NATIONAL WOMEN'S LAW CENTER

EXPANDING THE POSSIBILITIES

turning the corner
state child care assistance policies 2014

ABOUT THE CENTER

The National Women's Law Center is a non-profit organization working to expand the possibilities for women and their families by removing barriers based on gender, opening opportunities, and helping women and their families lead economically secure, healthy, and fulfilled lives—with a special focus on the needs of low-income women and their families.

ACKNOWLEDGEMENTS

The authors thank Nancy Duff Campbell, Co-President of the National Women's Law Center, for her review of and comment on the report, and Beth Stover, Graphic and Web Designer of the National Women's Law Center, for designing the report.

The authors are also grateful to the state child care administrators who provided the information on their states' policies included in this report.

This report would not have been possible without the generous support for the Center's child care and early education work provided by the Alliance for Early Success, Early Childhood Funders Collaborative, Ford Foundation, Heising-Simons Foundation, Moriah Fund, New Directions Foundation, and an anonymous donor.

The findings and conclusions of this report are those of the authors alone, and do not necessarily reflect the opinions of these funders.

NATIONAL WOMEN'S LAW CENTER
EXPANDING THE POSSIBILITIES

turning the corner state child care assistance policies 2014

BY KAREN SCHULMAN, SENIOR POLICY ANALYST

HELEN BLANK, DIRECTOR OF CHILD CARE AND EARLY LEARNING

table of contents

introduction

CHILD CARE HELPS CHILDREN, FAMILIES, AND COMMUNITIES PROSPER. It gives children the opportunity to learn and develop skills they need to succeed in school and in life.[1] It gives parents the support and peace of mind they need to be productive at work. And, by strengthening the current and future workforce, it helps our nation's economy. Yet many families, particularly low-income families,[2] struggle to afford child care. The average fee for full-time care ranges from approximately $3,700 to $16,400 a year, depending on where the family lives, the type of care, and the age of the child.[3] Child care assistance can help families with these high child care costs.

Given the importance of child care assistance, it is encouraging that families in thirty-three states were better off—having greater access to assistance and/or receiving greater benefits from assistance—in February 2014 than in February 2013 under one or more child care assistance policies covered in this report.[4] Families in thirteen states were worse off under one or more of these policies in February 2014 than in February 2013.[5] The policies covered are critical in determining families' ability to obtain child care assistance and the extent of help that assistance offers—income eligibility limits to qualify for child care assistance, waiting lists for child care assistance, copayments required of parents receiving child care assistance, reimbursement rates for child care providers serving families receiving child care assistance, and eligibility for child care assistance for parents searching for a job.[6]

This year is the second year in a row in which the situation for families improved in more states than it worsened. In February 2013, families in twenty-seven states were better off under one or more child care assistance policies covered in this report, and families in twenty-four states were worse off under one or more of these policies, than in February 2012.[7]

Families in thirty-three states were better off in February 2014 than in February 2013 under one or more child care assistance policies. Families in thirteen states were worse off under one or more of these policies.

The past two years represent a turnaround from the previous two years, when the situation worsened for families in more states than it improved. In February 2012, families in twenty-seven states were worse off under one or more child care assistance policies covered in this report, and families in seventeen states were better off under one or more of these policies, than in February 2011.[8] In February 2011, families in thirty-seven states were worse off under one or more of these policies, and families in eleven states were better off under one or more of these policies, than in February 2010.[9]

The negative trends between 2010 and 2012 stemmed at least in part from states' exhaustion of the $2 billion in additional federal funding for the Child Care and Development Block Grant (CCDBG) for FY 2009 and FY 2010 provided by the American Recovery and Reinvestment Act (ARRA)[10]—states had to obligate all of the funds by September 2010 and expend those funds by September 2011.[11] The slight increases in annual federal funding for CCDBG in FY 2011 and FY 2012 were not sufficient to keep pace with inflation, much less compensate for the loss of ARRA funds.

In contrast, states made some progress on child care assistance policies in the past two years as federal child care funding and state budgets stabilized. While CCDBG funding in FY 2013 declined slightly from FY 2012, due to across-the-board federal budget cuts under the Budget Control Act (BCA) of 2011[12] (commonly known as the sequester), CCDBG funding in FY 2014 increased slightly from FY 2013, even after adjusting for inflation.[13] In addition, a strengthening economy helped improve most states' fiscal outlook, which lessened pressure on states to make budget cuts and enabled them to invest in priorities.[14]

Although there were fewer cutbacks and more improvements in the year between 2013 and 2014 than in any of the previous three years, the improvements states made between 2013 and 2014 were generally modest and not sufficient to close continuing gaps in families' access to assistance and the level of assistance available. In addition, families were still worse off in 2014 than they were in 2001 in more states than they were better off under three of the four policies for which there are comparison data for 2001.[15]

Changes between February 2013 and February 2014 and between 2001 and February 2014 are described in more detail below, but in summary:

- Two states increased their income limits for child care assistance by a dollar amount that exceeded inflation between 2013 and 2014. Five states increased their income limits to adjust for multiple years of inflation, and twenty-nine states increased their income limits for one year of inflation, as measured against the change in the state median income or federal poverty level.[16] Twelve states kept their income limits the same as a dollar amount. Yet three states lowered their income limits for child care assistance as a dollar amount between 2013 and 2014. Comparing 2014 to 2001, in twenty-five states, the income limits were lower as a percentage of the federal poverty level.[17]
- Eighteen states had waiting lists or frozen intake for child care assistance in 2014, lower than the nineteen states with waiting lists or frozen intake in 2013 and the twenty-one states with waiting lists or frozen intake in 2001. Among the thirteen states that had waiting lists in both years and for which comparable data are available, the number of children on the waiting list decreased in ten states and increased in three states between 2013 and 2014. Comparing 2014 to 2001, among the nine states that had waiting lists in both years and for which there are comparable data, the number of children on the waiting list decreased in four states and increased in five states.
- In most states, families receiving child care assistance paid the same percentage of their income in copayments in 2014 as in 2013. Copayments decreased as a percentage of income for a family at 150 percent of poverty in four states, and for a family at 100 percent of poverty in five states. Yet, copayments increased as a percentage of income for a family at 150 percent of poverty in two states, and for a family at 100 percent of poverty in one state. In approximately one-third to over half of the states, depending on income, individual families were required to pay more in copayments in 2014 than the nationwide average amount that families who pay for child care spend on child care. Comparing 2014 to 2001, in nearly half to over half of the states, depending on income, families paid a higher percentage of their income in copayments.
- Sixteen states increased at least some of their reimbursement rates for providers serving families receiving child care assistance, while no state reduced its reimbursement rates, between 2013 and 2014. Yet, only one state had reimbursement rates at the federally recommended level in 2014, a slight decrease from the three states with rates at the recommended level in 2013, and a significant decrease from the twenty-two states with rates at the recommended level in 2001. Thirty-seven states had higher reimbursement rates for higher-quality providers in 2014—an increase from thirty-three states in 2013. However, in more than three-quarters of these states, even the higher rates were below the federally recommended level in 2014.
- Forty-six states allowed families receiving child care assistance to continue receiving it while a parent searched for a job in 2014, the same number of states as in 2013. Between 2013 and 2014, four of these states increased the length of time families could receive child care assistance while a parent searched for a job. Fourteen states allowed families not receiving child care assistance to qualify for assistance while a parent searched for a job in 2014, the same number of states as in 2013.[18]

looking ahead: developments since february 2014

ALTHOUGH THIS REPORT PRIMARILY FOCUSES ON CHANGES BETWEEN FEBRUARY 2013 AND FEBRUARY 2014, states reported on some changes they made or expected to make after February 2014. Twenty-one states reported they had made or expected to make improvements in one or more of the policies covered in this report after February 2014. Only one state reported it had made cutbacks in these policies since February 2014.[19]

- One state planned to reduce its income eligibility limit for child care assistance after February 2014.
  - North Carolina planned to reduce its income limit from 75 percent of the 2014 state median income ($42,204 a year for a family of three) to 200 percent of the 2014 federal poverty level ($39,580 a year for a family of three) for families with children birth through age five and families with children of any age who have special needs and to 133 percent of the 2014 federal poverty level ($26,321 a year for a family of three) for families with children ages six through twelve as of October 2014.
- Two states increased their income eligibility limits for child care assistance after February 2014.
  - Kentucky increased its income limit from 100 percent of the 2011 federal poverty level ($18,540 a year for a family of three) to 140 percent of the 2011 federal poverty level ($25,942 a year for a family of three) as of August 2014. The state planned to restore its income limit to the level it was at in February 2013—150 percent of the 2011 federal poverty level ($27,804 a year for a family of three)—as of July 2015.
  - Nebraska increased its income limit for child care assistance from 125 percent of the 2013 federal poverty level ($24,408 for a family of three) to 130 percent of the 2014 federal poverty level poverty ($25,728 for a family of three) as of July 2014.
- Two states reduced the number of children on the waiting list for child care assistance after February 2014.[20]
  - Arizona, which had not served any children on the waiting list for child care assistance since February 2011 and had 6,366 children on the waiting list as of February 2014, began serving 4,000 children on the waiting list as of July 2014.
  - Oregon, which had 1,980 children on the waiting list for child care assistance as of February 2014, had served all children on the waiting list as of May 2014 and was continuing to serve all eligible children whose families applied without placing any on the waiting list as of August 2014.[21]
- One state reduced copayments for families receiving child care assistance after February 2014.
  - Arkansas lowered copayments for families receiving child care assistance as of March 2014, from as much as 80 percent of the cost of care to a maximum of 8 percent of the cost of care. In addition, families using higher-quality care now pay a lower percentage of the cost of care—a maximum of 6 percent for families using providers at quality level one of the state's three-tier quality rating and improvement system, 4 percent for families using providers at quality level two, and 2 percent for families using providers at quality level three. For example, the monthly copayment for a family of three with an annual income of $29,695 (150 percent of poverty) and a four-year-old receiving care in a center without a quality rating in Pulaski County was reduced from $365 to $37; if the center was at quality level three, the family's monthly copayment would be reduced to $9.

- Eight states increased their reimbursement rates[22] for providers serving families receiving child care assistance after February 2014.[23]
  - Connecticut increased its reimbursement rates for the first time since 2002 as of July 2014. For example, the monthly reimbursement rate for center care for a four-year-old in the North Central region increased from $650 to $671.
  - Indiana increased its reimbursement rates for the first time since 2007 as of May 2014. For example, the monthly reimbursement rate for center care for a four-year-old in Marion County increased from $693 to $762.
  - Massachusetts increased its reimbursement rates by 2.3 percent for center care and by 4 percent for family child care as of March 2014, and increased its reimbursement rates for family child care by another 3 percent as of July 2014. For example, the monthly reimbursement rate for center care for a four-year-old in Boston increased from $795 to $813.
  - New Mexico increased its reimbursement rates for child care for infants and toddlers as of July 2014. For example, the monthly reimbursement rate for center care for a one-year-old in metropolitan areas increased from $542 to $721.
  - New York changed its reimbursement rates from the 75th percentile of 2011 market rates to the 69th percentile of 2013 market rates as of April 2014. This change resulted in rates for most categories increasing or remaining the same (although rates for a few categories decreased). For example, the monthly reimbursement rate for center care for a four-year-old in New York City increased from $940 to $1,009.
  - South Dakota increased its reimbursement rates from the 75th percentile of 2011 market rates to the 75th percentile of 2013 market rates as of July 2014. For example, the monthly reimbursement rate for center care for a four-year-old in Minnehaha County increased from $643 to $692.
  - Utah increased its reimbursement rates as of May 2014 and again as of July 2014. For example, the monthly reimbursement rate for center care for a four-year-old statewide increased from $480 to $505.
  - Washington increased its reimbursement rates by 4 percent as of July 2014. For example, the monthly reimbursement rate for center care for a four-year-old in King County increased from $687 to $714.
- Five states implemented new tiered reimbursement rates for higher-quality care, added quality tiers, and/or raised the rates for their highest tiers after February 2014.
  - Arkansas implemented a new tiered reimbursement rate system for higher-quality providers as of July 2014. There are four rate levels, including a base rate level that is paid to providers that do not meet the standards necessary to achieve a rating in the state's voluntary quality rating and improvement system, or do not participate in that system, and three progressively higher rate levels that are paid to providers of higher-quality care as determined by that system. For example, the monthly reimbursement rate for a four-year-old in Pulaski County is $511 for a center at quality level one, $536 for a center at quality level two, and $588 for a center at quality level three, compared to the base rate of $457.
  - Indiana increased the number of reimbursement tiers and raised the differential between the lowest and highest tiers as of May 2014. Previously, the state had two tiers, including a base rate level and a rate level for accredited care that was 10 percent higher than the base rate. The new system has four tiers, including a base rate level that is paid to providers that do not meet the standards necessary to achieve a rating in the state's voluntary quality rating and improvement system, do not participate in that system, or are at level one of the system, and three progressively higher rate levels that are paid to providers of higher-quality care as determined by that system. Rates are 10 percent above the base rate for providers at level two; 20 percent above the base rate for providers at level three; and 30 percent above the base rate for providers at level

four. For example, the monthly reimbursement rate for a center at quality level four serving a four-year-old in Marion County is $992, compared to the base rate of $762 (which, as described above, was also raised in May 2014).

- Michigan implemented a new tiered reimbursement rate system for higher-quality providers as of July 2014. There are four rate levels, including a base rate level that is paid to providers that do not meet the standards necessary to achieve a rating in the state's voluntary quality rating and improvement system (which has five star levels), do not participate in that system, or are at the one- or two-star level of the system, and three progressively higher rate levels that are paid to providers of higher-quality care as determined by that system. Rates are 25 cents per hour above the base rate for three-star providers; 50 cents per hour above the base rate for four-star providers; and 75 cents per hour above the base rate for five-star providers. For example, the statewide monthly reimbursement rate for a five-star center serving a four-year-old is $633, compared to the base rate of $487.[24]
- Minnesota added a new tiered reimbursement rate level for higher-quality providers as of March 2014. Previously, the state had two rate levels, including a base rate level and a rate level for accredited providers that was 15 percent higher than the base rate. There are now three rate levels, including a base rate level that is paid to providers that do not meet the standards necessary to achieve a rating in the state's voluntary quality rating and improvement system (which has four star levels), do not participate in that system, or are at the one- or two-star level of the system, and two progressively higher rate levels that are paid to accredited providers and providers of higher-quality care as determined by that system. Rates are 15 percent above the base rate for accredited providers, as they were previously, as well as for three-star providers; and 20 percent above the base rate for four-star providers. For example, the monthly reimbursement rate for a four-star center serving a four-year-old in Hennepin County is $1,044, compared to the base rate of $870.
- North Carolina planned to increase its reimbursement rates for higher-quality providers as of January 2015. The rates for providers at the one- and two-star levels of the state's five-star quality rating and improvement system (which is mandatory for all licensed providers, except those that are religious sponsored) will remain the same, while the rates for three-, four-, and five-star providers will increase for the first time since 2007. For example, the monthly reimbursement rate for a four-year-old in Mecklenburg County will increase from $641 to $721 for a three-star center, from $670 to $746 for a four-star center, and from $702 to $776 for a five-star center, compared to the base rate (which is paid to one-star providers and which will not change) of $477.

Twenty-one states reported they had made or expected to make improvements in one or more of the policies covered in this report after February 2014.

- Six states increased, or planned to increase, the amount of time parents could receive child care assistance while searching for a job after February 2014.
  - Alaska, which allowed parents to begin receiving or continue receiving child care assistance while searching for a job for up to 80 hours a year as of February 2014, planned to extend the amount of time parents could receive child care assistance while searching for a job in the spring of 2015. The state is considering allowing parents to qualify for and begin receiving assistance for part-day child care (up to five hours per day) for up to two part-time months (seventeen days per month) while searching for a job, and allowing parents to continue receiving child care assistance for full-time child care until the end of the month following the month of a job loss.

- Montana extended the amount of time parents could continue receiving child care assistance while searching for a job from thirty days to ninety days as of August 2014.
- Nevada planned to extend the amount of time parents could begin receiving or continue receiving child care assistance while searching for a job from two weeks to four weeks as of the end of 2014 or beginning of 2015.
- Ohio, which had allowed parents to continue receiving child care assistance for up to thirty days following a job loss only if they were scheduled to start a new job or school by the end of that time period, began allowing parents to continue receiving child care assistance while searching for a job for up to ninety-one days—even if they are not scheduled to start a new job or school—as of September 2014.
- Oklahoma planned to extend the amount of time parents could continue receiving child care assistance while searching for a job from thirty days to sixty days in 2015.
- Utah planned to extend the amount of time parents could continue receiving child care assistance while searching for a job from until the end of the month of a job loss to until the end of the month following the month of a job loss as of December 2014 or January 2015.[25]

methodology

THE NATIONAL WOMEN'S LAW CENTER COLLECTED THE DATA IN THIS REPORT from state child care administrators in the fifty states and the District of Columbia (counted as a state in this report). The Center sent the state child care administrators a survey in the spring of 2014 requesting data on policies as of February 2014 in five key areas—income eligibility limits, waiting lists, parent copayments, reimbursement rates, and eligibility for child care assistance for parents searching for a job. The survey also asked state administrators to report on any policy changes that the state had made since February 2013 or expected to make after February 2014 in each of the five areas. The survey questions were largely the same as in previous years, although there were additional questions about eligibility for child care assistance for parents to attend school; the data collected from these additional questions will be analyzed in a separate report. Center staff contacted state administrators for follow-up information as necessary. The Center obtained supplementary information about states' policies from documents available on state agencies' websites.

The Center collected the 2013 data used in this report for comparison purposes through a similar process and analyzed these data in the Center's October 2013 report, *Pivot Point: State Child Care Assistance Policies 2013*. The Children's Defense Fund (CDF) collected the 2001 data used in this report and analyzed these data in CDF's report, *State Developments in Child Care, Early Education and School-Age Care 2001*. CDF staff collected the data through surveys and interviews with state child care advocates and verified the data with state child care administrators. The CDF data reflect policies in effect as of June 1, 2001, unless otherwise indicated. The Center uses 2001 as a basis for comparison because it was the year between the peak year for Temporary Assistance for Needy Families (TANF) funding for child care, FY 2000, and what was the peak year for CCDBG funding, FY 2002, until FY 2010, when ARRA provided a temporary boost in CCDBG funding (see the section below on funding for child care assistance).

The Center chose to examine the policy areas covered in this report because they are central determinants of whether low-income families can receive child care assistance and the extent of assistance they can receive. Income eligibility limits reveal how generous a state is in determining whether families qualify for child care assistance,[26] and waiting lists help reveal whether families who qualify for assistance actually receive it. Parent copayment levels reveal whether low-income parents receiving assistance have significant out-of-pocket costs for child care. Reimbursement rates reveal the extent to which families receiving assistance may be limited in their choice of child care providers and providers serving families receiving assistance may be limited in the quality of care they can offer to families. Eligibility policies for parents searching for work reveal whether parents can receive assistance while seeking employment so that they can avoid disrupting their child's child care arrangement and have child care available as soon as the parent finds a job.

The policy areas covered in this report are central determinants of whether low-income families can receive child care assistance and the extent of assistance they can receive.

funding for child care assistance for low-income families

TOTAL FEDERAL FUNDING FOR CHILD CARE ASSISTANCE HAS DECLINED SINCE 2001. The primary source of funding for child care assistance is the federal CCDBG program. CCDBG funding was $5.277 billion in FY 2014.[27] CCDBG funding in FY 2014 was slightly higher than in FY 2013 ($5.123 billion),[28] even after adjusting FY 2013 funding for inflation ($5.218 billion in FY 2014 dollars[29]). Yet, CCDBG funding in FY 2014 was significantly lower than in FY 2010, when ARRA boosted funding, even before adjusting for inflation—$6.044 billion (including the additional $2 billion in CCDBG funding for states to obligate in FY 2009 and FY 2010 provided through ARRA, assuming $1 billion of ARRA funds each year for FY 2009 and FY 2010),[30] or $6.529 billion in FY 2014 dollars.[31] The FY 2010 level represented a peak for CCDBG, exceeding the previous peak for CCDBG funding after adjusting for inflation ($6.348 billion in FY 2014 dollars[32]), which occurred in FY 2002. However, the ARRA funding that contributed to the FY 2010 peak funding level was temporary.

