of benefits) than a policy adopting a brief period of time when families who have exceeded the initial income eligibility continue to qualify for assistance.

It is still essential to set adequate initial income eligibility limits, so families are able to qualify for the child care assistance they need. As of February 2014, a family with an income above 150 percent of poverty could not qualify for assistance in 15 states, and a family with an income above 200 percent of poverty could not qualify for assistance in a total of 38 states—even though a study by the Economic Policy Institute indicates that a family needs an income equal to at least 200 percent of poverty to meet its basic needs.[16] Even without a separate exit eligibility limit, generous initial income eligibility limits allow room for families' incomes to grow without immediately losing assistance upon redetermination.

FAMILY COPAYMENT POLICIES

Key Provisions in the Law

- The reauthorization law maintains existing language on sliding fee scales and the existing definition of sliding fee scales as a system of cost sharing by a family based on the family's income.
- The law adds language stating that cost sharing must not be a barrier to families receiving child care assistance.

Implementation Considerations

The legislation does not specify exactly how states must design their copayment policies so as not to create a burden for families receiving child care assistance. However, this language is a clear signal to states that they should not set copayment levels so high that they will discourage families from applying for or continuing to receive child care assistance. This policy may be particularly important to monitor within the context of reauthorization implementation and the costs entailed—costs that states may be tempted to pass on to providers and families, which would exacerbate barriers to access.

With this reauthorization legislation, states can reexamine their copayment policies to determine whether the cost burden is manageable for families receiving child care assistance. Even at current levels, many states' copayments are far too high. For example, more than half of the states require families with incomes at 150 percent of poverty and receiving child care assistance to pay a higher portion of their income in copayments that the nationwide average amount that families who pay for child care spend on child care (7.2 percent of income).[17]

States should consider lowering their copayments and waiving fees for families with incomes below the poverty level. States should certainly not raise fees to cover other costs of implementing the reauthorization, as this would only shift the burden to low-income families who cannot afford it.

Additional Resources

Child Care Subsidy Policies and Simplification

- NWLC, *Turning The Corner: State Child Care Assistance Policies 2014*, http://www.nwlc.org/sites/default/files/pdfs/nwlc_2014statechildcareassistancereport-final.pdf.
- CLASP and Urban Institute, *Confronting the Child Care Eligibility Maze: Simplifying and Aligning Child Care with Other Work Supports*, http://www.clasp.org/resources-and-publications/publication-1/WSS-CC-Paper.pdf.
- Urban Institute, *Designing Subsidy Systems to Meet the Needs of Families*, http://www.urban.org/Uploaded-PDF/411611_subsidy_system.pdf.
- U.S. Department of Health and Human Services, Administration for Children and Families, Office of Child Care, *Policies and Practices that Promote Continuity of Child Care Services and Enhance Subsidy Systems*, http://www.acf.hhs.gov/programs/occ/resource/im2011-06.

Special Populations

- CLASP, *Better for Babies: A Study of State Infant and Toddler Child Care Policies*, http://www.clasp.org/resources-and-publications/files/BetterforBabies2.pdf.
- CLASP, *Charting Progress for Babies in Child Care: Build Supply of Quality Care*, http://www.clasp.org/babiesinchildcare/recommendations/their-families-to-have-access-to-quality-options-for-their-care/build-supply-of-quality-care.
- U.S. Department of Health and Human Services, Administration for Children and Families, Office of Child Care, *Policies/Resources for Expanding ECE Services for Homeless Children & Families*, http://www.acf.hhs.gov/programs/occ/news/policies-resources-for-expanding-ece-services-for-homeless-children.
- U.S. Department of Health and Human Services, Administration for Children and Families, Office of Child Care, *Information Memorandum: Child Welfare and*

Child Care Partnerships, "Child Welfare and Child Care Partnerships: Partnering with Families Involved in Child Care Subsidy Programs," http://www.acf.hhs.gov/programs/occ/resource/im-child-welfare.

- U.S. Department of Health and Human Services, Administration for Children and Families, Office of Child Care, *Information Memorandum: Refugee Resettlement and Child Care Partnerships*, "Refugee Resettlement and Child Care Partnerships: Partnering to Increase Refugee Families' Access to High-Quality Child Care," http://www.acf.hhs.gov/programs/occ/resource/im-refugee-resettlement.

Direct Contracts

- CLASP, *Ensuring Quality Care for Low-Income Babies: Contracting Directly with Providers to Expand and Improve Infant and Toddler Care*, http://www.clasp.org/resources-and-publications/files/0422.pdf.

1 U.S. Department of Health and Human Services, Administration for Children and Families, Office of Child Care, *Child Care and Development Fund Statistics*, "Table 2 - Percent of Children Served by Payment Method," FY 2013 Preliminary Data, http://www.acf.hhs.gov/programs/occ/resource/fy-2013-ccdf-data-tables-preliminary-table-2.