Another important source of child care funding is the TANF block grant. States may transfer up to 30 percent of their TANF block grant funds to CCDBG, or use TANF funds directly for child care without first transferring the money. States' use of TANF dollars for child care (including both transfers and direct funding) was $2.477 billion in FY 2013 (the most recent year for which data are available),[33] below the high of $3.966 billion in FY 2000[34] even without adjusting for inflation. (In FY 2014 dollars, use of TANF funds for child care was $2.523 billion in FY 2013 compared to $5.545 billion in FY 2000.[35])

Total federal child care funding from CCDBG and TANF in FY 2014, assuming use of TANF funds was the same as the FY 2013 inflation-adjusted amount, was $7.800 billion, which was slightly above funding in FY 2013 after adjusting for inflation—$7.741 billion in FY 2014 dollars—but significantly below funding in FY 2001 after adjusting for inflation—$10.952 billion in FY 2014 dollars.[36]

income eligibility limits

A FAMILY'S ACCESS TO CHILD CARE ASSISTANCE DEPENDS ON A STATE'S INCOME ELIGIBILITY LIMIT. The family's ability to obtain child care assistance is affected not only by a state's income limit in a given year, but also by whether the state adjusts the limit for inflation each year so that the family does not become ineligible for assistance simply because its income keeps pace with inflation.

Between 2013 and 2014, over two-thirds of the states increased their income eligibility limits as a dollar amount by an amount sufficient to keep pace with or exceed inflation, as measured against the change in the federal poverty level or state median income, depending on which benchmark the state used.[37] However, nearly one-quarter of the states did not increase their income limits, and a few states reduced their income limits. Between 2001 and 2014, all but seven of the states increased their income limits as a dollar amount; however, in over two-fifths of these states, the increase between 2001 and 2014 was not sufficient to keep pace with inflation, as measured against the change in the federal poverty level.[38] Moreover, approximately three-quarters of the states had income limits at or below 200 percent of poverty in 2014.

- Two states increased their income eligibility limits by a dollar amount that exceeded inflation between 2013 and 2014 (*see Table 1a*).[39]
- Thirty-four states increased their income eligibility limits as a dollar amount to adjust for inflation between 2013 and 2014, including twenty-nine states that adjusted for one year of inflation,[40] as well as four states that adjusted for two years of inflation[41] and one state that adjusted for three years of inflation to make up for previous years in which they had not adjusted for inflation.[42]
- In twelve states, the income eligibility limit was the same as a dollar amount in 2014 as in 2013.
- In three states, the income eligibility limit was lower as a dollar amount in 2014 than in 2013. One of these three states set its income limit based on the federal poverty level and reduced its income limit as a percentage of the federal poverty level.[43] Two of these three states set their income limits based on state median income and reduced their income limits to adjust for state median income that decreased.[44]
- Forty-four states increased their income eligibility limits as a dollar amount between 2001 and 2014 (*see Table 1b*). In eleven of these states, the increase was great enough that the income limit was higher as a percentage of the federal poverty level in 2014 than in 2001. In fifteen of these states, the increase was great enough that the income limit stayed the same, or nearly the same, as a percentage of the federal poverty level in 2014 as in 2001.[45] However, in eighteen of these states, the increase was not sufficient to keep pace with the federal poverty level, so the income limit was lower as a percentage of the federal poverty level in 2014 than in 2001.
- In seven states, the income eligibility limit was lower as a dollar amount in 2014 than in 2001. In these states, the income limit decreased as a percentage of the federal poverty level, bringing to twenty-five the total number of states in which the income limit failed to keep pace with the increase in the federal poverty level between 2001 and 2014.
- A family with an income above 100 percent of the federal poverty level ($19,790 a year for a family of three in 2014) could not qualify for child care assistance in one state in 2014. A family with an income above 150 percent of poverty ($29,685 a year for a family of three in 2014) could not qualify for assistance in a total of fifteen states. A family with an income above 200 percent of poverty ($39,580 a year for a family of three in 2014) could not qualify for assistance in a total of thirty-eight states. Yet, in most communities across the country, a family needs an income equal to at least 200 percent of poverty to meet its basic needs, including housing, food, child care, transportation, health care, and other necessities, based on a study by the Economic Policy Institute.[46]

waiting lists

EVEN IF FAMILIES ARE ELIGIBLE FOR CHILD CARE ASSISTANCE, THEY MAY NOT NECESSARILY RECEIVE IT. Instead, their state may place eligible families on a waiting list or freeze intake (turn away eligible families without adding their names to a waiting list). Families on the waiting list may wait months before receiving child care assistance, or may never receive it. Families on the waiting list are left with difficult choices. According to several studies,[47] these families often struggle to pay for reliable, good-quality child care as well as other necessities, or must use low-cost—and frequently low-quality—care. Some families cannot afford any child care, which can prevent parents from working.

In 2014, nearly two-thirds of the states were able to serve eligible families who applied for child care assistance without placing any on waiting lists or freezing intake, but just over one-third of the states had waiting lists or frozen intake for at least some families applying for assistance. The number of states with waiting lists or frozen intake in 2014 was slightly lower than the number in 2013 or 2001. In addition, more states' waiting lists decreased than increased between 2013 and 2014. However, slightly more states' waiting lists increased than decreased between 2001 and 2014.[48]

The amount of time families spend on the waiting list for child care assistance varies greatly among states. In some states, the average wait is a few weeks or months, while in other states, the average wait is a year or more.

- Eighteen states had waiting lists or frozen intake in 2014,[49] compared to nineteen states in 2013, and twenty-one states in 2001 (*see Table 2*).
- Of the sixteen states that had waiting lists or frozen intake in both 2013 and 2014, ten states had shorter waiting lists in 2014 than in 2013, and three states had longer waiting lists. In the remaining three states with waiting lists or frozen intake in both 2013 and 2014, it was not possible to compare the length of waiting lists based on the available data.
- Of the thirteen states that had waiting lists or frozen intake in both 2001 and 2014, four states had shorter waiting lists in 2014 than in 2001, and five states had longer waiting lists. In the remaining four states with waiting lists or frozen intake in both 2001 and 2014, it was not possible to compare the length of waiting lists based on the available data.
- Among the ten states with waiting lists that reported data for 2014, the average length of time families spent on the waiting list before receiving child care assistance was less than six months in three states,[50] between six months and a year in three states,[51] and more than a year in four states.[52] The average length of time families spent on the waiting list ranged from sixty-seven days in one state to two to three years in another state. Among the nine states that reported data for both years, the average length of time on the waiting list was shorter in 2014 than in 2013 in three states, the same in 2014 as in 2013 in four states, and longer in 2014 than in 2013 in two states.[53]

The number of states with waiting lists or frozen intake in 2014 was slightly lower than the number in 2013 or 2001. In addition, more states' waiting lists decreased than increased between 2013 and 2014.

copayments

MOST STATES REQUIRE FAMILIES RECEIVING CHILD CARE ASSISTANCE to contribute toward their child care costs based on a sliding fee scale that is designed to charge progressively higher copayments to families at progressively higher income levels. Some states also take into account the cost of care used by a family in determining the amount of the family's copayment. Copayment levels matter because if they are so high as to be unaffordable for families, child care providers may be forced to absorb the lost income or families may be discouraged from participating in the child care assistance program.

This report analyzes state copayment policies by considering two hypothetical families: a family of three with an income at 100 percent of the federal poverty level and a family of three with an income at 150 percent of the federal poverty level.[54] In most states, families paid the same percentage of their income in copayments in 2014 as in 2013. In only a few states, families paid a higher percentage of their income in copayments in 2014 than in 2013, and in only a few states, families paid a lower percentage of their income in copayments in 2014 than in 2013. In nearly half to over half of the states, depending on income, families paid a higher percentage of their income in copayments in 2014 than in 2001.

Many states had relatively high copayments in 2014. In approximately one-third to over half of the states, depending on income, a family was required to pay more in copayments than the nationwide average amount that families who pay for child care (including those who receive child care assistance and those who do not) spent on child care—7.2 percent of income.[55]

- In two states, copayments for a family of three at 150 percent of poverty[56] increased as a percentage of income between 2013 and 2014 (*see Table 3a*). In thirty-five states, copayments remained the same as a percentage of income. In four states, copayments decreased as a percentage of income. In one state, a family at 150 percent of poverty was eligible for child care assistance in 2013 but not 2014; in one state, a family at 150 percent of poverty was eligible in 2014 but not 2013; and in eight states, a family at 150 percent of poverty was not eligible in either 2013 or 2014.[57]
- In twenty-five states, copayments for a family of three at 150 percent of poverty[58] increased as a percentage of income between 2001 and 2014. In eight states, copayments remained the same as a percentage of income. In eight states, copayments decreased as a percentage of income. In seven states, a family at 150 percent of poverty was eligible for child care assistance in 2001 but not 2014; in one state, a family at 150 percent of poverty was eligible in 2014 but not 2001; and in two states, a family at 150 percent of poverty was not eligible in either 2001 or 2014.
- In one state, copayments for a family of three at 100 percent of poverty increased as a percentage of income between 2013 and 2014 (*see Table 3b*). In forty-four states, copayments remained the same as a percentage of income. In five states, copayments decreased as a percentage of income. In one state, a family at 100 percent of poverty was eligible for child care assistance in 2013 but not 2014.
- In twenty-eight states, copayments for a family of three at 100 percent of poverty increased as a percentage of income between 2001 and 2014. In twelve states, copayments remained the same as a percentage of income. In ten states, copayments decreased as a percentage of income. In one state, a family at 100 percent of poverty was eligible for child care assistance in 2001 but not 2014.
- In twenty-eight states, the copayment for a family of three at 150 percent of poverty was above $178 per month (7.2 percent of income) in 2014. In an additional nine states, a family at this income level was not eligible for child care assistance.
- In seventeen states, the copayment for a family of three at 100 percent of poverty was above $119 per month (7.2 percent of income) in 2014. In one additional state, a family at this income level was not eligible for child care assistance.

reimbursement rates

STATES SET REIMBURSEMENT RATES FOR CHILD CARE PROVIDERS who care for children receiving child care assistance. The reimbursement rate is a ceiling on the amount the state will pay providers, and a provider will be reimbursed at that rate if the provider charges private-paying parents a fee that is equal to or greater than the rate. If a provider charges private-paying parents a fee that is below the maximum reimbursement rate, the state will reimburse the provider an amount equal to the private-pay fee. Reimbursement rates may vary by geographic region, age of the child, type of care, and other factors. Reimbursement rates help determine whether child care providers have sufficient resources to sustain their businesses, offer salaries high enough to attract and retain qualified staff, set low child-staff ratios, maintain facilities, and buy materials and supplies for activities that encourage children's learning and development. Inadequate reimbursement rates deprive child care providers of the resources needed to offer high-quality care and may discourage high-quality providers from enrolling families who receive child care assistance.

States are required to collect data on child care providers' market rates every two years, but are not required to set their rates at any particular level or update their rates regularly. Federal regulations recommend, but do not mandate, that rates be set at the 75th percentile of current market rates,[59] a rate that is designed to allow families access to 75 percent of the providers in their communities. In 2014, just one state set its reimbursement rates at the 75th percentile of current market rates, a slight decline from the three states that set their rates at this recommended level in 2013, and a sharp decline from 2001, when over two-fifths of the states set their reimbursement rates at this level.[60] In 2014, the remaining fifty states set their reimbursement rates below the 75th percentile of current market rates, including many states that set their rates substantially below the 75th percentile. In addition, only about two-fifths of the states had updated their reimbursement rates in the previous two years. Without regular updates to reimbursement rates to at least keep pace with rises in the cost of care, the gap between reimbursement rates and the 75th percentile of current market rates expands.

When the reimbursement rate falls short of the fee a child care provider charges private-paying parents, over three-quarters of the states allow child care providers to ask parents receiving child care assistance to cover the difference (beyond any required copayment). While this approach may allow child care providers to avoid losing income, it transfers the financial burden to low-income families who struggle to afford the additional charge.

In 2014, just one state set its reimbursement rates at the 75th percentile of current market rates, a sharp decline from 2001, when over two-fifths of the states set their reimbursement rates at this level.

- One state set its reimbursement rates at the 75th percentile of current market rates (rates from 2012 or 2013) in 2014 (*see Table 4a*). This was slightly lower than the number of states—three—that set their reimbursement rates at this level in 2013 (*see Table 4b*). It was also substantially lower than the number of states—twenty-two—that set their reimbursement rates at this level in 2001.

- Twenty states increased at least some of their reimbursement rates between 2012 and 2014,[61] including sixteen states that increased their rates between 2013 and 2014.[62] Three states reduced their reimbursement rates between 2012 and 2014; none of these reductions occurred between 2013 and 2014.[63] The remaining twenty-eight states did not update their reimbursement rates between 2012 and 2014. All states except one updated their reimbursement rates between 2001 and 2014.
- In thirty-four states, reimbursement rates for center care for a four-year-old in 2014 were at least 20 percent below the 75th percentile of market rates (based on the state's most recent market survey for which it reported data) for this type of care (*see Table 4c*).[64]
- In thirty states, reimbursement rates for center care for a one-year-old in 2014 were at least 20 percent below the 75th percentile of market rates (based on the state's most recent market survey for which it reported data) for this type of care.[65]
- Thirty-nine states allowed child care providers to charge parents receiving child care assistance the difference between the reimbursement rate and the fee that the provider charged private-paying parents if the reimbursement rate was lower in 2014—the same number of states as in 2013.[66]

Thirty-seven states had higher reimbursement rates (tiered rates) for child care providers that met higher-quality standards in 2014, four more states than in 2013.[67] Some states had a single higher reimbursement rate; other states had progressively higher reimbursement rates for progressively higher levels of quality. Tiered reimbursement rates can offer child care providers incentives and support to improve the quality of their care. However, a minimal rate differential may not cover the additional costs entailed in raising quality sufficiently to qualify for a higher rate. These costs include expenses for additional staff in order to reduce child-staff ratios, increased salaries for staff with advanced education in early childhood development, staff training, facilities upgrades, and/or new equipment and materials. Yet, in more than three-quarters of states with tiered rates, the highest rate fell below the 75th percentile of current market rates. In nearly half of the states with tiered rates, the highest reimbursement rate was also less than 20 percent above the base rate.

Thirty-seven states had higher reimbursement rates (tiered rates) for child care providers that met higher-quality standards in 2014, four more states than in 2013.

- Thirty-seven states paid higher reimbursement rates for higher-quality care in 2014,[68] an increase from thirty-three states in 2013 (*see Table 4d*).[69] While most of these states had tiered rates that applied across different age groups, one state only paid tiered rates for providers caring for children from two years of age to kindergarten entry,[70] one state only paid tiered rates for providers caring for children up to 2.9 years of age,[71] and one state only paid tiered rates for providers caring for children up to three years of age.[72]
- Thirteen of the thirty-seven states with tiered rates in 2014 had two rate levels (including the base level),[73] three states had three levels, eleven states had four levels, seven states had five levels, and three states had six levels.[74]
- In over three-quarters of the thirty-five states with tiered rates for center care for a four-year-old in 2014, the reimbursement rate for this type of care at the highest quality level was below the 75th percentile of current market rates (which includes providers at all levels of quality) for this type of care.[75]
  - In twenty-eight of the thirty-five states, the reimbursement rate at the highest quality level was below the 75th percentile of market rates (based on the state's most recent market survey for which it reported data).[76] This includes ten states in which the reimbursement rate at the highest quality level was at least 20 percent below the 75th percentile.
  - In two of the thirty-five states, the reimbursement rate at the highest quality level was equal to the 75th percentile of market rates.
  - In five of the thirty-five states, the reimbursement rate at the highest quality level was above the 75th percentile of market rates. This includes three states in which the reimbursement rate at the highest quality level was at least 10 percent above the 75th percentile.

- Among the thirty-five states with tiered reimbursement rates for center care for a four-year-old, the difference between a state's lowest rate and highest rate for this type of care ranged from 2 percent to 74 percent in 2014.[77] There was no consistent relationship between the percentage difference and whether the highest rate was below or above the 75th percentile of market rates (based on the state's most recent market survey for which it reported data).
  - In five of the thirty-five states, the highest rate was 2 percent to 9 percent greater than the lowest rate. In all of these five states, the highest rate was below the 75th percentile of market rates.
  - In twelve of the thirty-five states, the highest rate was 10 percent to 19 percent greater than the lowest rate. In eight of these twelve states, the highest rate was below the 75th percentile of market rates.
  - In eight of the thirty-five states, the highest rate was 20 percent to 29 percent greater than the lowest rate. In seven of these eight states, the highest rate was below the 75th percentile of market rates.
  - In ten of the thirty-five states, the highest rate was at least 30 percent greater than the lowest rate. In eight of these ten states, the highest rate was below the 75th percentile of market rates.
- In five states, the amount of the differential between their lowest and highest rates was greater in 2014 than in 2013.[78] In one state, the amount of the differential between its lowest and highest rates was smaller in 2014 than in 2013.[79]

eligibility for families with parents searching for a job

CHILD CARE ASSISTANCE CAN HELP PARENTS get or keep the child care they need while searching for an initial job or a new job. Parents can more readily start work if they already have child care available when they find a job than if they can only begin arranging child care after finding a job. In addition, children can have greater stability if they can remain in the same child care without disruption while their parent searches for a job.

All but five states allowed families receiving child care assistance to continue receiving it for at least some amount of time while a parent searched for a job in 2014, the same as in 2013. Yet less than one-third of the states (fourteen) allowed families to qualify for and begin receiving child care assistance while a parent searched for a job in 2014, the same as in 2013.[80]

Among states setting a limit by the number of days, weeks, or months, the amount of time families could continue receiving or qualify for and begin receiving child care assistance while a parent searched for a job ranged from two weeks to thirteen weeks in 2014. Four states increased the length of time families could continue receiving child care assistance while a parent searched for a job between 2013 and 2014.[81]

- Forty-six states allowed families receiving child care assistance to continue receiving it while a parent searched for a job in 2014, the same number of states as in 2013 (*see Table 5*).
    - Three states allowed families to continue receiving child care assistance until the end of the month in which the parent lost his or her job in 2014. Two states allowed families to continue receiving child care assistance until the end of the month following the month in which the parent lost his or her job in 2014, including one state that in 2013 had allowed families to continue receiving child care assistance only until the end of the same month in which the parent lost his or her job. In these states, the amount of time a parent had to search for a new job depended on when during the month s/he lost a job.
    - Three states allowed families to continue receiving child care assistance while a parent searched for a job for up to a certain number of hours, including one state for up to 80 hours, one state for up to 150 hours, and one state for up to 240 hours in 2014.
    - One state allowed families to continue receiving child care assistance while a parent searched for a job for up to two weeks in 2014.
    - One state allowed families to continue receiving child care assistance while a parent searched for a job for up to twenty-one days in 2014.
    - Nineteen states allowed families to continue receiving child care assistance while a parent searched for a job for up to either thirty days or four weeks in 2014.
    - One state allowed families to continue receiving child care assistance while a parent searched for a job for up to forty days in 2014.
    - One state allowed families to continue receiving child care assistance while a parent searched for a job for up to fifty-six days in 2014.
    - Ten states allowed families to continue receiving child care assistance while a parent searched for a job for up to either sixty days, eight weeks, or two months in 2014, including one state that increased the length of time from thirty days and one state that increased the length of time from forty-five days in 2013.

- Five states allowed families to continue receiving child care assistance while a parent searched for a job for up to either ninety days, thirteen weeks, or three months in 2014, including one state that increased the length of time from thirty days.
- Four states allowed families to receive child care assistance while a parent searched for a job for up to either thirty days or four weeks in 2014.
- One state allowed families to receive child care assistance while a parent searched for a job for up to forty days in 2014.
- Five states allowed families to receive child care assistance while a parent searched for a job for up to either sixty days, eight weeks, or two months in 2014.

- Five states did not allow families receiving child care assistance to continue receiving it while a parent searched for a job in 2014, the same number as in 2013.
- Fourteen states allowed families not receiving child care assistance to qualify for assistance while a parent searched for a job in 2014, the same number as in 2013.[82]
  - Three states allowed families to receive child care assistance while a parent searched for a job for up to a certain number of hours, including one state for up to 80 hours, one state for up to 150 hours, and one state for up to 240 hours in 2014.
  - One state allowed families to receive child care assistance while a parent searched for a job for up to two weeks in 2014.
- One state permitted localities to allow families not receiving child care assistance to qualify for assistance while a parent searched for a job for up to six months (if funds were available) in 2014, the same as in 2013.
- Thirty-six states did not allow families not receiving child care assistance to qualify for assistance while a parent searched for a job in 2014, the same number as in 2013.

All but five states allowed families receiving child care assistance to continue receiving it for at least some amount of time while a parent searched for a job in 2014.

conclusion

FAMILIES' ACCESS TO CHILD CARE ASSISTANCE AND/OR THE EXTENT OF ASSISTANCE THEY COULD RECEIVE INCREASED under one or more key child care assistance policies in nearly two-thirds of the states, and decreased in less than one-third of the states, between February 2013 and February 2014. This year's trend built on initial progress made in the previous year, when families experienced improvements in slightly more states than they experienced cutbacks, and represented a reversal from the two years before that, when families experienced cutbacks in more states than they experienced improvements.

While the policies examined in this report are key indicators for assessing child care assistance, and suggest encouraging trends over the past two years and continuing into next year, there are other important indicators to consider. For example, the number of children receiving child care assistance in 2012 (the most recent year for which data are available) was 1.51 million,[83] a decrease from 1.81 million in 2001,[84] even though there were a greater number of children living in low-income families in 2012 than in 2001.[85] Data are not yet available to determine whether this decline continued through 2014 or the policy improvements in the past two years were accompanied by an uptick in children served. Regardless of whether there was a small increase or decrease in enrollment, there are still far too many children whose families cannot receive the help they need.[86]

As more policy makers at the federal, state, and local level recognize the value of child care and early education, more are supporting increased investments that will allow for additional policy improvements and for more families to receive child care assistance and participate in other early education programs. Continued progress in this critical area is essential to ensure that parents have the affordable, reliable child care they need to work, that children have the opportunities they need to learn and grow, and that our nation has the strong workforce it needs for economic prosperity now and in the future.

endnotes

1 Research demonstrates the important role that high-quality child care plays in giving children a strong start. Suzanne Helburn, Mary L. Culkin, Carollee Howes, Donna Bryant, Richard Clifford, Debby Cryer, Ellen Peisner-Feinberg, and Sharon Lynn Kagan, Cost, Quality, and Child Outcomes in Child Care Centers (Denver, CO: University of Colorado, 1995); Ellen S. Peisner-Feinberg, Richard M. Clifford, Mary L. Culkin, Carollee Howes, Sharon Lynn Kagan, et al., The Children of the Cost, Quality, and Outcomes Study Go to School (Chapel Hill, NC: University of North Carolina, Frank Porter Graham Child Development Center, 1999); Eric Dearing, Kathleen McCartney, and Beck A. Taylor, Does Higher Quality Early Child Care Promote Low-Income Children's Math and Reading Achievement in Middle Childhood?, Child Development, 80 (5), 2009, 1329-1349; National Research Council and the Institute of Medicine, From Neurons to Neighborhoods: The Science of Early Childhood Development (Washington, DC: National Academy Press, 2000).

2 In 2013 (the most recent year for which data are available), 7.27 million families with children under age six (43.4 percent) had incomes under 200 percent of poverty. U.S. Census Bureau, Current Population Survey, 2014 Annual Social and Economic Supplement, Detailed Table POV08: Families With Related Children Under 6 by Number of Working Family Members and Family Structure: 2013, *available at* http://www.census.gov/hhes/www/cpstables/032014/pov/pov08_200.htm.

3 Child Care Aware of America, Parents and the High Cost of Child Care: 2013 Report (Arlington, VA: Child Care Aware of America, 2013), 14, *available at* http://usa.childcareaware.org/sites/default/files/cost_of_care_2013_103113_0.pdf.

4 These thirty-three states are Alabama, Arizona, Arkansas, Colorado, District of Columbia, Florida, Georgia, Idaho, Illinois, Indiana, Iowa, Maine, Massachusetts, Minnesota, Mississippi, Missouri, Montana, Nebraska, Nevada, New Hampshire, New Jersey, New Mexico, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, Texas, Vermont, Virginia, and Washington.

5 These thirteen states are Alabama, Arkansas, District of Columbia, Kentucky, Maine, Maryland, Minnesota, New York, North Carolina, North Dakota, Oregon, South Dakota, and Utah. Eight of these states are also included in the list of thirty-three states above because in these states, families were worse off under some policies, but better off under other policies.

6 Families were considered worse off under the child care assistance policies between 2013 and 2014 if during that time period the state reduced its income eligibility limit to qualify for child care assistance as a dollar amount; implemented a waiting list, increased its waiting list or froze intake; increased parent copayments for families at 100 percent of poverty and/or 150 percent of poverty as a percentage of income; reduced provider reimbursement rates as a dollar amount or stopped reimbursing providers at the federally recommended level, the 75th percentile of current market rates; reduced reimbursement rate differentials for higher-quality care; and/or reduced the length of time families could receive child care assistance while a parent searched for a job or stopped allowing families to qualify for or continue receiving child care assistance while a parent searched for a job. Families were considered better off under state child care assistance policies between 2013 and 2014 if during that time period the state increased its income eligibility limit to qualify for child care assistance by an amount that exceeded an annual inflation adjustment; reduced its waiting list, served all families on the waiting list, or unfroze intake; reduced parent copayments for families at 100 percent of poverty and/or 150 percent of poverty as a percentage of income; increased provider reimbursement rates as a dollar amount; increased or began implementing reimbursement rate differentials for higher-quality care; and/or increased the amount of time families could receive child care assistance while a parent searched for a job or started allowing families to qualify for or continue receiving child care assistance while a parent searched for a job.

7 Karen Schulman and Helen Blank, Pivot Point: State Child Care Assistance Policies 2013 (Washington, DC: National Women's Law Center, 2013), *available at* http://www.nwlc.org/sites/default/files/pdfs/final_nwlc_2013statechildcareassistancereport.pdf. These counts include twelve states in which families were better off under some policies and worse off under others.

8 Karen Schulman and Helen Blank, Downward Slide: State Child Care Assistance Policies 2012 (Washington, DC: National Women's Law Center, 2012), *available at* http://www.nwlc.org/sites/default/files/pdfs/NWLC2012_StateChildCareAssistanceReport.pdf. These counts include six states in which families were better off under some policies and worse off under others.

9 Karen Schulman and Helen Blank, State Child Care Assistance Policies 2011: Reduced Support for Families in Challenging Times (Washington, DC: National Women's Law Center, 2011), *available at* http://www.nwlc.org/sites/default/files/pdfs/state_child_care_assistance_policies_report2011_final.pdf. These counts include seven states in which families were better off under some policies and worse off under others.

10 American Recovery and Reinvestment Act, Pub. L. No. 111–8, 123 Stat. 524 (2009).

11 Program Instruction (CCDF-ACF-PI-2009-03), Issued April 9, 2009, *available at* http://www.acf.hhs.gov/sites/default/files/occ/pi2009_03.pdf.

12 Budget Control Act of 2011, Pub. L. No. 112–25, 125 Stat. 240 (2011).

13 CCDBG funding was $5.195 billion in FY 2012 ($5.381 billion in FY 2014 dollars), $5.123 billion in FY 2013 ($5.218 billion in FY 2014 dollars), and $5.277 billion in FY 2014. FY 2012 funding levels from U.S. Department of Health and Human Services, Fiscal Year 2013 Budget in Brief (Washington, DC: U.S. Department of Health and Human Services, 2012), 88, 92, *available at* http://www.hhs.gov/asfr/ob/budgets-in-brief-performance-reports.html. FY 2013 and FY 2014 funding levels from U.S. Department of Health and Human Services, Fiscal Year 2015 Budget in Brief (Washington, DC: U.S. Department of Health and Human Services, 2014), 108, 113, *available at* http://www.hhs.gov/budget/fy2015/fy-2015-budget-in-brief.pdf. Inflation adjustments calculated by National Women's Law Center usingCongressional Budget Office, The Budget and Economic Outlook report series; figures are adjusted for inflation using the average of the Consumer Price Index and the Employment Cost Index. See section on funding for child care assistance for more details.

14 National Association of State Budget Officers, The Fiscal Survey of States: Spring 2014 (Washington, DC: NASBO, 2014), *available at* http://www.nasbo.org/sites/default/files/NASBO%20Spring%202014%20Fiscal%20Survey.pdf; National Conference of State Legislatures, State Budget Update: Spring 2014 (Denver, CO: NCSL, 2014), *available at* http://www.ncsl.org/documents/fiscal/SPRING_SBU_2014_free.pdf; National Conference of State Legislatures, State Budget and Tax Actions: Preliminary Report (August 2013) (Denver, CO: NCSL, 2013), *available at* http://www.ncsl.org/Portals/1/Documents/fiscal/SBTA_PreliminaryReport_final.pdf; Elizabeth McNichol, States Should React Cautiously to Recent Income Tax Growth: April Surge Provides Opportunity to Invest in Infrastructure, Boost Reserves (Washington, DC: Center on Budget and Policy Priorities, 2013), *available at* http://www.cbpp.org/files/6-13-13sfp.pdf.

15 This report uses 2001 policies as the basis for comparison because, until 2010, it was the year between the peak year for Child Care and Development Block Grant (CCDBG) funding, 2002, and the peak year for Temporary Assistance for Needy Families (TANF) funding used for child care, 2000. See section on funding for child care assistance.

16 The federal poverty level for a family of three was $19,790 in 2014. U.S. Department of Health and Human Services, 2014 Poverty Guidelines, *available at* http://aspe.hhs.gov/poverty/14poverty.cfm. The federal poverty level for a family of three was $19,530 in 2013. U.S. Department of Health and Human Services, 2013 Poverty Guidelines, *available at* http://aspe.hhs.gov/poverty/13poverty.cfm.

17 The federal poverty level for a family of three was $14,630 in 2001. U.S. Department of Health and Human Services, The 2001 HHS Poverty Guidelines, *available at* http://aspe.hhs.gov/poverty/01poverty.htm.

18 Comparable data were not collected for 2001.

19 These counts include one state that made both improvements in some policies and cutbacks in others.

20 In addition to these two states, Nevada, which had 653 children on the waiting list for child care assistance as of February 2014, began to serve all children on the waiting list, but the list grew to 829 children as more families applied upon learning that the state was serving new families. New Mexico's waiting list grew from

259 children in February 2014 to 639 children in July, but in August the state was planning to serve all children on the waiting list. Pennsylvania's waiting list grew from 2,651 children in February 2014 to 5,906 children in May, but decreased to 4,211 children in August. These three states are not counted as having either cuts or improvements in their waiting lists since February 2014 because they did not have consistent trends in their waiting lists.

21 Oregon projected that it would have to resume placing children on the waiting list in October 2014.

22 For states that pay higher rates for higher-quality care, only if the state increased its base rate (the lowest rate) is it included here, and the reimbursement rate increase described is an increase in the base rate.

23 These eight states do not include Illinois or New Jersey, which increased their rates for family child care, but not for center care, after February 2014. For example, in Illinois, the monthly reimbursement rate for family child care for a four-year-old in Group 1A counties increased from $633 to $646 as of July 2014. In New Jersey, the monthly reimbursement rate for family child care for a four-year-old statewide increased from $514 to $520 as of April 2014, and to $527 as of August 2014. These eight states also do not include Michigan, which did not increase its reimbursement rates, but did increase the maximum number of reimbursable hours from 80 hours to 90 hours in a biweekly period as of July 2014, which had the effect of increasing the maximum monthly reimbursement a provider could receive. For example, the monthly reimbursement a center could receive for providing full-time care (9 hours a day, 5 days a week, 4.33 weeks a month) for a four-year-old increased from $433 to $487.

24 As explained in the endnote above, Michigan's monthly reimbursement rate at the base level as of July 2014 is calculated to be higher than the base monthly reimbursement rate as of February 2014 shown in Table 4c because the state increased the maximum number of reimbursable hours from 80 hours to 90 hours in a biweekly period.

25 The policy change applies to parents who were employed full time before the job loss. Utah will also continue to provide assistance to parents searching for a job for up to 150 hours of child care in a six-month period through the separate Kids-in-Care program.

26 This study focuses on the income criteria used to determine a family's eligibility when it first applies for assistance, because this traditionally has been used as the measure of access to benefit programs and determines whether a family can enter the program. However, some states allow families to continue to receive assistance up to a higher income level than the initial eligibility limit. Information about states that have different entrance and exit income eligibility limits is provided in the notes to Tables 1a and 1b.

27 U.S. Department of Health and Human Services, Fiscal Year 2015 Budget in Brief (Washington, DC: U.S. Department of Health and Human Services, 2014), 108, 113, *available at* http://www.hhs.gov/budget/fy2015/fy-2015-budget-in-brief.pdf. This amount includes $2.360 billion in discretionary funding and $2.917 billion in mandatory (entitlement) funding.

28 U.S. Department of Health and Human Services, Fiscal Year 2015 Budget in Brief (Washington, DC: U.S. Department of Health and Human Services, 2014), 108, 113, *available at* http://www.hhs.gov/budget/fy2015/fy-2015-budget-in-brief.pdf. This amount includes $2.206 billion in discretionary funding and $2.917 billion in mandatory (entitlement) funding.

29 National Women's Law Center calculations using Congressional Budget Office, The Budget and Economic Outlook report series. Figures are adjusted for inflation using the average of the Consumer Price Index and the Employment Cost Index.

30 U.S. Department of Health and Human Services, Fiscal Year 2011 Budget in Brief (Washington, DC: U.S. Department of Health and Human Services, 2010), 75, 79, *available at* http://www.hhs.gov/asfr/ob/budgets-in-brief-performance-reports.html. In addition to the $1 billion in ARRA funding, this total of $6.044 billion in CCDBG funding includes $2.127 billion in discretionary funding and $2.917 billion in mandatory (entitlement) funding.

31 National Women's Law Center calculations using Congressional Budget Office, The Budget and Economic Outlook report series. Figures are adjusted for inflation using the average of the Consumer Price Index and the Employment Cost Index.

32 CCDBG funding in FY 2002, before adjusting for inflation, was $4.817 billion. This amount includes $2.1 billion in discretionary funding and $2.717 billion in mandatory (entitlement) funding. U.S. Department of Health and Human Services, FY 2003 President's Budget for HHS (Washington, DC: U.S. Department of Health and Human Services, 2002), 83, 92, *available at* http://www.hhs.gov/asfr/ob/budgets-in-brief-performance-reports.html. Inflation adjustment calculated by National Women's Law Center using Congressional Budget Office, The Budget and Economic Outlook report series; figures are adjusted for inflation using the average of the Consumer Price Index and the Employment Cost Index.

33 National Women's Law Center analysis of data from U.S. Department of Health and Human Services, Administration for Children and Families, Fiscal Year 2013 TANF Financial Data, Table A.1.: Federal TANF and State MOE Expenditures Summary by ACF-196 Spending Category, FY 2013, *available at* http://www.acf.hhs.gov/sites/default/files/ofa/fy_2013_expenditures.pdf. Total includes $1.367 billion transferred to CCDBG, $73 million spent on child care categorized as "assistance," and $1.037 billion spent on child care categorized as "non-assistance."

34 National Women's Law Center analysis of data from U.S. Department of Health and Human Services, Administration for Children and Families, Fiscal Year 2000 TANF Financial Data, Table A. Combined Federal Funds Spent in FY 2000 Through the Fourth Quarter, *available at* http://archive.acf.hhs.gov/programs/ofs/data/tanf_2000.html. Total includes $2.413 billion transferred to CCDBG, $353 million spent on child care categorized as "assistance," and $1.200 billion spent on child care categorized as "non-assistance."

35 National Women's Law Center calculations using Congressional Budget Office, The Budget and Economic Outlook report series. Figures are adjusted for inflation using the average of the Consumer Price Index and the Employment Cost Index.

36 In FY 2001, CCDBG funding was $4.567 billion ($6.169 billion in FY 2014 dollars) and TANF funding used for child care was $3.541 billion ($4.783 billion in FY 2014 dollars). The CCDBG funding amount includes $2.0 billion in discretionary funding and $2.567 billion in mandatory (entitlement) funding. U.S. Department of Health and Human Services, FY 2002 President's Budget for HHS (Washington, DC: U.S. Department of Health and Human Services, 2001), 89-90, *available at* http://archive.hhs.gov/budget/pdf/hhs2002.pdf. The TANF funding amount includes $1.899 billion transferred to CCDBG, $285 million spent on child care categorized as "assistance," and $1.357 billion spent on child care categorized as "non-assistance." National Women's Law Center analysis of data from U.S. Department of Health and Human Services, Administration for Children and Families, Fiscal Year 2001 TANF Financial Data, Table A. Combined Federal Funds Spent in FY 2001 Through the Fourth Quarter, *available at* http://archive.acf.hhs.gov/programs/ofs/data/tanf_2001.html. CCDBG and TANF amounts in FY 2014 dollars calculated by National Women's Law Center using Congressional Budget Office, The Budget and Economic Outlook report series; figures are adjusted for inflation using the average of the Consumer Price Index and the Employment Cost Index.

37 In states that allow localities to set their income limits within a state-specified range, the maximum of that range is used for the analysis in this report.

38 State median income is not used to measure inflation between 2001 and 2014 because variations among states in state median income adjustments and in the benchmark states use to set their income eligibility limits are more difficult to track than changes in the federal poverty level over a long-term period.

39 These two states are Nebraska (which increased its income limit from 120 percent of the 2012 federal poverty level to 125 percent of the 2013 federal poverty level) and North Dakota (which increased its income limit from 160 percent of the 2012 federal poverty level to 85 percent of the 2014 state median income). In most instances, the states included in the counts referenced in the text of this report are discernible from the tables following the endnotes. When the states are not easily discernible from the tables, the endnotes identify the states referenced.

40 These twenty-nine states include one state (Oregon) that set its income limit based on the federal poverty level and adjusted its income limit for the 2014 federal poverty level; twenty-two states (Arizona, Delaware, Florida, Idaho, Illinois, Indiana, Iowa, Kansas, Maine, Missouri, Nevada, New Hampshire, New Mexico, New York, Pennsylvania, Rhode Island, South Carolina, South Dakota, Virginia, Washington, Wisconsin, and Wyoming) that set their income limits based on the federal poverty level and adjusted their income limits for the 2013 federal poverty level; and six states (Colorado, Connecticut, Massachusetts, Minnesota, Tennessee, and Texas) that set their income limits based on state median income and adjusted their income limits for the 2014 state median income between February 2013 and February 2014.