2 CLASP, "Massachusetts: Family Child Care System Contracts," *Charting Progress for Babies in Child Care Project*, 2011, http://www.clasp.org/babiesinchildcare/state/massachusetts-family-child-care-system-contracts.

3 Karen Schulman and Helen Blank, *Turning the Corner: State Child Care Assistance Policies 2014*, NWLC, 2014, http://www.nwlc.org/sites/default/files/pdfs/nwlc_2014statechildcareassistancereport-final.pdf.

4 Liz Watson, Lauren Frohlich, and Elizabeth Johnston, *Collateral Damage: Scheduling Challenges for Workers in Low-Wage Jobs and Their Consequences*, NWLC, 2014, http://www.nwlc.org/sites/default/files/pdfs/collateral_damage_scheduling_fact_sheet.pdf.

5 Kendall Swenson, *Child Care Subsidy Duration and Caseload Dynamics: A Multi-State Examination*, U.S. Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation, 2014, http://aspe.hhs.gov/hsp/14/ChildCareSubsidy/rpt_ChildCareSubsidy.pdf.

6 Elizabeth E. Davis, Caroline Krafft, Nicole Forry, et al., *Implementation of 12-Month Child Care Subsidy Eligibility Redetermination: A Case Study from Maryland*, Child Trends, 2014, http://www.childtrends.org/wp-content/uploads/2015/02/2014-56MDChildCareAssistance_Brief.pdf.

7 For research on child care authorization periods, see Charles Michalopoulos, Erika Lundquist, and Nina Castells, *The Effects of Child Care Subsidies for Moderate-Income Families in Cook County, Illinois*, Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services, 2010, http://www.acf.hhs.gov/sites/default/files/opre/cook_county.pdf. For a summary of research on various strategies, including lengthened redetermination periods, in SNAP and Medicaid, see Gina Adams and Jessica Compton, *Client-Friendly Strategies: What Can CCDF Learn from Research on Other Systems*?, Urban Institute, 2011, http://www.urban.org/UploadedPDF/412526-client-friendly-strategies.pdf.

8 Sarah Minton, Christin Durham, Erika Huber, and Linda Giannarelli, *The CCDF Policies Database Book of Tables: Key Cross-State Variations in CCDF Policies as of October 1, 2011* (Table 21), Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services, 2012, http://www.acf.hhs.gov/sites/default/files/opre/ccdf_policies_database_2011_book_of_tables_text.pdf.

9 Senate Committee on Health, Education, Labor, and Pensions, *Report on the Activities of the Committee on Health, Education, Labor, and Pensions, United States Senate, 113th Congress: Child Care and Development Block Grant Act of 2014*, S. Report No. 113–138 (2014), http://www.gpo.gov/fdsys/pkg/CRPT-113srpt138/pdf/CRPT-113srpt138.pdf.

10 Brandon Roberts, Deborah Povich and Mark Mather, *Low-Income Working Families: The Growing Economic Gap*, Working Poor Families Project, http://www.workingpoorfamilies.org/wp-content/uploads/2013/01/Winter-2012_2013-WPFP-Data-Brief.pdf.

11 U.S. Department of Labor, Bureau of Labor Statistics, *Labor Force Statistics from the Current Population Survey,* 2015, http://www.bls.gov/cps/cpsaat30.htm.

12 Under the Affordable Care Act (ACA), an individual must not be required to provide additional information or documentation unless information cannot be obtained electronically or such information obtained is not reasonably compatible. Alice M. Weiss, Abigail Arons, and Julien Nagarajan, *States' Medicaid ACA Checklist for 2014*, State Health Reform Assistance Network, 2013, http://statenetwork.org/wp-content/uploads/2014/11/State-Network-NASHP-States-ACA-Medicaid-Checklist-for-2014.pdf.

13 For more state examples on coordinating eligibility across benefit programs see Gina Adams and Hannah Matthews, *Confronting the Child Care Eligibility Maze: Simplifying and Aligning Child Care with Other Work Supports*, Urban Institute and CLASP, 2013, http://www.clasp.org/resources-and-publications/publication-1/WSS-CC-Paper.pdf.

14 Gina Adams, Kathleen Snyder, Patti Banghart, and the Urban Institute Child Care Research Team, *Designing Subsidy Systems to Meet the Needs of Families: An Overview of Policy Research Findings*, Urban Institute, 2008, http://www.urban.org/UploadedPDF/411611_subsidy_system.pdf.

15 Schulman and Blank, *Turning The Corner*.

16 Schulman and Blank, *Turning the Corner*.

17 Schulman and Blank, *Turning the Corner* (11); Lynda Laughlin, "Table 6," *Who's Minding the Kids? Child Care Arrangements: Spring 2011*, U.S. Census Bureau, 2013, http://www.census.gov/content/dam/Census/library/publications/2013/demo/p70-135.pdf.