41 These four states include one state (Montana) that set its income limit based on the federal poverty level and adjusted its income limit from the 2010 to 2012 federal poverty level; and three states (Alabama, New Jersey, and Ohio) that set their income limits based on the federal poverty level and adjusted their income limits from the 2011 to 2013 federal poverty level.
42 This state is Vermont, which set its income limit based on the federal poverty level and adjusted its income limit from the 2010 to 2013 federal poverty level.
43 This state is Kentucky.
44 These two states are North Carolina and Utah.
45 These fifteen states include two states in which the income limit decreased by five percentage points, four states in which the income limit decreased by three percentage points, three states in which the income limit decreased by two percentage points, two states in which the income limit stayed the same, two states in which the income limit increased by three percentage points, one state in which the income limit increased by four percentage points, and one state in which the income limit increased by five percentage points as a percentage of the federal poverty level.
46 National Women's Law Center analysis of data from Elise Gould, Hilary Wething, Natalie Sabadish, and Nicholas Finio, What Families Need to Get By: The 2013 Update of EPI's Family Budget Calculator (Washington, DC: Economic Policy Institute, 2013), *available at* http://www.epi.org/publication/ib368-basic-family-budgets/; and from Sylvia Allegretto, Basic Family Budgets: Working Families' Incomes Often Fail to Meet Living Expenses Around the U.S. (Washington, DC: Economic Policy Institute, 2005), *available at* http://www.epi.org/page/-/old/briefingpapers/165/bp165.pdf.
47 See, e.g., Karen Schulman and Helen Blank, In Their Own Voices: Parents and Providers Struggling with Child Care Cuts (Washington, DC: National Women's Law Center, 2005), 10; Children's Action Alliance, The Real Reality of Arizona's Working Families—Child Care Survey Highlights (Phoenix, AZ: Children's Action Alliance, 2004); Deborah Schlick, Mary Daly, and Lee Bradford, Faces on the Waiting List: Waiting for Child Care Assistance in Ramsey County (Ramsey County, MN: Ramsey County Human Services, 1999) (Survey conducted by the Minnesota Center for Survey Research at the University of Minnesota); Philip Coltoff, Myrna Torres, and Natasha Lifton, The Human Cost of Waiting for Child Care: A Study (New York, NY: Children's Aid Society, 1999); Jennifer Gulley and Ann Hilbig, Waiting List Survey: Gulf Coast Workforce Development Area (Houston, TX: Neighborhood Centers, Inc., 1999); Jeffrey D. Lyons, Susan D. Russell, Christina Gilgor, and Amy H. Staples, Child Care Subsidy: The Costs of Waiting (Chapel Hill, NC: Day Care Services Association, 1998); Casey Coonerty and Tamsin Levy, Waiting for Child Care: How Do Parents Adjust to Scarce Options in Santa Clara County? (Berkeley, CA: Policy Analysis for California Education, 1998); Philadelphia Citizens for Children and Youth, et al., Use of Subsidized Child Care by Philadelphia Families (Philadelphia, PA: Philadelphia Citizens for Children and Youth, 1997); Greater Minneapolis Day Care Association, Valuing Families: The High Cost of Waiting for Child Care Sliding Fee Assistance (Minneapolis, MN: Greater Minneapolis Day Care Association, 1995).
48 Waiting lists are not a perfect measure of unmet need, however. For example, waiting lists may increase due to expanded outreach efforts that make more families aware of child care assistance programs, and may decrease due to a state's adoption of more restrictive eligibility criteria.
49 These eighteen states include Tennessee, because it does not serve any families other than families receiving or transitioning from TANF, teen parents, foster families, and children under protective custody; however, the state no longer refers to this policy as frozen intake.
50 These three states are Colorado, Oregon, and Pennsylvania.
51 These three states are Florida, New Mexico, and North Carolina.
52 These four states are Alabama, Arizona, Massachusetts, and Nevada.
53 Comparable data were not collected in 2001.
54 If a state determines its copayment based on the cost of care, this report assumes that the family had a four-year-old in a licensed, non-accredited center charging the state's maximum reimbursement rate. If a state allows localities to set their copayments within a state-specified range, the maximum of that range is used for the analysis in this report.
55 U.S. Census Bureau, Who's Minding the Kids? Child Care Arrangements: 2011, Detailed Tables, Table 6: Average Weekly Child Care Expenditures of Families with Employed Mothers that Make Payments, by Age Groups and Selected Characteristics: Spring 2011 (2013), *available at* http://www.census.gov/hhes/childcare/data/sipp/2011/tables.html.
56 For a family of three, 150 percent of the federal poverty level was equal to an income of $29,295 in 2013 and $29,685 in 2014.
57 These ten states do not include states that had income eligibility limits to initially qualify for assistance below 150 percent of poverty but allowed families already receiving assistance to remain eligible with incomes above 150 percent of poverty, as was the case for six states in 2014 (Florida, Indiana, Missouri, Ohio, South Carolina, and West Virginia) and six states in 2013 (Florida, Indiana, Kentucky, Ohio, South Carolina, and West Virginia). Also note that the number of states in which a family at 150 percent of poverty was not eligible for assistance in 2013 reported here (nine) differs from the number reported in the 2013 State Child Care Assistance Policies report (eight) because one state provided revised information.
58 For a family of three, 150 percent of the federal poverty level was equal to an income of $21,945 in 2001.
59 Child Care and Development Fund (Preamble to Final Rule), 63 Fed. Reg. 142 (July 24, 1998), *available at* http://www.gpo.gov/fdsys/pkg/FR-1998-07-24/pdf/98-19418.pdf.
60 For this analysis, a state's reimbursement rates in a given year are considered up-to-date if based on a market survey conducted no more than two years prior to that year. Also note that for this analysis, a state's reimbursement rates are not considered to be at the 75th percentile of market rates if only some of its rates—for example, for certain regions, age groups, or higher-quality care—are at the 75th percentile.
61 These twenty states are Colorado, District of Columbia, Illinois, Iowa, Maine, Minnesota, Missouri, Montana, Nebraska, New Hampshire, New Mexico, Oklahoma, Oregon, North Dakota, South Dakota, Texas, Utah, Vermont, Virginia, and Washington. Colorado is included because some of its counties, including the county (Denver) for which rates are reported in Table 4c, increased their rates. The District of Columbia is included because it increased its rates for infants and toddlers, although not for other age groups. Illinois is included because it increased its rates for family child care, although not for centers. Maine is included because it increased its rates for many categories of care, although not the particular categories in the particular counties shown in Table 4c. Texas is included because it reported that sixteen of its twenty-eight localities—which determine when to update rates—had updated at least some of their rates within the past two years. The twenty states do not include Florida, which did not report that any of its localities—which determine when to update rates—had increased their rates within the past two years. Differences between rates shown in Table 4c of this report and rates shown in Table 4c of the State Child Care Assistance Policies 2012 and 2013 reports for any states other than those identified in this and the following two endnotes are due to revisions or recalculations of the data or changes in the category for which data are reported rather than policy changes.
62 These sixteen states are Colorado, District of Columbia, Illinois, Iowa, Maine, Minnesota, Missouri, Montana, Nebraska, New Hampshire, New Mexico, Oklahoma, Oregon, Texas, Vermont, and Washington.
63 These three states are Pennsylvania, Wisconsin, and Wyoming. Pennsylvania and Wisconsin reduced their base rates, but raised their higher rates for higher-quality care.
64 States were asked to report data from their most recent market rate survey, and most states reported data from 2012 or more recent surveys. However, four states—Delaware, Nevada, New Hampshire, and New York—reported data from 2011 or 2010. Delaware and Nevada are included in these thirty-four states because their reimbursement rates were 20 percent or more below the 75th percentile of market rates based on their outdated surveys, and so presumably their reimbursement rates would be 20 percent or more below the 75th percentile of current market rates. New Hampshire and New York are not included in the thirty-four states because their reimbursement rates were less than 20 percent below the 75th percentile of market rates based on their outdated surveys, and thus it is not possible to calculate whether their reimbursement rates were 20 percent or more below the 75th percentile of current market rates.

65 Delaware and Nevada are included in these thirty states because their reimbursement rates were 20 percent or more below the 75th percentile of market rates based on their outdated surveys, and so presumably their reimbursement rates would be 20 percent or more below the 75th percentile of current market rates. New Hampshire and New York are not included in the thirty states because their reimbursement rates were less than 20 percent below the 75th percentile of market rates based on their outdated surveys, and thus it is not possible to calculate whether their reimbursement rates were 20 percent or more below the 75th percentile of current market rates.

66 Comparable data were not collected for 2001. However, comparable data were collected for 2000 and 2005. In each of these years, thirty-seven states permitted child care providers to charge parents the difference between the state reimbursement rate and the provider's private fee. Karen Schulman and Helen Blank, Child Care Assistance Policies 2005: States Fail to Make Up Lost Ground, Families Continue to Lack Critical Supports (Washington, DC: National Women's Law Center, 2005), 5, 18; Karen Schulman, Helen Blank, and Danielle Ewen, A Fragile Foundation: State Child Care Assistance Policies (Washington, DC: Children's Defense Fund, 2001), 103.

67 This analysis is based on tiered rates in each state's most populous city, county, or region. Within each state, the use and structure of tiered rates may vary across cities, counties, or regions.

68 The four states that had tiered rates in 2014 but not 2013 are Georgia, New Hampshire, Rhode Island, and Washington.

69 Comparable data on tiered rates were not collected for 2001.

70 This state is Hawaii.

71 This state is Massachusetts.

72 This state is Rhode Island. In addition, the state requires that at least 10 percent of the provider's enrollment must be receiving child care assistance for the provider to be eligible for the increased reimbursement for higher-quality care.

73 This analysis is based on the number of different rate levels, not based on the number of quality levels. The base rate refers to the lowest rate level, regardless of whether the base level is incorporated into the state's quality rating and improvement system (for example, a base rate that is the initial one-star rate in a five-star rating system) or is not a level of the quality rating and improvement system (for example, a base rate that is the rate for providers not participating in a voluntary five-star rating system).

74 One state, Ohio, changed the number of its rate levels between 2013 and 2014; it increased the number of rate levels from four to six.

75 Massachusetts and Rhode Island are not included in this analysis because they do not have higher rates for higher-quality care for four-year-olds. Massachusetts' highest rate for center care for a one-year-old was 25 percent below the 75th percentile of current market rates for this type of care. Rhode Island's highest rate for center care for a one-year-old was 19 percent below the 75th percentile of current market rates for this type of care.

76 These twenty-eight states include New Mexico and North Carolina, which determined a separate 75th percentile of current market rates for child care providers at each quality level. In North Carolina, the reimbursement rate at the highest quality level was lower than the 75th percentile for four of the state's five rate levels. In New Mexico, the reimbursement rate at the highest quality level was lower than the 75th percentile at each of the state's four rate levels.

77 Massachusetts' highest rate for center care for a one-year-old was 3 percent above its lowest rate for this type of care. Rhode Island's highest rate for center care for a one-year-old was 5 percent above its lowest rate for this type of care.

78 These five states are Nebraska, New Mexico, Ohio, Oklahoma, and Pennsylvania.

79 This state is Colorado. While the differential between the highest and lowest rates was smaller in 2014 than in 2013, the rate at each level was higher in 2014 than in 2013.

80 This analysis is based on policies for families not connected to the TANF program. Additional states allowed families receiving or transitioning from TANF to qualify for child care assistance while a parent searched for a job.

81 These four states are Arkansas, Florida, Illinois, and Oregon. See the notes for Table 5 for more details about the states' policy changes.

82 The number of states that allowed families not receiving child care assistance to qualify for assistance while a parent searched for a job in 2013 reported here (fourteen) differs from the number reported in the State Child Care Assistance Policies 2013 report (fifteen) because one state provided revised information.

83 U.S. Department of Health and Human Services, Administration for Children and Families, Office of Child Care, FY 2012 CCDF Data Tables (Preliminary), Table 1 - Average Monthly Adjusted Number of Families and Children Served, *available at* http://www.acf.hhs.gov/programs/occ/resource/fy-2012-ccdf-data-tables-preliminary-table-1.

84 U.S. Department of Health and Human Services, Administration for Children and Families, Office of Child Care, FY 2001 CCDF Data Tables and Charts, Table 1 - Child Care and Development Fund Average Monthly Adjusted Number of Families and Children Served, *available at* http://www.acf.hhs.gov/sites/default/files/occ/fy2001tables1.pdf.

85 The number of children under age six living in low-income families (families with incomes below 200 percent of poverty) increased from 9.7 million in 2001 to 11.4 million in 2012. National Center for Children in Poverty, Low-income Children in the United States: National and State Trend Data, 1998–2008 (New York, NY: National Center for Children in Poverty, 2009), 37, *available at* http://www.nccp.org/publications/pdf/text_907.pdf; Yang Jiang, Mercedes Ekono, Curtis Skinner, Basic Facts about Low-income Children: Children under 6 Years, 2012 (New York, NY: National Center for Children in Poverty, 2014), 2, *available at* http://www.nccp.org/publications/pdf/text_1088.pdf.

86 Only one in six children eligible for federal child care assistance received it in 2009 (the most recent year for which data are available). U.S. Department of Health and Human Services, Office of Human Services Policy, Office of the Assistant Secretary for Planning and Evaluation, Estimates of Child Care Eligibility and Receipt for Fiscal Year 2009 (Washington, DC: U.S. Department of Health and Human Services, 2012), *available at* http://aspe.hhs.gov/hsp/12/childcareeligibility/ib.pdf.

TABLE 1A: INCOME ELIGIBILITY LIMITS FOR A FAMILY OF THREE IN 2013 AND 2014

	Income limit in 2014			Income limit in 2013			Change in income limit 2013 to 2014		
State	As annual dollar amount	As percent of poverty ($19,790 a year)	As percent of state median income	As annual dollar amount	As percent of poverty ($19,530 a year)	As percent of state median income	As annual dollar amount	As percent of poverty	As percent of state median income
Alabama*	$25,392	128%	47%	$24,084	123%	45%	$1,308	5%	2%
Alaska*	$54,288	274%	74%	$54,288	278%	75%	$0	-4%	-1%
Arizona*	$32,244	163%	60%	$31,512	161%	57%	$732	2%	3%
Arkansas	$29,760	150%	62%	$29,760	152%	62%	$0	-2%	0%
California*	$42,216	213%	65%	$42,216	216%	65%	$0	-3%	0%
Colorado*	$25,389-$60,284	128%-305%	36%-85%	$24,814-$58,176	127%-298%	36%-85%	$575-$2,108	1%-7%	0%
Connecticut*	$43,333	219%	50%	$42,829	219%	50%	$504	0%	0%
Delaware*	$39,060	197%	56%	$38,184	196%	53%	$876	2%	2%
District of Columbia*	$45,775	231%	62%	$45,775	234%	71%	$0	-3%	-9%
Florida*	$29,295	148%	53%	$28,635	147%	52%	$660	1%	1%
Georgia	$28,160	142%	50%	$28,160	144%	50%	$0	-2%	0%
Hawaii	$47,124	238%	66%	$47,124	241%	64%	$0	-3%	2%
Idaho*	$25,392	128%	49%	$24,828	127%	48%	$564	1%	1%
Illinois*	$36,132	183%	53%	$35,328	181%	52%	$804	2%	1%
Indiana*	$24,804	125%	42%	$24,240	124%	41%	$564	1%	1%
Iowa*	$28,332	143%	44%	$27,684	142%	45%	$648	1%	-1%
Kansas*	$36,144	183%	58%	$35,316	181%	58%	$828	2%	0%
Kentucky*	$18,540	94%	33%	$27,804	142%	52%	-$9,264	-49%	-18%
Louisiana	$30,540	154%	53%	$30,540	156%	54%	$0	-2%	-2%
Maine	$48,828	247%	78%	$47,725	244%	80%	$1,103	2%	-2%
Maryland	$29,990	152%	34%	$29,990	154%	35%	$0	-2%	-1%
Massachusetts*	$43,165	218%	50%	$42,096	216%	50%	$1,069	3%	0%
Michigan	$23,880	121%	39%	$23,880	122%	39%	$0	-2%	0%
Minnesota*	$34,459	174%	47%	$33,786	173%	47%	$673	1%	0%
Mississippi	$34,999	177%	72%	$34,999	179%	73%	$0	-2%	-1%
Missouri*	$24,036	121%	40%	$23,520	120%	40%	$516	1%	0%
Montana	$28,632	145%	49%	$27,468	141%	49%	$1,164	4%	1%
Nebraska*	$24,408	123%	39%	$22,908	117%	38%	$1,500	6%	1%
Nevada	$25,392	128%	44%	$24,817	127%	43%	$575	1%	1%
New Hampshire*	$48,825	247%	61%	$47,725	244%	62%	$1,100	2%	0%
New Jersey*	$39,060	197%	45%	$37,060	190%	43%	$2,000	8%	2%
New Mexico*	$39,060	197%	81%	$38,180	195%	82%	$880	2%	-1%
New York*	$39,060	197%	56%	$38,180	195%	55%	$880	2%	0%
North Carolina*	$42,204	213%	75%	$42,818	219%	76%	-$614	-6%	-1%
North Dakota	$58,980	298%	85%	$30,575	157%	46%	$28,405	141%	39%
Ohio*	$24,420	123%	39%	$23,172	119%	38%	$1,248	5%	1%
Oklahoma*	$35,100	177%	66%	$35,100	180%	67%	$0	-2%	-2%
Oregon	$36,612	185%	63%	$36,130	185%	61%	$482	0%	2%
Pennsylvania*	$39,060	197%	57%	$38,180	195%	58%	$880	2%	0%
Rhode Island*	$35,154	178%	48%	$34,362	176%	46%	$792	2%	1%
South Carolina*	$29,295	148%	55%	$28,635	147%	53%	$660	1%	2%
South Dakota*	$35,613	180%	60%	$34,800	178%	60%	$813	2%	0%
Tennessee	$32,268	163%	60%	$31,692	162%	60%	$576	1%	0%
Texas*	$34,178-$47,752	173%-241%	61%-85%	$28,635-$47,190	147%-242%	52%-85%	$562-$5,543	0%-26%	0%-9%
Utah*	$34,395	174%	60%	$34,416	176%	60%	-$21	-2%	0%
Vermont*	$39,060	197%	57%	$36,600	187%	57%	$2,460	10%	0%
Virginia*	$29,295-$48,828	148%-247%	39%-65%	$28,644-$47,736	147%-244%	39%-65%	$651-$1,092	1%-2%	-1%-0%
Washington*	$39,072	197%	56%	$38,184	196%	56%	$888	2%	0%
West Virginia*	$28,632	145%	53%	$28,632	147%	56%	$0	-2%	-3%
Wisconsin*	$36,132	183%	54%	$35,316	181%	54%	$816	2%	0%
Wyoming*	$36,588	185%	57%	$35,808	183%	57%	$780	2%	-1%

TABLE 1B: INCOME ELIGIBILITY LIMITS FOR A FAMILY OF THREE IN 2001 AND 2014

	Income limit in 2014			Income limit in 2001			Change in income limit 2001 to 2014		
State	As annual dollar amount	As percent of poverty ($19,790 a year)	As percent of state median income	As annual dollar amount	As percent of poverty ($14,630 a year)	As percent of state median income	As annual dollar amount	As percent of poverty	As percent of state median income
Alabama*	$25,392	128%	47%	$18,048	123%	41%	$7,344	5%	6%
Alaska*	$54,288	274%	74%	$44,328	303%	75%	$9,960	-29%	-1%
Arizona*	$32,244	163%	60%	$23,364	160%	52%	$8,880	3%	7%
Arkansas*	$29,760	150%	62%	$23,523	161%	60%	$6,237	-10%	2%
California*	$42,216	213%	65%	$35,100	240%	66%	$7,116	-27%	-2%
Colorado*	$25,389-$60,284	128%-305%	36%-85%	$19,020-$32,000	130%-219%	36%-61%	$6,369-$28,284	-2%-86%	0%-24%
Connecticut*	$43,333	219%	50%	$47,586	325%	75%	-$4,253	-106%	-25%
Delaware*	$39,060	197%	56%	$29,260	200%	53%	$9,800	-3%	3%
District of Columbia*	$45,775	231%	62%	$34,700	237%	66%	$11,075	-6%	-4%
Florida*	$29,295	148%	53%	$20,820	142%	45%	$8,475	6%	9%
Georgia	$28,160	142%	50%	$24,278	166%	50%	$3,882	-24%	0%
Hawaii*	$47,124	238%	66%	$46,035	315%	83%	$1,089	-77%	-17%
Idaho*	$25,392	128%	49%	$20,472	140%	51%	$4,920	-12%	-2%
Illinois*	$36,132	183%	53%	$24,243	166%	43%	$11,889	17%	9%
Indiana*	$24,804	125%	42%	$20,232	138%	41%	$4,572	-13%	1%
Iowa*	$28,332	143%	44%	$19,812	135%	41%	$8,520	8%	3%
Kansas*	$36,144	183%	58%	$27,060	185%	56%	$9,084	-2%	2%
Kentucky*	$18,540	94%	33%	$24,140	165%	55%	-$5,600	-71%	-22%
Louisiana*	$30,540	154%	53%	$29,040	205%	75%	$1,500	-51%	-22%
Maine	$48,828	247%	78%	$36,452	249%	75%	$12,376	-2%	3%
Maryland	$29,990	152%	34%	$25,140	172%	40%	$4,850	-20%	-6%
Massachusetts*	$43,165	218%	50%	$28,968	198%	48%	$14,197	20%	2%
Michigan	$23,880	121%	39%	$26,064	178%	47%	-$2,184	-57%	-9%
Minnesota*	$34,459	174%	47%	$42,304	289%	76%	-$7,845	-115%	-29%
Mississippi	$34,999	177%	72%	$30,999	212%	77%	$4,000	-35%	-5%
Missouri*	$24,036	121%	40%	$17,784	122%	37%	$6,252	0%	3%
Montana	$28,632	145%	49%	$21,948	150%	51%	$6,684	-5%	-2%
Nebraska*	$24,408	123%	39%	$25,260	173%	54%	-$852	-49%	-15%
Nevada	$25,392	128%	44%	$33,420	228%	67%	-$8,028	-100%	-23%
New Hampshire*	$48,825	247%	61%	$27,797	190%	50%	$21,028	57%	11%
New Jersey*	$39,060	197%	45%	$29,260	200%	46%	$9,800	-3%	-1%
New Mexico*	$39,060	197%	81%	$28,300	193%	75%	$10,760	4%	6%
New York*	$39,060	197%	56%	$28,644	202%	61%	$10,416	-5%	-5%
North Carolina*	$42,204	213%	75%	$32,628	223%	69%	$9,576	-10%	6%
North Dakota	$58,980	298%	85%	$29,556	202%	69%	$29,424	96%	16%
Ohio*	$24,420	123%	39%	$27,066	185%	57%	-$2,646	-62%	-18%
Oklahoma*	$35,100	177%	66%	$29,040	198%	66%	$6,060	-21%	0%
Oregon	$36,612	185%	63%	$27,060	185%	60%	$9,552	0%	3%
Pennsylvania*	$39,060	197%	57%	$29,260	200%	58%	$9,800	-3%	-1%
Rhode Island*	$35,154	178%	48%	$32,918	225%	61%	$2,236	-47%	-13%
South Carolina*	$29,295	148%	55%	$21,225	145%	45%	$8,070	3%	10%
South Dakota*	$35,613	180%	60%	$22,826	156%	52%	$12,787	24%	8%
Tennessee	$32,268	163%	60%	$24,324	166%	56%	$7,944	-3%	4%
Texas*	$34,178-$47,752	173%-241%	61%-85%	$21,228-$36,516	145%-250%	47%-82%	$11,236-$12,950	-8%-28%	3%-14%
Utah*	$34,395	174%	60%	$28,248	193%	59%	$6,147	-19%	1%
Vermont*	$39,060	197%	57%	$31,032	212%	64%	$8,028	-15%	-7%
Virginia*	$29,295-$48,828	148%-247%	39%-65%	$21,948-$27,060	150%-185%	41%-50%	$7,347-$21,768	-2%-62%	-2%-15%
Washington*	$39,072	197%	56%	$32,916	225%	63%	$6,156	-28%	-7%
West Virginia*	$28,632	145%	53%	$28,296	193%	75%	$336	-49%	-21%
Wisconsin*	$36,132	183%	54%	$27,060	185%	51%	$9,072	-2%	4%
Wyoming*	$36,588	185%	57%	$21,948	150%	47%	$14,640	35%	10%

NOTES FOR TABLES 1A AND 1B: INCOME ELIGIBILITY LIMITS

The income eligibility limits shown in the table represent the maximum income families can have when they apply for child care assistance. Some states allow families, once receiving assistance, to continue receiving assistance up to a higher income level than that initial limit. These higher exit eligibility limits are reported below for states that have them.

Changes in income limits were calculated using raw data, rather than the rounded numbers shown in the table.

All income limits given as dollar amounts below are for a family of three.

Data in the tables for 2014 reflect policies as of February 2014, data in the tables for 2013 reflect policies as of February 2013, and data in the tables for 2001 reflect policies as of June 2001, unless otherwise indicated. Certain changes in policies since February 2014 are noted below.

Alabama: In 2001, families already receiving assistance could continue doing so until their income reached $27,756. In 2013, the exit eligibility limit was $27,792, and in 2014, it was $29,292.

Alaska: The Alaska Permanent Fund Dividend (PFD) payment, which the majority of families in the state receive, is not counted when determining eligibility.

Arizona: As of October 2014, the income limit was expected to increase to $32,676 (165 percent of poverty) to adjust for the 2014 federal poverty level.

Arkansas: The income limit shown in the table for 2001 takes into account a deduction of $100 per month ($1,200 a year) that was allowed for an adult household member who worked at least 30 hours per week, assuming there was one working parent. The stated income limit, in policy, was $22,323 in 2001. The state no longer used the deduction in 2013 or 2014.

California: Under policies in effect in 2001, families that had been receiving assistance as of January 1, 1998 could continue doing so until their income reached $46,800 since they were subject to higher income limits previously in effect. Also note that two counties (San Mateo and San Francisco) allowed families already receiving assistance to continue to receive it up to an income of $63,768 in 2013 and 2014.

Colorado: Counties set their income limits within state guidelines; the ranges in the tables reflect the minimum and maximum income limits allowed by the state. Counties may also allow families already receiving assistance to continue doing so for up to six months after their income exceeds the county's initial income limit, if their income remains below 85 percent of state median income ($58,176 in 2013 and $60,284 in 2014). As of October 2014, the maximum level at which counties are allowed to set their income limits was expected to increase to $60,820 (85 percent of state median income) to adjust for the updated state median income estimate.

Connecticut: In 2013, families already receiving assistance could continue doing so until their income reached $64,243. In 2014, the state no longer had a separate exit eligibility limit. As of October 2014, the income limit was expected to increase to $43,770 (50 percent of state median income) to adjust for the updated state median income estimate.

Delaware: As of October 2014, the income limit was expected to increase to $39,588 (200 percent of poverty) to adjust for the 2014 federal poverty level.

District of Columbia: In 2001, families already receiving assistance could continue doing so until their income reached $41,640. In 2013 and 2014, the exit eligibility limit was $51,101.

Florida: In 2013, families already receiving assistance could continue doing so until their income reached $38,180. In 2014, the exit eligibility limit was $39,060.

Hawaii: The income limit shown in the table for 2001 takes into account a 20 percent deduction of all countable income. The stated income limit, in policy, was $36,828. The state no longer used the deduction in 2013 or 2014.

Idaho: As of October 2014, the income limit was expected to increase to $25,728 (130 percent of poverty) to adjust for the 2014 federal poverty level.

Illinois: The income limit shown in the table for 2001 takes into account a 10 percent earned income deduction. The stated income limit, in policy, was $21,819. The state no longer used the deduction in 2013 or 2014. As of July 2014, the income limit was increased to $36,612 (185 percent of poverty) to adjust for the 2014 federal poverty level.

Indiana: In 2013, families already receiving assistance could continue doing so until their income reached $32,448. In 2014, the exit eligibility limit was $33,204. As of April 2014, the income limit to qualify for assistance was increased to $25,128 (127 percent of poverty), and the exit eligibility limit was increased to $33,648 (170 percent of poverty) to adjust for the 2014 federal poverty level.

Iowa: For special needs care, the income limit was $38,180 in 2013 and $39,060 in 2014. As of July 2014, the income limit for standard care was increased to $28,716 (145 percent of poverty), and the income limit for special needs care was increased to $39,600 (200 percent of poverty) to adjust for the 2014 federal poverty level.

Kansas: As of May 2014, the income limit was increased to $36,612 (185 percent of poverty) to adjust for the 2014 federal poverty level.

Kentucky: In 2013, families already receiving assistance could continue doing so until their income reached $30,588. In 2014, there was no separate exit eligibility limit. As of August 2014, the income limit was increased to $25,942 (140 percent of the 2011 federal poverty level).

Louisiana: Data on the state's policies as of 2001 are not available, so data on policies as of March 15, 2000 are used instead.

Massachusetts: In 2001, families already receiving assistance could continue doing so until their income reached $49,248. In 2013, the exit eligibility limit was $71,563, and in 2014, it was $73,380. Also note that, for special needs care, the income limit to qualify for assistance was $71,563 in 2013 and $73,380 in 2014, and the exit eligibility limit was $84,192 in 2013 and $86,329 in 2014. As of October 2014, for standard care, the income limit to qualify for assistance was expected to increase to $43,909 (50 percent of state median income), and the exit eligibility limit was expected to increase to $74,645 (85 percent of state median income) to adjust for the updated state median income estimate.

Minnesota: In 2013, families already receiving assistance could continue doing so until their income reached $48,164. In 2014, the exit eligibility limit was $49,124. As of October 2014, the income limit to qualify for assistance was expected to increase to $35,462 (47 percent of state median income), and the exit eligibility limit was expected to increase to $50,554 (67 percent of state median income) to adjust for the updated state median income estimate.

Missouri: In 2013, families already receiving assistance could continue doing so until their income reached $25,740. In 2014, the exit eligibility limit was $34,188.

Nebraska: For families transitioning from TANF, the income limit was $35,316 in 2013 and $36,132 in 2014. As of July 2014, the income limit was increased to $36,612 (185 percent of poverty) for families transitioning from TANF to adjust for the 2014 federal poverty level, and the income limit for all other families was increased to $25,728 (130 percent of poverty).

New Hampshire: As of July 2014, the income limit was increased to $49,475 (250 percent of poverty) to adjust for the 2014 federal poverty level.

New Jersey: In 2001, families already receiving assistance could continue doing so until their income reached $36,575. In 2013, the exit eligibility limit was $46,325, and in 2014, it was $48,825.

New Mexico: As of April 2014, the income limit was increased to $39,580 (200 percent of poverty) to adjust for the 2014 federal poverty level.

New York: A few small demonstration projects set the income limit at $48,680 in 2013 and $49,802 in 2014. Also note that data on the state's policies as of 2001 are not available, so data on policies as of March 15, 2000 are used instead. As of June 2014, the income limit was increased to $39,580 (200 percent of poverty) to adjust for the 2014 federal poverty level.

North Carolina: As of October 2014, the income limit was expected to decrease to $39,580 (200 percent of poverty) for families with children birth through age five and families with children of any age who have special needs and to $26,321 (133 percent of poverty) for families with children ages six to thirteen.

Ohio: In 2013, families already receiving assistance could continue doing so until their income reached $37,080. In 2014, the exit eligibility limit was $39,072. The state did not have a separate exit eligibility limit in 2001. As of March 2014, the income limit to qualify for assistance was increased to $24,732 (125 percent of poverty), and the exit eligibility limit was increased to $39,576 (200 percent of poverty) to adjust for the 2014 federal poverty level.

Oklahoma: The income limit depends on how many children are in child care. The income limits shown in the table assume that the family was receiving assistance for two children in care. The income limit for a family receiving assistance for only one child in care was $29,100 in 2013 and 2014.

Pennsylvania: In 2001, families already receiving assistance could continue doing so until their income reached $34,381. In 2013, the exit eligibility limit was $44,862, and in 2014, it was $45,896. As of May 2014, the income limit to qualify for assistance was increased to $39,580 (200 percent of poverty), and the exit eligibility limit was increased to $46,507 (235 percent of poverty) to adjust for the 2014 federal poverty level.

Rhode Island: In 2014, families already receiving assistance could continue doing so until their income reached $43,943, under a pilot program begun in October 2013. As of April 2014, the income limit to qualify for assistance was increased to $35,622 (180 percent of poverty), and the exit eligibility limit was increased to $44,528 (225 percent of poverty) to adjust for the 2014 federal poverty level.

South Carolina: In 2001, families already receiving assistance could continue doing so until their income reached $24,763. In 2013, the exit eligibility limit was $33,408, and in 2014, it was $34,178. As of October 2014, the income limit to qualify for assistance was expected to increase to $29,685 (150 percent of poverty), and the exit eligibility limit was expected to increase to $34,633 (175 percent of poverty) to adjust for the 2014 federal poverty level.

South Dakota: The income limits shown in the table take into account that the state disregards 4 percent of earned income. The stated income limits, in policy, were $21,913 in 2001, $33,408 in 2013, and $34,188 in 2014. As of March 2014, the stated income limit was increased to $34,632 (175 percent of poverty) to adjust for the 2014 federal poverty level.

Texas: Local workforce development boards set their income limits within state guidelines; the ranges shown in the tables indicate the lowest and highest income limits set by local boards. In addition, some local boards allow families an extended year of child care assistance up to a higher income than the initial eligibility limit; however, this exit eligibility limit cannot exceed 85 percent of state median income ($47,190 in 2013 and $47,752 in 2014). As of October 2014, the maximum income at which local boards can set their eligibility limits was expected to increase to $48,378 (85 percent of state median income) to adjust for the updated state median income estimate.

Utah: The income limits shown in the table take into account a standard deduction of $100 per month ($1,200 a year) for each working parent, assuming there is one working parent in the family, and a standard deduction of $100 per month ($1,200 a year) for all families to help cover any medical expenses. The stated income limits, in policy, were $25,848 in 2001, $32,016 in 2013, and $31,995 in 2014. Also note that in 2013, families already receiving assistance could continue doing so up to a stated income limit of $40,020. In 2014, the stated exit eligibility limit was $39,994. As of October 2014, the stated income limit to qualify for assistance was expected to increase to $32,004 (56 percent of state median income), and the stated exit eligibility limit was expected to increase to $40,005 (70 percent of state median income) to adjust for the updated state median income estimate. The stated income limit to qualify for special needs care was $48,600 in 2013 and $48,564 in 2014.

Vermont: As of July 2014, the income limit was increased to $39,576 (200 percent of poverty) to adjust for the 2014 federal poverty level.

Virginia: The state has different income limits for different regions of the state. In 2001, the state had three separate regional income limits, which were: $21,948, $23,400, and $27,060. In 2013, the state had four separate regional income limits: $28,644, $30,552, $35,328, and $47,736. In 2014, the state also had four separate regional income limits: $29,295, $31,248, $36,132, and $48,828.

Washington: As of April 2014, the income limit was increased to $39,576 (200 percent of poverty) to adjust for the 2014 federal poverty level.

West Virginia: In 2013 and 2014, families already receiving assistance could continue doing so until their income reached $35,316.

Wisconsin: In 2001, families already receiving assistance could continue doing so until their income reached $29,256. In 2013, the exit eligibility limit was $38,180, and in 2014, it was $39,060. As of March 2014, the income limit to qualify for assistance was increased to $36,612 (185 percent of poverty), and the exit eligibility limit was increased to $39,576 (200 percent of poverty) to adjust for the 2014 federal poverty level.

Wyoming: The income limits shown in the table for 2013 and 2014 take into account a standard deduction of $200 per month ($2,400 a year) for each working parent, assuming there is one working parent in the family. The stated income limits, in policy, were $33,408 in 2013 and $34,188 in 2014. Also note that in 2001, families already receiving assistance could continue doing so until their income reached $27,060. In 2013, the stated exit eligibility limit was $42,960, and in 2014, it was $43,956. As of April 2014, the stated income limit to qualify for assistance was increased to $34,632 (175 percent of poverty), and the stated exit eligibility limit was increased to $44,532 (225 percent of poverty) to adjust for the 2014 federal poverty level.

TABLE 2: WAITING LISTS FOR CHILD CARE ASSISTANCE

State	Number of children or families on waiting lists as of early 2014	Number of children or families on waiting lists as of early 2013	Number of children or families on waiting lists as of December 2001
Alabama*	8,394 children	6,318 children	5,089 children
Alaska	No waiting list	No waiting list	588 children
Arizona*	6,366 children	6,712 children	No waiting list
Arkansas*	2,514 children	No waiting list	8,000 children
California*	Waiting lists at local level	Waiting lists at local level	280,000 children (estimated)
Colorado*	12 children	75 children	Waiting lists at county level
Connecticut	No waiting list	No waiting list	No waiting list
Delaware	No waiting list	No waiting list	No waiting list
District of Columbia*	No waiting list	No waiting list	9,124 children
Florida*	37,867 children	60,259 children	46,800 children
Georgia	No waiting list	No waiting list	16,099 children
Hawaii	No waiting list	No waiting list	No waiting list
Idaho	No waiting list	No waiting list	No waiting list
Illinois	No waiting list	No waiting list	No waiting list
Indiana*	No waiting list	4,692 children	11,958 children
Iowa	No waiting list	No waiting list	No waiting list
Kansas	No waiting list	No waiting list	No waiting list
Kentucky*	No waiting list	Frozen intake	No waiting list
Louisiana	No waiting list	No waiting list	No waiting list
Maine	No waiting list	No waiting list	2,000 children
Maryland*	1,643 children	76 children	No waiting list
Massachusetts*	40,047 children	51,792 children	18,000 children
Michigan	No waiting list	No waiting list	No waiting list
Minnesota*	7,973 families	6,430 families	4,735 children
Mississippi*	No waiting list	7,021 children	10,422 children
Missouri	No waiting list	No waiting list	No waiting list
Montana	No waiting list	No waiting list	Waiting lists at local level
Nebraska	No waiting list	No waiting list	No waiting list
Nevada*	653 children	1,748 children	No waiting list
New Hampshire	No waiting list	No waiting list	No waiting list
New Jersey*	No waiting list	No waiting list	9,800 children
New Mexico*	259 children	5,467 children	No waiting list
New York*	Waiting lists at local level	Waiting lists at local level	Waiting lists at local level
North Carolina*	20,162 children	39,961 children	25,363 children
North Dakota	No waiting list	No waiting list	No waiting list
Ohio	No waiting list	No waiting list	No waiting list
Oklahoma	No waiting list	No waiting list	No waiting list
Oregon*	1,980 children	No waiting list	No waiting list
Pennsylvania*	2,651 children	6,183 children	540 children
Rhode Island	No waiting list	No waiting list	No waiting list
South Carolina	No waiting list	No waiting list	No waiting list
South Dakota	No waiting list	No waiting list	No waiting list
Tennessee*	See notes	See notes	9,388 children (and frozen intake)
Texas*	16,470 children	16,817 children	36,799 children
Utah	No waiting list	No waiting list	No waiting list
Vermont	No waiting list	No waiting list	No waiting list
Virginia*	7,786 children	10,444 children	4,255 children
Washington	No waiting list	No waiting list	No waiting list
West Virginia	No waiting list	No waiting list	No waiting list
Wisconsin	No waiting list	No waiting list	No waiting list
Wyoming	No waiting list	No waiting list	No waiting list

NOTES FOR TABLE 2: WAITING LISTS FOR CHILD CARE ASSISTANCE

Data in the tables for 2014 reflect policies as of February 2014, and data in the tables for 2013 reflect policies as of February 2013, unless otherwise indicated.

Alabama: Families receiving TANF that are participating in the JOBS program, families that have transitioned off TANF assistance within the past 6 months and are employed, minor parents working toward the completion of a high school diploma or a GED, families receiving protective services, and foster care families are served without being placed on the waiting list. Also note that data for December 2001 are not available so data from November 2001 are used instead.

Arizona: Families receiving child protective services and families receiving or transitioning from TANF who need child care for employment are served without being placed on the waiting list.

Arkansas: Foster care families, guardian cases, teen parents, homeless families, and families receiving TANF are served without being placed on the waiting list.

California: The waiting list total for 2001 is an estimated figure. The state no longer has a centralized waiting list; most local contractors and some counties maintain waiting lists.

Colorado: Waiting lists are kept at the county level, rather than at the state level. Four counties had waiting lists in 2001, but data on the total number of children on waiting lists in counties that had them are not available. In addition, four counties had frozen intake in 2001. The waiting list totals for 2013 and 2014 are the totals of reported county waiting lists. Counties determine whether to serve any groups of families without placing them on the waiting list; counties typically allow families receiving TANF and teen parents to be served without being placed on the waiting list.

District of Columbia: The waiting list total for 2001 may include some children living in the wider metropolitan area that encompasses parts of Maryland and Virginia.

Florida: The waiting list total for 2013 is from January 2013. The waiting list total for 2014 is from March 2014.

Indiana: In addition to the waiting list, some counties froze intake in 2001. Also note that in 2013, when the state had a waiting list, TANF/IMPACT families with a complete referral from their caseworker were served without being placed on the waiting list.

Kentucky: The state froze intake in 2013 for families with incomes at or above 100 percent of poverty; families with incomes at or above 100 percent of poverty were no longer eligible for child care assistance in 2014. Children receiving protective or preventive services, children whose parents were required to participate in the TANF Kentucky Works Program, children with special needs, and teen parents were served and not subject to the freeze.

Maryland: Families receiving or transitioning from TANF, families receiving Supplemental Security Income (SSI), and children with documented disabilities are served without being placed on the waiting list. The waiting list total for 2013 is from March 19, 2013. The waiting list total for 2014 is from March 24, 2014.

Massachusetts: Families receiving TANF and participating in the employment services program and families referred by the child welfare agency based on open cases of abuse or neglect are served without being placed on the waiting list.

Minnesota: The waiting list total for 2013 is from January 2013. Families receiving TANF and families transitioning from TANF (for up to one year after their TANF case closes) are served without being placed on the waiting list.

Mississippi: In 2013, when the state had a waiting list, families receiving TANF or transitioning from TANF, children in foster, protective, or preventive services, children with special needs, children of deployed military members, and children of teen parents were served without being placed on the waiting list.

Nevada: Families receiving TANF and families with foster care or child protective services placements are served without being placed on the waiting list.

New Jersey: Data for 2001 are not available, so data from March 2002 are used instead.

New Mexico: In 2013, families with incomes at or below 100 percent of poverty were served without being placed on the waiting list. In 2014, families with incomes at or below 150 percent of poverty were served without being placed on the waiting list. In addition, families receiving or transitioning from TANF, teen parents in school, and children with siblings who are already receiving child care assistance are served without being placed on the waiting list.

New York: Waiting lists are kept at the local district level and statewide data are not available. Each local district also has the authority to freeze intake and stop adding names to its waiting list.

North Carolina: Children in protective services or foster care are served without being placed on the waiting list.

Oregon: The state began serving all families on the waiting list as of April 2014 and deactivated the waiting list—serving all families that applied for child care assistance without placing them on the waiting list—as of May 2014. Families receiving TANF, families that received TANF in the previous three months, families that are eligible for an opening in a contracted Oregon Program of Quality or Head Start program, and families involved with the child welfare system where child care is needed to keep or return a child home are served without being placed on the waiting list when it is activated.

Pennsylvania: Families receiving TANF and families transitioning from TANF are served without being placed on the waiting list.

Tennessee: When the state reported its data in 2001, intake was frozen for all families other than those receiving or transitioning from TANF. The waiting list total for 2001 represents the number of children on the waiting list when intake was closed. In 2013 and 2014, the state did not serve any families other than families receiving or transitioning from TANF, teen parents, foster families, and children under protective custody; however, the state no longer refers to this policy as frozen intake.

Texas: Local workforce development boards maintain waiting lists. The totals in the table represent the aggregate number of children on waiting lists across all of the state's 28 boards. In addition, some boards have frozen intake. In 2013, 16 boards had a waiting list and 8 boards had frozen intake (including some of which may have had both a waiting list and frozen intake). In 2014, 15 boards had a waiting list and 5 boards had frozen intake (including some of which may have had both a waiting list and frozen intake). Families in the TANF Work Program, families in the Supplemental Nutrition Assistance Program (SNAP) Employment and Training program, families transitioning from TANF, and children receiving protective services are served without being placed on the waiting list.

Virginia: Data for December 2001 are not available, so data from January 2001 are used instead. The waiting list total for 2014 is from May 2014. Families receiving TANF and families with children enrolled in Head Start are served without being placed on the waiting list.

TABLE 3A: PARENT COPAYMENTS FOR A FAMILY OF THREE WITH AN INCOME AT 150 PERCENT OF POVERTY AND ONE CHILD IN CARE

	Monthly fee in 2014		Monthly fee in 2013		Monthly fee in 2001		Change 2013 to 2014		Change 2001 to 2014	
State	As a dollar amount	As a percent of income	As a dollar amount	As a percent of income	As a dollar amount	As a percent of income	In dollar amount	In percent of income	In dollar amount	In percent of income
Alabama	Not eligible	Not eligible	Not eligible	Not eligible	$215	12%	N/A	N/A	N/A	N/A
Alaska	$124	5%	$121	5%	$71	4%	$3	0%	$53	1%
Arizona	$152	6%	$152	6%	$217	12%	$0	0%	-$65	-6%
Arkansas*	$365	15%	$365	15%	$224	12%	$0	0%	$141	3%
California	$115	5%	$115	5%	$0	0%	$0	0%	$115	5%
Colorado	$272	11%	$269	11%	$185	10%	$4	0%	$87	1%
Connecticut	$148	6%	$146	6%	$110	6%	$2	0%	$38	0%
Delaware	$264	11%	$264	11%	$159	9%	$0	0%	$105	2%
District of Columbia	$118	5%	$102	4%	$91	5%	$15	1%	$27	0%
Florida*	$217	9%	$217	9%	$104	6%	$0	0%	$113	3%
Georgia	Not eligible	Not eligible	Not eligible	Not eligible	$139	8%	N/A	N/A	N/A	N/A
Hawaii	$473	19%	$473	19%	$38	2%	$0	0%	$435	17%
Idaho	Not eligible	Not eligible	Not eligible	Not eligible	Not eligible	Not eligible	N/A	N/A	N/A	N/A
Illinois	$197	8%	$210	9%	$134	7%	-$13	-1%	$63	1%
Indiana*	$224	9%	$220	9%	$154	8%	$4	0%	$70	1%
Iowa*	Not eligible	Not eligible	Not eligible	Not eligible	Not eligible	Not eligible	N/A	N/A	N/A	N/A
Kansas	$207	8%	$207	8%	$162	9%	$0	0%	$45	0%
Kentucky	Not eligible	Not eligible	$260	11%	$177	10%	N/A	N/A	N/A	N/A
Louisiana*	$227	9%	$227	9%	$114	6%	$0	0%	$113	3%
Maine	$247	10%	$195	8%	$183	10%	$52	2%	$64	0%
Maryland*	$313	13%	$313	13%	$236	13%	$0	0%	$77	0%
Massachusetts	$271	11%	$271	11%	$160	9%	$0	0%	$111	2%
Michigan	Not eligible	Not eligible	Not eligible	Not eligible	$24	1%	N/A	N/A	N/A	N/A
Minnesota	$80	3%	$78	3%	$53	3%	$2	0%	$27	0%
Mississippi*	$172	7%	$172	7%	$105	6%	$0	0%	$67	1%
Missouri	$287	12%	Not eligible	Not eligible	Not eligible	Not eligible	N/A	N/A	N/A	N/A
Montana	Not eligible	Not eligible	Not eligible	Not eligible	$256	14%	N/A	N/A	N/A	N/A
Nebraska*	Not eligible	Not eligible	Not eligible	Not eligible	$129	7%	N/A	N/A	N/A	N/A
Nevada*	Not eligible	Not eligible	Not eligible	Not eligible	$281	15%	N/A	N/A	N/A	N/A
New Hampshire	$309	13%	$330	13%	$2	0%	-$20	-1%	$307	12%
New Jersey	$106	4%	$106	4%	$133	7%	$0	0%	-$27	-3%
New Mexico	$169	7%	$166	7%	$115	6%	$3	0%	$54	1%
New York*	$297	12%	$298	12%	$191	10%	-$1	0%	$106	2%
North Carolina	$247	10%	$244	10%	$159	9%	$3	0%	$88	1%
North Dakota	$102	4%	$179	7%	$293	16%	-$77	-3%	-$191	-12%
Ohio	$219	9%	$216	9%	$88	5%	$3	0%	$131	4%
Oklahoma*	$226	9%	$226	9%	$146	8%	$0	0%	$80	1%
Oregon	$438	18%	$426	17%	$319	17%	$12	0%	$119	0%
Pennsylvania	$229	9%	$225	9%	$152	8%	$4	0%	$77	1%
Rhode Island	$198	8%	$195	8%	$19	1%	$3	0%	$179	7%
South Carolina	$87	4%	$87	4%	$77	4%	$0	0%	$10	-1%
South Dakota	$356	14%	$352	14%	$365	20%	$5	0%	-$9	-6%
Tennessee	$178	7%	$173	7%	$112	6%	$4	0%	$66	1%
Texas*	$125-$270	5%-11%	$125-$270	5%-11%	$165-$256	9%-14%	$0	0%	-$40-$14	-4% - -3%
Utah	$213	9%	$212	9%	$220	12%	$1	0%	-$7	-3%
Vermont	$260	11%	$309	13%	$123	7%	-$49	-2%	$137	4%
Virginia	$247	10%	$244	10%	$183	10%	$3	0%	$64	0%
Washington	$182	7%	$192	8%	$87	5%	-$9	0%	$95	3%
West Virginia	$114	5%	$114	5%	$54	3%	$0	0%	$60	2%
Wisconsin	$242	10%	$234	10%	$160	9%	$8	0%	$82	1%
Wyoming	$43	2%	$39	2%	$98	5%	$4	0%	-$55	-4%

TABLE 3B: PARENT COPAYMENTS FOR A FAMILY OF THREE WITH AN INCOME AT 100 PERCENT OF POVERTY AND ONE CHILD IN CARE

	Monthly fee in 2014		Monthly fee in 2013		Monthly fee in 2001		Change 2013 to 2014		Change 2001 to 2014	
State	As a dollar amount	As a percent of income	As a dollar amount	As a percent of income	As a dollar amount	As a percent of income	In dollar amount	In percent of income	In dollar amount	In percent of income
Alabama	$67	4%	$78	5%	$65	5%	-$11	-1%	$2	-1%
Alaska	$49	3%	$47	3%	$14	1%	$2	0%	$35	2%
Arizona	$65	4%	$65	4%	$65	5%	$0	0%	$0	-1%
Arkansas*	$0	0%	$0	0%	$0	0%	$0	0%	$0	0%
California	$0	0%	$0	0%	$0	0%	$0	0%	$0	0%
Colorado	$165	10%	$163	10%	$113	9%	$2	0%	$52	1%
Connecticut	$66	4%	$65	4%	$49	4%	$1	0%	$17	0%
Delaware	$120	7%	$120	7%	$55	5%	$0	0%	$65	3%
District of Columbia	$44	3%	$44	3%	$32	3%	$0	0%	$12	0%
Florida*	$130	8%	$130	8%	$69	6%	$0	0%	$61	2%
Georgia	$143	9%	$143	9%	$21	2%	$0	0%	$122	7%
Hawaii	$203	12%	$203	12%	$0	0%	$0	0%	$203	12%
Idaho	$50	3%	$226	14%	$65	5%	-$176	-11%	-$15	-2%
Illinois	$77	5%	$82	5%	$65	5%	-$5	0%	$12	-1%
Indiana*	$83	5%	$81	5%	$0	0%	$2	0%	$83	5%
Iowa*	$9	1%	$9	1%	$22	2%	$0	0%	-$13	-1%
Kansas	$58	4%	$58	4%	$22	2%	$0	0%	$36	2%
Kentucky	Not eligible	Not eligible	$130	8%	$97	8%	N/A	N/A	N/A	N/A
Louisiana*	$152	9%	$152	9%	$49	4%	$0	0%	$103	5%
Maine	$132	8%	$95	6%	$97	8%	$37	2%	$35	0%
Maryland*	$244	15%	$244	15%	$90	7%	$0	0%	$154	7%
Massachusetts	$141	9%	$141	9%	$40	3%	$0	0%	$101	5%
Michigan	$24	1%	$24	1%	$24	2%	$0	0%	$0	0%
Minnesota	$43	3%	$43	3%	$5	0%	$0	0%	$38	2%
Mississippi*	$88	5%	$88	5%	$47	4%	$0	0%	$41	1%
Missouri	$110	7%	$110	7%	$43	4%	$0	0%	$67	3%
Montana	$66	4%	$81	5%	$49	4%	-$15	-1%	$17	0%
Nebraska	$63	4%	$63	4%	$30	2%	$0	0%	$33	1%
Nevada*	$50	3%	$50	3%	$0	0%	$0	0%	$50	3%
New Hampshire	$124	8%	$130	8%	$0	0%	-$7	0%	$124	8%
New Jersey	$77	5%	$78	5%	$71	6%	-$2	0%	$6	-1%
New Mexico	$72	4%	$74	5%	$47	4%	-$2	0%	$25	1%
New York*	$8	0%	$12	1%	$4	0%	-$4	0%	$4	0%
North Carolina	$165	10%	$163	10%	$106	9%	$2	0%	$59	1%
North Dakota	$35	2%	$97	6%	$158	13%	-$62	-4%	-$123	-11%
Ohio	$120	7%	$125	8%	$43	4%	-$5	0%	$77	4%
Oklahoma	$132	8%	$132	8%	$54	4%	$0	0%	$78	4%
Oregon	$168	10%	$161	10%	$90	7%	$7	0%	$78	3%
Pennsylvania	$134	8%	$130	8%	$65	5%	$4	0%	$69	3%
Rhode Island	$33	2%	$33	2%	$0	0%	$0	0%	$33	2%
South Carolina	$61	4%	$61	4%	$43	4%	$0	0%	$18	0%
South Dakota	$0	0%	$0	0%	$0	0%	$0	0%	$0	0%
Tennessee	$113	7%	$113	7%	$39	3%	$0	0%	$74	4%
Texas*	$75-$180	5%-11%	$75-$180	5%-11%	$109-$170	9%-14%	$0	0%	-$34 - $10	-4% - -3%
Utah	$16	1%	$16	1%	$36	3%	$0	0%	-$20	-2%
Vermont	$6	0%	$17	1%	$0	0%	-$11	-1%	$6	0%
Virginia	$164	10%	$162	10%	$122	10%	$2	0%	$42	0%
Washington	$65	4%	$65	4%	$20	2%	$0	0%	$45	2%
West Virginia	$76	5%	$76	5%	$27	2%	$0	0%	$49	2%
Wisconsin	$108	7%	$104	6%	$61	5%	$4	0%	$47	2%
Wyoming	$0	0%	$0	0%	$10	1%	$0	0%	-$10	-1%

NOTES FOR TABLES 3A AND 3B: PARENT COPAYMENTS

For a family of three, an income at 100 percent of poverty was equal to $14,630 a year in 2001, $19,530 a year in 2013, and $19,790 a year in 2014.

For a family of three, an income at 150 percent of poverty was equal to $21,945 a year in 2001, $29,295 a year in 2013, and $29,685 a year in 2014.

For states that calculate their fees as a percentage of the cost of care, it is assumed that the family was purchasing care at the state's maximum reimbursement rate for licensed, non-accredited center care for a four-year-old. Monthly fees were calculated from hourly, daily, and weekly fees assuming the child was in care 9 hours a day, 5 days a week, 4.33 weeks a month.

Copayments for states with standard income deductions were determined based on adjusted income.

Changes in copayments were calculated using raw data, rather than the rounded numbers shown in the table.

Data in the tables for 2014 reflect policies as of February 2014, data in the tables for 2013 reflect policies as of February 2013, and data in the tables for 2001 reflect policies as of June 2001, unless otherwise indicated.

Arkansas: The state lowered copayments for families receiving child care assistance as of March 2014, from as much as 80 percent of the cost of care to a maximum of 8 percent of the cost of care. In addition, families using higher-quality care now pay a lower percentage of the cost of care—a maximum of 6 percent for families using providers at quality level one of the state's three-tier quality rating and improvement system, 4 percent for families using providers at quality level two, and 2 percent for families using providers at quality level three.

Florida: Local early learning coalitions set their copayments, subject to state approval; the copayments in the tables reflect the maximum copayment levels allowed under state policy and used by a local coalition.

Indiana: Copayments vary depending on how long the family has been receiving child care assistance, with families paying a higher percentage of income the longer they receive assistance. The copayments shown in the tables assume it is the first year the family is receiving assistance.

Iowa: A family with an income at 150 percent of poverty would be eligible for assistance if the family were using special needs care. For this family, the copayment would have been $174 per month in 2013 and 2014. A family with an income at 100 percent of poverty that is using special needs care would have the same copayment as a family using standard care. Also note that the state calculates copayments based on units of care; a unit is a 5-hour block of time, so 9 hours of care a day, 5 days a week, 4.33 weeks a month would equal 44 units.

Louisiana: Data are not available for June 2001, so data from March 2000 are used instead.

Maryland: The state determines copayments based on maximum state reimbursement rates in the region where the family lives.

Mississippi: For children in foster care or protective services and children receiving SSI benefits, the copayment is $10 per month.

Nebraska: A family with an income at 150 percent of poverty would be eligible if the family were transitioning from TANF. This family's copayment would have been $190 per month in 2013 and 2014.

Nevada: Families receiving TANF and participating in work or work-related activities, certain families receiving child protective services, and certain foster parents are exempt from copayments. Also note that a family with an income at 150 percent of poverty may be eligible in some extraordinary circumstances, such as if the family has a child with disabilities, a child in protective services, or a dramatic change in circumstances. This family's copayment would have been $199 per month in 2013 and 2014 (unless exempt from the copayment).

New York: Local social services districts set their copayments within a state-specified range; the copayments in the tables reflect the maximum amount allowed in that range. Families receiving TANF and participating in their required activity do not have a copayment. Also note that data are not available for June 2001, so data from March 2000 are used instead.

Oklahoma: The copayment amounts shown in Table 3a for a family with an income at 150 percent of poverty in 2013 and 2014 assume the family had two children in care; if the family had one child in care, it would not have been eligible for child care assistance.

Texas: Local workforce development boards set their copayments within state guidelines; the copayments in the tables reflect the range of copayments set by local boards. Also note that parents participating in the TANF Work Program and the SNAP Employment and Training program are exempt from the copayment.

TABLE 4A: STATE REIMBURSEMENT RATES IN 2014

State	State reimbursement rates compared to market rates	Year when reimbursement rates last changed	If state rate is lower than rate provider charges, is provider allowed to charge parents the difference?
Alabama	53rd-64th percentile of 2013 rates	2009	Yes
Alaska*	50th-75th percentile of 2009 rates	2010	Yes
Arizona*	75th percentile of 2000 rates	2009	Yes
Arkansas*	75th percentile of 2007 rates	2007	Yes, for certified
California	85th percentile of 2005 rates	2006	Yes
Colorado*	Locally determined	Varies by locality	No
Connecticut*	60th percentile of 2001 rates	2002	Yes
Delaware*	50 cents/day above 65% of the 75th percentile of 2011 rates	2011	Yes
District of Columbia*	Equal to or 15% above the 75th percentile of 2001 rates	2006/2013	No
Florida*	Locally determined	Varies by locality	Yes
Georgia	50th percentile of 2005 rates	2006	Yes
Hawaii*	At or below the 75th percentile of 2009 rates	2008/2010	Yes
Idaho	75th percentile of 2001 rates	2001	Yes
Illinois*	30th-100th percentile of 2012 rates	2012/2013	Yes, unless contracted
Indiana*	75th percentile of 2007 rates	2007	Yes
Iowa*	2%, 2%, and 4% increases above the 75th percentile of 2004 rates	2013	No
Kansas	65th percentile of 2000 rates	2002	Yes
Kentucky	68th percentile of 2005 rates	2006	Yes
Louisiana*	10th-50th percentile of 2012 rates	2007	Yes
Maine*	50th percentile of 2013 rates	2013	No
Maryland	51st percentile of 2005 rates	2010	Yes
Massachusetts*	4th-34th percentile of 2012/2013 rates	2009	No
Michigan*	7th-86th percentile of 2011 rates	2009	Yes
Minnesota*	25th percentile of 2011 rates	2014	Yes
Mississippi*	36th-75th percentile of 2009 rates	2007	Yes
Missouri*	Below the 75th percentile of 2012 rates	2013	Yes
Montana	2% increase above the 75th percentile of 2009 rates	2013	Yes
Nebraska	60th percentile of 2013 rates	2013	No
Nevada	15th-65th percentile of 2011 rates	2004	Yes
New Hampshire	50th percentile of 2011 rates	2013	Yes
New Jersey*	Below the 75th percentile of 2010 rates	2009	Yes, unless contracted
New Mexico*	Above or below the 75th percentile of 2013 rates	2014	No
New York*	75th percentile of 2011 rates	2011	Yes
North Carolina*	Below the 75th percentile of 2007 rates	2007	Yes
North Dakota	28th-67th percentile of 2013 rates	2012	Yes
Ohio*	26th percentile of 2010 rates	2011	No
Oklahoma*	Below the 75th percentile of 2012 rates	2013	No
Oregon	75th percentile of 2012 rates	2013	Yes
Pennsylvania*	19th-31st percentile of 2012 rates	2013	Yes
Rhode Island	75th percentile of 2002/2004 rates	2008	No
South Carolina	50th-75th percentile of 2011 rates	2007	Yes
South Dakota*	75th percentile of 2011 rates	2012	Yes
Tennessee	60th percentile of 2013 rates	2008	Yes
Texas*	17th-75th percentile of 2012 rates	Varies by locality	Yes
Utah*	46th-75th percentile of 2013 rates	2012	Yes
Vermont	Below the 75th percentile of 2012 rates	2013	Yes
Virginia	25th-50th percentile of 2012 rates	2013	Yes
Washington*	2% increase above the 75th percentile of 2008 rates	2013	No
West Virginia*	20th-85th percentile of 2013 rates	2009	No
Wisconsin*	Below the 75th percentile of 2005 rates	2012	Yes
Wyoming*	Below the 75th percentile of 2007 rates	2012	Yes

TABLE 4B: STATE REIMBURSEMENT RATES COMPARED TO THE 75TH PERCENTILE OF CURRENT MARKET RATES IN 2014, 2013, AND 2001

	Rates equal to or above the 75th percentile of current market rates….		
State	In 2014?	In 2013?	In 2001?
Alabama	No	No	Yes
Alaska*	No	No	No
Arizona	No	No	No
Arkansas	No	No	Yes
California	No	No	Yes
Colorado*	No	No	Yes
Connecticut	No	No	No
Delaware	No	No	No
District of Columbia	No	No	No
Florida*	No	No	Yes
Georgia	No	No	No
Hawaii	No	No	No
Idaho	No	No	Yes
Illinois*	No	No	No
Indiana	No	No	Yes
Iowa	No	No	No
Kansas	No	No	No
Kentucky	No	No	Yes
Louisiana	No	No	Yes
Maine	No	No	Yes
Maryland	No	No	Yes
Massachusetts	No	No	No
Michigan	No	No	No
Minnesota	No	No	Yes
Mississippi*	No	No	Yes
Missouri	No	No	No
Montana*	No	No	No
Nebraska	No	No	No
Nevada	No	No	Yes
New Hampshire	No	No	No
New Jersey*	No	No	No
New Mexico	No	No	No
New York*	No	Yes	Yes
North Carolina*	No	No	No
North Dakota	No	Yes	Yes
Ohio	No	No	No
Oklahoma	No	No	No
Oregon	Yes	No	No
Pennsylvania	No	No	No
Rhode Island	No	No	Yes
South Carolina	No	No	No
South Dakota*	No	Yes	Yes
Tennessee	No	No	No
Texas*	No	No	Yes
Utah	No	No	No
Vermont	No	No	No
Virginia	No	No	No
Washington	No	No	No
West Virginia*	No	No	Yes
Wisconsin	No	No	Yes
Wyoming	No	No	Yes

TABLE 4C: STATE REIMBURSEMENT RATE AMOUNT IN 2014 COMPARED TO MARKET RATE AMOUNT FOR CHILD CARE CENTERS

		Center care for a four-year-old					Center care for a one-year-old				
State	City/county/ region*	Monthly state reimburse-ment rate	75th percentile of market rate	Year of market rate	Difference between state rate and 75th percentile	Percentage difference between state rate and 75th percentile	Monthly state reimburse-ment rate	75th percentile of market rate	Year of market rate	Difference between state rate and 75th percentile	Percentage difference between state rate and 75th percentile
Alabama	Birmingham Region	$442	$563	2013	-$121	-22%	$481	$628	2013	-$147	-23%
Alaska	Anchorage	$650	$825	2013	-$175	-21%	$850	$945	2013	-$95	-10%
Arizona	Maricopa County (Phoenix)	$515	$888	2012	-$372	-42%	$576	$1,083	2012	-$507	-47%
Arkansas	Pulaski County (Central Arkansas)	$457	$569	2013	-$113	-20%	$552	$698	2013	-$146	-21%
California	Los Angeles County	$744	$935	2012	-$191	-20%	$1,029	$1,404	2012	-$375	-27%
Colorado*	Denver	$671	$1,083	2013	-$411	-38%	$823	$1,245	2013	-$422	-34%
Connecticut*	North Central Region	$650	$1,065	2012	-$416	-39%	$818	$1,299	2012	-$481	-37%
Delaware	New Castle County	$574	$866	2011	-$292	-34%	$622	$940	2011	-$318	-34%
District of Columbia*	Citywide	$909	$1,409	2012	-$500	-35%	$1,355	$1,829	2012	-$474	-26%
Florida	Miami-Dade County	$403	$570	2013	-$167	-29%	$442	$628	2013	-$186	-30%
Georgia*	Zone 1	$494	$785	2013	-$291	-37%	$602	$909	2013	-$307	-34%
Hawaii	Statewide	$675	$785	2013	-$110	-14%	$1,395	$1,495	2013	-$100	-7%
Idaho*	Region IV (Boise Metro Area)	$492	$613	2013	-$121	-20%	$594	$702	2013	-$108	-15%
Illinois*	Group 1A Counties	$815	$1,009	2012	-$194	-19%	$1,157	$1,289	2012	-$131	-10%
Indiana*	Marion County	$693	$805	2013	-$112	-14%	$814	$1,078	2013	-$264	-24%
Iowa*	Statewide	$595	$726	2012	-$131	-18%	$738	$862	2012	-$124	-14%
Kansas	Sedgwick County	$444	$629	2013	-$185	-29%	$661	$824	2013	-$164	-20%
Kentucky	Central Region	$466	$585	2013	-$119	-20%	$532	$650	2013	-$118	-18%
Louisiana	Statewide	$379	$520	2012	-$141	-27%	$401	$541	2012	-$141	-26%
Maine*	Cumberland County	$810	$953	2013	-$143	-15%	$974	$1,031	2013	-$56	-5%
Maryland*	Region W	$532	$815	2013	-$283	-35%	$844	$1,190	2013	-$345	-29%
Massachusetts*	Boston	$795	$1,221	2013	-$427	-35%	$1,181	$1,632	2013	-$451	-28%
Michigan*	Statewide	$433	$823	2013	-$390	-47%	$650	$1,219	2013	-$569	-47%
Minnesota*	Hennepin County	$870	$1,104	2012	-$234	-21%	$1,160	$1,464	2012	-$303	-21%
Mississippi	Statewide	$339	$476	2013	-$137	-29%	$375	$563	2013	-$188	-33%
Missouri*	St. Louis Metropolitan Area	$358	$866	2012	-$508	-59%	$614	$1,083	2012	-$469	-43%
Montana*	Billings Region	$636	$650	2013	-$13	-2%	$729	$714	2013	$14	2%
Nebraska*	Urban Counties	$730	$844	2013	-$114	-14%	$844	$909	2013	-$65	-7%
Nevada	Clark County	$498	$760	2011	-$262	-34%	$606	$860	2011	-$254	-30%
New Hampshire*	Statewide	$736	$823	2011	-$87	-11%	$874	$953	2011	-$79	-8%
New Jersey	Statewide	$573	$906	2012	-$333	-37%	$695	$1,031	2012	-$336	-33%
New Mexico*	Metropolitan Counties	$458	$714	2013	-$256	-36%	$542	$721	2013	-$178	-25%
New York*	New York City	$940	$940	2011	$0	0%	$1,429	$1,429	2011	$0	0%
North Carolina*	Mecklenburg County	$670	$940	2013	-$270	-29%	$737	$1,062	2013	-$325	-31%
North Dakota	Statewide	$565	$600	2013	-$35	-6%	$663	$700	2013	-$37	-5%
Ohio	Cuyahoga County (Cleveland)	$570	$740	2012	-$171	-23%	$713	$966	2012	-$253	-26%
Oklahoma*	Enhanced Area Counties	$461	$584	2012	-$123	-21%	$624	$723	2012	-$99	-14%
Oregon*	Group Area A	$850	$850	2012	$0	0%	$1,130	$1,130	2012	$0	0%
Pennsylvania*	Philadelphia	$707	$758	2012	-$51	-7%	$902	$909	2012	-$7	-1%
Rhode Island	Statewide	$680	$866	2013	-$186	-22%	$814	$1,054	2013	-$240	-23%
South Carolina	Statewide Urban Counties	$476	$563	2013	-$87	-15%	$528	$630	2013	-$102	-16%
South Dakota*	Minnehaha County (Sioux Falls)	$643	$692	2013	-$49	-7%	$731	$770	2013	-$39	-5%
Tennessee*	Top Tier Counties	$515	$606	2012	-$91	-15%	$598	$714	2012	-$117	-16%
Texas	Gulf Coast Area	$507	$632	2012	-$124	-20%	$713	$750	2012	-$38	-5%
Utah*	Statewide	$480	$537	2013	-$57	-11%	$620	$710	2013	-$90	-13%
Vermont*	Statewide	$578	$866	2012	-$288	-33%	$612	$974	2012	-$363	-37%
Virginia	Fairfax County	$1,018	$1,516	2011-2012	-$498	-33%	$1,212	$1,745	2011-2012	-$533	-31%
Washington*	Region 4 (King County)	$687	$1,117	2012	-$430	-39%	$818	$1,358	2012	-$540	-40%
West Virginia	Statewide	$498	$563	2013	-$65	-12%	$606	$650	2013	-$43	-7%
Wisconsin	Milwaukee County/Dane County	$740	$1,007	2012	-$267	-26%	$955	$1,299	2012	-$344	-26%
Wyoming	Statewide	$521	$649	2012	-$128	-20%	$573	$758	2012	-$185	-24%

TABLE 4D: STATE TIERED REIMBURSEMENT RATES FOR CENTER CARE FOR A FOUR-YEAR-OLD IN 2014

State	City/county/ region*	Number of tier levels (including base rate)	Reimburse-ment rate for lowest tier	Reimburse-ment rate for highest tier	Reimbursement rates between highest and lowest tiers	Difference between highest and lowest tiers	Percentage difference between highest and lowest tiers	75th percentile of market rate	Difference between rate at highest tier and 75th percentile	Percentage difference between rate at highest tier and 75th percentile
Alabama										
Alaska										
Arizona	Maricopa County (Phoenix)	2	$515	$567	N/A	$52	10%	$888	-$321	-36%
Arkansas*										
California										
Colorado*	Denver	6	$671	$888	$714, $736, $823, $844	$217	32%	$1,083	-$195	-18%
Connecticut*	North Central Region	2	$650	$682	N/A	$32	5%	$1,065	-$383	-36%
Delaware*	New Castle County	4	$574	$866	$693, $779	$292	51%	$866	$0	0%
District of Columbia	Citywide	3	$632	$909	$771	$277	44%	$1,409	-$500	-35%
Florida*	Miami-Dade County	2	$403	$483	N/A	$81	20%	$570	-$87	-15%
Georgia*	Zone 1	4	$494	$543	$503, $518	$49	10%	$785	-$242	-31%
Hawaii*	Statewide	2	$675	$710	N/A	$35	5%	$785	-$75	-10%
Idaho										
Illinois*	Group 1A Counties	5	$708	$850	$744, $779, $815	$142	20%	$1,009	-$159	-16%
Indiana*	Marion County	2	$693	$762	N/A	$69	10%	$805	-$43	-5%
Iowa										
Kansas										
Kentucky*	Central Region	4	$455	$516	See notes	$61	13%	$585	-$68	-12%
Louisiana*	Statewide	5	$379	$455	$390, $409, $430	$76	20%	$520	-$65	-13%
Maine*	Cumberland County	4	$810	$891	$826, $850	$81	10%	$953	-$62	-7%
Maryland*	Region W	4	$532	$671	$585, $633	$139	26%	$815	-$144	-18%
Massachusetts*										
Michigan*										
Minnesota*	Hennepin County	2	$870	$1,001	N/A	$131	15%	$1,104	-$103	-9%
Mississippi*	Statewide	5	$312	$424	See notes	$111	36%	$476	-$52	-11%
Missouri*	St. Louis Metropolitan Area	2	$358	$430	N/A	$72	20%	$866	-$436	-50%
Montana*	Billings Region	5	$636	$763	$668, $700, $731	$127	20%	$650	$114	18%
Nebraska*	Urban Counties	2	$730	$844	N/A	$114	16%	$844	$0	0%
Nevada*	Clark County	4	$498	$558	$528, $543	$60	12%	$760	-$202	-27%
New Hampshire*	Statewide	3	$736	$810	$773	$74	10%	$823	-$13	-2%
New Jersey	Statewide	2	$573	$604	N/A	$31	5%	$906	-$302	-33%
New Mexico*	Metropolitan Counties	4	$458	$608	$546, $580	$150	33%	$768	-$160	-21%
New York*	New York City	2	$940	$1,081	N/A	$141	15%	$940	$141	15%
North Carolina*	Mecklenburg County	5	$477	$702	$501, $641, $670	$225	47%	$1,010	-$308	-30%
North Dakota										
Ohio*	Cuyahoga County (Cleveland)	6	$570	$712	$598, $627, $655, $684	$142	25%	$740	-$28	-4%
Oklahoma*	Enhanced Area Counties	4	$292	$509	$375, $461	$217	74%	$584	-$75	-13%
Oregon										
Pennsylvania*	Philadelphia	5	$707	$815	$714, $727, $767	$108	15%	$758	$57	8%
Rhode Island*										
South Carolina	Statewide Urban Counties	5	$390	$624	$455, $476, $580	$234	60%	$563	$61	11%
South Dakota										
Tennessee*	Top Tier Counties	4	$429	$515	$450, $494	$87	20%	$606	-$91	-15%
Texas	Gulf Coast Area	2	$507	$533	N/A	$25	5%	$632	-$99	-16%
Utah										
Vermont*	Statewide	6	$578	$809	$607, $636, $694, $751	$231	40%	$866	-$57	-7%
Virginia										
Washington*	Region 4 (King County)	2	$687	$701	N/A	$14	2%	$1,117	-$416	-37%
West Virginia	Statewide	3	$498	$585	$541	$87	17%	$563	$22	4%
Wisconsin*	Milwaukee County/Dane County	4	$740	$974	$779, $857	$234	32%	$1,007	-$33	-3%
Wyoming										

NOTES FOR TABLES 4A, 4B, 4C, AND 4D: REIMBURSEMENT RATES

State reimbursement rates are compared to the 75th percentile of market rates (the rate designed to allow families access to 75 percent of providers in their community) because federal regulations recommend that rates be set at this level.

A state is considered to have rates that were based on current market prices if the market survey used to set its rates was conducted no more than two years earlier (so, for example, rates used in 2014 are considered current if set at the 75th percentile of 2012 or more recent market rates).

States were asked to report reimbursement rates and the 75th percentile of market rates for their most populous city, county, or region. Monthly rates were calculated from hourly, daily, and weekly rates assuming the child was in care 9 hours a day, 5 days a week, 4.33 weeks a month. Differences between state reimbursement rates and the 75th percentile were calculated using raw data, rather than the rounded numbers shown in the table.

For states that pay higher rates for higher-quality care, the most common rate level (the level representing the greatest number of providers) for each state is used for the data analysis in Tables 4a, 4b, and 4c, unless otherwise indicated. The rates analyzed in the tables do not reflect other types of higher rates or rate enhancements, such as higher rates paid for care for children with special needs or care during non-traditional hours.

Data in the tables for 2014 reflect policies as of February 2014, data in the tables for 2013 reflect policies as of February 2013, and data in the tables for 2001 reflect policies as of June 2001, unless otherwise indicated. Certain changes in policies since February 2014 are noted below.

Alaska: Reimbursement rates are set at the 75th percentile of market rates for infant and toddler care and at the 50th percentile for all other categories of care.

Arizona: Reimbursement rates were set at the 75th percentile of 2000 market rates in 2006. On July 1, 2007, the state implemented a 5 percent increase in rates. On April 1, 2009, the state reversed this 5 percent increase and rates reverted to the level at which they had been set in 2006.

Arkansas: Only Better Beginnings certified facilities (formerly known as quality approved providers) are allowed to charge parents the difference between the state reimbursement rate and the rate charged to private-paying parents. As of July 2014, the state began paying higher rates for higher-quality care; under this new tiered rate system, there are four rate levels, including a base rate level that is paid to providers that do not meet the standards necessary to achieve a rating in the state's voluntary quality rating and improvement system, or do not participate in that system, and three progressively higher rate levels that are paid to providers of higher-quality care as determined by that system.

Colorado: Counties determine their reimbursement rates and when to update them. The reimbursement rates in Tables 4c and 4d reflect that Denver increased its rates in April 2013. Counties also determine whether to offer higher rates for higher-quality care. While only a few counties (including Denver) had higher rates for higher-quality care in 2014, all counties will be required to have such tiered rates by July 2016.

Connecticut: The state increased reimbursement rates as of July 2014.

Delaware: Providers are allowed to charge parents the difference between the state reimbursement rate and the rate charged to private-paying parents under the Purchase of Care Plus option. Also note that the state has five quality rating levels, but only four different reimbursement rate tiers; providers at both quality level one and quality level two receive the base rate.

District of Columbia: The District increased reimbursement rates for infant and toddler care by 15 percent in October 2013; the remaining rates were last changed in 2006. The rates in Table 4c reflect that 2013 increase in infant rates.

Florida: Local early learning coalitions set their reimbursement rates. In addition, local coalitions may pay rates that are up to 20 percent higher than the base rate for Gold Seal providers, a designation indicating higher-quality care and tied to accreditation.

Georgia: Zone 1 includes Camden, Cherokee, Clayton, Cobb, DeKalb, Douglas, Fayette, Forsyth, Fulton, Gwinnett, Hall, Henry, Paulding, and Rockdale Counties. Also note that Table 4d reflects that the state began providing higher reimbursement rates to higher-quality providers as of July 2013.

Hawaii: Reimbursement rates were last updated for licensed care in 2008 and for license-exempt care in 2010. Also note that the state has higher reimbursement rates for accredited center care for children over age 24 months through the time the children are eligible to enroll in kindergarten or junior kindergarten (usually age five by the end of the calendar year, depending on the child's birth date). The state does not have accredited rates for care for infants and toddlers or for family child care.

Idaho: Region IV includes Ada, Boise, Elmore, and Valley Counties.

Illinois: Reimbursement rates vary by the age of the child, type of care, and region of the state. Rates for centers range from the 30th to 100th percentile of market rates, with the majority of rates below the 50th percentile. Rates for family child care range from the 50th to 100th percentile, with most rates between the 50th and 75th percentile. In January 2012, the state increased rates for child care centers and family child care providers. In January 2013 and again in July 2014, the state increased rates for family child care providers, but not for child care centers. Reimbursement rates are reported for the Metropolitan Region (referred to as Group 1A), which includes Cook, DeKalb, DuPage, Kane, Kendall, Lake, and McHenry Counties. Also note that a provider that has a contract with the state is not permitted to ask families to pay the difference between the state reimbursement rate and the rate charged to private-paying parents.

Indiana: The state increased reimbursement rates to the 55th percentile of 2013 market rates as of May 2014. The state also increased the number of reimbursement tiers and raised the differential between the lowest and highest tiers as of May 2014. Providers that do not meet the standards necessary to achieve a rating in the state's voluntary quality rating and improvement system (which has four levels), do not participate in that system, or are at level one of the system receive the base rate, providers at level two receive a rate 10 percent higher than the base rate, providers at level three receive a rate 20 percent higher than the base rate, and providers at level four receiving a rate 30 percent higher than the base rate.

Iowa: The state set its rates at the 75th percentile of 2004 market rates in 2007, and then increased its rates by 2 percent in 2008, by another 2 percent in January 2013, and by 4 percent in July 2013. The reimbursement rates in the Table 4c reflect the 4 percent increase in rates as of July 2013. Also note that the state calculates reimbursements based on units of care; a unit is a 5-hour block of time, so 9 hours of care a day, 5 days a week, 4.33 weeks a month would equal 44 units.

Kentucky: The amount of the bonus above the base rate at each star level of the state's quality rating and improvement system—for four-year-olds, $7 to $11 per month for two-star providers, $11 to $15 per month for three-star providers, and $14 to $18 per month for four-star providers—depends on the percentage of children served by the provider who are receiving child care assistance. (One-star providers do not receive a bonus above the base rate.) For all levels, a licensed or certified provider may receive, to the extent funds are available, $2 per day beyond the maximum rate if the provider is accredited. The highest rate shown in Table 4d assumes that the provider receives the maximum allowable bonus at the four-star level and is accredited.

Louisiana: Reimbursement rates are below the 50th percentile of market rates for most age groups and types of care. Rates for center care for infants, toddlers, and preschoolers are at or below the 10th percentile, rates for family child care for infants and toddlers are between the 25th and 50th percentile, and rates for family child care for preschoolers are between the 15th and 30th percentile. Rates were last updated as of January 2007, except for the addition of rates for military providers in October 2009. Also note that bonuses for higher-quality care are paid quarterly.

Maine: The reimbursement rates in Table 4c reflect that the state updated its base rates to the 50th percentile of 2013 market rates (from the 50th percentile of 2011 market rates) in October 2013; this resulted in increases to many rates, but some rates decreased (as was the case for center care for a one-year-old in Cumberland County) and some remained the same (as was the case for center care for a four-year-old in Cumberland County). Also note that as of February 2014, providers at quality levels two and three could only receive the additional reimbursement above the base rate for the first 12 months after achieving that quality level; providers at quality level four could receive the additional reimbursement on an ongoing basis. As of August 2014, providers at all quality levels receive the additional reimbursement on an ongoing basis.

Maryland: Region W includes Anne Arundel, Calvert, Carroll, Charles, and Prince George's Counties.

Massachusetts: Reimbursement rates are between the 6th and 34th percentile of market rates for center care and between the 4th and 25th percentile for family child care. Also note that the state pays higher rates (3 percent above the base rate) for center care and family child care at level two or above of the state's quality rating and improvement system for children up to 2.9 years old. The state increased rates for center care (by 2.3 percent) and family child care (by 4 percent) as of March 2014; the state increased rates again for family child care (by 3 percent), but not center care, as of July 2014.

Michigan: In October 2011, reimbursement rates for legally exempt family child care providers at Tier 1 (providers that do not complete the additional training required to achieve Tier 2) were reduced; reimbursement rates for other types of providers remained the same. Also note that monthly rates in Table 4c were calculated based on hourly rates and taking into account that the state reimbursed providers for a maximum of 80 hours in a two-week period as of February 2014; the state increased the maximum reimbursable hours to 90 in a two-week period as of July 2014. The state implemented higher rates for higher-quality care as of July 2014 as well; under the new tiered rate system, providers that do not meet the standards necessary to achieve a rating in the state's voluntary quality rating and improvement system (which has five star levels), do not participate in that system, or are at the one- or two-star level receive the base rate, three-star providers receive 25 cents per hour above the base rate, four-star providers receive 50 cents per hour above the base rate, and five-star providers receive 75 cents per hour above the base rate.

Minnesota: The reimbursement rates in Tables 4c and 4d reflect that as of February 2014, the state set base rates at the existing level (the level that went into effect as of November 28, 2011, following a 2.5 percent rate reduction) or the 25th percentile of market rates, whichever was higher; this resulted in an increase for approximately half of the base rates. Also note that as of March 2014, the state added a third tiered rate level for higher-quality care; the new rate (which is paid to four-star providers) is 20 percent above the base rate.

Mississippi: Reimbursement rates for licensed centers are at the 51st percentile of market rates for infants, 49th percentile for toddlers, 56th percentile for preschoolers, 62nd percentile for school-age care during the summer, and 75th percentile for special needs care. Reimbursement rates for family child care are at the 36th percentile for infants, 65th percentile for toddlers, 64th percentile for preschoolers, 75th percentile for school-age care during the summer, and 42nd percentile for special needs care. Also note that the state has two separate tiers for providers: Tier 2 for those meeting basic licensing/regulatory requirements and Tier 1 for those that are accredited or have a director who meets certain educational and/or experience criteria; Tier 1 providers receive a higher rate. In addition, the state has a five-star quality rating and improvement system that provides bonuses equal to 7 percent of the total payment for two-star centers, 17 percent for three-star centers, 22 percent for four-star centers, and 25 percent for five-star centers. The highest rate shown in Table 4d assumes that the provider qualifies for the Tier 1 rate level and five-star bonus.

Missouri: The reimbursement rates in Tables 4c and 4d reflect that the state increased rates for licensed child care providers and license-exempt religious child care providers by 3 percent in July 2013. Also note that the state does not allow parents involved in the protective services system to be asked to pay the difference between the state reimbursement rate and the rate charged to private-paying parents.

Montana: The reimbursement rates in Table 4c and 4d reflect that the state increased rates by 2 percent as of August 2013. Also note that data on policies as of 2001 are not available, so policies as of March 2000 are used instead.

Nebraska: The reimbursement rates in Tables 4c and 4d reflect that the state increased base reimbursement rates to the 60th percentile of 2013 market rates (from the 50th percentile of 2011 market rates), and increased rates for accredited care, as of July 2013. Also note that Urban Counties include Dakota, Douglas, Lancaster, and Sarpy Counties.

Nevada: The state began implementing its Silver Stars quality rating and improvement system as of July 2012 for Clark County and July 2013 for the rest of the state. The system has five quality levels, but only four separate reimbursement rate levels (the lowest two levels both receive the same base rate). Previously, the state had two separate rate levels—the base rate and a rate for accredited centers that was 15 percent above the base rate. The state no longer has a separate rate for accredited centers.

New Hampshire: The reimbursement rates in Table 4c and Table 4d reflect that the state updated its base reimbursement rates to the 50th percentile of 2011 market rates (from the 50th percentile of 2009 market rates) as of July 2013. Table 4d reflects that the state also reinstated tiered rates for higher-quality care, which had been suspended since January 2010, as of July 2013.

New Jersey: The percentile of the market rate at which reimbursement rates are set depends on the age of the child and category of care. Also note that centers that have direct contracts with the state are not permitted to ask families receiving child care assistance to pay the difference between the state reimbursement rate and the rate charged to private-paying parents. Data on policies as of 2001 are not available, so policies as of March 2000 are used instead. The state increased rates for approved home providers and registered family child care providers represented by the Child Care Workers Union in April 2014 and again in August 2014.

New Mexico: The reimbursement rates in Tables 4c and 4d reflect that the state increased base rates by 4 percent as of January 2014 and increased the differentials for higher-quality care as of July 2013. The state increased rates again for infant and toddler care as of July 2014. Also note that as of July 2012, the two-star reimbursement rate level became the base rate, and the one-star rate level was eliminated. The state's market rate survey differentiates between quality levels and the 75th percentile of market rates is obtained for providers at each quality level; in Table 4c, the reimbursement rate for the most common rate level is compared to the 75th percentile for that same quality level, and in Table 4d, the reimbursement rate for the highest quality level is compared to the 75th percentile for that quality level.

New York: The state did not provide data on the 75th percentile of market rates based on its most recent market rate survey, conducted in 2013. The state updated its reimbursement rates to the 69th percentile of 2013 market rates as of April 2014. Also note that local social services districts may set reimbursement rates for accredited programs that are up to 15 percent higher than base rates.

North Carolina: The state's market rate survey differentiates between quality levels and the 75th percentile of market rates is obtained for providers at each quality level. There are five star levels in the state's quality rating and improvement system (which is mandatory for all licensed providers, except those that are religious sponsored). Reimbursement rates were increased on October 1, 2007, for three-, four-, and five-star licensed facilities if the market rate survey data supported a change, but were not brought up to the 75th percentile of 2007 market rates. Rates for one- and two-star licensed facilities are based on 2003 market rate survey data. The state planned to increase reimbursement rates for three-, four-, and five-star providers as of January 2015. In Table 4c, the reimbursement rate for the most common rate level is compared to the 75th percentile for that same quality level. In Table 4d, the reimbursement rate for the highest quality level is compared to the 75th percentile for that quality level.

Ohio: The state reduced reimbursement rates to the 26th percentile of 2008 market rates (from the 35th percentile of 2008 market rates) as of July 31, 2011. Also note that Table 4d reflects that the state increased the number of its rate tiers for higher-quality care from four (the base rate and three star levels of the state's voluntary quality rating and improvement system) to six (the base rate and five star levels) as of October 2013.

Oklahoma: The reimbursement rates in Tables 4c and 4d reflect that the state increased Standard Area rates for two- and three-star center care and family child care by $1.50 per day and Enhanced Area rates for two- and three-star center care and family child care by $1.00 per day as of November 2013. Enhanced Area rates apply to 19 out of 77 counties in the state (Caddo, Canadian, Cherokee, Cleveland, Comanche, Creek, Garfield, Kay, Logan, McCurtain, Oklahoma, Ottawa, Payne, Pittsburg, Pottawatomie, Tulsa, Wagoner, Washington, and Woods); Standard Area rates apply to the remaining counties. The state has four quality levels in its quality rating and improvement system (which is mandatory for all licensed providers)—one star, one star plus, two stars, and three stars.

Oregon: The reimbursement rates in Table 4c reflect that the state increased reimbursement rates to the 75th percentile of 2012 market rates (from the 75th percentile of 2006 market rates) as of October 2013. Group Area A includes the Ashland, Bend, Corvallis, Eugene, Monmouth, and Portland (Multnomah County) areas.

Pennsylvania: The state lowered base reimbursement rates for centers with no star rating as of January 2013. The rates for one-star providers, which previously were reimbursed at the base level, and for two-star providers were not changed. The rates for three- and four-star providers were increased. The reimbursement rates in Table 4d reflect that rates for three- and four-star providers were increased again as of August 2013.

Rhode Island: The state began providing higher reimbursement, in the form of monthly awards, for higher-quality care for infants and toddlers as of August 2013. To be eligible for an award, a provider must serve children under age three and at least 10 percent of the children enrolled must receive child care assistance. For each child under age three receiving child care assistance, three-star providers receive $100 per year ($8.33 per month), four-star providers receive $300 per year ($25 per month), and five-star providers receive $500 per year ($41.67 per month), in addition to the base rate.

South Dakota: The state increased reimbursement rates to the 75th percentile of 2013 market rates as of July 2014.

Tennessee: Top Tier Counties are those with the 20 highest average populations in 2007 and/or 20 highest per capita incomes in 2005-2007. These counties include: Anderson, Blount, Bradley, Cheatham, Coffee, Davidson, Fayette, Greene, Hamilton, Knox, Loudon, Madison, Maury, Montgomery, Putnam, Roane, Robertson, Rutherford, Sevier, Shelby, Sullivan, Sumner, Washington, and Williamson.

Texas: Local workforce development boards set their reimbursement rates and determine when to update them. Average rates across board areas range from the 17th to 75th percentile of market rates. Twenty of the 28 boards have updated reimbursement rates in at least one category of care within the last two years; the Gulf Coast Workforce Development Area last updated its reimbursement rates in 2010. Also note that providers are allowed to ask parents to pay the difference between the reimbursement rate and the rate charged to private-paying parents, unless specifically prohibited by the local board or when the parent is exempt from having to pay a copayment or the parent's copayment is calculated to be zero.

Utah: The state increased reimbursement rates in May 2014 and again in July 2014.

Vermont: The reimbursement rates in Tables 4c and 4d reflect that the state increased rates by 3 percent as of November 2013.

Washington: The reimbursement rates in Tables 4c and 4d reflect that the state increased base reimbursement rates by 2 percent as of September 2013. Table 4d reflects that the state also implemented a new tiered reimbursement system for higher-quality providers as of September 2013; under this system, rates for providers at level two or higher of the state's five-level quality rating and improvement system are 2 percent above the base rate. Also note that the state increased base rates by 4 percent as of July 2014.

West Virginia: The percentile of the market rate for reimbursement rates varies by the type of care, age of the child, and quality tier. Also note that policies as of 2001 are not available, so policies as of March 2000 are used instead.

Wisconsin: As of July 2012, providers at the two-star level of the state's quality rating and improvement system (which is mandatory for all providers serving children receiving child care assistance) receive a rate that is 5 percent lower than the previous base rate; providers at the three-star level receive a rate that is at the previous base rate; and providers at the four-star level receive a rate that is 5 percent higher than the previous base rate. Providers at the five-star level received a rate that was 10 percent higher than the previous base rate from July 2012 until January 2013, when the rate was increased to 25 percent above the previous base rate. (Providers at the one-star level are not eligible for reimbursement for serving children who receive child care assistance.)

Wyoming: The state reduced reimbursement rates as of July 2012. Prior to that, rates had last been updated in 2007.

TABLE 5: ELIGIBILITY FOR CHILD CARE ASSISTANCE WHILE PARENTS SEARCH FOR A JOB IN 2014

	Parents receiving child care assistance when they lose a job		Parents applying for child care assistance while searching for a job	
State	Can they continue receiving assistance?	For how much time?	Can they qualify for assistance?	For how much time?
Alabama	No	N/A	No	N/A
Alaska*	Yes	80 hours	Yes	80 hours
Arizona*	Yes	60 days	No	N/A
Arkansas*	Yes	60 days	No	N/A
California*	Yes	60 days	Yes	60 days
Colorado*	Yes	30 days	Yes	30 days
Connecticut*	Yes	Until end of following month	No	N/A
Delaware	Yes	3 months	No	N/A
District of Columbia*	Yes	3 months	No	N/A
Florida*	Yes	60 days	No	N/A
Georgia	Yes	8 weeks	No	N/A
Hawaii*	Yes	30 days	Yes	30 days
Idaho*	Yes	Until end of month	No	N/A
Illinois*	Yes	90 days	No	N/A
Indiana*	Yes	13 weeks	No	N/A
Iowa*	Yes	30 days	Yes	30 days
Kansas*	Yes	Until end of month	No	N/A
Kentucky	Yes	4 weeks	No	N/A
Louisiana	No	N/A	No	N/A
Maine*	Yes	8 weeks	No	N/A
Maryland*	Yes	30 days	No	N/A
Massachusetts*	Yes	8 weeks	Yes	8 weeks
Michigan	No	N/A	No	N/A
Minnesota*	Yes	240 hours	Yes	240 hours
Mississippi*	Yes	60 days	Yes	60 days
Missouri*	Yes	30 days	No	N/A
Montana*	Yes	30 days	No	N/A
Nebraska*	Yes	2 months	Yes	2 months
Nevada*	Yes	2 weeks	Yes	2 weeks
New Hampshire*	Yes	40 days	Yes	40 days
New Jersey*	Yes	90 days	No	N/A
New Mexico*	Yes	30 days	No	N/A
New York*	Yes	4 weeks	Local decision	See notes
North Carolina*	Yes	30 days	No	N/A
North Dakota*	Yes	8 weeks	Yes	8 weeks
Ohio*	Yes	30 days	No	N/A
Oklahoma*	Yes	30 days	No	N/A
Oregon*	Yes	Until end of following month	No	N/A
Pennsylvania*	Yes	30 days	No	N/A
Rhode Island*	Yes	21 days	No	N/A
South Carolina*	Yes	30 days	No	N/A
South Dakota*	Yes	30 days	No	N/A
Tennessee	Yes	30 days	No	N/A
Texas*	Yes	4 weeks	No	N/A
Utah*	Yes	150 hours	Yes	150 hours
Vermont*	Yes	4 weeks	Yes	4 weeks
Virginia*	No	N/A	No	N/A
Washington*	Yes	56 days	No	N/A
West Virginia	Yes	30 days	No	N/A
Wisconsin	Yes	Until end of month	No	N/A
Wyoming	No	N/A	No	N/A

NOTES FOR TABLE 5: ELIGIBILITY FOR CHILD CARE ASSISTANCE WHILE PARENTS SEARCH FOR A JOB

The table reflects policies that apply to families not receiving TANF; policies may differ for families receiving TANF.

Data in the tables reflect policies as of February 2014. Certain changes in policies since February 2014 are noted below.

Alaska: Parents can receive child care assistance while searching for a job for up to 80 hours per year. The state is considering extending the amount of time parents could receive child care assistance while searching for a job as of the spring of 2015; parents would be allowed to qualify for and begin receiving assistance for part-day child care (up to 5 hours per day) for up to two part-time months (17 days per month) while searching for a job, and parents would be allowed to continue to receive child care assistance for full-time child care until the end of the month following the month of a job loss.

Arizona: Parent receiving child care assistance can continue to receive it while searching for a job for up to two 30-day periods or one 60-day period, beginning after the last day worked, in each 12-month period.

Arkansas: The data in the table reflect that the state increased the amount of time parents could continue to receive child care assistance while searching for a job to 60 consecutive days once in a calendar year, as of February 2014. Previously, parents could continue to receive child care assistance while searching for a job for up to 45 days; a one-time extension of 15 consecutive calendar days could be granted if needed to secure employment.

California: Parents can receive child care assistance while searching for a job for up to 60 working days during the contract period, for no more than 5 days per week and less than 30 hours per week.

Colorado: Parents can receive child care assistance for up to 30 days in a 12-month period from when the job search began.

Connecticut: Parents receiving child care assistance can continue to receive it until the end of the month following the month of a job loss if they are actively seeking another job and payment is needed to prevent the loss of a slot in a school-based or licensed child care program and the child continues to attend care.

District of Columbia: Parents receiving child care assistance can continue to receive it for up to 3 months from the effective date of employment termination if they lost a job due to a reduction in force by the employer and through no fault of the employee.

Florida: The data in the table reflect that the state increased the amount of time parents could continue to receive child care assistance while searching for a job from 30 days to 60 days as of July 2013.

Hawaii: Parents can receive child care assistance while searching for a job for up to 30 consecutive days once in a 12-month period.

Idaho: Parents searching for a new job can continue to receive child care assistance through the end of the month in which they lost their previous job.

Illinois: Parents receiving child care assistance can continue to receive it while searching for a job for up to 90 consecutive days, beginning with the parent's last day of work or school, or up to 30 consecutive days during three separate times within a 12-month period. This policy reflects a change that went into effect as of June 2013; previously, parents could continue to receive child care assistance while searching for a job for up to 30 consecutive days three times within a 12-month period, but not for 90 consecutive days.

Indiana: Parents receiving child care assistance can continue to receive it while searching for a job for up to 13 cumulative weeks per 12-month period beginning one day after the loss of a job.

Iowa: Parents can receive child care assistance while searching for a job for up to 30 consecutive days, once within a 12-month period.

Kansas: Parents receiving child care assistance must report the loss of a job within 10 days, and the caseworker must provide 10 days' notice that the case will be closed. Cases always close the last day of the month.

Maine: Parents receiving child care assistance can continue to receive it while searching for a job for up to 8 weeks, for up to 20 hours per week.

Maryland: Parents receiving child care assistance can continue to receive it while searching for a job for up to 30 consecutive days.

Massachusetts: Parents receiving child care assistance may be allowed to continue to receive it while searching for a job for an additional 4 weeks (on top of the initial 8 weeks allowed within a 52-week period) if there are extraordinary circumstances.

Minnesota: Parents can receive child care assistance while searching for a job for up to 240 hours per calendar year.

Mississippi: Parents can receive child care assistance while searching for a job for up to 60 days from the last date of employment, per instance of job loss.

Missouri: Parents receiving child care assistance can continue to receive it for up to 30 days after losing a job, twice per calendar year.

Montana: Under the policy in effect as of February 2014, parents receiving child care assistance could continue to receive it for up to 30 calendar days following the loss of a job. As of August 2014, the state extended the amount of time parents could continue to receive child care assistance while searching for a job to 90 days.

Nebraska: Parents can receive child care assistance while searching for a job for up to 2 consecutive calendar months following each instance of the loss of employment.

Nevada: Parents can receive child care assistance while searching for a job for up to 2 weeks in a 12-month calendar year. If child care assistance is provided for at least one day, the entire week is counted toward this limit. Child care assistance is only provided while a parent searches for a job for a child who is not attending full-day school. The state planned to extend the amount of time parents could receive child care assistance while searching for a job to up to 4 weeks as of the end of 2014 or the beginning of 2015.

New Hampshire: Parents can receive child care assistance while searching for a job for up to 40 days in a 6-month period, for up to 30 hours per week.

New Jersey: Parents receiving child care assistance can continue to receive it after losing a job for up to 90 days from the date of a layoff notice. Parents cannot receive child care assistance while searching for a job if they voluntarily quit employment.

New Mexico: Parents receiving child care assistance can continue to receive it while searching for a job for up to 30 calendar days, twice per calendar year, immediately following the loss of employment or graduation from high school or undergraduate school.

New York: Local social services districts may allow parents receiving child care assistance to continue to receive it while searching for a job for up to 2 weeks, or 4 weeks if child care arrangements would be lost if assistance was not continued. Local districts may also choose to allow parents to qualify or continue to receive child care assistance while searching for a job for up to 6 months if the district has funds available. Child care assistance is only provided for the portion of the day a parent documents as directly related to seeking employment. Local districts may impose additional limitations on child care assistance for parents to search for a job.

North Carolina: Parents receiving child care assistance can continue to receive it while searching for a job for up to 30 calendar days, and can request a 30-day extension.

North Dakota: Parents can receive child care assistance while searching for a job for up to 8 weeks in a calendar year, for up to 20 hours per week.

Ohio: Under the policy in effect as of February 2014, parents receiving child care assistance could continue to receive it for up to 30 days if they were scheduled to return to work, school, or training within that timeframe. As of September 2014, parents can continue to receive child care assistance for up to 91 days while searching for a job, even if they are not scheduled to return to work, school, or training.

Oklahoma: Parents can continue to receive child care assistance for up to 30 calendar days while searching for a job if they had been receiving child care assistance for at least 30 days prior to losing a job or completing an education program. Parents may be approved to receive child care assistance while searching for a job no more than twice per calendar year, and must have been employed or going to school for at least 90 calendar days between approval periods. Also note that the state plans to extend the amount of time parents can continue to receive child care assistance while searching for a job to up to 60 days as of June 2015.

Oregon: The data in the table reflect that parents receiving child care assistance can continue to receive it through the end of the month following the month of a job loss, under the policy that went into effect as of July 2013. Previously, parents receiving child care assistance could continue to receive it while searching for a job only until the end of the month following a job loss and a 10-day notice of closure.

Pennsylvania: Parents who voluntarily leave a job can continue to receive child care assistance during a 13-day notification period. Parents who involuntarily lose a job can continue to receive child care assistance for up to 30 days, in addition to the 13-day notification period. After the 30-day period, parents can remain eligible for child care assistance for up to 30 additional days, but their case is suspended and they cannot receive child care assistance to help pay for child care during this time.

Rhode Island: Parents receiving child care assistance can continue to receive it for up to 21 consecutive days from the beginning of a period of temporary unemployment resulting from a job loss or transition between jobs.

South Carolina: Parents receiving child care assistance can continue to receive it while searching for a job for up to 30 days from the date of the employment loss.

South Dakota: Parents receiving child care assistance can continue to receive it while searching for a job for up to 30 days from the last date of employment.

Texas: Parents receiving child care assistance can continue to receive it while searching for a job for up to 4 weeks in a federal fiscal year.

Utah: Parents can receive child care assistance while searching for a job for up to 150 hours in a 6-month period under the Kids-In-Care Program. Under the policy in effect as of February 2014, the state also allowed parents to continue to receive child care assistance through the primary child care assistance program until the end of the month of a job loss. As of December 2014 or January 2015, the state planned to allow parents to continue to receive child care assistance through the primary child care assistance program until the end of the month following the month of a job loss if they had been employed full time.

Vermont: Parents can request two 4-week extensions in a 12-month period (in addition to the initial 4 weeks) to receive child care assistance while searching for a job. Parents cannot receive child care assistance while searching for a job for a school-age child except during school vacation days and summertime.

Virginia: Parents cannot receive child care assistance while searching for a job, but families must be provided at least 10 days' advance notice before their case is closed.

Washington: Parents receiving child care assistance can continue to receive it while searching for a job for up to 28 days twice per calendar year or up to 56 days once per calendar year.

NATIONAL WOMEN'S LAW CENTER
EXPANDING THE POSSIBILITIES

11 Dupont Circle, Suite 800
Washington, DC 20036
202.588.5180 | fax 202.588.5185
www.nwlc.org